

Governing Body's Response to the Annual Complaints Performance and Service Improvement Report

Financial year 1 April 2025 to 31 March 2026

Governing body	Odu-Dua Housing Association Management Board
Member Responsible for Complaints	Chair of the Board
Status	For approval and publication
Board approval date	2 nd September 2026
Reporting period	2025/26

Purpose of this response

This is the Management Board's response to Odu-Dua Housing Association's Annual Complaints Performance and Service Improvement Report 2025/26 and annual self-assessment against the Housing Ombudsman's Complaint Handling Code. It is intended for publication alongside those documents as part of the annual submission to the Housing Ombudsman Service.

1. Board review and assurance

The Board has reviewed the 2025/26 Annual Complaints Performance and Service Improvement Report and the annual self-assessment against the Housing Ombudsman's Complaint Handling Code. We have considered the complaint data, complaint themes and outcomes, response times, learning, service improvement actions, Ombudsman activity and the evidence used to support the self-assessment.

The Chair, as Member Responsible for Complaints (MRC), has considered the same evidence and sought assurance from the accountable senior lead on how the Code is applied in practice. The Board's role is not simply to note the documents. We have challenged whether the self-assessment reflects day-to-day complaint handling, whether learning is being turned into service improvement and whether residents can see that their concerns are taken seriously.

What the Board considered

- the volume, categories, outcomes and timeliness of complaints during 2025/26;
- the evidence supporting the annual self-assessment and the areas where policy wording should be strengthened;
- the main complaint themes, particularly repairs delays, missed appointments and communication;
- the single Stage 2 acknowledgement that was outside the required timescale;
- the complaint referred to the Housing Ombudsman Service for investigation;

- the use of apologies, compensation and agreed actions to put matters right;
- the service improvement plan for 2026/27, including how progress will be monitored; and
- the need for respectful, accessible and human-centred complaint handling, including reasonable adjustments and fair treatment of residents.

2. Our assessment of 2025/26 performance

Odu-Dua recorded seven formal complaints during 2025/26. Six were concluded at Stage 1 and one progressed to Stage 2. One complaint journey was also recorded as being investigated by the Housing Ombudsman Service. Five of the seven complaints related to repairs and maintenance, making repairs the clearest theme for the year.

Measure	2025/26 position	Board view
Formal complaints received	7	Low volume; accessibility must continue to be tested.
Repairs and maintenance complaints	5 of 7 (71%)	Main service theme; requires focused improvement.
Stage 1 acknowledgements within target	7 of 7 (100%)	Positive performance to maintain.
Stage 1 responses within target	7 of 7 (100%)	Positive performance, including one agreed extension.
Stage 2 acknowledgement within target	0 of 1 (0%)	A clear service failure and control weakness.
Stage 2 response within target	1 of 1 (100%)	Final response met the required timescale.
Complaints refused or excluded	0	No refusals or exclusions recorded in the supplied data.

The Board welcomes the strong Stage 1 timeliness recorded in the annual data. We also recognise that timeliness alone is not enough. The complaint themes show that residents can experience frustration when repairs take too long, appointments are missed or updates are not provided. The missed Stage 2 acknowledgement is therefore important: even where the final response is on time, the resident should receive prompt confirmation that their escalation has been accepted and is being progressed.

3. Scrutiny, challenge and risks identified

The annual self-assessment records compliance with all provisions of the Complaint Handling Code. In reviewing that assessment, the Board identified areas where the wording of the existing Complaints Policy could more clearly reflect the Code and Odu-Dua's current operational practice. These have been included in the 2026/27 service improvement plan.”. The Board has not treated that declaration as the end of the assurance process. Our review identified the following areas for continued challenge and improvement:

Area challenged	Board assurance / finding	Required action
Stage 2 acknowledgement	One Stage 2 acknowledgement was outside the five-working-day requirement.	Use a monthly control report and due-date monitoring; report exceptions to the MRC and Board.
Repairs and contractor performance	Repairs generated most complaints, with delay, repeat contact and missed appointments recurring.	Escalate ageing repairs earlier, follow up missed visits promptly and strengthen contractor oversight.
Communication	Residents were dissatisfied where they did not know what would happen next or when.	Provide proactive updates, including when there is no change, and give realistic dates and clear ownership.
Policy wording	The Board noted that some wording in the current policy could more clearly reflect the Code. Management has confirmed that, in practice, residents are not required to justify a Stage 2 escalation and that any contact restrictions arising from unacceptable behaviour are proportionate and do not automatically prevent access to the complaints process. The Board supports the planned policy review.	Review policy and templates so escalation is not made dependent on residents explaining their reasons and contact restrictions remain proportionate.
Low complaint volume	A low number of complaints may reflect good service, but it can also indicate barriers to complaining.	Continue to publicise the process, test accessibility and use resident scrutiny and feedback to identify any barriers.
Respect and reasonable adjustments	Good complaint handling depends on how residents are treated as well as on response times.	Audit reasonable adjustments and communication preferences; reinforce respectful, non-defensive and non-judgemental communication.

4. Respect, attitudes and residents' rights

The Board expects complaints to be handled in a way that protects residents' dignity and supports a relationship of respect. Staff and contractors should listen carefully, avoid defensive or judgemental language, explain decisions clearly and consider the resident's individual circumstances. Reasonable adjustments and communication preferences should be recorded, acted on and reviewed where needed.

Where behaviour creates a genuine need to manage contact, any restriction should be proportionate, evidence-based, kept under review and should not prevent the resident from accessing the complaints process. We also expect staff and contractors to recognise that vulnerability may not be obvious and to ask what support or adjustment would help rather than make assumptions.

5. Learning and service improvement

The Board supports the 2026/27 service improvement plan. We expect the plan to be used as a live management and assurance tool, rather than as a list of intentions. Progress should be evidenced through complaint records, repair and contractor data, action trackers, resident feedback and periodic file checks.

- maintain 100% compliance with acknowledgement and response times, with any exception explained and reported;
- give proactive repair updates and realistic timescales, including when there is no material change;
- follow up missed contractor appointments on the same or next working day and escalate repeat failure;
- use early service-recovery contact where repairs or other service requests are ageing or repeated;
- track apologies, compensation, repairs and other remedies until completed;
- audit complaint files for reasonable adjustments, communication preferences, tone, complaint definition, reasons, remedies and follow-through;
- provide quarterly themes-and-learning information to the Board; and
- complete the planned policy and template review and confirm the outcome to the Board.

6. Member Responsible for Complaints (MRC) assurance and ongoing oversight

The Chair, as MRC, will continue to provide independent governing-body oversight rather than take part in the operational handling of complaints. The MRC will receive regular information on complaint volumes, categories, outcomes, timeliness, repeat themes, Ombudsman activity, overdue remedies and progress against the service improvement plan.

The MRC will seek evidence that actions have changed service delivery, not only that actions have been recorded as complete. Where performance is below target, where themes recur or where an Ombudsman finding identifies wider risk, the MRC will ensure that the matter is brought to the Board with a clear action, owner and timescale.

7. Governing body response

Board statement for publication

The Management Board has reviewed Odu-Dua Housing Association's Annual Complaints Performance and Service Improvement Report for 2025/26 and the annual self-assessment against the Housing Ombudsman's Complaint Handling Code. We are satisfied that the documents provide a fair account of the complaint information presented to us, while also identifying areas that require further improvement.

Those issues do not require an immediate policy rewrite for the annual submission, but they have been transparently identified, operational practice has been clarified, and a formal policy review has been programmed by 31 December 2026.

We note that repairs, delay and communication were the main themes during the year and that one Stage 2 acknowledgement fell outside the Code timescale. We have challenged management on these points and support the actions set out in the 2026/27 service improvement plan, including stronger complaint controls, proactive repair updates, contractor follow-up, timely remedies, respectful communication, reasonable adjustments, resident scrutiny and clearer policy wording.

The Chair, as Member Responsible for Complaints, has reviewed the complaint performance information and the evidence supporting the self-assessment and will continue to seek assurance that the Code is reflected in practice. The Board expects complaints to be treated as valuable service intelligence and residents to be treated with dignity, fairness and respect throughout the process. We will monitor progress quarterly and will require evidence that learning from complaints is producing measurable and sustained improvement.

8. Approval and publication

Subject to formal approval, this response should be published in the complaints section of Odu-Dua's website alongside the 2025/26 Annual Complaints Performance and Service Improvement Report, the annual Complaint Handling Code self-assessment and the current Complaints Policy and Procedure. The exact live links should then be used in the Housing Ombudsman's 2026/27 annual submission form.

Approved by: Odu-Dua Housing Association Management Board / Chair acting on behalf of the Board

Approval date: 2nd September 2026 **Chair / MRC:** Ms Sandra Brown