| Ref. | Recommendation | |
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| **R1.** | Review Complaints policies (on renewal dates) with a residents focus group taking into account the need to use more straight forward language. | Completed. Complaints policy was reviewed in July 2026 and suggestions from residents incorporated. The policy will need to be approved by the trustees before being published on the website. |
| **R2.** | Produce an accessible residents easy read guide/visual/flowchart to accompany the policy like BCOP have. | The website is still being worked on and will be updated soon. |
| **R3.** | Ensure Panel are able to speak with residents with recent lived experience in future scrutiny projects. | Ongoing. |
| **R4.** | Provide an alternative option to ensure accessibility and transparency of info for those who can't/choose not to access information via a website. Hard copies to be available in schemes. | Completed. Policies are available on scheme including complaints policy. |
| **R5** | Ensure learning from complaints is visible and specific in newsletters and on the website using visuals or a "you said we did" approach. | Website will be updated soon with all relevant info. |
| **R6.** | Develop standard complaint letter templates to set tone and language. See SCHA for best practice and test the templates out with residents. | Standard complaint letter templates were reviewed by scrutineers during meeting in July 2026 and agreed all ok. |
| **R7.** | For future self-assessments against the Complaint Handling Code, work with together with residents to ensure tested. | Ongoing. To be completed when the next self-assessment is due in December 2026. |
| **R8.** | Have you say forum approach – ensure meetings are held / led by residents with senior leaders if not already. | Completed. Quarterly Chief Executive Drop In Surgeries held by Steven on schemes. |

| Ref. | Recommendation | |
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| **R9.** | Build in to the procedure, post move in visits after 2 months to talk about complaints process. | Completed. Support Officer visits new residents to talk about complaints process. |
| **R10.** | Review websites with a group of residents to ensure visible information in the right places, including performance, satisfaction and learning. | Ongoing. Once draft website is available for review. |
| **R11.** | Culture of complaints – should be welcomed not feared.<br><br>Invest in refresher training for every Manager and team that touch complaints to ensure the appropriate recording of complaints, removal of defensiveness.<br><br>Ensure training focuses on greater compassion and empathy with complainants and try and walk in their shoes and consider how they would feel if it was their mum complaining for example.<br><br>Centre for Learning \| Housing Ombudsman Service All staff that respond to complaints should watch this. | Completed. Complaints training booked in for September. |
| **R12.** | Consider adopting 5 step approach as detailed in the report. | Completed. Incorporated into updated policy. |
| **R13.** | Reflect and respond to resident survey findings. | Completed. |
| **R14.** | Ensure human interpretation of policy and procedures. | Ongoing. No AI is used in the interpretation of policy and procedures. |
| **R15.** | The Panel would want to see the delivery of the recommendations from this scrutiny report shared on each website and in newsletters in | Ongoing. Awaiting final version of website. |

| Ref. | Recommendation | |
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| | the forthcoming months evidencing that the work of the resident scrutiny panel is taken seriously and valued. | |
| **1.** | HPLC to produce and share annual complaints performance report. | Completed. |