

Self-Assessment Against the Complaint Handling Code 2024

Covering the year: 1 April 2024 – 31 March 2025

Completed by: Andrew, Complaints Officer | Date: 6 August 2026 | Scheduled for Committee review: 18 August 2026 (not yet reviewed or approved)

1. Definition of a complaint

Ref	The Code requires...	Status	Evidence / commentary
1.3	Give residents the choice to complain, however they express dissatisfaction; complaints via a third party handled per policy.	Yes	Complaints Policy §4 confirms any expression of dissatisfaction, by any route, is offered as a complaint; representatives are explicitly permitted.
1.4	Policy distinguishes a service request from a complaint.	Yes	Complaints Policy §2 sets out the distinction in plain language.
1.5	A complaint must be raised when a resident is unhappy with a service request response, without stopping work on the original request.	Yes	Complaints Policy §2 confirms both continue in parallel.
1.6	Survey feedback isn't a complaint, but respondents must be told how to complain; feedback requests must explain how to complain.	Yes	Complaints Policy §3 addresses this.

2. Exclusions

Ref	The Code requires...	Status	Evidence / commentary
2.1	Accept a complaint unless there is a valid, evidenced reason not to; consider each on its own merits.	Yes	Complaints Policy §3.
2.2	Policy sets out fair, reasonable exclusion criteria.	Yes	Complaints Policy §3 lists the three permitted exclusions only.
2.3	Accept complaints within 12 months of the issue (or awareness of it); use discretion beyond this where justified.	Yes	Complaints Policy §3.
2.4	Explain reasons for non-acceptance and confirm the right to ask the Ombudsman to review that decision.	Yes	Complaints Policy §3.
2.5	No blanket exclusions — consider individual circumstances.	Yes	Complaints Policy §3.

3. Accessibility and awareness

Ref	The Code requires...	Status	Evidence / commentary
3.1	Multiple channels to complain; Equality Act 2010 reasonable adjustments considered.	Yes	Complaints Policy §4 offers phone, in person, email, letter, and the member portal.
3.2	Residents can complain any way, to any member/officer; everyone aware of the process and how to pass it on.	Yes	As a 6-person co-op, the agreed practice is that residents bring complaints to the Complaints Officer directly, and members are aware this is the route.
3.4	Policy in an accessible format, sets out the 2-stage process and timescales, and is published on the complaints section of the website.	No — in progress	Revised policy drafted covering process and timescales in full. Not yet published: the committee member with website access needs to upload it. Target: 18 August 2026 (next committee meeting).

Ref	The Code requires...	Status	Evidence / commentary
3.5	Policy explains how the co-op publicises the complaints policy, including Ombudsman/Code information.	Yes	Complaints Policy §11 references the Ombudsman; once published on the website this is met in full.
3.6	Residents can have a representative deal with, or accompany them on, a complaint.	Yes	Complaints Policy §4.
3.7	Residents given information on their right to access the Ombudsman and how to engage with it.	Yes	Complaints Policy §11.

4. Complaint handling staff

Ref	The Code requires...	Status	Evidence / commentary
4.1	A named complaints officer (or team) responsible for handling, Ombudsman liaison, and governing-body reporting.	Yes	Andrew, Complaints Officer, listed in the member portal.
4.2	Complaints officer has access to all levels and the authority to resolve disputes promptly.	Yes	Complaints Policy §5; as an elected committee role, the Complaints Officer can raise matters directly with any member.
4.3	Complaint handling is prioritised, resourced, and relevant people are suitably trained.	Yes	The Complaints Officer's understanding of complaint handling is drawn from relevant real-world experience handling HR and employment matters at work, rather than formal Code-specific training to date.

5. The complaint handling process

Ref	The Code requires...	Status	Evidence / commentary
5.1	A single policy for all complaints; no differential treatment.	Yes	One Complaints Policy applies to all members/residents.
5.2	No extra named stages (e.g. no 'stage 0' or 'informal complaint' stage).	Yes	Complaints Policy §6 — informal conversation is offered as an option, not a mandatory extra stage.
5.3	No more than 2 formal stages.	Yes	Complaints Policy §6.
5.4	Any third-party-handled responses form part of the same 2-stage process; residents don't face two processes.	N/A	Zah has no managing agent or contractor handling complaints on its behalf — all complaint handling is in-house.
5.5	Landlord remains responsible for third parties' Code compliance.	N/A	As above — no third-party arrangement in place.
5.6	Set out the 'complaint definition' (understanding of the complaint and desired outcome) at each stage; ask for clarification where unclear.	Yes	Complaints Policy §6, steps 1 and 6.
5.7	Be clear what the co-op is, and isn't, responsible for.	Yes	Complaints Policy §6 requires this in both Stage 1 and Stage 2 responses.
5.8	Handlers act on the merits, independently, fairly, and address conflicts of interest.	Yes	Complaints Policy §6 — Stage 2 must be handled by someone not involved in Stage 1.
5.9	Agree update intervals with the resident if a response will be late.	Yes	Complaints Policy §6, 'If we need more time'.
5.10	Record and keep under review any reasonable adjustments and disclosed disabilities.	Yes	Complaints Policy §4 commits to this. No adjustments have been requested to date.
5.11	Don't refuse to escalate without a valid, Code-compliant reason.	Yes	Complaints Policy §6 — escalation to Stage 2 is available on request, no justification required from the resident.

Ref	The Code requires...	Status	Evidence / commentary
5.12	Keep a full record of the complaint and its correspondence/evidence at each stage.	Yes	A complaints log spreadsheet has been created (fields: date received, complainant, summary, stage, key dates, outcome, remedy), to be moved to a shared committee location by 18 August 2026 so it isn't dependent on one person. No complaints were received in 2024-25 to test it against in practice.
5.13	A remedy can be offered at any stage, without needing to wait for escalation.	Yes	Complaints Policy §7.
5.14	Have a policy for managing unacceptable behaviour, with evidenced, reviewed restrictions.	Yes	Complaints Policy §8 (new).
5.15	Any restrictions are proportionate and have regard to the Equality Act 2010.	Yes	Complaints Policy §8.

6. Complaint stages — Stage 1

Ref	The Code requires...	Status	Evidence / commentary
6.2	Acknowledge, define and log Stage 1 complaints within 5 working days of receipt.	Yes	Complaints Policy §6. Not yet tested in practice — no complaints received in 2024-25.
6.3	Full Stage 1 response within 10 working days of acknowledgement.	Yes	As above — policy commitment in place, untested in practice.
6.4– 6.5	Extend by no more than 10 working days without good reason, explain why, and give Ombudsman contact details.	Yes	Complaints Policy §6, 'If we need more time'.
6.6– 6.7	Respond once the answer is known (not once actions are finished); address every point with reasons.	Yes	Complaints Policy §6, step 3–4.
6.8	Handle additional issues raised mid-investigation appropriately (fold in if related and not yet responded to; otherwise log as new).	Yes	Reflected in practice via Complaints Officer judgement; not separately spelled out word-for-word in the policy — acceptable as this is standard practice guidance rather than a resident-facing commitment.
6.9	Written Stage 1 confirmation covers: stage, definition, decision + reasons, remedy, outstanding actions, how to escalate.	Yes	Complaints Policy §6, step 4.

6. Complaint stages — Stage 2

Ref	The Code requires...	Status	Evidence / commentary
6.11	Acknowledge, define and log a Stage 2 escalation within 5 working days of the request.	Yes	Complaints Policy §6. Untested in practice to date.
6.12	Resident not required to justify escalating; landlord makes reasonable effort to understand outstanding concerns.	Yes	Complaints Policy §6, step 5.
6.13	Stage 2 considered by someone different from whoever made the Stage 1 decision.	Yes	Complaints Policy §6, step 6 — two Committee members not involved in the Stage 1 decision.
6.14	Final Stage 2 response within 20 working days of acknowledgement.	Yes	Complaints Policy §6, step 8.
6.15– 6.16	Extend by no more than 20 working days without good reason, explain why, give Ombudsman contact details.	Yes	Complaints Policy §6, 'If we need more time'.
6.17– 6.18	Respond once the answer is known; address every point with reasons.	Yes	Complaints Policy §6, step 8.

Ref	The Code requires...	Status	Evidence / commentary
6.19	Written Stage 2 confirmation covers the same elements as Stage 1, plus how to reach the Ombudsman.	Yes	Complaints Policy §6, step 8; §11.
6.20	Stage 2 is the final response and involves all suitable people needed to issue it.	Yes	Complaints Policy §6.

7. Putting things right

Ref	The Code requires...	Status	Evidence / commentary
7.1–7.2	Acknowledge faults, set out actions taken/intended, and ensure remedies reflect actual resident impact.	Yes	Complaints Policy §7.
7.3	Remedies clearly set out what will happen and by when, agreed with the resident, and followed through.	Yes	Complaints Policy §7.
7.4	Take account of Ombudsman guidance on remedies.	Yes	Complaints Officer to refer to published Ombudsman remedies guidance when a remedy is being considered.

8. Self-assessment, reporting and compliance

Ref	The Code requires...	Status	Evidence / commentary
8.1	Produce an annual complaints performance and service improvement report covering: self-assessment; quantitative/qualitative performance incl. refused complaints; any Ombudsman non-compliance findings; service improvements from learning; the Ombudsman's annual landlord report (if any); other relevant Ombudsman publications about Zah.	No — in progress	2024-25 report being drafted alongside this self-assessment (see separate document). No complaints were received in the period; the report will explain this and set out the wider steps taken this year to build a Code-compliant complaints function from scratch. Target for completion and publication: 18 August 2026 (next committee meeting).
8.2	Report to the governing body and publish on the website, alongside the governing body's response.	No — in progress	To be taken to the Committee on 18 August 2026 for review and a written response, then published together with this self-assessment and the policy once website access is confirmed.
8.3	Re-assess following any significant restructure, merger, or change in procedures.	Yes	Commitment included in Complaints Policy §13.
8.4	Review and update the self-assessment if asked to by the Ombudsman.	Yes	No such request has been made to date; commitment noted for the future.
8.5	In exceptional circumstances preventing compliance, inform the Ombudsman and residents, publish this, and give a timescale for returning to compliance.	N/A	No such circumstances have arisen.

9. Scrutiny & oversight: continuous learning and improvement

Ref	The Code requires...	Status	Evidence / commentary
9.1–9.2	Look beyond individual cases for wider service improvements; use complaints as intelligence for positive change.	Yes	Commitment set out in Complaints Policy §10. With no complaints in 2024-25 there is no case data yet to learn from — this year's main improvement has been building the policy, self-assessment and reporting framework itself.
9.3	Report back on wider learning to stakeholders (e.g. residents, staff, relevant committees).	Yes	Complaints Policy §10 commits the Complaints Officer/MRC to report to the Committee.
9.4	A suitably senior lead person is accountable for complaint handling and assesses themes/trends/systemic issues.	Yes	Complaints Officer role fulfils this; with very low complaint volumes expected, thematic review will be a standing item whenever a complaint is received.

Ref	The Code requires...	Status	Evidence / commentary
9.5	A governing body member is appointed as Member Responsible for Complaints (MRC).	No	Not yet appointed. Action: committee to agree who holds this role. Target: 18 August 2026 (next committee meeting).
9.6–9.7	MRC ensures the governing body gets regular updates on volumes/categories/outcomes, trends, Ombudsman investigation progress, and the annual report.	No — pending 9.5	Cannot be fully in place until the MRC role is filled. Once appointed, this will be a standing item at committee meetings (even where the update is ‘no complaints this period’).
9.8	A standard objective for employees/third parties reflecting collaborative, blame-free, professional complaint handling.	N/A	Zah is a fully mutual co-op run by volunteer members rather than paid staff or contracted third parties acting on our behalf for complaint handling; the collaborative, no-blame ethos in Complaints Policy §1 and §10 is the practical equivalent for our size and structure.

Summary of outstanding actions

The following still need to happen before this self-assessment can honestly show full compliance:

1. Appoint a Member Responsible for Complaints (9.5) — unlocks 9.6 and 9.7 too.
2. Move the complaints log spreadsheet from a personal device to a shared committee location (5.12).
3. Get committee/General Meeting sign-off on the new Complaints Policy, this self-assessment, and the annual report (8.1, 8.2).
4. Publish the policy, self-assessment, annual report and governing body response on the website once access is arranged (3.4, 8.2).

Noted as worth strengthening over time, but not blocking submission: wider committee awareness of the complaints route (3.2), and Code-specific training beyond real-world experience (4.3).