Improvement plan assurance review – final report

Warwick District Council

MAY 2026

Strictly private and confidential

hqn CONSULTANCY

Contents

Section **Page number**

1 Executive summary

The purpose of this report is to consider the evidence for completion of several actions, which were agreed following Housing Quality Network's (HQN) assessment of compliance with the Regulator of Social Housing's (RSH) Consumer Standards. This is a mid-point review and therefore, by definition, there remain actions to be completed. We have also not carried out a wider inspection of the service, so, while this report should provide assurance that many elements that we would expect to see in a compliant service are now in place, we cannot provide overall assurance around an indicative compliant consumer standard rating.

Clearly Warwick District Council ("the Council") has responded positively to the challenges set out by HQN (as well as by other parties) and is in a stronger position now. There have been several notable actions completed, which should put the Council in a position to evidence compliance, provided it continues its progress.

Notable developments to aid compliance include the following:

- The creation of a process to oversee the implementation of the improvement plan, which the Council's internal audit team has deemed to be sound
- Evidence that the governing body (that is councillors) is engaged in overseeing compliance with the consumer standards and the improvement plan
- A range of relevant policies and procedures have been developed, though these would benefit from a little more consistency in content
- Significant progress has been made in obtaining up-to-date stock condition information, and achieving further Decent Homes Standard compliance, which are now at levels often seen in providers that have obtained a compliant rating
- Significant progress has also been made in achieving compliance with the "big six" areas of compliance (that is, fire, legionella, asbestos, gas, electrical and lift safety)
- The publication of the Council's Tenant Satisfaction Measures survey results for 2024/25
- The enhancement of the Council's engagement strategy and opportunities for tenants to influence strategy and hold the Council to account for performance
- Improvements in the management of complaints, including improved performance against Housing Ombudsman timescales and a mechanism for learning from complaints.

However, there do remain areas to address, at least some of which are significant challenges to a compliant consumer standard rating, with the following areas to be addressed:

- There is a stated intention to use cloned data to achieve 100% compliance with the regulatory expectation around stock condition. The Council is clear that it will continue to seek access to homes in order to achieve 100% compliance with RSH expectations, but “we will have to make assumptions for purposes of the HRA business plan and planned programme”. While we understand the council’s position, HQN believes that the

Safety and Quality Standard is clear in respect of this matter, and, should the council be in any doubt as to whether their approach may affect compliance, we recommend that they discuss the matter directly with the RSH to seek reassurance.

- There is a high number of outstanding fire risk assessment remedial actions
- There remains a significant backlog of responsive repairs that needs addressing
- While work has been undertaken to address the requirements of Awaab's Law and progress has been made, there is still work to be done to ensure the Council deals with, and is able to report on, relevant reports of hazards covered by the law.

In conclusion, we note that the Council has made significant progress in completing actions on the improvement plan, which will benefit tenants and assist in evidencing compliance with the consumer standards. However, there do remain a number of key actions to be completed as part of the improvement plan. We will review the evidence for completion of these actions as part of the end-point review in due course.

2 Introduction

In September 2024, following a self-referral and subsequent engagement, the Regulator of Social Housing (RSH), concluded a C3 grade for the Council, meaning that their *"judgement is that there are serious failings in the landlord delivering the outcomes of the consumer standards and significant improvement is needed."*

Following the finding, the Council established a Consumer Standards and Compliance Board (CSCB) and developed the Asset Compliance Committee into the Housing Scrutiny Committee. The CSCB brings together relevant officers, as well as several external critical friends (including HQN, which had carried out an assessment of compliance with the consumer standards shortly before the RSH engagement) and at a later date, a tenant, to oversee the implementation of an improvement plan to address the challenges identified by HQN and the RSH (along with the findings of a separate review carried out by Pennington Choices which focussed on the Safety and Quality Standard).

It is positive to note that the Council commissioned an internal audit of the "HQN Action Plan Progress Review" and, in a draft report, dated March 2026, the Senior Internal Auditor stated:

"Overall, we can give a **substantial** degree of assurance that the systems and controls in place in respect of the HQN Action Plan are appropriate and are working effectively to help mitigate and control the identified risks."

The definition of "substantial" for this purpose is "There is a sound system of control in place and compliance with the key controls."

The Council has asked HQN to carry out two assessments of the evidence for completion of improvement actions and this report is the first of those assessments ("the mid-point review").

The purpose of this report is to consider the evidence for the completion of actions, stated as complete, identified following the HQN review and the RSH engagement. We note that there has been a separate review, undertaken by Pennington Choices, considering the evidence for completion of the recommendations arising from that review.

As part of the brief, we undertook the following activities:

- An assessment of evidence for completion of the actions so far considered to have been completed by the Council. We have only reviewed the evidence for those actions identified as complete
- Sought clarification on a small number of points to confirm information.

This is a mid-point review so, by definition, there remain actions to complete as part of the improvement programme that will, in time, deliver a compliant service.

We are mindful that both the HQN inspection and RSH engagement took place in 2024 and we are now two years into the regulatory inspection framework. We have a lot more detail as to what the RSH expects to see to confirm compliance. Therefore, we have taken a view on what currently the RSH expects to see to confirm compliance and, where appropriate, we have looked for evidence of compliance across the standards, rather than purely focus on the recommendations made in 2024.

We have placed the specific recommendations arising from our review into an appendix at the back of this report (Appendix 1).

3 Organisation of evidence

We were provided with a range of documents for review to confirm completion of certain actions. The documents were contained within folders for each of the four consumer standards, plus separate folders for policies and procedures. This was clear. However, you may wish to put the policies and procedures into the consumer standard specific folders for ease and clarity.

It was not always clear what the evidence was for the completion of specific actions. While there was a document provided that stated which actions had been completed, it was not always clear what the action related to (for example, *"complete all actions by January 2025"*) and in several cases, the evidence for completion was not referred to. We recommend that each action/recommendation is given a reference number and each piece of evidence is given a reference number that clearly links to the recommendation. This makes it much easier for the reviewer to assess what evidence is being put forward to confirm completion of action.

We were also provided with a spreadsheet entitled "internal analysis evidence" which sets out current position and outstanding actions by each element of the consumer standards (and relevant elements of the code of practice). This is well set out, clear and provides much useful context and information, albeit some sections have been left blank. It is a useful addition to (but not replacement for) the actual evidence to support completion of actions.

4 Policies and procedures

The Council has developed several key policies as part of its service improvement programme. In reviewing these policies, we note the following positive aspects:

- We saw clear sign off by a relevant councillor (for example the portfolio holder or chair of a relevant committee or board). As part of our review, we were advised that "all new strategies and policies are approved by Cabinet and where appropriate considered by Housing Scrutiny Committee. These are published reports within the public domain and are only signed by Strategic Lead and Portfolio Holder after Cabinet has received and approved report." We were provided with evidence for this
- A scrutiny of how well policies have been embedded after 12 months (but see below around inconsistency)
- A review date for the policy (but see below around inconsistency).

However, we also note the following (these findings may not impact on a successful inspection result but are important in terms of customer focus, for example):

- The policies do not always follow a consistent template. For example, not all policies have a section on service standards, resident engagement or quality assurance. While some policies will require sections that are not relevant to other polices, all policies should have some common sections. We recommend the adoption of a template with consistent, standard contents
- The period for review varies from policy to policy. This is not an issue, as the relative importance of a policy may warrant more regular review, but we recommend clarity as to why one policy has a two-year review period and another has a three-year period, for example. For clarity, policies should also be reviewed whenever there is any relevant statutory or regulatory change. For example, the damp and mould policy may need more regular review in light of the changes as a result of Awaab's Law.

We make one further recommendation in terms of the process for policy reviews, namely around the evidence of tenant influence in the process. The London Borough of Haringey has a simple, but effective, way of evidencing tenant engagement in the policy review process. In each policy, there is a section entitled "resident co-design and engagement", which sets out the answers to three questions, as follows:

- When did you discuss development of this policy with residents?

- What did they tell you?
- How has what residents told us informed development of this policy?

We recommend that the Council adopts a similar approach to evidencing the tenant influence in policy development.

5 Assessment of actions to achieve compliance

Safety and Quality Standard

In simple terms, the RSH is looking for the following to confirm compliance with this standard:

- Accurate up-to-date stock condition data, which is used to inform priorities
- All homes meet the Decent Homes Standard – where not at 100% there are clear, costed plans in place to achieve within a reasonable period of time
- Full compliance with health and safety requirements, in particular "the big six" and dealing with damp and mould
- Provision of an effective, efficient and timely repairs and maintenance service
- Clear evidence that the provider assists tenants requiring housing adaptations.

Evidence for compliance with the above expectations

- Stock condition survey (SCS) data – the report to the last compliance board meeting states that 79.61% of homes have had a stock condition survey within the last five years
- Decent Homes compliance – the same report states that 96.88% of homes meet the standard. We note that plans are currently being developed to achieve full compliance
- "Big six" compliance – the same report also confirms high levels of compliance, with a small number of homes non-compliant with electrical safety expectations and a very small number non-compliant with gas safety and legionella expectations.

Much of the above compares well with providers that have been awarded a compliant rating (C2 or above) in inspection. Cambridge City Council achieved a C2 rating from the RSH in October 2025, despite only having SCS data less than five years old for 44% of its homes. So, clearly (almost) 80% is not a barrier to a compliant rating, though the RSH expects providers to achieve 100% and retain that figure. We note, from the internal analysis document that there is a target to achieve "90-95%" by June 2026. We recommend that statements/targets are more precise – that is state whether it is 90% or 95%.

We also recommend, if not in place, that a target is set for 100% completion of physical surveys. We were advised that once the June target is achieved, there is an intention to clone the remaining data. Having confirmed this matter with an asset management specialist, we advise against this approach, unless you have received a clear steer from the RSH to this

effect. The relevant consumer standard required outcome is explicit and the RSH has been clear in its messaging generally that SCS should comprise 100% physical surveys of homes. Without doing so, the Council cannot be entirely confident about its level of Decent Homes compliance or its figures for HHSRS issues.

In the evidence bank, we note that there are policies in respect of building safety and all the "big six" compliance areas. We also note the existence of an aids and adaptations policy and a damp, mould and condensation policy.

Other policies we might expect to see in a comprehensive suite of policies include planned maintenance, vacant property management, disrepair, no access and recharges. We have seen reference to no access and planned maintenance policies, and we are aware they have been discussed in compliance board meetings, so should be included in the evidence bank, once signed off within the governance structure.

We note, in the evidence bank, the existence of procedures in respect of the "big six", along with damp, mould and condensation, which do have consistent review dates and are more consistent in terms of content.

Although in different formats, we also note the existence of documentation relevant to the processes and procedures relating to the aids and adaptations process.

There is a project plan around energy performance certification (EPC) for all relevant properties. We recommend that any relevant report to the management team and/or into the governance structure (along with meeting note confirming agreement) is included in your evidence base.

We note that the 30-year business plan has recently been updated and presented to Cabinet, and that it clearly indicates that the plan will deliver all necessary works to ensure that all tenants will be in a home that meets the Decent Homes Standard and maintained at that standard. The plan also states that works are costed and programmed to ensure all homes achieve a minimum of EPC band C by 2030. This would address the HQN recommendation around updating the business plan.

The following actions, relevant to this standard, are stated as complete, but we have not seen the evidence:

- Review all repairs measures reported and validate
- Repairs backlog.

The latter action is not complete, as reporting to the compliance board on a regular basis confirms. In May 2025, there were 938 outstanding and overdue repairs. According to the latest report to the board (which provided data up to March 2026) there were 1724 overdue repairs, of which 422 were either urgent or emergency. While we were advised that some of these are "administratively" open (that is, works completed but system not updated), the board can only judge performance on the information presented to it. Besides, the regulator has a laser focus

on the accuracy and reliability of data. Therefore, from both a performance and assurance perspective, this remains a serious challenge to obtaining a compliant consumer standard rating from the regulator.

Risks to compliance

While significant progress has been made in this critical area, there are areas that need continued focus and progress in order to have confidence in achieving a compliant rating from the RSH.

In addition to the repairs backlog referred to above, we note there remain over 500 overdue FRA remedial actions. As with the repairs situation above, this is likely to be a critical challenge to obtaining a compliant consumer standard rating.

The internal evidence analysis document raises a concern around the visibility of actions to address HHSRS issues (although the completed actions log states that all outstanding remedial work to known category one risks has been completed). We recommend that more visibility is provided within the relevant report that is presented to the compliance board (and elsewhere as appropriate).

Damp, mould and condensation - work has been undertaken to address the requirements of Awaab's Law. Progress has been made, but there is still work to be done to ensure the Council deals with, and is able to report on, relevant reports of hazards covered by the law.

Transparency, Influence and Accountability Standard

The key priorities for satisfying the RSH around compliance with this standard are as follows:

- Accessible information about availability of and access to services, along with information on service standards
- Provide performance information that allows tenants to understand how the landlord is performing
- Provide a wide range of opportunities for tenants to influence and scrutinise services
- Evidence of treating tenants with respect and ensuring fair access to and equitable outcomes of services
- Ensure complaints are addressed fairly, effectively and promptly.

Fairness and respect

We were not advised of any completed actions in this area. However, the internal analysis document refers to the drafting of an equality, diversity and inclusion policy and training provided for staff. We recommend provision of the policy, training materials and details of who has attended as evidence of progress in this area.

The analysis also refers to a "strong culture", which is covered in induction. Documentation to assist in evidencing this element of the standard could include the Council's approach to recruitment (eg, competency and culture-based), induction, training and development.

Finally, the analysis also refers to a vulnerability policy having been drafted.

All of the above can be provided as evidence for compliance in this area and we will review in the next iteration of this review (the "end point review").

Information and performance information

The following actions have been completed (with evidence seen):

- The publication on the Council website of the latest Tenant Satisfaction Measures (TSM) for 2024/25 - confirmed on website
- Publication of names of accountable persons for the consumer standards – confirmed on website
- Publication of the lettable standard – confirmed on website.

We also noted a lot of other useful information on the website.

Household data

The collection and use of household data – *"knowing who is behind every door"* - is a key expectation of the RSH. They expect you to have good knowledge of your tenants and their households and to be using that knowledge reactively and proactively in the delivery of services.

We saw evidence to confirm the updating of the tenancy audit form, and we note that a high level of data held (96.7%) was reported to the compliance board, which is impressive. The Regulator may want to test such a high level of data being reported.

We recommend the development of a related strategy, to cover not just the collection of data but also its intended use, and have provided an example structure for the strategy you may wish to follow (Appendix 2).

In addition to the above statement around tenancy audits, we did not see the evidence for completion of the action relating to information sheets in respect of high-rise buildings.

Engagement

Although no specific actions were identified as completed in this area, as part of the mid-point review, we note the following actions have been undertaken to improve compliance in respect of engagement:

- There is a resident engagement and communication action plan in place with progress reports presented to the housing scrutiny committee
- A resident influencing group (RIG) is in place (it pre-existed the RSH engagement), which has the following purposes (among others):
  - Oversee and monitor the Council's resident engagement strategy and action plan for housing services
  - Provide feedback to ensure residents' voices influence housing policies, services, and decisions
  - Promote collaboration to identify areas for improvement in housing services and propose solutions.

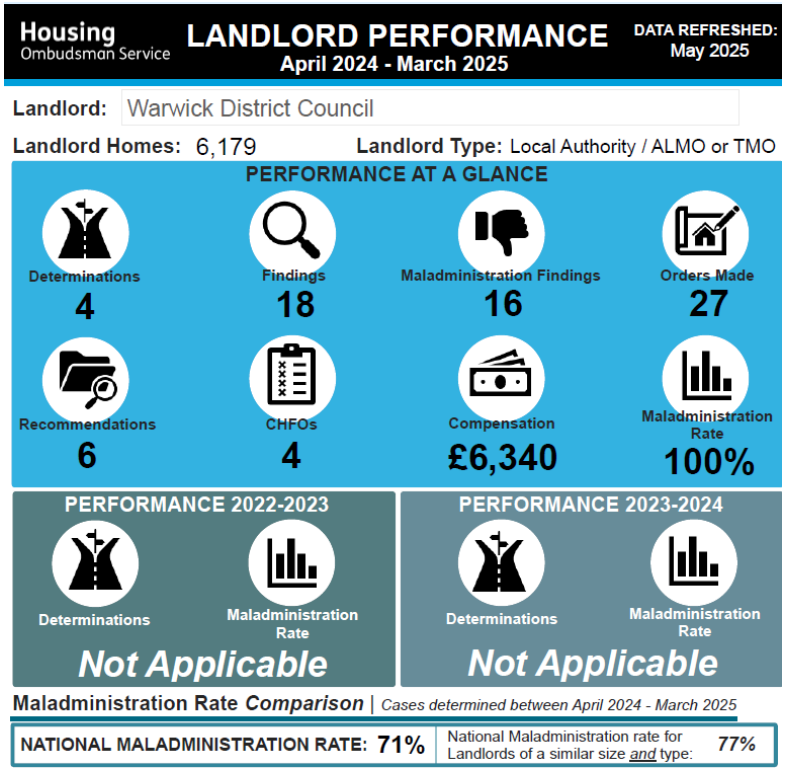
  We have seen evidence that it oversees the implementation of the engagement strategy and action plan, and that it is asked to review and sign off relevant policies
- The RIG (and other engagement activities) is supported by a specialist engagement team, comprising a manager, team leader, and three engagement officers. For a landlord of approximately 6,000, this feels like a well-resourced service, when compared with many other providers HQN has worked with.

Complaints

There are several actions, relevant to compliance with the consumer standard in respect of complaints management that have been completed, including the following:

- An up-to-date self-assessment against the Housing Ombudsman complaints handling code – this is on the website and states the Council is fully compliant
- Clear information around the complaints process and how to make a complaint – we have seen the policy and accompanying information is on the website
- Annual complaints report 2024/25 – this is a requirement of the Housing Ombudsman, and we have seen it on the Council website
- However, performance in responding to complaints within the year (2024/25) was poor with only 63% of stage one and 32% of stage two complaints being responded to within the extended target times allowed by the Ombudsman. The Council also received four determinations with 16 maladministration findings and four complaints handling failure orders (see following page). We know that determinations often relate to issues in prior years, so it is important for the Council to demonstrate it has learnt from these experiences and put in place measures to improve performance
- In the current financial year, performance in responding to stage one complaints is significantly improved (with 96% of complaints responded to within the Ombudsman timescales). However, while improving, the percentage of stage two complaints responded to within Ombudsman timeframe remains poor, at 54%. There needs to (continue to) be a critical focus on improving this performance
- On a positive note, despite approximately 50% of stage one complaints not being upheld, the escalation rate is 20%, which is relatively low in our experience

- We have seen evidence that a process has been put in place to systemise the recording and reporting of learning lessons from complaints. We also saw evidence of an internal complaints group, which plays a leading role in learning from complaints. We saw in the evidence bank notes of these meetings
- Briefings and training to staff – the evidence bank refers to these being delivered to a significant number of colleagues. We recommend that the presentation(s) be provided in the evidence bank. We also recommend that you provide a position statement that sets out your approach to ensuring new recruits are sufficiently trained along with any plans for refresher training.



Neighbourhood and Community Standard

To comply with this standard, the RSH expects providers to evidence the following:

- That antisocial behaviour (ASB) and hate crime is managed effectively, including through partnership working
- Working effectively with partners to tackle domestic abuse
- Promotion of social, environmental and economic wellbeing.

We note that the Council has developed a range of policies relevant to this standard, including:

- ASB policy

- Hate crime policy. Although such a policy is not an absolute requirement (provided hate incidents and crime are covered within a wider ASB policy) it is positive practice to develop one
- Neighbourhood management policy.

Domestic abuse

It is a specific requirement of the consumer standards that landlords have a domestic abuse policy (and the code of practice that sits beside the standards, sets out expectations as to what should be in the policy). We note that there is a domestic abuse and violence policy on the Council's website. However, it is several years old (dated 2017). We are aware that an external specialist has been engaged to review and revise the policy, and that a draft new policy is currently going through the internal governance process.

We do note the provision of an advice leaflet in this area and also note that there is a procedure in place for dealing with MARAC referrals to ensure consistency. The documentation states that a service lead has been appointed, though the evidence base does not provide details.

Tenancy Standard

The RSH wants to see evidence of the following:

- Fair and transparent lettings
- Support for tenants to maintain their tenancies
- Tenancies and terms of occupation are appropriate
- Assistance to mutually exchange homes.

Allocations and lettings

We have seen the evidence for an up-to-date housing allocations policy, along with a procedure relating to the reletting of vacant properties.

Tenancy and tenancy sustainability

We note the evidence to confirm completion of the joint tenancy strategy and a tenancy fraud policy. We also note various procedures and leaflets relating to ending of tenancies, rent arrears, etc.

Mutual exchange

We note that the evidence bank contains a mutual exchange procedure and there is some information on the Council website providing information. We have not seen a specific policy, but think one could be developed quickly, utilising the initial section of the procedure along with relevant information from the website.

6 Recommendations

Following our review, we make the following recommendations to evidence or enhance compliance.

- Organise the evidence base so that it is easy for the reviewer to assess the evidence for completion of each action/recommendation. Ensure there is evidence provided to confirm the completion of every action deemed to be complete
- As part of the evidence base, ensure the provision of the most up-to- date (eg, quarterly) performance information to evidence compliance
- Review and refresh the evidence base on a regular basis (at least quarterly) so that, for example, performance information is always up to date
- Where the action to meet a recommendation involves the production of a new policy, and the policy is considered by a committee or similar (in addition to the relevant councillor sign off), we recommend the evidence base contains the relevant report to that body as appropriate
- Adopt a standard template for the production of policies and procedures
- Adopt a process for evidencing the influence of tenants in the review and production of policies
- Review and set targets to achieve (RSH) expected compliance levels – for example 100% stock condition data
- Review the suite of policies relevant to safety and quality and consider whether to develop additional policies, such as the development of a specialist disrepair policy.

Appendix 1: HQN recommendations

Safety and Quality Standard

1 The top priority is to continue to address the compliance weaknesses in the Pennington Choices report until completion of all required actions to ensure compliance.

2 Complete all outstanding remedial work in relation to known HHSRS category one risks.

3 Take action to make non-decent homes decent.

4 Review the damp and mould delivery process to ensure the Council complies with the forthcoming Awaab's Law and provides value for money.

5 Validate and complete 100% SCS and update the 30-year HRA business plan to ensure the DHS is maintained and other priorities are fully funded.

6 Develop a new HRA AMS that identifies the asset management challenges and includes a prioritised action plan for the life of the strategy (five years is the norm).

7 Review the approach to managing aids and adaptations, in particular the contractual arrangements and take action to improve service delivery.

8 Use the information in this report to develop a comprehensive, SMART, Safety and Quality Standard action plan.

9 Regularly report information on service KPIs and performance against the Safety and Quality Standard action plan to members and routinely provide details of problems supported by proposed actions and timescales.

Transparency, Influence and Accountability Standard

1 Consider refreshing staff training on diversity and assess the outcomes of that training – is it making a difference?

2 Share EDI information: use it to shape services and to review whether existing policies deliver fair outcomes for all.

3 Review and revise the approach to the collection, analysis and use of household data:

- a Ensure the tenancy audit proforma is comprehensive and customer focused and used by all.
- b Set targets and monitor the completion of tenancy audits visits. Ensure there is a comprehensive approach to the collection of data (every visit is an opportunity).
- c Ensure widespread understanding (by staff and tenants) of why data is being collected and what it will be used for.
- d Develop a strategy for how data will be used.

4 Complaints: As a priority, carry out a deep dive review into complaints management to ensure you are compliant with the HOS code of complaint handling. There should be a particular focus on:
    a Identifying whether the Council is recording all relevant expressions of dissatisfaction as complaints.
    b Ensuring all relevant staff understand the difference between service requests and expressions of dissatisfaction.
    c Delivering wider training on effective complaints management across relevant teams.
    d Completing a self-assessment against the Housing Ombudsman complaints handling code, ensure appropriate governance sign off and publish on the Council website (and send a copy to the Ombudsman).
    e Ensuring learning from complaints is embedded into the complaints management process.
5 Transparency: develop an information and performance information plan and publish performance information widely to tenants and staff (and on the Council website).
6 Influence: consult with tenants and develop a "wide range of meaningful opportunities" for tenants – eg, in practical tasks such as checking voids or estate walkabouts (which were specific activities raised by tenant representatives we met on-site).
7 Consider opportunities to gain feedback from a broader range of residents including younger tenants and complainants (post-transaction surveys, online options, polls, etc).
8 Accountability: Develop clear service standards in conjunction with tenants, publish and agree a reporting framework.

Neighbourhood and Community Standard

1 Develop, consult on, publish and implement key policies – especially:
    a Neighbourhood management policy.
    b ASB in housing.
    c Domestic abuse.
    d Hate crime.
2 Ensure the above policies are supplemented by clear procedures, which are trained out to relevant colleagues.
3 Develop and consult on service standards for neighbourhood management including key estate services, such as cleaning, grounds maintenance, pathways.
4 Deliver staff training on the above – with support to develop skills.
5 Consider appointing service leads for key areas such as DA, who can acquire additional, specialist knowledge and support others in the team.

Tenancy standard

1 Review the lettable standard for vacant properties in consultation with tenants to ensure it meets positive practice and the tenant-facing version enables prospective tenants to assess whether a property meets the standard.

2 Carry out an end to end process review of the vacant property process, from tenant giving notice, to sign up, to identify pinch points and delays.

3 Use the above to develop a focussed action plan to improve the whole vacant property process and set targets to reduce the time properties are in maintenance and the overall average re-let times. Set a realistic but challenging target to reduce re-let times by at least 50% in the first instance, then to achieve top quartile performance.

4 Complete the process for consultation and governance sign off of the tenancy strategy and policy.

5 Develop a suite of performance indicators to assess whether the Council's allocations policy and process is meeting expectations and priorities, including around EDI and other aspects. There is the potential to use this data to develop a low demand strategy too.

6 Implement a process for carrying out and assessing the success of tenancy support visits, by priority areas, as identified above and use to prioritise resources.

7 Develop a tenancy fraud policy and process to mitigate the risk that homes are not being occupied (or being bought by) those that are not entitled to.

Appendix 2: Model household data strategy

We recommend to members that they develop a "knowing our customers" strategy. The strategy could be structured in the following way:

Why collect?

- Know who is behind every door
- Influence service design and tailor services
- Know your household sizes
- Understand the level of under- and over-crowding
- Tackle tenancy fraud – identify potential sub-letting, cuckooing, etc
- Understand the level of disability and vulnerability
- Awareness of the most common non-English communities.

What collect?

Collect what you will, or may, use. Do not collect what you will not use. National Housing Federation suggests you collect the following:

- Ethnicity (adults)
- Age (all)
- Gender (all)
- Disability and long term health conditions
- Support needs
- Language barriers
- Contact details.

How collect?

- Make it easy – portal, online, dedicated phone line, QR code, incentivise?
- Collect data from new tenants
- An annual census/survey of tenants and leaseholders
- "Every visit, every contact counts" – it is not just the housing officer's job so utilise as many customer interactions as possible – contact centre, home visits, scheme events, contractors?
- External company.

How use?

- We recommend the data is used reactively and proactively
- Reactive – tailor service in response to request
- Proactive – influencing budgets (eg, A&A), targeting community development activity
- Tailor services appropriately
- Influence the mix of property types on new build schemes
- Influence allocations, lettings and transfer arrangements
- Assess trends in complaints, ASB, etc
- Assess the best ways to engage with residents and communities
- Celebrate the diversity of your communities.

Key actions

- Ensure staff are confident in explaining the need for data
- Set targets to achieve full data set – 25% by date, 50% by date, etc – monitor and report
- Prioritise – no repairs reported in 12-month period, multiple repairs reported in period, difficult to access for gas servicing, regular rent payments outside area, etc.

Fast, practical guidance on everything to do with housing

HQN provides high-quality advice, tailored support and training to housing associations, councils, ALMOs and other housing providers.

Find out more about HQN and our network membership by visiting hqnetwork.co.uk or call us on +44 (0)1904 557150.

Rockingham House, St Maurice's Road, York, YO31 7JA
Tel: +44 (0)1904 557150 Email: hqn@hqnetwork.co.uk Visit: hqnetwork.co.uk

HQN Limited Registered in England Reg No. 3087930