

Appendix 3 – Consumer Standards Improvement Action Plan

Ref (Action Num)	Issue	Specific Outcome	Measurable	Achievable	Target date for completion)	Action Monitoring	Outcome monitoring	Current Status
1	In October 2025, we had completed stock condition surveys on 27.5% of our stock. The remainder did not have reliable up to date data on their condition from the last 5 years	Links to Safety and Quality Standard and workstream 1 in the consumer standards improvement strategy. By October 26 we will have up to date data on the condition of our stock so that we can use the data to profile stock investment works in the business plan to ensure decency is sustained	By October 26 we will have surveyed or attempted to survey (minimum of 2 attempts) all our housing stock and put in place resources to undertake cyclical 5 year condition surveys	Programme developed for 5 year cyclical programme of stock condition surveys with adequate resource in place for immediate and long term	Oct-26	Started but may be late		13.08.26: Updated survey numbers: 4,116 properties surveyed, 954 no access.

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1.1	Insufficient staffing resource	More resource in place to address surveying needs	Increased surveys being completed to enable deadline to be met	Appropriate and sufficient resource to be put in place to complete current round of stock conditions and future rounds.			Completed	Sufficient resource in place to ensure surveys are completed. Draft plans are in place for the future programme, but we are awaiting confirmation of legislation updates to finalise this (MEES) for delivery method finalisations. Surveys completed in the latter parts of 2021 when the programme started will be added to our external provider for completion where there hasn't been any physical inspection since i.e. the property has become void.
1.2	Difficulty accessing customer homes to complete surveys	Number of no access properties will be reduced and we will have a process in place for tackling those remaining and ongoing to ensure tenant safety is sustained.	By July 26 we will have reviewed the process for tackling no access properties, including our methods of communication. We will also have an updated No Access Policy in place	Review no access policy and internal process including comms	Sep-26	Started but may be late		Options are being considered for the delivery of the next round of surveys and a specification is being written to ensure all requirements are met including HHSRS and EPCs. This will be ready for discussion in September.

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1.3	Lack of fully functioning housing management system	To have a fully functioning housing management system to enable a single source of truth for all our housing data and information	Housing system will have been health checked and modules identified for update and/or implementation with a time line	Review of housing management system to improve functionality	Dec-27	Started and on target		Required system improvements have been identified and we are looking to bring in a system consultant to complete the required work. Priority areas are system integration with repairs provider and HHSRS/DHS and hazard tracking.
1.4	Lack of Housing Asset Management Strategy	Housing Asset Management Strategy adopted	By December 25 we will have an approved Housing Asset Management Strategy which we will publish on our website	Finalise and adopt Housing Asset Management Survey			Completed	Housing Asset Management Strategy now published on the website.

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2	We don't have an accurate record of the number of homes that reach a decent homes standard and we need to ensure that homes are meeting the decency standard	Links to Safety and Quality Standard and workstream 1 in the consumer standards improvement strategy. Decency rate known so that we can publish and build plans to remedy and bring homes up the required standard	By April 26 we will be able to publish our decency rate and by Dec 26 we will have costed plans to bring all our homes up to the required decency standard	Embed decency process and build plans	Dec-26	Started and on target		Our decency figures have been published as at 31.3.26 which was 85.5%.
2.1	Lack of system for calculating Decent Homes	System in place to calculate Decent Homes	Able to supply a Decent Homes figure	Spreadsheet to be created to allow data to be assessed			Completed	We have now been able to upload all the data from the surveys carried out to date into the Housing System giving us an updated decency figure for publication at 31.3.26.

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2.2	Internal processes not agreed and embedded and data not reliable	Processes in place with trusted data sets	Data is being entered correctly and can be trusted, this will be monitored through spot checks on data sets	Processes to be created and put in place along with briefings with staff so they understand expectations	Dec-26	Started and on target		Non-technical triage training on Awaab's Law identified for Case staff to bolster quality of triage process. Training booked for 7 September. We carry out regular ad hoc desk top checks on the HHSRS data and challenge any potential anomalies with Savills (external contractor) and internal teams. Next step: work up an agreed formal process for auditing and validating the data including both external auditors and internal teams Audit brief agreed with East Kent Audit Partnership based on the monthly compliance report data. Also including the new external audit contract for contractor competence.

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2.3 (changed from 2.4 on 27/5 /26 to follow 2.2)	System not in place to ensure hazards are recorded, monitored and closed down	Ensure that all hazards arising from SCS, including those which require immediate attention are correctly recorded, responded to and output data managed	Number of actions outstanding, including timescales to be monitored	System in place to enable hazards to be recorded, monitored and closed down. Staff fully briefed and weekly monitoring meetings in place to check progress and validate data. Additional staff recruited in both FM and Case	Dec-26	Started and on target		Audit brief agreed with East Kent Audit Partnership based on the monthly compliance report data. Also including the new external audit contract for contractor competency. Number of hazards is reported monthly and broken down by the decency criteria. The remaining data from the last batch of Savills surveys is being manually uploaded into the housing management system. Once this is done our figures will be updated.

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3	There are failings in maintaining performance and completing remedial works to the required levels consistently across all areas	Links to Safety and Quality Standard and workstream 1 in the consumer standards improvement strategy. Performance across all compliance streams to be maintained consistently alongside regular reporting to senior management and councillors	Increased performance across the compliancy areas	More robust contract management and reporting to senior officers for relevant oversight	Oct-26	Started and on target		The follow up Tenant Health and Safety Audit in September 2025 gave reasonable assurance for fire safety, electrical safety, lift safety and legionella safety (in the original audit in June 2025, assurance as limited for these areas). Audit brief agreed with East Kent Audit Partnership based on the monthly compliance report data. Also including the new external audit contract for contractor competency.

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3.1	There is limited assurance on our fire safety due to the high number of overdue FRA actions	Positive assurance on our fire safety to ensure tenants are kept safe	By March 2026, evidence of a significant reduction and sustained downward trend in number of overdue fire actions	Contractor performance reviewed and action plan agreed Evidence of actions being resolved and reduced on a sustained basis	Oct-26	Started and on target		Date increased to reflect monitoring. Fire Risk Assessment (FRA) compliance remains at 100%, with valid FRAs in place for all 410 applicable assets. 29 assessments were completed during July. There are currently 301 open FRA actions, of which 131 are overdue, including 19 high-risk, 12 medium-risk, and 270 low-risk actions. Of the overdue actions, 11 are classified as high risk and 120 as low risk. While the volume of outstanding actions remains over 300, the overall trend continues to show improvement, with a sustained reduction in both open and overdue actions as remedial works are progressed and completed.

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3.2	There is limited assurance on our electrical safety due to the high number of overdue EICR checks	Positive assurance on electrical safety to ensure tenants are kept safe	By July 26, evidence of a significant reduction and sustained downward trend in number of overdue EICRs	Contractor performance reviewed and action plan agreed Evidence of actions being resolved and reduced on a sustained basis Up to date list of no access properties from contractor cross checked with our own list and validated. Process agreed with Case and Locality services or phone calls, door knocking	Jul-26	Started and on target		Electrical safety compliance remains consistent, with communal areas achieving 100% EICR compliance and domestic properties maintaining 94.4% compliance in July against the five-year inspection requirement. Although performance remains at 94%, EICR compliance has shown an improved trend over recent months. Continued focus is required to reduce overdue inspections and ensure all outstanding remedial works are completed to maintain resident safety and regulatory compliance.

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3.3	There was no assurance on lift safety due to length of time taken to remedy defects	Positive assurance on lift safety to ensure tenants are kept safe	Historic overdue lift actions to be cleared by Dec 25 Lift contract to be retendered by Dec 25	Contract retendered and in place Actions being closed down on time	Oct-26	Started and on target		Lift compliance is 40 out of 41 assets for July, there are no Cat A defects and 11 Cat B defects.
3.4	There is limited assurance on our legionella safety due to the high number of overdue actions	Positive assurance on legionella safety to ensure tenants are kept safe	Historic overdue actions cleared by Dec 25. Ongoing new actions to be remedied within timescales Legionella data to be transferred over to our own software (True Compliance) - Dec 25	Resources identified and prioritised to move actions over from the contractor portal to CCC's own. and to check the overdue actions and close down when verified the work has been done	Oct-26	Started and on target		100% compliance for July, actions have decreased from 45 in June to 43 in July. Only one overdue action, which is medium level risk. Of the outstanding actions, 12 are high, 26 medium and 5 low.

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3.5	Non compliance with Smoke and CO Regs 2022 with c20% of homes not being compliant	Full compliance with Smoke and CO2 Regs to ensure tenants are kept safe	CO levels increased to 100% compliance by Feb 26		Oct-26	Started and on target		Compliance for July is 100% for communal and 98% for domestic. Over 30 cases have gone to court for injunctions to increase compliance.

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3.6	We are unable to evidence a data based block inspection programme based upon current regulations and legislation. We also need clarity on where the data determining block type and inspection frequency is held, where inspection outcomes are recorded, and who is responsible for reviewing this information. Clear oversight of these elements will	Risk based block inspections programme established and sufficient oversight is in place to monitor this	Monitoring of block inspection programme to be built in to individual officer and team and performance monitoring on a quarterly basis. Policy has been reviewed and is compliant	Additional resource within the Neighbourhood Management Team to be in place by June 2026. Full block inspection programme to be put in place with oversight of inspections and any actions from these	Sep-26	Started and on target		Although performance remains at 94%, EICR compliance has shown an improved trend over recent months. Continued focus is required to reduce overdue inspections and ensure all outstanding remedial works are completed to maintain resident safety and regulatory compliance.

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3.7	Inadequate reporting to senior managers and councillors	Reporting in place to senior managers and councillors to ensure sufficient oversight and transparency of tenant health and safety	Monthly compliance reports to Management Team and to housing portfolio holder in place by Dec 2025 Six monthly housing performance report to be reviewed Dec 25	Regular reporting to be put in place that covers all relevant health and safety areas.			Completed	Regular reporting is in place, through a monthly compliance report, block inspection reports and twice a year performance reports to Cabinet. The damp and mould tracker sheet has been amended to ensure KPI data is reliable. This is included in the monthly compliance report and will be checked as part of the audit due to take place in the next few weeks.

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3.8	All KPI data not included in reporting to senior managers and councillors	To have full oversight of contractor performance through reporting of KPI data to senior managers and councillors	Six monthly housing performance reports to include all KPI data by Oct 26	To work with contractors to ensure customer satisfaction data is collected on a frequent basis and to review methods of collection to facilitate better quality responses			Completed	Performance management continues with our contractors. KPI data provided for end of year Performance Report (Cabinet 30 June)

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4	There is limited assurance we provide a transparent and effective adaptations service	Links to Safety and Quality Standard and workstream 1 in the consumer standards improvement strategy. Assurance that adaptation service is transparent, allowing tenants to hold us to account and services are monitored adequately	• Adaptations policy in place • Major adaptations completed within timescales • Customers satisfaction for adaptations is over 80%	Adaptations policy to be created that clearly sets out the roles between CCC and KCC. Increase capital funding and agree timescales for works to increase wait times and publish service standards so tenants are made aware	Dec-26	Started and on target		Policy created and published on the website, this includes the service standards for adaptations. Monitoring of adaptations is in place. A new feedback form to review satisfaction with the adaptations service has been created and is in the process of tenant sign off. There is a new tracker sheet in place to monitor contractor timescales and funding for adaptations.
4.1	No adaptations policy in place	Adaptations policy in place that sets out the roles of CCC and KCC, how decisions will be made and will set out the service standards	Policy will be in place and published on the website	Create an adaptations policy			Completed	Policy is in place and will be reviewed every two years. It has been published on the website.

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4.2	No KPIs or monitoring in place	KPIs in place to monitor the outputs for the adaptations service and relevant oversight in place	KPIs agreed and being reported to management, Cabinet and REP	Routes for reporting are in place and information is already being recorded. Work with DDI for reporting mechanism to senior management			Completed	Monitoring in place and being reported to management team on a quarterly basis
4.3	Tenants are not aware of the service standards for adaptations	Tenants will have information available to them to inform them of the service standards	Service standards will be published on the website	Service standards to be created setting out what customers should be expecting from the service and these will be published on the website.			Completed	Service standards are incorporated within the Disabled Adaptations Policy and are published on the Council's website. This delivers the action plan commitment. Awareness of the service standards will continue to be promoted through tenant engagement activities and communications. The effectiveness of these arrangements will be monitored and reviewed as part of the service's approach to continuous improvement.

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4.4	We are not receiving any feedback from customers to inform service improvement and understand the impact of the service	We will understand the views of tenants and be able to use this data to inform service delivery	Customer satisfaction survey created and monitoring in place, along with implementation of service improvement as a result of any feedback	Feedback form to be created and with the assistance of DDI, put into a format for tenants to feedback. DDI support will also be required to drawn down the data received to analyse and implement and learning across the service	Nov-26	Started but may be late		Final draft completed now awaiting sign off from the Disability Forum. Head of Locality to attend next forum to obtain feedback. Target date for completion amended to reflect the delay.

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4.5	No contractor timescales in place	Contractors will understand their obligations and this will ensure adaptations are completed within the set timescales	Agree timescales with new contractor and measure performance through contract management	No current timescales in contract, so agreement will be needed with the contractor	Sep-26	Started and on target		We have implemented a new tracker to record all jobs in 26/27, the dashboard from which has been supplied. All major jobs are subject to post inspections by surveyors. Meeting between contractor, contract manager and service took place in July to discuss operational challenges and need for up to date WIP to be provided. Tracker is being refined to pull this data into it - this should be completed in August so we have a full picture of waiting list, work in progress and completed works in one place.

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4.6	Not enough capital funding for major adaptations leading to long delays	Reduced waiting times for major adaptations	Downward trend on waiting times for major adaptations	Budgets to be reviewed and funds identified	Dec-26	Started and on target		Date changed to allow for monitoring to ensure the budget is sufficient. Additional capital budget was put in place for 2026/27. We are currently in the process of budget monitoring for Q1 so will be reviewing the status of the budget during this process. We are also reviewing the referrals received to ensure the budget is sufficient and will report this as part of our budget monitoring.

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5	We do not hold complete data about our tenants. Therefore, providing limited assurance that we understand the diverse needs of our tenants across all protected characteristics and can ensure our services are accessible and equitable	Links to Transparency, Influence and Accountability Standard and workstream 2 in the consumer standards improvement strategy. We will hold data on all tenants, where they disclose this, about their diverse needs, including those arising from protected characteristics, language barriers, and additional support needs. Data will be used to monitor and ensure services deliver fair and equitable outcomes for tenants	All new tenants will continue to be asked if a reasonable adjustment can be made and all existing tenants have an annual review for this. By June 2026, we will be able to record all protected characteristics in the housing system. A key interdependency is the system work needed for all protected characteristics to be recorded and in a way associated with the Person Reference Number. By December 2027 we will have good tenant data held within the system with annual opportunities to review existing and submit up-to-date information. With an aim of 20% full tenant data per annum from April 2026	System capacity to record data in a meaningful way to report and obtain customer insight is in place Forms are updated so that data collection is consistent across landlord services An emerging picture of the landlord service customer base is created to review the accessibility of services for its customers	Dec-27	Started and on target		As of June 2026, we are able to record all protected characteristics within the housing management system, with fields aligned to our dedicated equalities monitoring form. This form was co-designed with tenants and is now in use from 1 June 2026 to collect data across the landlord service. We will further expand data collection through additional methods, including an online form to support annual data collection exercises for existing tenants. As data collection progresses, this will support improved insight into tenant needs and inform service delivery, including monitoring for equitable outcomes. Since implementation of the equalities monitoring form on 1 June 2026, protected characteristics data has been collected for 78 new tenants.

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5.1	Sign off needed for dedicated form to be used to collect agreed protected characteristics	Dedicated equalities monitoring form to be a part of tenant data collection	Date of sign off to be recorded	Form to be created to collect tenant data, which is signed off by members of working group and Information Governance, then the Head of Service sign off			Completed	Form has been created and signed off.

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5.2	Additional fields needed within Northgate Housing to represent all protected characteristics to be collected. Data fields to link to person reference and be usable to report	Tenant data, specifically protected characteristics (where declared), will be able to show alongside datasets to check for who we are serving, check for gaps or unequal outcomes, and improve services. Relevant data and information will be used to understand the diverse needs of tenants, including those arising from protected characteristics	Agreed protected characteristics fields will exist in the Northgate Housing system	Once missing fields have been identified these are to be added to the system with the ability to report. Digital, Data and Improvement (DDI) will appoint a lead to assist with this project			Completed	Relevant fields have been identified and are live within the housing system
5.3	Procedure needed for data entry and collection of protected characteristics	Systems and collection procedures in place to collect the required data	Procedure to be drafted and relevant briefings/training with staff	Creation and implementation of procedure for data entry along with training/briefing for staff			Completed	Procedure in place

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5.4	There is a need for all relevant forms to be standardised, once final sign off on data to be collected, to enable consistency of all data categories (personal details, protected characteristics, reasonable adjustments) across housing management data activities	Amended tenancy sign up, Mutual Exchange sign up, Tenancy Audits, telephone scripts and online forms, and annual data collection exercises to reflect the data that needs to be collected	Identical matching forms will exist in paper, online and in Housemark software	Housemark and Online forms designed to mirror the agreed equalities monitoring form	Dec-26	Started and on target		The equalities monitoring form has been implemented from 1 June 2026 and reflects the agreed protected characteristic data fields set out in Action 5.2. This form is now being used to collect data from tenants, ensuring a consistent approach across the landlord service. Work remains underway to replicate this form across additional collection methods, including an electronic version for officer use and a future online form for tenant self-completion. This action is now focused on embedding and extending consistent data collection across all service interactions.

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5.5	Data review exercises to be carried out (minimum of 5 x annually) to check for equitable outcomes	Data review exercises will be used to check for equitable outcomes and tenant engagement tailored to findings	Qualitative and quantitative findings to be included in performance reporting to Head of Housing and Community	Creation of programme of exercises to be carried out using tenant data to check equitable outcomes. Findings to be shared with Resident Engagement Panel and senior staff for relevant actions	April 2026 - April 2027 and annually thereafter	Started and on target		A programme of data review exercises has been established for 2026–2027, with a minimum of five reviews planned between October 2026 and March 2027. This timing allows for data collection to embed from June 2026 so that analysis is based on more complete and reliable datasets. An initial outline programme has been developed, setting out proposed priority service areas where there is potential risk of unequal outcomes. Early scoping work has started in areas such as complaints and hard to access properties. The final scope of these exercises will be refined with input from the Resident Engagement Panel and may change to reflect tenant priorities. This action is focused on

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5.6	Annual data collection and cleansing exercise	All tenants prompted to give the most up-to-date information to meet legal duties, keep residents safe, deliver fair and accessible services, manage tenancies properly, and plan services effectively	To improve 'full tenant data' by 20% each year from April 2026 (a record of all relevant protected characteristics, or, that they would 'prefer not to say')	Annual proactive request sent to tenants to request information on protected characteristics and any update to circumstances	April 2026 - April 2027 and annually thereafter	Started and on target		The approach to annual data collection and cleansing will be implemented following the initial embedding of protected characteristic data collection from June 2026. Previous data collection exercises have improved tenant contact and reasonable adjustment data. The next phase will extend this to protected characteristics, ensuring a consistent and structured approach to collecting and updating tenant information. The first annual data collection exercise for protected characteristics is planned for later in 2026, allowing sufficient time for new data collection processes to be embedded and for data quality to improve. This action is focused on establishing a sustainable

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5.7	No reporting on data sets held or oversight of gaps in data needs	Reporting in place and oversight of data	Reports created on a quarterly basis and reported to the Head of Housing and Community for oversight	Reporting to be created by ICT to understand the volume of the missing data. These will be used to target the data collection methods. Regular reporting on data sets will be provided to senior officers	Apr-26		Completed	Reporting on tenant data and data gaps has been established, with required data fields aligned to the equalities monitoring form (Action 5.2). A revised reporting framework has now been developed to incorporate the updated data fields and provide clearer oversight of data completeness.

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6	We do not share our service standards for some areas and there is a need to improve our sharing of regular performance information for tenants in relation to landlord services	Links to Transparency, Influence and Accountability Standard and workstream 2 in the consumer standards improvement strategy. Service standards and performance will be shared with tenants in an understandable way	Repairs timescales will be published in policy and online The percentage of homes that meet the decent homes standard will be published by April 2026 Performance information will be reported online on a quarterly basis Tenant-facing performance information and service standards will be reviewed and sense-checked through tenant engagement groups (i.e. Tenant Communication Group and Resident Engagement Panel) prior to publication where appropriate	Performance information will be reported to Housing Management Team on a monthly basis, senior management quarterly and published online quarterly	Oct-26	Started and on target		Repairs timescales are published in the online Repairs and Maintenance policy (RAMP) and Tenant Handbook Our annual submissions reported 85.5% decency and 14.5% non-decency to 31st March 2026. Existing tenant engagement structures, including Tenant Communications Group and Resident Engagement Panel, are in place and are being used to review and inform tenant communications, providing a mechanism to improve how performance information and service standards are shared.

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6.1	Repair target timescales were not clearly set out for tenants	Repairs target timescales clearly set out for tenants and available on the website	Data published on the website	Provide repair timescales in the tenant handbook and the Repairs and Maintenance Policy (RAMP).	Dec-25		Completed	This is complete through the RAMP (page 27) and Tenant Handbook (pages 42 and 43) which are published on the website
6.2	The Percentage of decent homes has not been published for two consecutive years	Decent homes percentage published on website and to tenants through the tenant newsletter	This will be published on CCC website by early April 2026 and then annually as part of the TSM submissions and website reporting	Dependant on achieving data sets and information for this. The data sets will be published on the council website and sent out in the newsletter for tenants	Jul-26		Completed	Decency rate is 84% for 25/26. We have submitted the Government return and published on the website https://www.canterbury.gov.uk/housing/decent-homes-standard

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6.3	Performance information is reported to tenants but not as frequently as it could be	Regular sharing of performance information to tenants about landlord services	This will be reported to Housing Management Team each month from April and on CCC website quarterly	Quarterly data to be collected and published on the council's website for tenants to see.	Oct-26	Started and on target		The statistic to be published have been agreed, we are working on a format and we will work with the digital team to get it onto the website.

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7	Complaint responses are not being sent promptly to tenants and there is no oversight of complaints made directly to contractors by tenants	Links to workstream 2 in the consumer standards improvement strategy. Stage 1 and 2 complaints responded to within required timescales. Tracking and oversight of contractor complaints in place	90% stage 1 and 2 complaints responded to within required timescales, recorded through KPIs to management Number of complaints received by contractors reported and monitored	Create and provide training to staff to understand what should be recorded as a complaint and how to respond to complaints. Increase staff pool of staff responding to complaints. Provide oversight of complaints through KPIs and include contractor complaints within this. Staffing resource to be reviewed to ensure objectives can be met	Apr-27	Started and on target		Complaint performance has improved following staff training, an increase in complaint handlers and the implementation of a new system. Stage 1 complaints performance at the end of July 26 is 93%. Stage 2 performance has fallen primarily due to a bug in our complaint handling system that gave an incorrect due date, and is currently 76%.

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7.1	Not all complaints are not being recorded	All complaints are recorded and monitored. Staff will be trained to understand what should be recorded as a complaint	Increase of recorded complaints. Housing staff have received training.	Training for staff provided and oversight from management, which will be through weekly complaints meetings			Completed	Training has been created and delivered across the housing service. Follow up session completed on 20 March 2026 and every quarter throughout the year. There has been an increase in complaints received, this is due to several factors 1. increased transparency in line with the code of guidance, 2. the implementation of a single channel for complaints, 3. an Increase in complaints across the board as the processes and training is embedded with all staff. This will remain under review to ensure all complaints are being recorded but we are satisfied staff are recording complaints.

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7.2	System required for oversight of complaints	Implement Placecube system to record and monitor complaints for greater oversight by management and assist staff with visibility of complaints to ensure they are going out on time and allow management to see at a glance what is outstanding for each area. This will also allow for consistency in approach from officers with set processes and templates to follow	Placecube system has been implemented for S1 and S2 complaints handling	System to be configured and implemented. Management to use system to monitor and provide oversight on complaints so interventions can be put in place when needed			Completed	Complaints Handling System implemented December 2025 for S1 and S2 complaint. All complaints are recorded, triaged and responded to through the system and there is oversight by management for their area of complaints

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7.3	No oversight from senior management of KPIs	KPIs to be reported to senior management Weekly meetings to take place with senior housing staff for oversight of complaints	Quarterly KPI monitoring Weekly complaint meetings	KPI information is already collected, resource required to create the mechanism to report to senior management, which has been identified through the DDI team, who collate the KPI data for senior management. Weekly meetings to be set up and attended by senior housing staff for oversight of complaints			Completed	April 26 - KPIs are reported to senior CCC management on a quarterly basis for oversight. These are also reported to senior housing management weekly through complaint oversight meetings

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7.4	Not enough complaint handlers	Increased pool of complaint handlers through identifying key staff to assist and relevant training provided	Reduced complaints outside of timescales and quicker responses	Further resource needs to be identified due to the increase in complaints and staff will need to be trained			Completed	Response times have improved following an increase in complaints handlers and reorganisation of where complaints go. Recruitment is still underway to increase capacity in repairs and locality teams and they will be trained to ensure there is resilience. Complaints continued to be monitored weekly by Housing management Team to ensure complaints are being responded to on time.

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7.5	No monitoring of quality and consistency of complaints	Template letters for responses to provide consistency, all housing staff have attended complaints training sessions to understand what a good complaint response looks like. We offer support to officers when drafting complaint responses	Quality checking of complaints to take place prior to a response being sent	Templates to be created and set up for staff to use for responses. Training created and rolled out to all staff. Staffing required to check complaint responses, this resource has been identified			Completed	Quality checking in place prior to any complaints being sent. Training has been rolled out to staff and templates are in place for staff to use when constructing a response. This will be kept under review and monitored. A customer satisfaction survey has been implemented with satisfaction data to be reported every quarter and any learning will be applied from this.

Ref (Action Num)	Issue	Specific Outcome	Measurable	Achievable	Target date for completion)	Action Monitoring	Outcome monitoring	Current Status
7.6	Gaps in data received from contractors in relation to complaints	All complaints from contractors are recorded and monitored and contractors are trained in complaints handling where appropriate	Reporting of contractor complaints, including response times, record of training completed with contractors	Work with contractors to provide training and understand of what should be recorded as a complaint to collect data on complaints. Buy in needed from contractors to attend training. Monitoring can be picked up in contract meetings	Apr-27	Started and on target		Contractor complaints are directed through to the service for response and training session were completed with the two main contractors (Sureserve and Cardo) on 8 April 26. This will be kept under review to ensure all complaints are going through this route.

Ref (Action Num)	Issue	Specific Outcome	Measurable	Achievable	Target date for completion)	Action Monitoring	Outcome monitoring	Current Status
8	Hate related ASB crime is not reported or monitored	We have an understanding of the levels of hate related ASB and the information is available for scrutiny by tenants, councillors and senior management	Hate related crime is recorded and monitoring is in place. Tenant satisfaction with services have increased	Reporting for ASB is already in place, there just needs to be a change to the recording of hate related crime and this is reported to tenants and senior management/councillors	Jul-26			Hate related crime can currently be reported by tenants through the website and it is now recorded separately and has been reported to Cabinet. We are seeking to expand information on the website to make it clearer for tenants where to report this. We will continue to review the data ensuring we pull out any themes as they emerge. We are also looking at how we can best reach minority groups as whilst the current data shows no hate crimes reported in 26/27 we want to be confident this is an accurate picture of what is happening and not as a result of a lack of awareness of how or where to report incidents.
8.1	Hate related crime is not recorded as a specific category	Hate related crime is recorded as a specific category	Hate related crime is recorded and monitoring is in place	Reporting expanded to include hate related crime			Completed	Hate related crime is recorded as its own category.

Ref (Action Num)	Issue	Specific Outcome	Measurable	Achievable	Target date for completion)	Action Monitoring	Outcome monitoring	Current Status
8.2	Monitoring is not in place	Monitoring in place and data used to inform service delivery	Hate related crime is reported to enable monitoring to be put in place and details to be included in future reporting on ASB	Monitoring of hate related crime to take place and any analysis of this to inform service delivery			Completed	ASB monitoring is included as part of quarterly reporting to management team. Current cases within Tenancy Enforcement 49 with officers carrying 28/21 cases respectively.
8.3	Data is not reported to tenants or management/Cabinet	Data is reported to tenants management and Cabinet	Reporting to be included in Cabinet reports and data will be provided to REP and published on the website	Reporting expanded to include hate related crime, this is to be included in performance information supplied to tenants, Rep, senior staff and councillors	Dec-26	Started and on target		Data has been reported in the Cabinet report in June, this will be updated on the website quarterly when the format has been agreed, see action 6.3. Date extended to allow time to get data onto the website.

Ref (Action Num)	Issue	Specific Outcome	Measurable	Achievable	Target date for completion)	Action Monitoring	Outcome monitoring	Current Status
8.4	There is no direct route for customers to report hate crime	Tenants have a route to report hate crime	Website is updated with the ability for tenants to report hate crime	DDI support needed to update the website that allows a route for customers to report hate crime online.			Completed	Website has been updated to allow tenants to report hate crime- this is through the ASB page however a separate reporting button is to be put in place.

Ref (Action Num)	Issue	Specific Outcome	Measurable	Achievable	Target date for completion)	Action Monitoring	Outcome monitoring	Current Status
9	Low TSM scores for ASB, indicating a requirement for improvement in the way ASB is managed	Links to workstream 3 in the Consumer Standards improvement strategy Assurance we are effectively dealing with antisocial behaviour and tenants feel more satisfied with our response and actions	TSM data will be used to measure increased satisfaction, this data will be benchmarked with other local authorities The data collected through surveys will be monitored and measured, to look for improvements to service and also for increased satisfaction measures	We need to analyse the data further to establish why there are levels of dissatisfaction. Contractor is required to look at the data and staff to follow up any actions from this. Tenants to be made aware of service standards to ASB and sufficient oversight put in place for cases of ASB, where learning is taking place	Apr-27	Started and on target		Presentation delivered to the Comms Group on 9 June setting out the service standards and discussing how we raise awareness of these. Satisfaction survey taken and feedback now being incorporated into the final draft. Satisfaction surveys to be in place for Q3 with the view to develop a focus group from respondents. ASB question has been added to TSMs giving options on which ASB applies so we can gather more area based information. Tailored ASB training to be delivered by external provider in September - will be based upon internal sessions with staff, learnings from cases and case data.

Ref (Action Num)	Issue	Specific Outcome	Measurable	Achievable	Target date for completion)	Action Monitoring	Outcome monitoring	Current Status
9.1	There is no formal mechanism for learning from ASB cases	There is active learning in place from ASB cases	Records of ASB learning and minutes/record of feedback being delivered to staff	System required for the recording learning and a method for reporting back to staff any learning and any changes to service delivery as a result of this	Oct-26	Started and on target		Team meetings agenda and 121 have been amended to discuss learning from ASB cases. ASB focus reviews to be scheduled in between teams to discuss any further learning. Review of actions taken to date to take place in August. Consideration to be given at this point as to how we link in survey outcomes so these become part of the learnings.
9.2	Standards are not published to tenants for ASB timescales	Expectations of timescales for dealing with ASB to be published on the website and tenants made aware	Standards are published on the website for tenants	Standards agreed for ASB management and these are to be included the service standards for tenants, which will be published on the website	Oct-26	Started and on target		Standards are published within the ASB Policy online. Letters and emails sent to tenants to be reviewed so there is a clear understanding of standards.

Ref (Action Num)	Issue	Specific Outcome	Measurable	Achievable	Target date for completion)	Action Monitoring target	Outcome monitoring	Current Status
9.3	No tenant satisfaction collection for ASB	Tenant satisfaction data is being used to inform service delivery and make any required changes	Survey in place and being sent to all tenants, responses recorded, along with any learning	Survey to be created sent to all tenants who experience ASB, to measure how satisfied they with the service they received and to provide any additional learning or identify the requirement for change in service delivery	Oct-26	Started and on target		Draft survey taken to Comms group on 9th June - feedback has been taken on board and amended version circulated. Creation of digital form now underway as well as printed versions. Intention is to roll out from Quarter 3 2026/27. Next step is to look at how we feedback this data.

Ref (Action Num)	Issue	Specific Outcome	Measurable	Achievable	Target date for completion)	Action Monitoring	Outcome monitoring	Current Status
9.4	KPIs not in place for ASB	KPIs are monitored	Quarterly reporting in place to senior CCC staff	Data is already being collected and resource identified in DDI to collate data and present to senior management on a quarterly basis. The data will also be reviewed by housing management to inform any changes to service delivery			Completed	KPIs in place and being reported quarterly to senior CCC staff

Ref (Action Num)	Issue	Specific Outcome	Measurable	Achievable	Target date for completion)	Action Monitoring target	Outcome monitoring	Current Status
9.5	We are not promoting the work we do with ASB	Promote to tenants through the tenant newsletter and to areas specifically about the work taking place with ASB, including promoting the Community Safety Partnership activities taking place	Regular feedback being provided to tenants on work with ASB	Identify areas of good practice with ASB and promote this to tenants through the tenant newsletter. Good practice will be identified through staff case management	Apr-27	Started and on target		Comms group have agreed an approach to promote the work completed. Approach to include: Word of mouth and frontline teams Having clear information on our website Promoting success stories - use of Social Media and Press Releases Using tenant communications like TNV Being clear on expectations when we complete sign ups Resident engagement, noticeboards and drop-ins Feedback through REP

Ref (Action Num)	Issue	Specific Outcome	Measurable	Achievable	Target date for completion)	Action Monitoring	Outcome monitoring	Current Status
9.6	Further analysis is needed on the TSM results	Data used from TSMs to inform service delivery and improve future scores	Company engaged to analyse the TSM data and breakdown the ASB data by demographic and area, allowing for further analysis of any issues. Action plan to be created from current TSM data sets for ASB	Company to be engaged to completed an analysis of the TSM data. Resource identified to cover costs of outsourcing, staff time required for analysis of this and further delivery of any changes	Oct-26	Started and on target		TSM findings were presented to REP on 14 April, action plan in place to address findings from the results.

Ref (Action Num)	Issue	Specific Outcome	Measurable	Achievable	Target date for completion)	Action Monitoring	Outcome monitoring	Current Status
9.7	Tenants are not always kept regularly updated on the progress of their ASB case	Tenants are updated regularly on their ASB case, leading to higher satisfaction rates from tenants in the way we deal with ASB	Contact points set out for regular updates to tenants with relevant monitoring in place	Mechanism is needed for reporting back and ensuring this is consistent across the service, a review will also be needed to ensure the level of contact is right	Oct-26	Started and on target		Neighbourhood Management Away Day is due to take place in September. Learnings from cases in 25/26 to be presented along with some feedback from complaints. Service standards to be reiterated and procedure to be refreshed in conjunction with the team. External case management training also to be delivered in September.

Ref (Action Num)	Issue	Specific Outcome	Measurable	Achievable	Target date for completion)	Action Monitoring	Outcome monitoring	Current Status
9.8	More robust case management oversight is needed	Improved approach to managing cases of ASB, with improved outcomes for tenants and consistency of service provided	Regular case review meetings are planned with officers. Approaches and learning are taken and fed back to the service.	Oversight is currently in place although not on a formal basis for low level ASB, this will need to be programmed in and management resource will need to be identified	Oct-26	Started and on target		Ongoing monitoring of cases through 121 and Case Reviews. ASB Tracker has also been refreshed and will be part of monthly performance monitoring reported to Head of Service by Team Leader and Team Meeting agendas.