

PLYMOUTH COMMUNITY HOMES

Annual Complaints Performance and Service Improvement Report

2025/26

Prepared in accordance with the Housing Ombudsman Complaint Handling Code

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1. About this report

This annual report explains how Plymouth Community Homes (PCH) handled complaints during 2025/26, what residents told us, what we learned, and the service improvements made as a result.

It has been prepared in line with the Housing Ombudsman Complaint Handling Code and supports transparency with residents, the Board, regulators and other stakeholders.

The report includes complaints handled through PCH's complaints process and information used for Tenant Satisfaction Measures, which all social landlords use to report resident satisfaction and service performance. Where figures are reported on a different basis, we explain this.

How complaints are handled

Residents can raise a complaint when they are unhappy with a service, decision, action or lack of action by PCH or someone working on our behalf. Complaints are logged, acknowledged, investigated and responded to through our two-stage complaints process. Where residents remain dissatisfied after Stage 1, they can ask for their complaint to be reviewed at Stage 2.

Recognising complaints

Residents do not need to use the word "complaint" for an expression of dissatisfaction to be treated as a complaint. Where a resident tells us they are unhappy with the standard of service received, the action taken or lack of action by PCH or someone acting on our behalf, colleagues are expected to recognise this and offer access to the complaints process.

We recognise the difference between a service request and a complaint. A service request asks us to take action to put something right. If a resident is dissatisfied with our response to that request, a complaint can be raised while work continues to resolve the underlying service issue.

Making our complaints service accessible

PCH is committed to making the complaints process accessible and inclusive. Residents can raise a complaint through telephone, email, online services, letter, social media or in person. We provide support through alternative formats, language and interpretation services, advocacy support and reasonable adjustments where required. Residents can also nominate an authorised representative to act on their behalf. These arrangements help residents access the service in a way that meets their individual needs.

What the terms in this report mean

Some words and phrases used in this report have a particular meaning. This guide explains them in plain English so you can refer back to it while reading the report.

Term	What it means
Tenant Satisfaction Measures	Regulatory measures used by all social landlords in England to gauge resident satisfaction and report on how well we are meeting service and safety standards.
Action to put things right	An action agreed after something has gone wrong, such as completing work, apologising or paying compensation.

Term	What it means
Stage 2 review	When a resident asks us to review our Stage One response.
Determination	The Housing Ombudsman's final decision on a complaint.
Maladministration	Where the Ombudsman finds that a landlord did something wrong or did not act properly.
Severe maladministration	The Ombudsman's most serious finding that the landlord did something wrong or did not act properly.
Service failure	A finding that the landlord's service fell below the expected standard.
Order	An action the Ombudsman requires the landlord to take.
Recommendation	An improvement the Ombudsman advises the landlord to make.
Quartile	Quartiles help us compare our performance to other landlords by putting results into four groups – 1 being the best and 4 means we have room to improve.
Member Responsible for Complaints	The Board member who helps make sure complaints receive proper review and challenge – at PCH this person is Maja Jorgensen.

2. Complaint performance 2025/26

Headline performance: three-year trend (tenants only)

Measure	2023/24	2024/25	2025/26	Change
Complaint volume	508	631	723	+92
Stage 1 complaints per 1,000 homes	30.3	42.6	45.2	+2.6
Stage 2 complaints per 1,000 homes	2.8	2.5	5.2	+2.7
Stage 1 response timeliness	98.4%	99%	98.8%	-0.2 percentage points
Stage 2 response timeliness	100%	100%	92%	-8 percentage points

Measure	2023/24	2024/25	2025/26	Change
Complaint satisfaction	40.2%	46.9%	47.4%	+0.5 percentage points

Complaint breakdown

Stage	2023/24	2024/25	2025/26
Stage 1	444	608	648
Stage 2	41	36	75

Over the last three years, we have seen an increase in tenants telling us when we have not met their expectations. Stage One complaints increased from 608 to 648. While most complaints continued to be resolved at Stage One, escalations to Stage Two complaints increased significantly in 2025/26.

The escalation analysis shows that residents were more likely to request a review when the underlying service issue remained unresolved, agreed actions were outstanding, communication had not met expectations or they disagreed with the Stage One outcome. The overall increase in complaints was largely driven by repairs, outstanding work, appointments and communication.

Complaints received in 2025/26

Stage	Number
Stage 1	648
Stage 2	75
Total	723

Complaint outcomes

Outcome	Number	Percentage
Upheld	410	56.71%
Partially upheld	149	20.61%
Not upheld	128	17.7%
Withdrawn	35	4.84%

Outcome	Number	Percentage
Not closed*	1	0.14%
Total	723	

*One Stage One case remained open at year end to allow PCH to respond appropriately to the resident's vulnerabilities. This represented 0.1% of complaints.

Response times

Stage 1

98.8% of Stage 1 complaints from tenants were answered within the response timescales set out in the Housing Ombudsman's Complaint Handling Code, 0.2 percentage points below 2024/25.

Eight responses took longer than the standard response period. Four had an extension agreed with the resident. A further four complaints involved delayed logging or complex investigations across more than one service.

Stage 2

92% of Stage 2 complaints from tenants were answered within the response timescales set out in the Housing Ombudsman's Complaint Handling Code, compared with 100% in 2024/25.

Six responses took longer than the standard response period. In each case, the extension was agreed with the resident and the reason and revised response date were recorded. We will continue to focus on providing a thorough response within the required period and keeping residents informed where an extension is necessary.

2025/26 summary

Complaint volumes increased, mainly because of repairs, outstanding work, appointments and communication. These themes contributed to more upheld complaints and show where improvement is most needed.

Complaint escalation

Reason for Stage 2 review	Percentage of cases
Service issue unresolved	27.4%
Outstanding actions	26.2%

Reason for Stage 2 review	Percentage of cases
Communication concerns	15.5%
Disagreement with outcome	30.9%
Other	0%

What we learned from Stage 2 complaints

- Residents were more likely to seek a review where an underlying service issue was unresolved, agreed actions remained outstanding, communication had not met expectations or they disagreed with the Stage 1 outcome.
- A complaint is only fully resolved when the promised remedy has been delivered and the resident understands what has happened.
- We are improving written updates, named case ownership, evidence of completed actions, contractor checks, and recording of commitments and support needs.

Delivering the actions we agreed

Delivering the actions we agreed is a critical part of effective complaint handling. A response should not bring oversight to an end where actions remain outstanding. Residents need to see that promised action has been completed.

During 2025/26, we improved how we record and follow up actions agreed through complaints. Each action is given to a named colleague and monitored until we have evidence that it has been completed.

Complaint investigations and Stage 2 reviews during 2025/26 showed that unresolved work and uncompleted actions were major reasons for residents remaining dissatisfied and asking for a review. This showed why we needed clearer ownership, better follow-up and evidence that actions had been completed.

During 2026/27, we will build on this by setting clear completion dates, checking that actions have been delivered and following up overdue actions with the responsible service.

Complaints we did not accept

PCH accepts complaints unless a valid exclusion applies under the Customer Complaints and Comments Policy.

During 2025/26, two complaints were not accepted, relating to matters subject to legal proceedings, events raised more than 12 months after they occurred, or anti-social behaviour being addressed through another process.

Each case was considered individually, with the decision explained in writing, appropriate alternative routes signposted, and residents advised of their right to request a review by the Housing Ombudsman.

Benchmarking

We compare our performance with other housing providers through Housemark. Quartile 1 means performance is in the top quarter of participating landlords and Quartile 4 means it is in the lowest quarter. These comparisons help us understand our position, but we also consider residents' experience and why complaints arise. A higher or lower number of complaints does not, by itself, show good or poor performance because it can also reflect how easy residents find it to complain.

Measure	Housemark quartile
Stage 1 complaints per 1,000 homes	Q1
Stage 2 complaints per 1,000 homes	Q1
Stage 1 response time	Q2
Stage 2 response time	Q3

The Stage 2 response time result reflects a relatively low volume of complaints and six cases where extensions were agreed with residents.

3. What residents told us

Three themes accounted for a significant proportion of the complaints raised during 2025/26. For each theme, we have set out what residents told us, what we learned, what changed and the early evidence of impact.

Theme 1: Outstanding work

Share of complaints

27%

What residents told us

Repairs were not always completed, follow-on work was delayed, promised actions were not consistently delivered and updates were not always provided when timescales changed.

What we learned

Delays were linked to high levels of work in progress, delayed follow-on repairs, inconsistent ownership and communication not keeping pace when plans changed.

What we changed

During 2025/26, we reviewed outstanding repairs more regularly, introduced clearer ownership of follow-on work and strengthened oversight of actions agreed through complaints. The Better Repairs Programme began in 2026 to build on this work and improve repair reliability.

What difference it made

Outstanding work complaints accounted for 27.2% of complaints in 2025/26, compared with 39% in 2023/24. This longer-term comparison provides useful context, but it should not be presented as evidence that the changes made during 2025/26 or the Better Repairs Programme, which began in 2026 have caused the reduction. It is too early to assess the programme's impact or confirm sustained improvement in resident outcomes.

Theme 2: Appointments

Share of complaints

13%

What residents told us

Appointments were missed or changed without enough notice, follow-up visits were delayed and residents were not always updated when arrangements changed.

What we learned

Complaints highlighted scheduling issues, delayed follow-on visits, communication gaps and disruption linked to service and system changes.

What we changed

We monitored missed and changed appointments more closely, reminded teams to tell residents promptly when arrangements changed and increased checks on whether follow-on visits took place. We also used complaints to identify problems following changes to our repairs scheduling system.

What difference it made

Appointment-related complaints reduced during the latter part of the year and performance visibility improved. It is too early to confirm sustained improvement in appointment reliability and resident experience.

Theme 3: Communication

Share of complaints

11%

What residents told us

Residents were not always kept informed, expectations and next steps were not always clear, and updates did not always reflect changes to repairs or appointments.

What we learned

Communication failures were linked to inconsistent updates, limited proactive contact when plans changed, unclear ownership and variation in the quality of information.

What we changed

We reminded teams to contact residents when plans or timescales changed, improved written confirmation of next steps and reviewed complaints to understand why communication had failed. We also began checking that actions promised in complaint responses were completed.

What difference it made

Communication now receives greater attention through complaint learning reviews, with clearer accountability and stronger monitoring. Further evidence is needed to demonstrate more timely and consistent updates for residents.

4. What we learned and how this is shaping improvement

How resident feedback shaped improvement priorities

Resident feedback from complaints, satisfaction surveys, policy consultation and service reviews helped identify the issues residents wanted us to prioritise, including reliable repairs, clearer communication and completion of promised actions. This feedback informed the priorities in this report, including further review of repairs, empty homes and leasehold services.

Residents were not directly involved in drafting this annual report or completing the 2026 self-assessment. We recognise this as an area to strengthen. During 2026/27, we will create further opportunities for residents to review complaint learning and challenge whether improvements are making a difference.

While individual complaints often relate to specific service issues, reviewing complaints together helps us identify wider themes and opportunities to improve services for all residents.

Wider learning from complaints

Supporting residents with additional needs

Some complaints showed that residents' health conditions, disabilities, communication preferences or other support needs were not always identified early enough or consistently reflected in service decisions.

In response, we improved how support needs and agreed adjustments are recorded, introduced additional checks at first contact and reminded teams to take these needs into account when arranging repairs, communicating with residents and assessing potential risks. Managers also reviewed more complex cases where residents may have required additional support.

Contractor management

Residents told us that the quality of contractor communication, appointment management and completed work can have a significant impact on their experience of our services.

We responded by increasing checks on completed work, repeat repairs and missed appointments, strengthening expectations around communication with residents and providing clearer instructions about the work required. Complaint learning now forms part of discussions with contractors to help improve performance and resident experience.

Cross-service working

Complaints often involve more than one team. Residents experience PCH as a single organisation and do not distinguish between different services when seeking help.

Complaints highlighted occasions where handovers between teams led to delays, inconsistent information or uncertainty about who was responsible for resolving an issue. In response, we improved coordination of complex cases, clarified ownership and escalation arrangements and increased joint review of higher-risk complaints involving multiple services.

Key learning themes

The main lessons from complaints during 2025/26 were:

- Complete repairs and follow-on work promptly.
- Deliver agreed actions and remedies in full.
- Recognise and respond to residents' support needs earlier.
- Strengthen contractor performance and accountability.
- Improve coordination across services.
- Use complaint learning to improve services.

- Improve communication across services and with residents

5. The difference complaints have made

More residents told us they were satisfied with how we handled their complaint, increasing from 40.2% in 2023/24 to 47.4% in 2025/26. However, there continues to be more to do; on reviewing the comments left in our most recent tenant perception survey, there is a mixed picture with some tenants reporting positively, but others have reported a lack of follow-up and a desire for a faster and more streamlined service.

We also responded to 98.8% of Stage 1 complaints within our target timescale.

Complaints about work that had not been completed or followed through reduced from 39% of all complaints in 2023/24 to 27.2% in 2025/26, suggesting some early improvement. These results suggest that some of the changes made during the year are having a positive impact. However, we do not yet have enough evidence to say that all of these improvements have led to lasting changes for residents.

Wider Tenant Satisfaction Measures

Measure	2025/26
Overall satisfaction	82.1%
Satisfaction with repairs	85.6%
Satisfaction with time taken to complete the most recent repair	81.8%
Keeping residents informed	84.6%
Listening to views and acting on them	73.5%

These results show that many residents value PCH's services, particularly when repairs are completed well and communication is clear.

What this tells us

Residents who only need a simple service from us are generally satisfied. However, residents who experience delays, outstanding work, repeated appointments or more complex issues are much more likely to become dissatisfied.

Confidence is most affected when repairs take too long, agreed actions are not completed, communication is inconsistent or residents have to chase us for updates.

Our focus is to maintain strong overall satisfaction while improving the services that residents find most frustrating, particularly repairs, communication and follow-through on agreed actions.

6. Ombudsman and regulatory assurance

Housing Ombudsman cases

During 2025/26, the Housing Ombudsman completed investigations into three complaints about PCH. While Ombudsman cases represent only a small proportion of the complaints we handle each year, they provide important independent insight into where residents experienced poor outcomes and where services need to improve.

The table below summarises Housing Ombudsman determinations received by PCH during 2025/26.

Measure	2025/26
Determinations received	3
Maladministration findings	2
Severe maladministration findings	1
Service failure findings	3
Orders made	10
Recommendations made	3

One Ombudsman investigation can result in more than one finding, order or recommendation. The findings received during 2025/26 related to drainage issues, damp and mould, property condition, anti-social behaviour and complaint handling. Learning from these cases has informed improvements to complaint handling, oversight of complex cases and the management of repairs-related issues.

Spotlight reports and sector learning

PCH also considers learning from Housing Ombudsman Spotlight reports and other sector publications. During 2025/26, particular attention was given to damp and mould, complaint handling, record keeping and resident communication.

This learning is considered alongside complaints, resident feedback, service performance information and internal assurance activity to help identify opportunities for improvement and prevent issues from recurring.

Governance and assurance

Complaints are reported and reviewed throughout the year to ensure learning is identified, service improvements are delivered and performance is subject to challenge and scrutiny. The Executive Management Team, Customer Focus Committee, Audit & Risk Committee and Board all receive information on complaint performance, learning, Ombudsman outcomes and compliance with the Complaint Handling Code.

These arrangements help ensure that complaint performance is regularly reviewed, areas of concern are challenged and agreed improvements are followed through. Internal auditing provides an additional independent source of assurance.

Complaint Handling Code compliance

On 31 March 2026, the Housing Ombudsman reviewed PCH's Customer Complaints and Comments Policy and made 11 recommendations where the written policy could be strengthened. PCH has incorporated these changes into Version 7.1 of the policy and is updating supporting procedures, templates, resident information, training and monitoring arrangements.

PCH completed its annual self-assessment against the Complaint Handling Code during 2026. The assessment found substantial evidence of compliance across complaint handling arrangements, governance, performance monitoring and organisational learning.

The self-assessment identified one area where further work is needed. During 2026/27, we will strengthen how complaint-handling responsibilities are embedded across teams and organisations delivering services on our behalf, helping to ensure a fair, timely and effective complaints service for residents. Progress will continue to be monitored through our governance arrangements.

7. Our priorities for 2026/27

Analysis of complaints during 2025/26 identified several recurring themes. Residents were most likely to become dissatisfied when agreed actions were not completed, repairs remained outstanding, communication did not meet expectations or service issues remained unresolved. These findings have informed the priorities set out below.

What success will look like for residents

These priorities address the issues most frequently identified through complaints during 2025/26. For residents, success will mean fewer unresolved issues, clearer ownership, more reliable repairs, timely updates when things change and stronger follow-through when PCH agrees to put something right.

Priority 1: Ensure actions agreed through complaints are completed

Why this matters

Residents should be able to trust that when PCH agrees to put something right, the action is completed fully and on time.

What we will do

- Better Repairs Programme to improve repair reliability.
- Dedicated oversight to make sure repair actions agreed through complaints are completed.
- Dedicated oversight to make sure complaint learning leads to service improvement.

How we will measure progress

- Percentage of actions completed on time.
- Number of overdue actions.
- Resident feedback through post-complaint survey.

Priority 2: Reduce avoidable escalation

Why this matters

Residents should not need to ask for a further review because the original issue remains unresolved, actions are outstanding or communication is unclear.

What we will do

- Better Repairs Programme to improve repair reliability.
- Dedicated oversight of complaint actions and learning.
- Complaint handling training to improve the quality and consistency of responses.

How we will measure progress

- Escalation rate.
- Reasons for escalation.
- Resolution satisfaction.

Priority 3: Improve reliability of the repairs journey

Why this matters

Residents should receive repairs that are well managed from first report through to completion, with fewer delays, repeat visits or missed appointments.

What we will do

- Better Repairs Programme to improve repair reliability.
- Dedicated oversight of repair actions agreed through complaints.

How we will measure progress

- Outstanding work complaints.
- Appointment-related complaints.
- Repeat repair rates.

Priority 4: Improve resident communication

Why this matters

Residents should receive clear, timely and consistent updates, especially when repairs, appointments or complaint actions change.

What we will do

- Complaint handling training to improve the quality and consistency of responses.
- Resident complaint workshops to listen to experience and test improvements.
- Provide clearer appointment information and proactive updates, with stronger ownership and handovers between teams and contractors.

How we will measure progress

- Communication complaints.
- Resident feedback.
- Tenant Satisfaction Measures.

Priority 5: Increase resident confidence in complaint handling

Why this matters

Residents should feel that complaints are listened to, handled fairly and used to improve services for them and others.

What we will do

- Complaint handling training.
- Dedicated oversight to ensure learning leads to improvement.
- A complaints satisfaction survey to understand residents' experience after a complaint.

How we will measure progress

- Complaint satisfaction.
- Ombudsman outcomes.
- Completion of learning actions.

Priority 6: Show how service improvements make a difference for residents

Why this matters

Residents should be able to see that improvements made in response to complaints lead to better services and lasting change.

What we will do

- Set clear measures for the difference improvements should make for residents.
- Track whether improvements reduce repeat complaints, delays and the need for residents to chase us.
- Report progress and resident feedback through our governance arrangements.

How we will measure progress

- Repeat complaints and delays.
- Resident feedback and satisfaction.
- Evidence of lasting improvement.

Appendix A: Complaint Handling Code self-assessment

The approved [PCH Complaint Handling Code Self-Assessment 2026](#) will be published alongside this report. It confirms PCH's compliance position, identifies areas requiring further improvement and explains how actions will be owned, monitored and reported.

Appendix B: Governing body response and statement from the Member Responsible for Complaints

As Plymouth Community Homes' Member Responsible for Complaints and Chair of the Customer Focus Committee, I have reviewed the Annual Complaints Performance and Service Improvement Report for 2025/26 and the organisation's self-assessment against the Housing Ombudsman Complaint Handling Code. My assurance is based on the Committee's scrutiny of complaint performance, themes, Housing Ombudsman outcomes, Code compliance and delivery of improvement actions. The report provides a transparent account of performance and learning, while identifying where further evidence of sustained improvement is required.

Throughout the year, the Customer Focus Committee received regular reports on complaint volumes, outcomes, response times, complaint satisfaction, complaint themes, Housing Ombudsman determinations and compliance with the Complaint Handling Code. This enables the Committee to provide scrutiny and challenge, understand resident experience and check that complaints are used to drive service improvement.

The Committee paid particular attention to repairs, outstanding work, appointments and communication because these issues have the greatest impact on residents and feature most prominently within complaint feedback. We also reviewed learning from Housing Ombudsman investigations and checked that orders, recommendations and wider sector learning had been translated into practical improvements.

The Committee recognises positive achievements during 2025/26. Complaint response times remained strong overall, complaint satisfaction improved over the longer term, and PCH strengthened complaint learning, governance and oversight. Independent assurance also confirmed that appropriate controls were in place to record, monitor and report on complaints and associated learning.

At the same time, further improvement is required. Complaint volumes increased and Stage 2 complaints rose significantly. Many escalations were linked to unresolved service issues, outstanding actions and communication concerns. The Committee expects continued focus on prompt delivery of remedies, clear updates to residents and evidence that service changes produce sustained improvements in resident experience.

The Customer Focus Committee receives updates on improvement activity arising from complaints and monitors progress against agreed actions. This includes complaint learning themes, Ombudsman outcomes, service reviews, audits and improvement programmes. Where progress is not being made at the expected pace, the Committee provides challenge and seeks further assurance on delivery, who is responsible and when work will be completed.

Priorities for 2026/27

- Improve completion of actions agreed through complaints.
- Reduce avoidable escalation to Stage 2.
- Improve reliability of the repairs journey.
- Strengthen communication and expectation management.
- Increase resident confidence that complaints result in meaningful change.
- Demonstrate more clearly the impact of service improvements on resident outcomes.

The Committee has also considered the requirements identified in the self-assessment as subject to policy approval or further embedding. Provision 9.8 remains partially compliant while PCH completes and evidences a consistent complaint-handling objective for all relevant employees and third parties.

The Committee will monitor this action, together with the wider implementation plan, to completion by 31 December 2026.

As Member Responsible for Complaints, I am satisfied that the Customer Focus Committee and Board regularly review complaint performance, learning, Code compliance and improvement actions. Arrangements are in place to identify learning, monitor compliance and track agreed actions. The Committee will continue to seek evidence that the actions identified through the self-assessment and this report have been completed and are making a measurable difference for residents. More work is still needed to complete agreed actions promptly, reduce avoidable Stage 2 reviews and show lasting improvements for residents. The Committee will continue to question progress and check that agreed changes are making a difference.

The Board welcomes the transparency provided through this report, endorses the improvement priorities for 2026/27 and will continue to monitor progress through regular performance, assurance and service improvement reporting. We remain committed to valuing complaints as a source of resident insight and using learning to drive continuous improvement across Plymouth Community Homes.

**On behalf of the Plymouth Community Homes Board and Member Responsible for Complaints –
Maja Jorgensen, Chair of Customer Focus Committee on 25 September 2026**