

Complaints performance and service improvement report 2025/26

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1. Commentary from the Board

As the Member Responsible for Complaints, I am presenting this annual report on behalf of the NHG Group, its parent NHG Board and the Boards of the subsidiary companies within the NHG Group. While recognising that complaints performance remains below the standard residents should expect and that further improvement is required, the Board also acknowledges the progress made during the financial year 2025/26 to strengthen complaint handling, improve accessibility and use complaint insight more systematically to drive service improvement.

The Board recognises that, although there have been improvements over the past 12 months, complaints performance remains some way from where it needs to be. Our focus is therefore on securing sustained improvement, strengthening accountability and ensuring that residents experience better outcomes when things go wrong.

Complaints are a key driver for service improvement and culture change across NHG, and our performance in this area is a key expression of how we keep our word to our residents, treating them fairly and putting things right where we have fallen short. This year's Annual Complaints Performance and Service Improvement Report, alongside our self-assessment against the Housing Ombudsman's Complaint Handling Code, reflects both the progress that has been made and the significant work that remains to ensure residents consistently receive the quality of service they should expect.

We welcome the improvements in Stage 1 timeliness and the clearer accountability now in place across directorates. The centralised complaints service has made it easier for residents to tell us when they are dissatisfied and has strengthened our ability to listen and learn. However, the report also shows that too many residents are still experiencing delays, repeat contact, communication failures and incomplete resolution. The increased volume of complaints tells us that access to the complaints service has improved, but it also reflects that too many residents are not yet being well served by the services they rely on.

Having recognised those challenges, we also acknowledge the improvements secured during the year. Stage 1 timeliness has improved significantly, governance and reporting are clearer, and complaint insight is being used more consistently to inform service improvement, particularly in repairs, communication, follow-through on agreed actions and resident engagement. The Board expects the 2026/27 priorities to focus on reducing avoidable escalation, strengthening follow-through on agreed actions, improving repair-related outcomes, and evidencing the impact of learning on resident experience. We will continue to provide scrutiny and challenge as NHG works to improve service design, operational delivery and resident focus.

Resident engagement is central to this improvement work. The work presented to the Board ahead of the summer period provides a stronger basis for involving residents in complaints learning, scrutiny and service redesign. We are now looking to engage more residents in reviewing complaint journeys, testing the clarity and tone of responses, and shaping lessons learned activity so that improvement is grounded in lived experience as well as internal performance data.

We hope this report provides clear insight into the progress made, the areas where further improvement is needed, and how residents can help shape that work. We welcome residents' input, thoughts and insights on how we can continue to improve our services. To get involved, please visit www.nhg.org.uk/your-community/get-involved

Claire Kober
Member Responsible for Complaints

2. Executive summary

2.1 This report sets out complaints performance at NHG for the period 1 April 2025 to 31 March 2026. It covers the key themes, learnings and service improvements arising from complaints, and details NHG mentions in Housing Ombudsman Service (HOS) publications, in compliance with the Housing Ombudsman Complaint Handling Code.

2.2 What residents experienced this year:

- Increased difficulty with repairs and property condition
- Delays in resolution (cited in 63% of complaints)
- Frustration with communication and lack of updates

2.3 What we learned:

- Timeliness and quality of resolution are the primary drivers of dissatisfaction
- Failures are often interconnected across services
- Incomplete follow-through at Stage 1 drives escalation

2.4 What we are changing:

- Strengthening monitoring of complaint actions
- Improving first-time fix rates in repairs
- Improving learning from complaints by embedding root cause analysis tools across the organisation
- Working with Directors to ensure that they are actively engaged in learning from complaints and owning identified service improvement in their area and cross cutting workstreams.
- Continue to review our compliance under Consumer Regulation to ensure complaints are addressed fairly, effectively and promptly including embedding first line quality assurance checks

3. Key findings

3.1 NHG remains compliant with the Housing Ombudsman Complaint Handling Code. NHG's self-assessment is published on our website alongside this annual complaints performance and service improvement report.

NHG's self-assessment confirms compliance with the Code requirements on accessibility, complaint definition, two-stage handling, response times, extensions, exclusions, remedies, learning, publication and governing body oversight. The areas identified for further strengthening are reflected in the 2026/27 improvement priorities set out in this report.

3.2 While we assess ourselves as compliant, we recognise areas where we are strengthening our approach, particularly in the following areas:

- Escalations to Stage 2
- Stage 2 timeliness

- Evidence of learning implementation
- Consistency of operational controls
- Timeliness of HOS responses

3.3. Complaint volumes have grown significantly during 2025/26. NHG received 10,258 Stage 1 complaints across the year, with 3,418 progressing to Stage 2.

3.4 This increase should be understood in two ways. It indicates that the centralised complaints service introduced in July 2024 has made it easier for residents to raise dissatisfaction and has strengthened NHG's ability to listen, investigate independently and capture learning. At the same time, the volume of complaints also reflects too many residents experiencing poor service, including delays, unresolved issues, communication failures and pressure within wider operational services. The increase is therefore both evidence of improved access to the complaints process and a clear signal that further service improvement is needed.

3.5 Early post-centralisation Ombudsman outcomes are encouraging, with a high proportion of determinations resulting in either no maladministration or reasonable redress.

We recognise this is an emerging evidence base and will continue to monitor outcomes as more recent cases reach determination.

3.6 Performance against the HOS Code timescales improved markedly. 96.4% of Stage 1 complaints were acknowledged in line with the Code, and 93.9% of Stage 1 complaints were responded to within Code timescales, a substantial step forward from 65.3% in 2024/25. Stage 2 timeliness of 72.4% also represents continued improvement but remains a priority area for further work.

*Timeliness includes cases where extensions were agreed with residents in line with the Code.

3.7 January 2026 recorded the highest monthly Stage 1 complaint volume of the year at 1,051. This reflected the combined impact of seasonal service closures, winter asset-related pressures and reduced capacity in the complaints service during the latter part of the year.

3.8 Recruitment is in progress to restore full operational capacity. The service has a clear recovery plan in place and remains on track to return to green performance status by the end of Q1 2026/27.

3.9 The key themes coming through from complaints remain property condition (and within it, repairs, damp and mould), timeliness of resolution, communication failures, and staff conduct. Timeliness alone accounts for 64.9% of complaint reasons in our most recent month.

3.10 The recent complaints audit provided an independent assessment of how effectively NHG's complaints operating model is working as part of the wider regulatory compliance plan. Its aim was to test whether the systems, controls, governance and quality management arrangements now in place are supporting timely, fair and resident-focused complaint handling. The audit recognised progress in the design of the complaint's framework, including clearer structures and improved oversight, but also identified areas where operational practice needs to be strengthened. The findings are being used to shape a focused improvement plan, with actions to improve system automation, deadline management, evidence of completed actions, and the tracking of learning through to sustained service improvement for residents.

4. Complaint Handling Code self-assessment.

4.1 The Housing Ombudsman's statutory Complaint Handling Code sets out the standards social housing landlords must meet when handling complaints. Its purpose is to support early resolution, ensure residents are treated fairly, and help landlords use complaints as a source of learning and service improvement. The Code is statutory from April 2024 and requires landlords to assess their complaint handling practice annually.

4.2 NHG has completed a refreshed self-assessment against the Code for 2025/26. This is included at [Appendix A](#) and published on the NHG website, alongside the annual complaints performance and service improvement report, in line with the Code's publication requirements.

4.3 The Housing Ombudsman's guidance also expects the self-assessment to form part of the annual complaints performance report and to be reported to the governing body, with the governing body's response published alongside it.

The self-assessment confirms NHG's ongoing compliance with the Code. It also identifies the areas where we are continuing to strengthen our practice, particularly:

- improving complaint response timeliness;
- strengthening root cause analysis;
- improving evidence that agreed actions have been completed; and
- embedding complaint insight into service design and wider service improvement.

4.4 This approach reflects the Code's emphasis on being fair, putting things right and learning from outcomes, while recognising that compliance is the foundation for good complaint handling rather than the end point.

Table 1 Summary of compliance to HOS Complaint Handling Code

Code area	Evidence to include	Further strengthening for 2026/27
Accessibility and awareness	Dedicated complaints route, published policy and resident-facing information.	Test awareness through complaint satisfaction surveys and resident scrutiny.
Two-stage process and timescales	Stage 1 and Stage 2 performance reported against Code timescales, including agreed extensions.	Improve Stage 2 timeliness and strengthen monitoring of extension quality.
Learning and service improvement	Complaint themes, Ombudsman determinations, internal audit and resident scrutiny inform improvement activity.	Track actions through to completion and evidence impact on resident experience.
Governance and publication	Self-assessment, annual report and Board commentary are published and reviewed through governance.	Clarify Board approval, Member Responsible for Complaints oversight and reporting frequency.

5. 2025/26 Performance

5.1 Headline performance

During 2025/26, NHG received 10,258 Stage 1 complaints. The overall trend is clear: complaint volumes continued to increase following the launch of the centralised complaints service in July 2024, which made the process more accessible through a dedicated route.

Summary of complaints received 2025/26

Stage 1	10,258 Received	96.4% Acknowledged in time	9,889 Responded to	93.9% Responded to in time
Stage 2	3,418 Received	72.4% Responded to in time		

5.2 Stage 1 performance

Chart 1 below shows complaint volumes received by month for 2025/26. By year end, 9,889 complainants had received a Stage 1 response. Of these 93.9% were responded to within the Complaint Handling Code timescales, including cases where residents were informed of an extension. This is a substantial improvement from 65.3% in 2024/25 and reflects the impact of a strengthened complaints function, clearer routing and more consistent process management. However, the volume of complaints also shows that too many residents are still experiencing service failures that require formal resolution.

Stage 1 complaint volumes by month 2025/26

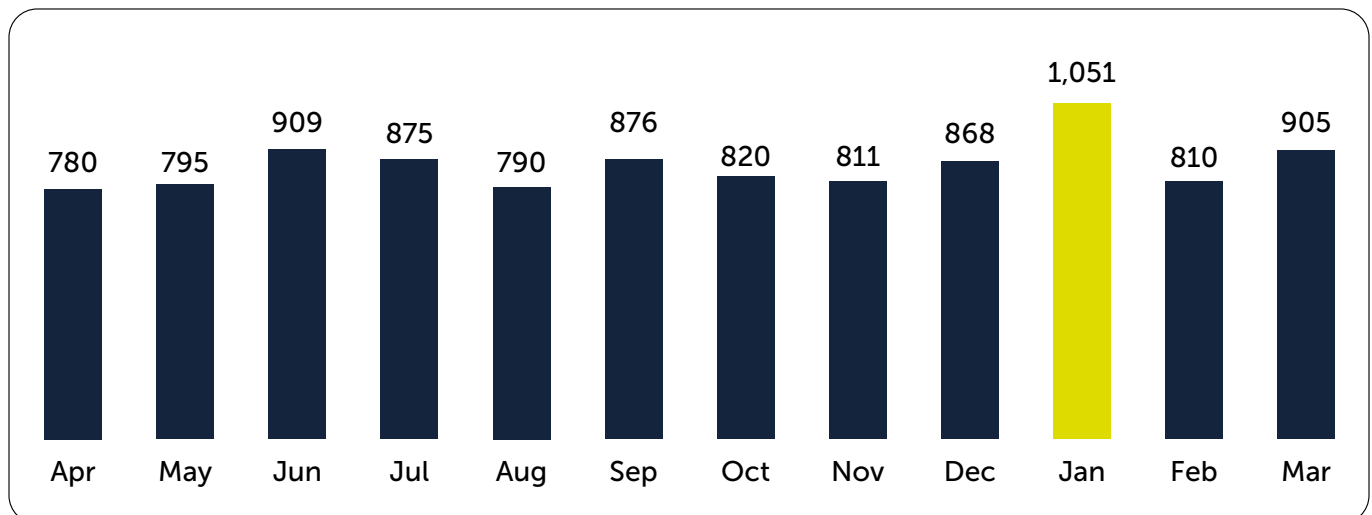


Chart 1 Stage 1 Complaint volumes 2025/26

5.3 Stage 2 performance

Across the year, 3,418 complaints progressed to Stage 2. This represents an escalation rate of 33%, which is above the G15 benchmark of around 25%. This indicates that too many residents did not feel their complaint had been resolved at Stage 1. By year end, 3,327 Stage 2 responses had been issued, with 72.4% responded to within the Code timescales. This is progress compared with 2024/25, but Stage 2 timeliness remains a priority area for improvement, particularly given the impact of capacity pressures during the latter part of the year.

5.4 Monthly trends and operational pressures

Complaint volumes were not evenly distributed across the year. Monthly Stage 1 volumes ranged between 780 and 909 during the first half of the year, eased to 790 in August, and then rose again from September. Q3 averaged 833 complaints per month. January 2026 recorded the highest monthly volume, with 1,051 complaints, before February and March returned to more typical levels at 810 and 905. The January peak reflected a combination of the Christmas closure period, seasonal asset pressures such as damp, mould, boiler and weather-related repairs, and capacity constraints in the complaints service. These pressures also provide important context for Stage 2 performance: while Stage 1 timeliness improved significantly, the 33% escalation rate shows that too many residents still felt their complaint had not been fully resolved at the first stage.

- The Stage 1 to Stage 2 escalation rate was 33%, which is above the G15 benchmark of around 25%. Reducing avoidable escalation therefore remains a priority, with the focus on improving the quality of Stage 1 resolution, completing agreed actions on time and ensuring residents receive clear updates until the underlying issue is resolved.
- The maladministration rate of 55%, which is also reported as part of the Housing Ombudsman Service's landlord performance publication, represents the overall maladministration rate inclusive of service failure findings. Adverse findings of maladministration and severe maladministration alone accounted for 33%.
- Maladministration findings have reduced from 62% in 2023/24 and 67% in 2024/25.

5.5 What this tells us

- The centralised complaints service has improved access and created a clearer route for residents to raise dissatisfaction.
- Higher complaint volumes also reflect continuing service pressures, particularly in repairs, property condition and communication.
- Stage 1 performance has improved significantly, but Stage 2 timeliness, action follow-through and avoidable escalation require further improvement during 2026/27.

6. Housing Ombudsman cases

6.1 During 2025/26, the Housing Ombudsman issued 261 determinations relating to NHG complaints, resulting in 709 individual findings. The number of determinations increased across the year, from 43 in Q1 to 92 in Q4, as the Ombudsman progressed its backlog of cases.

6.2 Many of the findings, including adverse outcomes, relate to complaints raised before the centralised complaints service was introduced in July 2024. This context is important, but it does not reduce the impact on the residents affected. We have used these determinations to identify learning, strengthen follow-through on remedies, and test whether improvements made since centralisation are being sustained in more recent cases.

Housing Ombudsman findings 2025/26

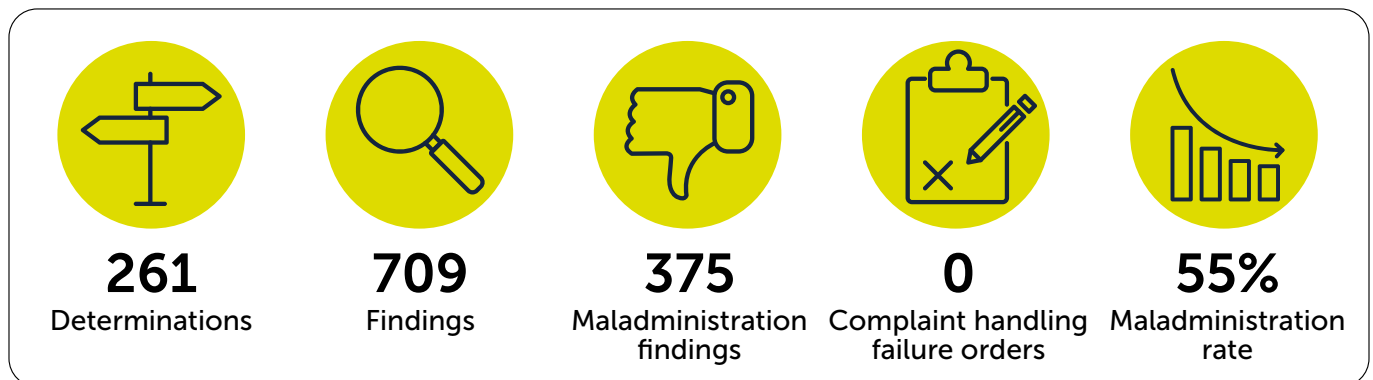


Chart 2 Housing Ombudsman Findings 2025/26

6.3 The mix of Ombudsman findings shows signs of improvement but also confirms that further work is needed. Reasonable redress findings increased from 30 in Q1 to 72 in Q4, indicating that in more cases NHG had taken steps to put things right before the Ombudsman reached a determination.

6.4 Q3 showed the strongest overall position, with adverse findings at 46.24% and reasonable redress accounting for 38% of all findings, as the first wave of post-centralisation cases began to reach determination.

6.5 In Q4, adverse findings increased to 56.38%. Although the quarter included 72 reasonable redress findings compared with 6 severe maladministration findings, these outcomes still reflect serious impact for some residents. We will continue to use all determinations, including historic cases, to strengthen remedies, improve follow-through and reduce the risk of recurrence.

Adverse findings % by quarter 2025/26

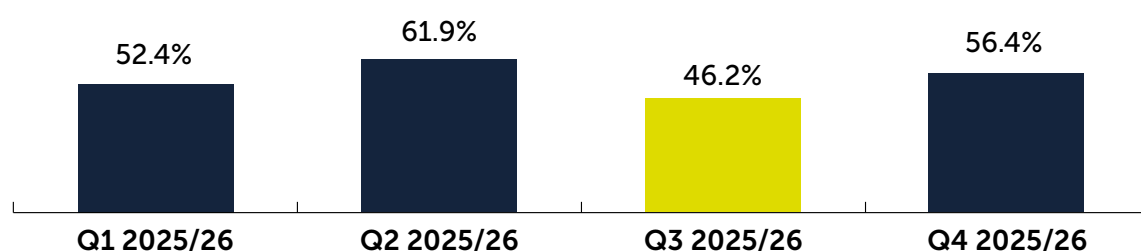


Chart 3 Housing Ombudsman Adverse Findings 2025/26

Maladministration trend by quarter 2025/26

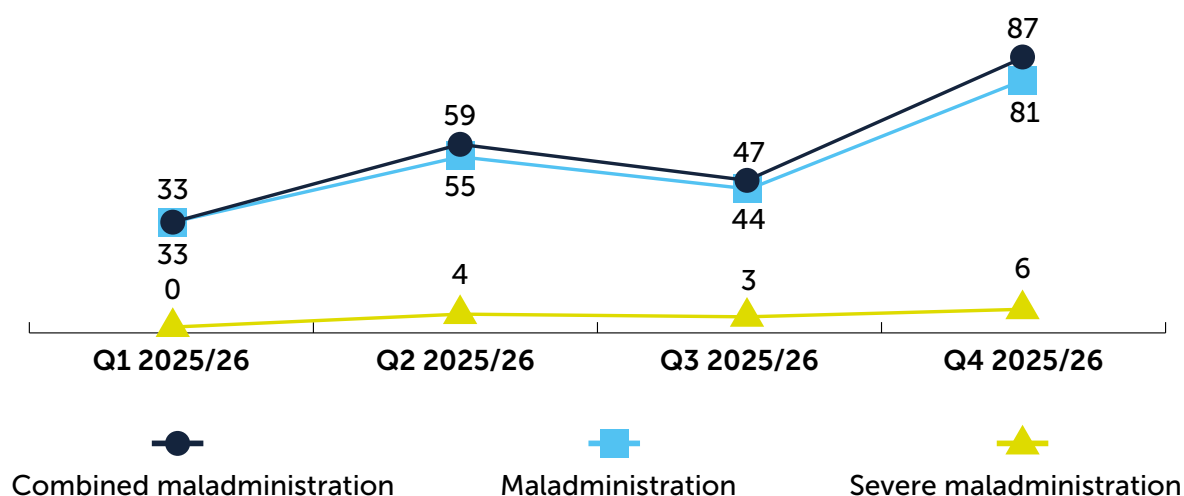


Chart 4 Housing Ombudsman Maladministration Trend 2025/26

6.6 As shown in Charts 3 and 4, severe maladministration findings increased across the year, from 0 in Q1 to 6 in Q4, with 13 findings in total. Maladministration and severe maladministration combined accounted for 33% of findings, compared with 39.22% in the equivalent prior year period. The rise in Q4 should be considered alongside the Ombudsman's continued clearance of older cases, many of which related to issues raised before the centralised complaints service was introduced.

6.7 While this provides important context, each adverse finding represents a poor experience for the resident concerned and has been used to identify learning and strengthen follow-through on remedies.

6.8 Determinations relating to complaints raised since centralisation in July 2024 have generally resulted in no maladministration or reasonable redress. This is encouraging and suggests that the centralised model is supporting more consistent complaint handling. However, the evidence base is still developing, and we will continue to monitor more recent determinations closely to test whether improvements are sustained and whether residents experience better outcomes in practice.

6.9 At year end, 428 NHG cases were awaiting determination by the Ombudsman. We expect this number to reduce during 2026/27 as the clearance programme progresses. We will continue to monitor the remaining caseload to identify any further clusters of historic findings, ensure learning is captured promptly, and apply that learning to current complaint handling and service improvement activity.

6.10 Complaints Not Accepted - During 2025/26, NHG did not accept 2,210 matters raised by residents as formal complaints. Each matter was assessed individually against the Complaint Handling Code and NHG's complaints policy to determine whether it should be handled through the complaints process or directed to a more appropriate route. Exclusions were not applied automatically. Where a matter was excluded, the issue was still recorded, reviewed and responded to in writing, with an explanation of the reason for the decision and the next steps available to the resident.

6.11 The most common reasons for exclusion were first requests for service, information or policy explanation; matters linked to ongoing court proceedings; insurance claims; subject access requests, which are managed under the SAR policy; duplicate complaints or matters already responded to; and cases being pursued in a way that met the threshold in NHG's unacceptable behaviour policy. Some matters, such as neighbour disputes, anti-social behaviour, hate crime or domestic abuse, were directed to specialist case management routes where those routes were better placed to provide immediate support and manage risk. However, where the resident was complaining about how NHG had handled such reports, the matter remained capable of being considered through the complaints process.

6.12 Exclusion decisions are intended to ensure that residents are directed to the route most likely to resolve their issue, rather than to restrict access to the complaints process. Where an exclusion applies, residents should be told clearly why the matter is not being treated as a complaint, what route will be used instead, and how they can challenge the decision or contact the Ombudsman where appropriate. We will continue to monitor exclusion reasons during 2026/27 to ensure they are being applied consistently, fairly and transparently, and to identify any themes that indicate residents need clearer information or earlier service intervention.

7. Complaint themes

7.1 Our thematic analysis for 2025/26 shows a consistent pattern in the issues driving resident dissatisfaction. Property condition remains the largest source of complaints, but the data also shows that complaints are often interconnected. Delays in repairs can lead to repeat contact, communication breakdowns and, in some cases, complaints about staff conduct. This means our learning must focus on the resident journey as a whole, rather than treating each complaint category in isolation.

Key insights from complaint data analysis

Top 5 complaint categories (% of total) 2025/26

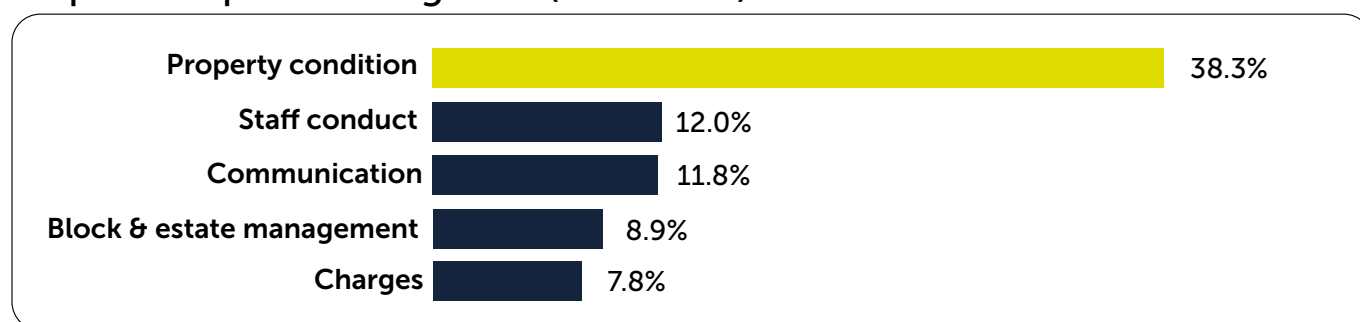


Chart 5 Top 5 Complaint Categories

7.2 Property condition was the largest complaint category in 2025/26, accounting for approximately 38% of all Stage 1 complaints. The proportion increased during the year and reached 39.9% by January 2026. This shows continuing pressure in repairs and maintenance and confirms that property condition remains the area where residents are most likely to experience dissatisfaction. The most common issues were delays in completing repairs, repeat visits for the same issue, concerns about the quality of work, and damp and mould.

7.3 These complaints should be considered alongside the mobilisation of new repairs contracts. The mobilisation period has involved changes to people, processes, systems and supply chains, and some fluctuation in performance was expected as the new arrangements became established. There are early signs of improvement, including stronger contractor engagement, increased oversight, better reporting and greater visibility of performance.

7.4 However, residents continued to experience delays, uncertainty and repeat contact during this period. Learning from 2025/26 has helped shape the mobilisation of three new Tier 1 repairs contractors and the way NHG monitors and measures performance. In 2026/27, NHG will introduce a strengthened commercial function within the repairs service to improve contract management, strengthen contractor accountability, improve first-time resolution and repairs satisfaction, and ensure residents receive clearer updates until issues are fully resolved.

7.5 Communication related complaints remained elevated during the year, accounting for approximately 12% of complaints. Volumes increased notably between October and December and stayed at a higher level into Q4. The main issues raised were unanswered emails, a lack of proactive updates, inconsistent information from different colleagues, and the tone or clarity of letters and emails. These findings show that residents need clearer ownership, more consistent updates and communication that is timely, accurate and easy to understand.

7.6 This insight has directly informed the Resident First Programme and the move to NHG's new Target Operating Model. The programme is designed to address the root causes of poor communication, repeat contact and unclear ownership by creating a more joined-up, resident-centred service model.

7.7 A central part of this change will be the development of a centralised contact centre service, with clearer triage, stronger case ownership and improved first-point resolution. The aim is to reduce unnecessary handoffs between teams, improve consistency across channels, and make it easier for residents to receive timely, accurate updates without needing to chase. This will help ensure complaint insight is translated into practical service design and measurable improvement for residents.

7.8 Staff conduct complaints accounted for approximately 12% of complaints and increased as a share of overall volume during the year. Our analysis indicates that these complaints often arise after residents have experienced unresolved repairs, repeated chasing or poor communication. While all concerns about conduct must be taken seriously, the data suggests that improving service ownership, timeliness and communication will also help reduce conduct-related dissatisfaction. A new Customer Experience Strategy and Customer standards will be developed by March 2027.

7.9 This learning is being reinforced through NHG's wider culture and people work. The introduction of the new NHG values, supported by the People function, is intended to set clearer expectations for how colleagues work with residents and with each other. The values will be embedded through performance and development conversations, guidance on what

good looks like at each level, and reward and recognition activity that celebrates colleagues who demonstrate the right behaviours.

7.10 This is particularly important in priority areas such as disrepair, complaint resolution and customer satisfaction, where resident trust depends on colleagues taking ownership, communicating clearly and following issues through to completion.

7.11 Service charge complaints accounted for approximately 8% of complaints. Residents most commonly raised concerns about the clarity of statements, the explanation of charges and perceived value for money.

7.12 Complaint insight has directly informed the move to more centralised income and service charge functions, including the establishment of a centralised service charge team and the development of a centralised income collection model. These changes are intended to improve consistency, strengthen ownership, support earlier intervention and provide residents with clearer explanations about charges, payments and arrears.

7.13 The centralised service charge team established in 2024 has already improved consistency of approach. However, the findings show that complex cases still require clearer communication, specialist input and better coordination between teams. The further centralisation of income and service charge activity will support a more consistent resident experience and help ensure learning from complaints is translated into improved service design.

7.14 Block and estate management complaints accounted for approximately 9% of complaints. Residents most commonly raised issues about communal maintenance, cleaning standards, security and grounds maintenance. These complaints often relate to the day-to-day experience of living in a building or estate, so the learning is to strengthen local ownership, improve visibility of estate standards and communicate more clearly when remedial action is planned or completed.

7.15 Further analysis beyond the complaint categories shows the main reason residents gave for complaining was timeliness. This was cited in approximately 63% of complaints across the year and increased as the year progressed. Quality of work accounted for a further 22%, while communication failures made up around 8%.

7.16 This pattern has remained consistent throughout the year. It shows that dissatisfaction is driven not only by the existence of a service issue, but by the time taken to resolve it, whether it is resolved fully first time and how clearly residents are kept informed. Our complaint reduction work must therefore focus on faster resolution, improved quality of work, stronger contractor performance management and more reliable follow-through after complaint responses are issued.

7.17 A number of cross-cutting themes have been identified and the analysis shows that complaint themes rarely sit within a single category. A delayed repair can lead to missed updates, repeat contact and dissatisfaction with how the resident feels they have been treated. This interconnected pattern is now shaping our approach to improvement. We are using complaint insight to identify where the resident journey most often breaks down, where earlier intervention would make the biggest difference, and where operational teams need clearer ownership of end-to-end resolution.

7.18 NHG has also analysed why complaints escalate to Stage 2. Q2 analysis identified that 53% of Stage 2 escalations were linked to incomplete monitoring actions from Stage 1. This means that in many cases, the original complaint response had been issued but the actions needed to resolve the underlying issue had not been completed before the resident escalated. This was an important learning point and has led to system and procedural changes, including mandatory confirmation of monitoring action completion, directorate-level tracking and weekly review of outstanding actions.

7.19 The escalation rate from Stage 1 to Stage 2 shows that too many residents are not receiving the resolution they need at the first stage of the complaints process. Recovery actions are now in place, but sustained improvement will depend on embedding stronger monitoring, completing agreed actions on time and improving the quality of Stage 1 resolution. The ambition for 2026/27 is to reduce avoidable escalation and bring performance back below the G15 benchmark as these changes become established.

8. Housing Ombudsman Landlord Performance Publication

8.1 The Housing Ombudsman Service published its 2025/26 Landlord Performance Report for NHG during summer 2026. The report recorded 261 determinations resulting in 709 findings and provides an external assessment of themes, outcomes and performance across cases determined during the reporting period. While the report identifies areas where further improvement is required, it also provides evidence of progress in several aspects of complaint handling since the introduction of NHG's centralised complaints service.

8.2 The Ombudsman reported an overall maladministration rate of 55%, compared with 67% in 2024/25 and 62% in 2023/24. This remains higher than NHG would want and represents a significant number of residents whose experience fell below expectations. However, the reduction demonstrates progress and is consistent with the improving outcomes described elsewhere in this report. Many determinations issued during 2025/26 related to complaints raised before the introduction of the centralised complaints service and before a number of the service improvements now in place.

8.3 The Ombudsman's findings show that the areas generating the greatest number of determinations continue to align closely with NHG's own complaint data. Responsive repairs, resident-landlord relationships and financial matters accounted for the majority of findings. Condensation damp and mould, service charges and leaks were among the most common issues considered. This reinforces the themes identified through NHG's complaint analysis and provides additional assurance that the areas being prioritised for improvement are the issues having the greatest impact on residents.

8.4 The report also highlights the importance of effective complaint handling, remedies and follow-through. During the year the Ombudsman made 768 orders relating to NHG cases, including compensation awards, apologies, repairs and other service improvement actions. These outcomes have been incorporated into NHG's wider learning framework and have informed service reviews, case conferences and improvement activity across several operational areas. NHG complied with all Ombudsman orders issued during the reporting period and did not feature in any Complaint Handling Failure Order reports.

8.5 While the reduction in maladministration findings is encouraging, the report also demonstrates that complaint volumes and Ombudsman referrals remain high relative to

NHG's stock size. This reflects both the scale of NHG's operations and the continuing challenges experienced by residents, particularly in relation to repairs, communication and service follow-through. The findings reinforce the need for sustained focus on reducing avoidable complaints, improving first-time resolution and ensuring agreed actions are completed. NHG will continue to use Ombudsman determinations, thematic publications and landlord performance reports alongside complaint, audit and resident feedback data to inform service improvement and strengthen outcomes for residents.

9. Complaints service satisfaction

9.1 Resident insight and satisfaction feedback reinforces the complaint data. Residents are most dissatisfied when issues take too long to resolve, when they have to repeat information, or when it is unclear who is responsible for the next action. Feedback is more positive where colleagues maintain ownership, provide regular updates and confirm when agreed actions have been completed.

9.2 The main points from resident feedback are:

- Delays between the complaint response and the underlying issue being fully resolved.
- Frustration caused by repeat contact, avoidable chasing and having to re-explain the issue.
- Improved satisfaction where there is clear ownership, proactive communication and confirmation that actions have been completed.

9.3 The strongest theme is the gap between issuing a complaint response and completing the actions needed to resolve the underlying issue. Where follow-on works or third-party actions remain outstanding, residents understandably experience the matter as unresolved, even if the formal complaint has been closed. This was particularly visible during repairs contract mobilisation, where longer lead times and changing supply arrangements increased the need for clearer updates and stronger ownership.

9.4 Repeat contact was closely linked to this. When residents did not have a clear next date, named owner or explanation of what would happen next, they were more likely to chase for updates or repeat their concerns through different channels. This created avoidable demand and increased frustration, while also making it harder for colleagues to focus on resolving the underlying issue.

9.5 One of the key learning points is that resolution and communication must be managed together. Where ownership was maintained and residents were kept informed, satisfaction was better, even where the issue took longer to resolve. Proactive updates, clear timescales and confirmation of completion can materially improve the resident experience and reduce avoidable escalation.

9.6 For 2026/27, we will strengthen how outstanding actions are tracked after complaint responses are issued. Each action will need a named owner, agreed update intervals, a clear completion route and confirmation back to the resident. This will help reduce avoidable escalation, improve resident confidence and provide stronger evidence that learning from complaints is being translated into sustained service improvement.

9.7 In 2025/2026 residents interviewed as part of the Tenant Satisfaction Measures (TSM) perception survey reported satisfaction with complaints handling of 26.0% amongst low-cost renters (LCRA) and 11.7% amongst low-cost homeowners (LCHO). Across both LCRA

and LCHO satisfaction with complaints handling remains the lowest scoring measure which is true for most landlords and reflects the particularly challenging nature of trying to turn perception around after something has likely gone wrong. Complaints experience has a significant impact on overall satisfaction. LCRA customers who said they'd made a complaint in the last 12 months reported almost 20 percent lower overall satisfaction with NHG than the average (32.8% compared to 52.5%). However, the results show it is possible to have a positive complaints experience and for this to drive higher overall satisfaction- LCRA customers who reported being very or fairly satisfied with complaints handling reported overall satisfaction with NHG of 72.0% compared to the 52.5% average.

9.8 The number of stage one complaints per one thousand homes was 176 for LCRA and 138.8 for LCHO. The number of stage two complaints per one thousand homes was 55.9 for LCRA and 50.7 for LCHO. Both these figures represent a significant increase compared to 24/25 which underlines the effect of introducing an independent, centralised complaints service. 90.8% of low-stage one LCRA complaints were responded to within the Housing Ombudsman's complaint handling code timescales and the figure for LCHO was 91.6%. At stage two, the performance was 71.2% and 73.7% respectively.

9.9 Responding to the TSM survey in 25/26, 44.5% of LCRA and 47.0% of LCHO customers said they'd made a complaint to NHG in the last 12 months. Whilst the proportion of customers reporting that they'd made a complaint in the last year stayed roughly the same for LCHO, there was an increase amongst LCRA. Analysis of results shows that amongst LCRA customers, satisfaction with complaints handling is higher amongst residents in older age groups (66-75) and those in the East region. Amongst LCHO, whilst there were no notable differences in satisfaction levels by characteristics or demographics, feedback from this group reveals where customers most want to see improvement- they want to feel listened to, receive updates on how the complaint is progressing and to feel that the issue has been understood and resolved.

10. Enhancing the complaint handling process

10.1 Building on the foundations laid in 2024/25, this year has been about embedding the centralised model and ensuring that complaint insight reaches the directorates that deliver the underlying services. Directors are now accountable for resolution performance in their areas, with tighter monitoring of response activity and quality and an explicit expectation that they will intervene where the complaints service needs operational support. Power BI dashboards are available so that directors can see up-to-date complaints performance for their service and intervene early.

10.2 Residents have been involved in helping to shape improvements. A Resident Complaint Scrutiny Panel helped co-create a complaints satisfaction survey. Further plans with residents include reviews of anonymised complaints, complaint responses and service performance.

10.3 Residents are increasingly involved in root cause analysis and service redesign. This includes attending feedback sessions, taking part in user research interviews, and helping to

validate customer journeys against their lived experience as well as the evidence observed internally. This approach recognises that sustainable improvements must be grounded in how residents experience services, not only in internal process analysis.

10.4 This insight has directly informed stronger monitoring controls, clearer directorate accountability and a sharper focus on ensuring that agreed actions are completed and tested for impact.

11. Learning from Complaints

11.1 Complaints, Ombudsman determinations, resident feedback, internal audit and operational performance data have all pointed to the same core learning: residents are most dissatisfied when issues take too long to resolve, when they have to chase or repeat information, where ownership is unclear, or where the final outcome does not address the underlying issue. During 2025/26, NHG has used this evidence to strengthen both complaint handling and the wider services that give rise to complaints.

11.2 The improvements described below show how complaint learning is being translated into changes to systems, processes, governance, service design and culture. Some actions are already in place, while others will continue to be embedded during 2026/27. We recognise that progress has been made, but the full impact will only be demonstrated through sustained improvements in resident experience, fewer repeat complaints, reduced escalation, better resident satisfaction and stronger evidence that agreed actions have been completed.

11.3 Housing Ombudsman reports and determinations have been a significant source of learning during 2025/26. The Ombudsman's Spotlight report on damp and mould, It's not lifestyle, and its wider work on attitudes, respect and rights have reinforced the importance of listening to residents, recognising their lived experience and taking ownership of resolving issues rather than placing responsibility back on the resident.

This learning has influenced both case-specific action and wider service improvement. Where Ombudsman determinations have identified failures, NHG has used case conferences and senior management review to consider:

- what went wrong for the resident;
- whether the remedy provided was fair and proportionate;
- whether the same issue could affect other residents;
- what process, system or behavioural change is needed; and
- how completion of the agreed action will be evidenced.

This approach supports a stronger learning culture by ensuring Ombudsman outcomes are not treated as isolated case decisions, but as evidence to inform service redesign and operational accountability.

11.4 Property condition remained the largest complaint category in 2025/26, with damp, mould, leaks, repeat repairs and delays in completion featuring consistently. Complaints in this area have also been considered alongside the Ombudsman's damp and mould learning and the introduction of Awaab's Law.

The key learning is that residents need early investigation, clear accountability and confidence that the underlying cause of the problem is being addressed. In response, NHG has strengthened its approach by:

- developing defined damp and mould response processes with clearer timescales and accountability;
- removing language or process steps that imply residents are responsible for proving the cause of damp or mould before action is taken;
- increasing focus on root cause investigation rather than repeated reactive visits;
- improving pre- and post-inspection of damp and mould works to confirm quality and completion;
- strengthening links between damp and mould casework, complaints data and Awaab's Law reporting; and
- improving communication with residents where works require multiple appointments, specialist input or follow-on action.

The learning from complaints has also informed the mobilisation of new Tier 1 repairs contractors. The mobilisation has involved changes to people, processes, supply chains and performance management arrangements. While residents continued to experience delays and uncertainty during the mobilisation period, the new arrangements provide an opportunity to build stronger contractor accountability from the outset. Complaint learning is being used to shape how performance is monitored, including greater focus on first-time resolution, repeat repairs, resident communication, quality assurance and completion of follow-on actions.

In 2026/27, this will be supported by a strengthened commercial and contract management function within repairs. This will help ensure that contractor performance is assessed not only by volume and productivity, but also by quality of work, repeat attendance, resident satisfaction, complaints, disrepair risk and evidence that issues have been resolved fully.

Complaints and customer feedback have highlighted recurring repairs as a significant driver of dissatisfaction. Residents may receive visits or partial fixes, but the issue then returns or remains unresolved. This creates frustration, repeat contact and escalation.

As a direct response, the repairs service has increased its focus on identifying repeat and serial repairs. The Repairs Hub is developing clearer escalation pathways so that properties with repeated repairs are reviewed more holistically rather than being treated as separate, unrelated jobs. This includes:

- identifying properties with repeat repairs over a defined period;
- reviewing the full repair history rather than individual work orders in isolation;
- involving inspections and technical oversight earlier;
- developing property-level action plans where repeated issues are identified;
- improving regional ownership through the integrated regional repairs model; and
- ensuring residents are told who owns the next action and when they can expect an update.

This responds directly to complaint learning that residents experience the service as fragmented where individual tasks are completed but the overall issue remains unresolved.

Complaints relating to recurring boiler breakdowns showed that some residents were having to complain before escalation or replacement was considered. This highlighted weaknesses in operational escalation routes and approval processes.

In response, colleagues in the Heating and Hot Water team reviewed the boiler replacement process and introduced a new protocol from April 2026. The aim is to ensure that recurring failures are identified earlier, that replacement decisions are made through a clearer route, and that residents are not required to escalate through the complaints process in order to receive an appropriate resolution.

This is an example of complaint learning being used to change an operational process, reduce avoidable complaints and improve resolution timeframes for residents.

11.5 Complaint learning has also informed the way NHG supports residents who need to move temporarily because of emergency or prolonged works. The relocation policy, refreshed in 2024/25 and now embedded, provides a clearer framework for these cases. Case management protocols have improved consistency in communication with displaced residents and provide clearer guidance on rent arrangements, storage of personal possessions and practical support during temporary moves.

We recognise, however, that temporary relocation can be disruptive and emotionally difficult for residents, particularly where works are prolonged or where families are moved at short notice. Learning from complaints will continue to be used to strengthen early communication, clarify responsibilities between teams, and ensure residents understand what will happen before, during and after a temporary move

11.6 Communication-related complaints remained elevated during 2025/26. Residents raised concerns about unanswered emails, lack of proactive updates, inconsistent information from different colleagues, and the clarity or tone of written communication. The learning is that communication failures often sit alongside wider service failures. Where residents do not know who owns the issue, what will happen next or when they will receive an update, dissatisfaction increases even where work is progressing.

This insight has directly informed the Resident First Programme and the development of NHG's new Target Operating Model. The programme is designed to address the root causes of poor communication, repeat contact and unclear ownership by creating a more joined-up, resident-centred service model.

A central part of the new model will be a centralised contact centre service with clearer triage, stronger case ownership and improved first-point resolution. The aim is to reduce unnecessary handoffs, improve consistency across contact channels and make it easier for residents to receive timely, accurate updates without needing to chase. This will help ensure complaint insight is translated into practical service design and measurable improvement.

Complaint learning is also informing the standards expected of customer-facing teams, including:

- clearer ownership of open issues;
- better handover between teams;
- improved recording of follow-on actions;

- proactive updates where resolution is delayed;
- confirmation when actions have been completed; and
- stronger quality assurance of written communication.

11.7 Complaint handling has reinforced the importance of making residents' needs and preferences visible to colleagues at the point decisions are made. A complaint that escalated to Stage 2 highlighted that customer needs and service adjustment information was not always visible enough within the case management system.

As a result, changes have been made so that recorded customer needs and preferences are displayed more prominently when colleagues are working on a case or repair. This reduces the risk that important information is missed and supports more tailored, inclusive and responsive service. This learning is particularly important where residents have vulnerabilities, communication preferences or support needs. It also supports the Complaint Handling Code's emphasis on fairness, accessibility and ensuring residents are not disadvantaged by the way a service is designed or delivered.

11.8 Staff conduct complaints accounted for a significant proportion of complaints and were often linked to unresolved repairs, repeated chasing or poor communication. This does not reduce the importance of addressing conduct concerns directly, but it shows that behaviour, communication and service ownership are closely connected.

Learning is being reinforced through NHG's wider culture and people work. The introduction of the new NHG values, supported by the People function, is intended to set clearer expectations for how colleagues work with residents and each other. The values will be embedded through performance and development conversations, guidance on what good looks like at each level, and reward and recognition activity that celebrates colleagues who demonstrate the right behaviours.

This is particularly important in areas such as disrepair, complaint resolution and customer satisfaction, where resident trust depends on colleagues taking ownership, communicating clearly and following issues through to completion. The aim is to strengthen a culture where colleagues see complaints as an opportunity to learn and improve, rather than only as a measure of failure.

11.9 Service charge complaints highlighted concerns about the clarity of statements, explanation of charges and perceived value for money. Complaint insight has directly informed the move to more centralised income and service charge functions, including the establishment of a centralised service charge team and the development of a more centralised income collection model.

These changes are intended to improve consistency, strengthen ownership, support earlier intervention and provide residents with clearer explanations about charges, payments and arrears. The centralised service charge team established in 2024 has already improved consistency of approach, but complex cases still require clearer communication, specialist input and better coordination between teams.

Further centralisation of income and service charge activity will support a more consistent resident experience and help ensure learning from complaints is translated into improved service design.

11.10 Analysis of Stage 2 escalations identified that 53% were linked to incomplete monitoring actions from Stage 1. This means that, in many cases, NHG had issued a complaint response but the actions needed to resolve the underlying issue had not been completed before the resident escalated.

This was one of the most important learning points from the year. It shows that complaint handling quality depends not only on the written response, but on whether the promised resolution actions are completed and confirmed. In response, NHG has introduced stronger monitoring controls, including:

- mandatory confirmation that monitoring actions have been completed;
- directorate-level tracking of outstanding actions;
- weekly review of overdue actions;
- clearer accountability for the service area that owns the underlying issue; and
- improved focus on evidence that actions have been completed.

For 2026/27, the priority is to embed these controls so residents do not have to escalate because agreed actions remain outstanding. This is expected to reduce avoidable Stage 2 escalation, improve resident confidence and provide stronger evidence that learning is being followed through to completion.

11.11 Complaint learning has shown that the complaints service cannot resolve all issues in isolation. Many complaints depend on timely action from operational teams, contractors or specialist services. For that reason, directorate accountability has been strengthened.

Directors now have access to performance information, including dashboard reporting, to help identify complaint themes, monitor response quality, track outstanding actions and intervene where operational support is required. This reflects the principle that the directorate responsible for the underlying service must also be accountable for completing the resolution promised to the resident.

Complaint performance, Ombudsman determinations, internal audit recommendations and learning actions will be reviewed through a clearer governance route. This will include regular senior management review, directorate ownership of outstanding actions, Executive Team reporting and Board scrutiny through the Member Responsible for Complaints.

The focus of governance will increasingly move beyond volumes and timeliness alone. Reporting will also consider resident impact, repeat themes, overdue actions, quality of remedies and evidence that learning has been embedded.

11.12 During 2025/26, NHG completed a complaints topic modelling pilot, delivered in partnership between complaints colleagues and the NHG data team. The project analysed nearly 8,000 complaint response letters, alongside call transcripts from the Customer Contact Centre, to identify high- and low-level categories of service failure using a draft categorisation model. The outputs are now being visualised through a Power BI report and shared with complaints and service area colleagues to refine and embed the approach.

The pilot's most important finding was the interconnected nature of complaints. Repair delays can lead to communication breakdowns, which in turn can contribute to staff conduct complaints or escalation where residents feel they have had to chase repeatedly. This insight has shaped how the complaints service works with operational directorates, moving the focus from downstream symptoms to the upstream causes of dissatisfaction.

NHG is also testing a Jeopardy Report that uses upheld complaint letters and investigation responses to identify real-time root causes and highlight emerging systemic issues earlier. Roll-out across the business is targeted for Q3 2026/27. This will strengthen the organisation's ability to identify risk, intervene earlier and evidence how complaint learning is being used to improve services.

11.13 Residents are increasingly involved in root cause analysis and service redesign. This includes attending feedback sessions, taking part in user research interviews and helping to validate customer journeys against their lived experience as well as the evidence observed internally.

This approach recognises that sustainable improvement must be grounded in how residents experience services, not only in internal process analysis. It also supports the Resident First Programme by ensuring service design is tested against lived experience and not only against internal assumptions about how processes should work.

The Resident Complaint Scrutiny Panel is an important part of this approach. The Panel has helped shape the complaints satisfaction survey and will support further reviews of anonymised complaints, complaint responses and service performance. Their feedback will inform complaint quality assurance, the tone and clarity of written responses, and the wider improvement programme.

11.14 The 2026 internal audit provided an independent assessment of NHG's complaints operating model at a point when the centralised complaints service is becoming more embedded. The audit recognised that the design of the complaints framework has strengthened and provided moderate assurance over the control environment. It also identified that operational effectiveness remains inconsistent in some areas.

The key areas for improvement include:

- System automation;
- Ombudsman deadline management;
- Evidence that agreed actions have been completed;
- Tracking recommendations through to completion;
- Strengthening controls around monitoring actions; and
- Ensuring learning is tested for impact.

These findings reinforce the themes visible in complaint data: residents are still experiencing delays, repeat contact, inconsistent follow-through and variable communication, particularly where resolution depends on multiple service areas.

The audit recommendations are being brought into the Resident First Programme so that improvements to complaint handling are connected to the wider transformation of

customer experience, service recovery and operational accountability. This will help NHG move from responding to individual complaints towards using complaints, audit findings and resident feedback as a single evidence base for redesigning services and reducing avoidable dissatisfaction.

11.15 Remedies are an important part of putting things right, but complaint learning shows they need to be understood more broadly than financial compensation alone. Residents need a remedy that reflects the impact of the failure and addresses the underlying issue.

Our approach to remedies includes:

- clear apologies;
- completion of outstanding works;
- named ownership of follow-on actions;
- service adjustments where needed;
- financial compensation where appropriate;
- confirmation that agreed actions have been completed; and
- process changes where a complaint has identified a wider issue.

During 2026/27, we will strengthen quality assurance of remedies so that compensation and non-financial remedies are applied consistently, fairly and in line with the resident's circumstances. We will also improve reporting on whether remedies have been completed and whether they have reduced the risk of recurrence.

11.16 Complaint learning has reinforced the importance of keeping residents informed before dissatisfaction escalates. KORI, the Keep Our Residents Informed platform, is now embedded as a way for teams to send updates to groups of residents by SMS, email or letter, with communication recorded on the CRM customer profile.

During 2025/26, more than 850,000 messages were sent to residents about matters affecting their homes. This supports improved information management and continuity of service. However, the continuing level of communication-related complaints shows that platform use alone is not enough. The learning for 2026/27 is to ensure updates are timely, relevant, specific and linked to clear ownership of the underlying issue.

11.17 During 2026, NHG reviewed progress against its Regulatory Compliance Plan (RCP), including the complaints workstream. While the final milestone relating to independent review and implementation of improvement actions is on track for completion, the organisation recognised that additional time is required to evidence that improvements have been fully embedded and are delivering sustained outcomes for residents. As a result, a proposal was made to extend the timeframe for completion of the complaints workstream, alongside the wider RCP, to allow performance to be demonstrated over a sustained period and independently validated.

11.18 The decision reflects a deliberate focus on evidence of impact rather than completion of activity alone. It recognises that complaints performance has improved following the introduction of the new operating model, but that NHG must continue to demonstrate sustained performance in areas including complaint timeliness, escalation rates, backlog reduction, quality assurance, organisational learning and service improvement before the

workstream can be considered fully complete.

11.19 The extension also aligns with NHG's wider commitment to ensuring that lessons from complaints are embedded into service design and delivery, supported by independent assurance and ongoing resident scrutiny. This approach provides greater confidence that improvements are sustainable, resident-focused and capable of being evidenced over time.

12. Looking ahead: 2026/27 priorities

12.1 This report reflects an organisation that is improving how it listens to residents, learns from complaints and acts on those insights. The priority for 2026/27 is to show that this learning is leading to sustained improvements in resident experience, reduced avoidable escalation and clearer evidence that agreed actions are completed.

12.2 As the centralised complaints service moves into its third year, the priority is to build on progress while addressing the areas where residents are still experiencing delay, repeat contact and incomplete resolution. The focus for 2026/27 will be to strengthen capacity, improve consistency and ensure that complaint insight leads to measurable service improvement.

12.3 This report shows that NHG has made progress in strengthening complaint handling, particularly through the centralised complaints service, improved Stage 1 timeliness, better use of complaint insight and clearer directorate accountability. It also shows that there is more to do. Residents are still experiencing delays, repeat contact, inconsistent communication and incomplete follow-through. Our focus for 2026/27 is therefore to move beyond compliance alone: to reduce the need for complaints by improving first-time resolution, to put things right more consistently when things go wrong, and to use resident feedback, complaint data, Ombudsman findings and audit recommendations as a single evidence base for service improvement.

12.4 Our key priorities are to:

- **Restore full operational capacity**
Complete the current recruitment programme, stabilise the complaints service and ensure colleagues have the support, training and oversight needed to manage demand effectively.
- **Embed stronger root cause analysis**
Roll out the topic modelling and Jeopardy Report tools developed during 2025/26 with NHG Digital, so themes are identified earlier and learning is shared consistently across directorates.
- **Reduce complaints about timeliness**
Focus on the service areas and customer journeys where delays are most common, with the aim of reducing timeliness-related complaints to below 50% of complaint reasons.
- **Strengthen Stage 1 resolution and action tracking**
Ensure that actions promised in complaint responses have named owners, agreed update intervals, completion routes and confirmation back to residents.
- **Improve repairs performance and contractor accountability**
Use learning from property condition complaints to strengthen new Tier 1 contractor mobilisation, first-time resolution, repeat repairs management, resident communication and quality assurance.

- **Embed the Resident First Programme and new Target Operating Model**

Use complaint insight to support the move to a more joined-up, resident-centred model, including the centralised contact centre service, clearer triage and improved first-point resolution.

- **Strengthen directorate accountability**

Continue directorate-level intervention, with clearer ownership of complaint outcomes, resolution performance, recurring themes and overdue actions.

- **Increase resident involvement in learning and redesign**

Expand the role of the Resident Complaint Scrutiny Panel and introduce quarterly resident-inclusive review sessions so improvement activity is shaped by lived experience as well as internal data.

- **Improve remedies and follow-through**

Strengthen quality assurance of compensation and non-financial remedies, and improve evidence that agreed actions have been completed and tested for impact.

12.5 These priorities sit alongside the genuine challenges faced during 2025/26, including record monthly complaint volumes, capacity constraints in the complaints service, the Ombudsman's clearance of older cases, and increasing complexity in property maintenance as homes age and regulatory standards evolve. The improvement plan for 2026/27 is designed to address those challenges through stronger capacity, clearer accountability, better root cause analysis and more consistent follow-through for residents.