

April 2026

Complaints and Anti-Social Behaviour service delivery and accreditation review

Bury Council Housing Services

1. Introduction

This report sets out the findings of a review of Bury Council Housing Services' (BCHS) approach to complaints handling and anti-social behaviour (ASB), undertaken by Housemark.

The review provides an independent, evidence-based assessment of how these services are delivered in practice. It draws on BCHS's self-assessment alongside validation activity, including case file reviews, staff interviews and engagement with residents, to understand both the intended design of the service and the reality of customer experience.

From the outset, BCHS was clear that this work should be as much a service review as an assessment against Housemark's accreditation standards. Drawing on previous experience, there was recognition that accreditation would be a longer-term objective, with the immediate priority being to take an honest view of current practice and identify what needs to improve.

The findings reflect that position. They demonstrate a service with a clear direction of travel, supported by strong leadership intent, improving governance and a genuine commitment to strengthening customer experience. At the same time, they highlight a consistent gap between this intent and day-to-day delivery, particularly in the application of core practices, the consistency of case management, and the experience of residents.

This report should therefore be read as part of BCHS's ongoing improvement journey. It sets out where the service is now, where progress has been made, and where further work is required to embed consistent, reliable practice.

Alongside this report, BCHS has developed improvement plans for both complaints and ASB. These plans reflect the findings of the review and set out the actions required to strengthen operational delivery, improve assurance and build confidence in the service over time.

1.1 About Housemark

Housemark is the leading data and insight company for the UK housing sector. As a catalyst and change partner, it supports housing providers to make informed, evidence-based decisions that improve services and outcomes for residents. Housemark combines sector-wide data, benchmarking and practical expertise to help organisations understand their current performance, identify what is possible, and translate insight into action.

Housemark works with housing providers across the UK to support service improvement, performance management and assurance. This includes supporting organisations to assess and strengthen key service areas such as complaints handling and anti-social

behaviour, recognising the critical role these services play in shaping resident experience and trust.

Assessments are carried out by experienced consultants with expertise in housing management, service improvement, policy and practice, and performance. The focus is not only on alignment with sector expectations and good practice, but on how effectively services are delivered in practice and how organisations can drive meaningful and sustainable improvement.

2. Background

Bury Council Housing Services (BCHS) commissioned Housemark to undertake a review of its complaints handling and anti-social behaviour (ASB) services, with a view to progressing towards accreditation in both areas over time.

This review takes place within the context of wider organisational change. Bury Council brought its housing management services back in-house, following the decision to transfer services from its Arms Length Management Organisation (ALMO), Six Town Housing. This reflected a desire to strengthen accountability, improve service delivery, and create a more consistent and customer-focused housing service.

As a result, BCHS is in a period of transition. This includes changes in leadership, a renewed focus on culture and expectations, and a clear emphasis on improving the quality and consistency of front-line services. The direction of travel is positive, with senior leadership driving a reset of standards and a stronger focus on core service delivery.

From the outset, BCHS was clear that this review should be as much a service review as an accreditation exercise. Drawing on previous experience of accreditation, there was recognition that the service was not yet at the stage where accreditation would be appropriate. Instead, the review was intentionally positioned to provide an honest assessment of current practice and identify what needs to improve before accreditation can be achieved.

The purpose of the review was therefore twofold. Firstly, to assess BCHS's position against the relevant accreditation frameworks for complaints and ASB. Secondly, and more importantly, to understand how services are being delivered in practice, identifying strengths, gaps and opportunities to strengthen operational consistency, improve customer experience, and embed learning across the service.

This approach aligns with wider sector expectations, including those of the Regulator of Social Housing and the Housing Ombudsman, which emphasise transparency, learning and continuous improvement.

Following the validation stage of the review, BCHS developed improvement plans for both complaints and ASB. These plans reflect the findings of the review and set out the actions

required to strengthen operational practice, improve assurance, and move the service towards accreditation readiness over time.

This report therefore captures BCHS's position at a point of transition, recognising both the progress made and the work still required to embed consistent, high-quality service delivery.

3. Methodology

The review was carried out using a structured approach designed to provide a balanced and evidence-based assessment of BCHS's complaints and ASB services.

The methodology combined a number of different sources of information to ensure that findings reflect both the design of the service and how it is experienced in practice. This included BCHS's self-assessment, detailed case file reviews, interviews with staff across the service, and engagement with residents.

This approach allowed for triangulation of evidence, ensuring that findings are not based on a single source, but on a consistent picture emerging across documentation, operational practice and customer experience.

Where appropriate, findings reflect common themes across both complaints and ASB. In other areas, they are considered separately to reflect the distinct nature of each service.

3.1 Self-assessment

In December 2025 and January 2026 BCHS completed detailed self-assessments for both complaints and ASB against the relevant accreditation frameworks.

These provided an initial view of how BCHS considers its services to be performing, including areas of strength and areas identified for improvement. The self-assessments also set out the policies, procedures and frameworks in place to support service delivery.

The self-assessment formed the starting point for the review and was tested through the subsequent validation work, including case file reviews, staff interviews and resident engagement.

3.2 Case file reviews

A sample of complaints and ASB case files were reviewed in February to assess how services are delivered in practice.

The case reviews focused on key aspects of service delivery, including timeliness, quality of communication, record keeping, evidence of investigation, decision-making, and how cases were brought to a close. Particular attention was given to whether processes

described in policy were consistently applied and whether the resident experience reflected the organisation's intended approach.

The case file review provided a critical insight into operational practice and was a key source of evidence in forming the overall findings.

3.3 Staff interviews

Interviews were carried out with a range of staff across BCHS, reflecting different roles and perspectives within the service. This included Neighbourhood Managers, Housing Officers, specialist roles and colleagues from related service areas.

Those interviewed included:

- Carran O'Grady, Complaints Manager
- Alison Wharton, Independent Living Manager
- Michael Conroy, Enforcement Manager
- Kim Ryan-Dooner, Tenant Engagement Manager
- Andy Weekes, Repairs Manager
- Joanne Payne, Housing Officer
- Bev Hopkinson, Scheme Manager
- Yasmin Poxton, Housing Manager
- Christine Seymour, Contact Centre Manager
- Mubarak Khanporia, Disrepair Manager
- Kim Partridge, Head of Communities and Neighbourhoods
- Claire Rogan, Head of Performance Improvement and Assurance

These discussions provided valuable insight into how services operate day to day, including staff understanding of policies and procedures, confidence in applying them, and the challenges experienced in delivering the service. They also helped to identify areas where practice is working well, as well as where there are inconsistencies or barriers to effective delivery.

We would like to thank all staff involved for their time and openness during the review. In particular, thanks are extended to Kelly Dickinson, Kim Partridge and Claire Rogan for their support in coordinating interviews and facilitating the assessment.

3.4 Customer interviews

In February and March, engagement took place with involved and non-involved residents to understand their experience of BCHS services, including both complaints handling and ASB.

These discussions provided valuable insight into how services are experienced from a resident perspective, including communication, responsiveness, and confidence in

outcomes. They also highlighted the extent to which residents feel able to influence services and whether they see evidence of learning and improvement.

Resident feedback was an important part of the overall evidence base and helped to ensure that the findings reflect not only internal perspectives, but also the lived experience of customers.

4. Summary of findings

The review of BCHS's complaints handling and anti-social behaviour (ASB) services highlights a service that is clearly moving in the right direction, but where improvements are not yet consistently embedded in day-to-day practice.

Across both service areas, there is a consistent picture. BCHS has established the core building blocks of effective service delivery, supported by strong leadership intent, updated policies and a clear focus on improving customer experience. This position is consistent across all sources of evidence.

However, this intent is not yet consistently reflected in operational practice. The gap between how the service is designed to operate and how it is experienced by residents remains the key issue.

4.1 Common themes across complaints and ASB

The review identified a number of clear strengths, including strong leadership intent, established frameworks, and a workforce that is engaged and committed to improving services.

A number of consistent themes emerged across both complaints and ASB. At the heart of these is the need to move from policy and intent to consistent, embedded practice.

Key themes include:

- **Inconsistent application of policies and procedures** – Staff generally understand expectations, but this is not always reflected in consistent action, leading to variation in service delivery.
- **Gaps in core case management disciplines** – Case files do not consistently demonstrate structured investigation, clear action planning, regular review or well-evidenced closure. This limits assurance that cases are being managed effectively.
- **Variable quality of communication** – While there are examples of strong engagement, this is not yet consistent. Residents do not always receive clear, timely or proactive updates, which impacts confidence in the service.

- **Developing, but not yet mature, performance and assurance frameworks** – Governance arrangements are in place and improving, but do not yet provide consistent oversight of case quality, outcomes or repeat issues.
- **A resident experience that lags behind organisational ambition** – Residents want to feel heard, informed and confident that action is being taken. This is not yet consistently the case.

These themes were evident across all sources of evidence and form the basis of the improvement required.

4.2 Complaints handling

In complaints handling, BCHS has a framework that is broadly aligned with expected standards. There is a clear structure in place, supported by defined processes and an understanding of the importance of timely response and customer satisfaction.

However, the review found that this framework is not yet consistently delivered in practice. Case file reviews and staff interviews highlight variability in the quality of investigation, response and learning.

In particular:

- Complaint investigations are not always sufficiently thorough or clearly evidenced.
- Responses can lack clarity, particularly in setting out findings, decisions and next steps.
- There is limited evidence that learning from complaints is consistently captured, tracked and used to drive service improvement.
- Record keeping is not always robust enough to demonstrate how conclusions have been reached.

While there are examples of good practice, these are not yet consistent across the service. As a result, the complaints process does not always provide the level of assurance or customer confidence that would be expected. This creates inconsistency in the experience of customers, rather than indicating a consistently weak service.

4.3 Anti-social behaviour (ASB)

The findings in relation to ASB are more pronounced. While policies and procedures are in place, there is a more significant gap between expected practice and operational delivery.

Case reviews and staff interviews demonstrate that the service is often reactive, with limited evidence of structured case management or early intervention. This has a direct impact on outcomes and on the experience of residents.

Key issues identified include:

- Inconsistent use of risk assessments and limited evidence of risk-based decision making.
- A lack of clear and structured action planning within cases.
- Limited evidence of early intervention or use of preventative tools.
- Cases progressing without clear direction, review or escalation where required.
- Closure of cases without sufficient evidence that issues have been fully resolved or that residents are satisfied with the outcome.

These issues mean that, in practice, the service does not yet consistently demonstrate a proactive, victim-focused approach to ASB management.

4.4 Context and direction of travel

It is important to view these findings within the context of a service that is undergoing change. BCHS has taken clear and positive steps to strengthen leadership, reset expectations and invest in improving services.

There is a strong sense from staff and leadership that the organisation is moving in the right direction. The challenge now is to translate this intent into consistent, day-to-day delivery.

This next phase will require a focus on:

- embedding core service standards
- strengthening operational oversight and accountability
- improving consistency of practice across teams
- ensuring that resident experience is at the centre of service delivery

5. Overall assessment

Taking all evidence into account, BCHS is not currently in a position to meet the requirements for accreditation in either complaints handling or ASB.

In line with the Housemark accreditation framework, accreditation requires organisations to achieve a pass across each commitment area. To achieve a pass, there must be a minimum level of compliance across the relevant building blocks within that area. As part

of this review, each building block within both the complaints and ASB frameworks was assessed based on the self-assessment, validation interviews, case file reviews and resident engagement.

This assessment demonstrates that, while BCHS has a number of building blocks in place, there is not yet sufficient consistency or depth of compliance across the commitment areas to meet the required threshold for accreditation. In particular, areas assessed as “in place, but needs improvement” reflect gaps in operational delivery rather than gaps in policy or intent.

The overall position can be summarised as follows:

- the framework exists
- leadership intent is strong
- policies and training are in place
- operational application is inconsistent
- core case management disciplines are not yet embedded
- resident experience lags behind organisational intent
- governance visibility exists but assurance is still maturing

Taken together, this reflects a service where the core components are in place, but where consistent delivery is not yet established across the organisation.

This is therefore not a position of failure, but one of transition. BCHS has established the foundations required for accreditation, but these are not yet sufficiently embedded or evidenced in practice to demonstrate consistent, high-quality service delivery.

5.1 Service improvement plans

Following the validation stage, improvement plans have been developed for both complaints and ASB. These plans are owned by BCHS, with leadership from Claire Rogan and Kimberley Partridge.

My role has been to support and challenge the development of these plans, ensuring they are both comprehensive and grounded in operational reality.

It is important to emphasise that these are not externally imposed plans, but plans that reflect BCHS’s own understanding of its services, informed by the findings of this review. This provides a strong foundation for improvement, as ownership sits clearly within the organisation.

A key consideration moving forward is pace. There is a clear appetite within BCHS to

move quickly and demonstrate progress. While this is positive, there is a risk that attempting to deliver too much, too quickly could undermine the longer-term objective of embedding sustainable change.

The issues identified through this review are not solely procedural. They relate to consistency, confidence, and culture. Addressing these requires time to implement changes, test them in practice, respond to challenges, and ensure they become part of day-to-day working rather than short-term initiatives.

Improvement should therefore be viewed through a medium-term lens. As a minimum, the implementation and embedding of the improvement plans should be considered over a 12-month period. This allows sufficient time for:

- new approaches to be introduced and understood by staff
- changes to be tested in live operational environments
- inevitable pressures and “shocks” within the service to be managed
- practice to stabilise and become consistent
- evidence to build that improvements are sustained over time

Short-term improvement in performance metrics alone will not be sufficient to demonstrate readiness for accreditation. What will be required is clear, consistent evidence that changes are embedded, that practice is reliable across teams, and that resident experience has improved as a result.

With this approach, BCHS is well placed to make meaningful and sustainable progress. Accreditation should therefore be viewed as a realistic future objective, once improvements have been implemented, embedded and evidenced consistently in practice over time.

6. Appendices

The following documents are appended to support the findings and conclusions set out in this report:

- Appendix 1: Complaints self-assessment findings and recommendations
- Appendix 2: ASB self-assessment findings and recommendations
- Appendix 3: Complaints improvement plan
- Appendix 4: ASB improvement plan

These appendices provide the detailed evidence base underpinning the review, including the assessment against accreditation criteria, the outcomes of validation activity, and the improvement actions developed by BCHS. They should be read alongside this report where further detail is required.

7. Consultant profile: Stephen Walker

Stephen Walker is an Associate with Housemark and a freelance housing consultant. He works with housing associations and local authorities to review and improve frontline services, strengthen customer experience, and provide independent assurance to Boards and executive teams.

He has over 26 years' experience in the social housing sector, including more than a decade at Director level. His experience spans neighbourhood management, contact centres, complaints, and community services, and includes working closely with Boards and senior leaders on performance, governance and service improvement.

Stephen specialises in service reviews, complaints handling and anti-social behaviour. His work focuses on ensuring that policies and frameworks are translated into consistent, effective practice. He is known for a pragmatic, evidence-based approach, working collaboratively with teams while maintaining a clear focus on outcomes for residents.

housemark.co.uk

info@housemark.co.uk

[@housemarkltd](https://twitter.com/housemarkltd)

