

## YMCA Derbyshire Annual Complaints Report 2024-2025

At YMCA Derbyshire, we strive to be as open and transparent as possible about the complaints we receive about our services. We also aspire to be a learning organisation and take every complaint as an opportunity to grow and evolve our business to meet the needs of our clients, community members and partner agencies.

In this report, we will explore the volume of complaints received, any trends that occurred, how we learnt from these and how we rectified any mistakes identified.

### **Our Complaints Breakdown**

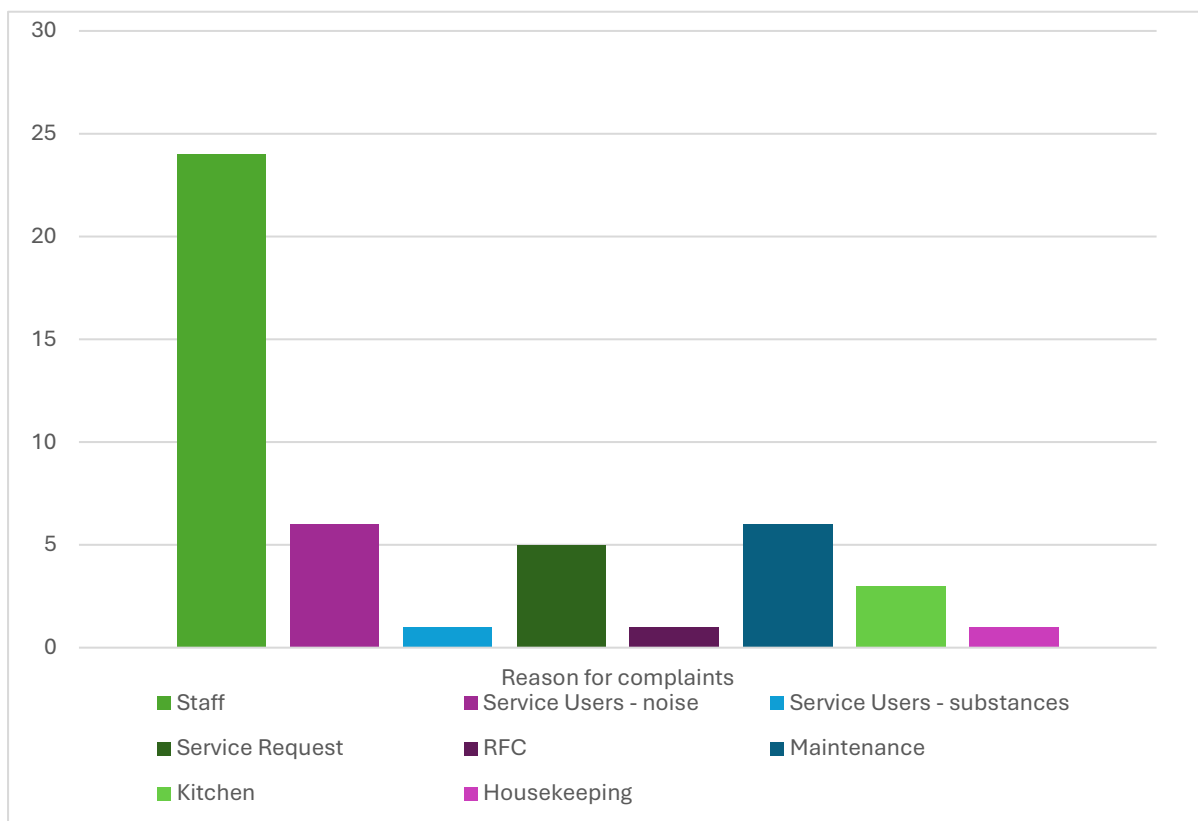
By way of explanation for the extended reporting period, we recognise that complaints reporting periods typically align with an organisation's accounting cycles. For YMCA Derbyshire, our financial year end was amended last year from July 2024 – July 2025 to July 2024 – December 2025.

This change was made to move to a more conventional year-end position, aligning our reporting period from July to December going forward. As a result, the complaints report originally due in July 2025 no longer aligned with the revised financial year end and was therefore extended to ensure consistency with wider organisational reporting structures.

This approach supports stronger governance arrangements, and the extended complaints report reflects the longer reporting period (12–17 months), hence a potentially greater number of complaints submitted in the report.

The table below represents the number of complaints or service requests for different areas of our organisation.

DEPARTMENT	
HOUSING	LIFE LONG LEARNING
47	2



The above figures relate directly to Housing only. We can see from the above figures that the number of complaints has doubled from last year. This is a positive thing for our organisation as it means we have made it easier for people to get in touch and express their concerns to us and have made the information accessible to more of our complainants. It also means it gives us more of an insight into particular areas that are repeatedly complained about where we can focus on improving our service.

The highest number of complaints received is with regards to staff members. Each complaint is considered on a case-by-case basis and investigated by the relevant service manager. When a pattern has emerged with regards to behavioural complaints, these have been escalated to ensure our values are being represented across our organisation. With the clients we work with, we understand that working closely with staff can cause frustration, however, the majority of complaints against staff were not upheld and where they were upheld, appropriate training and learning (including reflective sessions) were put in place to ensure that behaviours improve and that staff are better equipped to handle difficult scenarios.

### **Service Requests**

We received 5 service requests during this period – further detailed below:

1. *Request to stay in onsite accommodation rather than moving to a designated dispersed accommodation* – this request was declined after safeguarding measures had been put into place relating to the individual making the request.
2. *Request to move to another property in dispersed accommodation* – this request was unable to be fulfilled due to the person departing from our service

3. *Request to have support delivered differently to what had previously been provided – this request was retracted by the individual after meeting with staff to agree a new support plan*
4. *Request to keep room available despite not living in the accommodation for a period of 2 months – this request was declined due to the individual not needing the accommodation.*
5. *To have all communications going forward in written format only including support sessions, no face to face interactions permitted – this request was considered and parts of the request were accepted, allowing exceptions for support sessions as this was deemed as detrimental to the wellbeing of the individual. Additional adjustments were made to allow written communication for appointments, updates on service, maintenance workers and low level communications that were not deemed to be an emergency.*

### **Analysis of data**

*2.12% of complaints were escalated to Stage 2 of our complaints handling procedure.*

- Complaint was upheld as there had been a communication failure between YMCA Derbyshire and the night time concierge staff who had not been passed information relating to a maintenance issue.

*2.12% of complaints were refused for consideration. The reasons was:*

- Complainant was a resident and put in a complaint about not liking another resident, it did not involve YMCA Derbyshire. They were instead offered to do a mediation to discuss their issues together.

*53.19% of complaints were not upheld. The reasons were varied and include:*

- No evidence of ASB was found after monitoring
- Witness statements do not align with complaint about staff
- Complainant withdrew complaint after thinking further on a situation
- No evidence of staff wrongdoing, processes correctly followed
- No further information provided on missing items, despite multiple phone calls and emails sent to complainant, welcomed to reopen another complaint if they come back to us with the requested information.
- Complainant admitted that staff had not done anything wrong and had just been anxious they may receive a warning so pre-emptively submitted a complaint.
- CCTV footage does not align with complainant statement

*100% of complaints were in line with the Housing Ombudsman code.*

*78.72% of complainants had known vulnerabilities including ‘experience of homelessness’ and ‘living with disability’. None required adjustments under the Equality Act 2010.*

### **Housing Ombudsman Complaints**

There were no complaints escalated to the Housing Ombudsman this year.

### **Learning and Improvements to our services**

- Having a familiar presence such as the housing navigator when having conversations on confusing areas such as rent may be beneficial as it can ease the resident and make them feel less overwhelmed.
- We should not isolate one resident within a group when asking for noise to be kept to a minimum during the night.
- Being cautious of the language we use is important when our residents may be struggling with their mental health.
- More careful consideration towards who we are placing in offsite properties and a more robust allocations assessment to be undertaken.
- For maintenance requests to be escalated to senior management if not resolved within specified time frames.
- Review the use of guest bans and upon the last week, assess as to whether this needs to be renewed.
- Staff are to take into consideration how conditions such as Tourette's may impact how a resident behaves in public areas. Further training to be built and delivered to the wider team on this condition and how we can best support our residents with it.
- Staff to be mindful of where they are conducting bag searches and only do so in private areas away from other residents.
- Building works being undertaken to improve pest control on our Campus.
- Other breakfast items to be provided at weekends so should staff be off sick, food is still be provided.
- Additional CCTV cameras placed around our Campus to prevent ASB from our residents to the local community and more frequent patrols of 'hot spots' of ASB activity.
- Further training provided to staff on medical interventions to ensure residents feel supported
- Communications are to be improved with the night concierge service by way of handovers and emails to both the staff and their managers.

### **Our Governing Body's Response To Report**

As housing is the core of our service it can be expected that this is where we will receive the majority of complaints.

Although the number of complaints have increased from last year it demonstrates that we have an accessible system and residents are comfortable to raise a complaint. Our procedure is demonstrated to be robust as the investigations undertaken determined the majority of complaints were not upheld. Any that were progressed were resolved at Stage 1 and one was escalated to Stage 2, no complaints were escalated to the Ombudsmen. This is positive and shows we are working effectively with our handling of complaints but still taking into consideration the issues raised and identifying alternative ways to help resolve them.

We have still identified areas of improvement and these will be implemented to ensure we continue to have a system that provides confidence in a fair system for our colleagues, residents and clients.