

This Key Line of Enquiry (KLOE) on access and customer care is part of a set of KLOEs produced by the Housing Inspectorate. To find out more about how KLOEs are used please read the KLOE guidance notes available from the Housing Inspectorate.

KLOEs represent sets of questions and statements around either service or judgement specific issues which provide consistent criteria for assessing and measuring the effectiveness and efficiency of housing services. These KLOEs are designed to provide inspectors, inspected bodies and others with a framework through which to view and assess services. In inspections, service specific KLOEs are used as a basis for assessing Judgement One on 'How good is the service?'

There is a separate KLOE for Judgement Two of inspections on 'What are the prospects for improvement?' This KLOE covers the assessments made on visions and ambitions, track record, ability to learn, quality and effectiveness of plans, prioritisation, capacity to deliver improvements and performance management.

As well as those service-specific KLOES, we have written three cross-cutting KLOEs which give more detail on our expectations of organisations in terms of value for money, diversity and, in this case, access and customer care.

The Access and Customer Care KLOE is intended to cover the following areas;

- ◆ Corporate Culture and Governance
- ◆ Access to the service
- ◆ Information
- ◆ Complaints
- ◆ Consultation and feedback mechanisms

KEY LINE OF ENQUIRY (KLOE)	AN ORGANISATION DELIVERING AN EXCELLENT SERVICE	AN ORGANISATION DELIVERING A FAIR SERVICE
<p>30.1 Corporate Culture and Governance</p> <ul style="list-style-type: none"> • Is there clear and consistent leadership ensuring that the whole organisation has a clear customer focus? • Have service users and relevant stakeholders been involved in evaluating the service and determining standards and priorities for improvement? How have these priorities been disseminated? • Are external requirements – legislative or good practice being addressed? • Do the governance structures receive the reports necessary to judge whether the organisation is delivering on customer focus? • How does the organisation respond to service users? 	<ul style="list-style-type: none"> • Has an impressive and appropriate corporate approach to customer care that is very well understood throughout the organisation. There is a regular, consistent message and ethos that focuses on the customer. Has staff that all demonstrate user focus in their work, and who treat people with respect at all times. • Sets clear standards in consultation with customers for all aspects of customer service. Customer services and standards are regularly tested and monitored including by customers themselves in all sections of the organisation. • Regularly updates and reviews the approach in light of external and internal requirements. Training programmes on customer care are regularly updated and delivered to relevant staff. Experience and good practice is shared in an effective and structured way. • Knows what its strengths and weaknesses are in delivering a customer focussed service. It is taking appropriate actions to improve the areas where customer service standards are not high. Customers' views are taken into account when prioritising actions for improvement. • Has comprehensive reports supplying information and statistics on the quality of customer care in all parts of the organisation. Measures have targets or benchmarks. • Tells service users what will happen as a result of their enquiry/request at the first point of contact, including outside normal office hours. Arranges the 	<ul style="list-style-type: none"> • Has staff who generally have a reasonable approach to customer care, but examples of some staff providing an inconsistent approach to customer care. Individuals may have high standards, but it is not strongly enough part of the organisation's culture and customer care is therefore sometimes inconsistent. • Has some customer standards, some of these and some customer services are tested or monitored, but significant aspects of the service lack standards and monitoring. • Does not regularly update its approach and there is a lack of knowledge on external and internal requirements. While there is some good practice in the organisation this is not shared adequately. • Has only a partial knowledge of its strengths and weaknesses and few actions are taken in response to weaknesses. Customers' views do not have significant input into prioritising actions for improvement • Has few measures in reports. In some relevant areas, there are no targets or benchmarks. Explanations for different measures and outcomes are not always adequate. Many senior officers and board members or councillors are not aware of the relevant key issues. • Does not systematically tell service users how and when their enquiry/request will be dealt with, at the first point of contact. There may be an appointment system, but it is not service user-focussed.

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	<p>appropriate response, at a time to suit the service user, mainly by appointment.</p>	<ul style="list-style-type: none"> Does advise some service users whether they are responsible for paying the cost of a service at the first point of contact, but not systematically.
<p>30.2 Access to the service</p> <ul style="list-style-type: none"> Are customers easily able to contact the organisation by telephone, in person or via the internet? Have appropriate decisions been made on where to locate offices, at what times services are available and how to structure the service. Are customers aware of the services available and how and when to access them? Are services standards comprehensive and are customers aware of them? Can the organisation identify customers who are not accessing the service and is appropriate action being taken to remove barriers to access? 	<ul style="list-style-type: none"> Has services that are easily accessed through conveniently located offices, by telephone and internet and by visits to residents where appropriate. Makes it easy for residents to access the service by telephone, in person or electronically, including outside normal office hours – all of which are dealt with efficiently and effectively Has carried out a full analysis of the costs and benefits of the different means of accessing services and residents have been consulted. Has signs leading to offices and receptions that are clear and effective. Successfully publicises all methods of access along with opening times and arrangements for out-of-hours contact which are clear, and have been agreed following consultation with users. Has service standards that are realistic and challenging. Customers are aware of the standards, understand them and are informed on how well the organisation is meeting those standards. Can provide significant evidence that customer service is delivered to a high standard including a high level of customer satisfaction. Has staff and contractors that deal with customers who are professional, informative and polite. They are well 	<ul style="list-style-type: none"> Offers a reasonable range of ways for service users to contact the service, but some are not as efficient and effective as others, therefore providing inconsistent service provision. Has many customers who do not find getting to the office convenient. The website is of limited use to access services and service users cannot easily contact staff by e-mail or telephone. May have carried out some cost benefit analysis and consultation on the means of accessing services, but has not used that information effectively. Has some offices that are not easy to locate. Has opening times and arrangements for out-of-hours contact that are either not clear and well publicised or have not been agreed following consultation with users. Has many customers who are not aware of the standards. Information on whether standards are being met is limited if it exists at all. Carries out little testing of customer services or the evidence that exists suggests that the service is below average quality. Has a small but significant proportion of staff or contractors who are not professional, informative and polite. Training while delivered is either very brief or inconsistent. Staff are not well supported by

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	<p>trained and well supported by information technology to deliver an effective service. They are able to tell customers about relevant services in other organisations.</p> <ul style="list-style-type: none"> • Offers a range of services and information via the internet and forms can either be downloaded or submitted on-line • Has information from surveys and databases that inform it of groups of customers who are not accessing the service as frequently as others. Action is taken to remove any barriers to accessing the service. 	<p>information technology.</p> <ul style="list-style-type: none"> • Has very little information available on customers who are not accessing the service and very little action is being taken to remove barriers to accessing the service
<p>30.3 Information</p> <ul style="list-style-type: none"> • Is the information provided to customers easy to read? Was it developed in consultation with customers and does it meet their needs and expectations. 	<ul style="list-style-type: none"> • Has front-line staff that demonstrate a wide range of knowledge about the full range of enquiries they receive or know who or how to access the necessary information to help service users. • Provides a variety of leaflets, posters, handbooks and other relevant information covering, all that customers reasonably need to know including for example, customer services, complaints, contact information, opening hours, approach to rent arrears and dealing with anti-social behaviour. • Provides all information in plain English and other formats required by customers (see diversity KLOE). These are easily available on paper and electronically on the website. • Produces regular newsletters about policies, procedures and performance that are interesting and informative and residents are involved in production and decisions on content 	<ul style="list-style-type: none"> • Has front-line staff who demonstrate reasonable knowledge about many services, but have some gaps in the range of knowledge about the enquiries they are likely to receive and are unclear where or who to access the information from, to be able to help service users. • Provides a variety of information to customers but it is not comprehensive and is not consistently written in plain English. • Does not supply information in alternative formats to suit the needs of groups with special needs. • Provides newsletters that are not regular, not interesting or not informative. • Has limited resident involvement in the production of leaflets, handbooks, newsletters etc. • Has below average resident satisfaction with the quality and range of information they receive.

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	<ul style="list-style-type: none"> Routinely consults residents about the nature and content of leaflets and handbooks. Residents are satisfied with the quality and timing of information. 	
<p>30.4 Complaints</p> <ul style="list-style-type: none"> Is the complaints service well publicised and easy to access? Are standards for complaint handling high? Are results from the complaints process publicised to customers and do they result in improvements to the service? Are customers reasonably satisfied with the responses to their complaints? Has the organisation implemented determinations by the Housing Ombudsman? 	<ul style="list-style-type: none"> Has customers that know about the complaints system and find it easy to use. The complaints process runs as it says it will run. Deals with complaints in a professional manner. Has clear standards for handling complaints and performance is reported to customers. Staff and customers are clear about procedures and standards Analyses complaints and learns from them, using them to to drive improvements to services. Involves customers in monitoring performance on complaints and identifying service improvements Monitors customer satisfaction with complaints and has customers who are satisfied with the way complaints are handled. Implements promptly, and in full, determinations made by the Housing Ombudsman. Has guidelines on compensation made in response to complaints and service failure that ensures that compensation is fair and relatively consistent. Has which guidelines meet statutory requirements, for example, LAs on the Right To Repair in Sections 121 and 122 of the Leasehold, Housing and Urban Development Act 1993 and regulatory requirements for HAs in HC circular 33/94 	<ul style="list-style-type: none"> Is not open to complaints and is reactive in its approach. Has a complaints procedure but it is not readily accessible or well publicised and complaints must always be made in writing. Has standards for complaints but performance against these is not routinely measured and monitored. Does not publicise complaints information and performance on complaints well. Makes some use of information from complaints to drive improvements in services, but it is not systematic. Does not manage complaints well and many customers are unhappy with the responses to complaints. Does not implement promptly, determinations made by the Housing Ombudsman. Has minimal guidance on compensation in response to complaints, there is a significant lack of consistency in compensation given out. Has guidelines which do not take account of statutory and regulatory requirements on compensation for repairs.

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<p>30.5 Consultation and feedback mechanisms</p> <ul style="list-style-type: none"> • Are there a variety of methods of consulting and obtaining feedback from customers and are they effective? • Does the approach take account of local context and ensure that a wide range of user views are obtained? • Is good use made of this information? • Are customers informed about what happens as a result of providing their views? 	<ul style="list-style-type: none"> • Actively canvasses the views of service users and uses them to review or improve services. Service users are consulted and involved in major decisions that affect the service. • Provides customers with a range of opportunities to put forward their views. The approach was developed in consultation with users. • Seeks views from a broad cross section of users using methods that encourage good response rates. • Use HC recommended (if HAS) survey methodology on satisfaction and uses comparison with other similar organisations in order to set targets for improvement. • Uses consultation and feedback from users to drive changes and improvements to the way services are delivered. • Has high levels of satisfaction with opportunities to inform management and affect decision making and service delivery • Has customers who understand the purpose and value of participating and replying to surveys and questionnaires. Customers are confident that their input will be valued and acted upon. 	<ul style="list-style-type: none"> • Seeks users' opinions, but does not always act on them and places a greater emphasis on seeking the views of stakeholders. • Has limited opportunities for service user involvement and feedback. What exists has been developed with little reference to the views of service users. • Does not ensure that consultation methods routinely reach a wide cross section of residents. • Does not use recommended survey methodology on satisfaction or use comparison with other organisations to set targets for improvement. • Has customers who are not clear whether the organisation responds to, and takes account of, feedback and this is reflected in satisfaction levels.

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There is a separate KLOE for Judgement Two of inspections on ‘What are the prospects for improvement?’ This KLOE covers the assessments made on visions and ambitions, track record, ability to learn, quality and effectiveness of plans, prioritisation, capacity to deliver improvements and performance management.

While the Housing Inspectorate has packaged some services together in producing these KLOEs there is no expectation that inspected bodies should organise and deliver services in a similar way. The Housing Inspectorate remains committed to supporting service structures that best meet the needs of service users and that focus on service delivery outcomes not processes and structures.

The purpose of focussing on diversity is to ensure that services address the different needs that customers have. Customers’ needs differ for a variety of reasons: these could include age, ethnic background, their ability to access services or their ability to participate in the life of their community.

The diversity KLOE is intended to cover the following areas;

- ◆ Corporate Culture and Governance**
- ◆ Access to customer services**
- ◆ Service user involvement**
- ◆ Partnerships**
- ◆ Harassment and domestic violence**

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<p>31.1 Corporate Culture and Governance</p> <ul style="list-style-type: none"> • Is there clear and consistent leadership in the promotion of equal opportunities and diversity? • Are external requirements – legislative or good practice being addressed? • Have service users and relevant stakeholders been involved in determining priorities? How have these priorities been disseminated? • Do the governance structures receive the reports necessary to judge whether the organisation is delivering on diversity? 	<ul style="list-style-type: none"> • Has a corporate policy on diversity that is appropriate and understood throughout the organisation. There is a regular, consistent message and ethos. • Promotes its commitment to diversity and equality to its customers and other stakeholders. • Uses categories recommended by the CRE to monitor ethnic breakdown of staff and contractors. Has a staff composition that, at all levels, reflects the community which it serves; or which is working positively towards this target. • Has responded to external factors. Actions are taking place accordingly and there is a suite of training programmes to share knowledge • Has representative involvement in determining priorities. Training programmes for users and providers (including contractors) exist and information is shared, in a variety of media, and on a regular basis. <i>In this context, information includes promoting policies or, for example, race equality</i> • Has comprehensive reports supplying information and statistics on a wide variety of issues affecting customers. Measures have targets or benchmarks. Senior officers and board members or councillors are aware of the relevant key issues. • Does not discriminate against any person or organisation on the grounds of race, ethnic origin, disability, nationality, gender, sexuality, age, class, 	<ul style="list-style-type: none"> • Has an appropriate corporate policy but many staff are either unaware of it or unfamiliar with it. There is a different approach or emphasis in different parts of the organisation without a good reason. • Has policies on equality and diversity but does not promote them to its customers and other stakeholders • Monitors the ethnic breakdown of staff and contractors, but is unable to compare performance with other organisations which use categories recommended by the CRE. • May have a staff group that reflects the community it serves overall, but is not working positively towards achieving it at all levels of the organisation. • Has identified most of its responsibilities with regard to legislation and good practice and has some training available. Actions planned to meet good practice are not comprehensive or not progressing as intended. • Has some priorities and decisions that have been influenced by stakeholders. • Has reports with few measures. In some relevant areas, there are no targets or benchmarks. Explanations for different measures and outcomes are not always adequate • Generally has a reasonable approach to diversity, but may have some aspects of the service which

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	appearance, religion, responsibility for dependants, unrelated criminal activities, being HIV positive or with AIDS, or any other matter which causes a person to be treated with injustice.	indirectly discriminate on the grounds of race, ethnic origin, disability, nationality, gender, sexuality, age, class, appearance, religion, responsibility for dependants, unrelated criminal activities, being HIV positive or with AIDS, or any other matter which causes a person to be treated with injustice.
<p>31.2 Access and customer care</p> <ul style="list-style-type: none"> Is communication with service users conducted in a manner that meets their needs, and can all service users access all relevant services? <i>‘access’ here includes physical access and relates in part to the DDA</i> Is there up-to-date information on the vulnerabilities of different service users, which is easily available and used to provide an appropriate service? Are the needs of vulnerable service users monitored to ensure that 	<ul style="list-style-type: none"> Has a clear understanding of its customer base, and local demographics using appropriate sources of information, including the input of local partners. It knows the exact breakdown of residents by age, ethnicity, disability and other factors that are relevant locally. Resources are prioritised accordingly. Uses categories recommended by the CRE to monitor ethnic breakdown of service users. Has a comprehensive database which sets out the preferred methods of communication for each resident. This addresses issues of language, literacy, hearing and visual impairment and support. This information is highlighted on computer systems for the benefit of all staff and provided to contractors where appropriate. Has a communication strategy that ensures that translation and interpretation facilities are readily available with guidelines on when and how to use them. Where there is a need, relevant documents are translated and readily available. All such communication issues are appropriately advertised. 	<ul style="list-style-type: none"> Has a breakdown of residents by age, ethnicity, disability and other factors but it is not comprehensive. There are few or no ideas of what relevance the ethnic origin or age of residents and their families has to the organisation. Resources may not have been allocated where it might have been relevant to do so. Monitors the ethnic breakdown of service users, but is unable to compare performance with other organisations who use categories recommended by the CRE. Has details of the communication requirements of some of its residents. Such information is not held in a systematic way and may not be available to all relevant service providers. Some documents are translated but it is not clear why not all are, and why in some languages and not others. Not all staff members are aware of how to access interpreters to attend meetings. Information to customers on these services is inconsistent. Does not have a communications strategy that

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<p>they are getting the right amount of support?</p> <ul style="list-style-type: none"> • Is there the facility to bring in more support for service users where this is needed? • Do all service users who need them, have aids and adaptations provided appropriately? 	<ul style="list-style-type: none"> • Complies with statutory requirements on, for example, the CRE code of practice on lettings. • Meets targets for lettings and allocations to the diverse range of applicants which reflect priority housing need and the communities in which it is working. • Has customer service points all of which are fully wheelchair accessible, with hearing loops, and comply with the Disability Discrimination Act. • Has comprehensive arrangements for disabled access to communal areas of estates and homes. • Has front line staff that all know how to use Talktype or text phones and how to deal with different levels of vulnerability and disability with evidence of training or induction. • Has a computer alert system to say which residents are potentially dangerous. Relevant staff and contractors have easy access to information about issues around vulnerability or challenging behaviour that are relevant to the service they are delivering. • Has systems that ensure that experience about successful ways of dealing with vulnerable residents is shared, recorded and made easily available. • Has a system for monitoring and reviewing the circumstances of vulnerable tenants to ensure that they are getting the support that they need. • Can access extra or floating support for residents 	<p>ensures that translation and interpretation facilities are readily available with guidelines on when and how to use them.</p> <ul style="list-style-type: none"> • Does not adequately advertise the communication facilities that are available. • Has adopted the CRE code of practice on lettings, but does not monitor compliance. • Makes lettings on priority housing need but does not monitor the diverse makeup of the communities in which it is working. • Has some customer service points that are not fully wheelchair accessible with hearing loops and in compliance with the Disability Discrimination Act • Has arrangements for disabled access to some communal areas of estates and homes, but it is not comprehensive. • Has some front line staff who do not know how to communicate effectively with those with disabilities. • Has a list of potentially dangerous residents but it is not used systematically. • Has information about vulnerable or challenging residents on file but in a way that makes it difficult for staff to find it unless they spend time looking. • Has some staff that are experienced and competent at dealing with vulnerable residents but their experience and successful approaches are not being

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	<p>who have particular needs such teenage parents or residents with low level mental health problems.</p> <ul style="list-style-type: none"> Has a clear process for assessing the needs for aids and adaptations, and provides them to residents' properties in a timely manner. This is communicated to all residents and all requests are appropriately dealt with. 	<p>shared and recorded.</p> <ul style="list-style-type: none"> Does not regularly review the needs and circumstances of vulnerable tenants. Has vulnerable tenants who are not getting adequate support. Provides aids and adaptations. However there are some difficulties around budget or communications and there are cases of unreasonable delay.
<p>31.3 Service user involvement</p> <ul style="list-style-type: none"> Is the organisation aware of the diversity its service users, and is it taking steps to ensure diversity? Are the views of specific and minority groups and the diverse needs of service users taken into account when developing and improving the service? 	<ul style="list-style-type: none"> Sets diversity targets for service users and monitors and reports on the breakdown of service user involvement bodies, surveys, forums and focus groups by ethnicity, gender, age, disability, location and others as relevant. Takes action to achieve a better balance where there is under representation of any particular group. Has members of service user involvement bodies who understand the clear message from the organisation on the importance of equality and promoting diversity. Consistently breaks down information from surveys and service users by relevant categories and has made changes and improvements in response to the views expressed by specific groups and minorities. Uses various methods to ensure the views of under represented groups are adequately heard. Has different types of minority groups of service 	<ul style="list-style-type: none"> Knows what the breakdown of the more significant service user bodies is on diversity, but not all active bodies. Takes little or no action to improve the diversity of relevant bodies where they are not representative. Does not communicate the message of the importance of equality and diversity adequately. Service user representatives are not necessarily aware of the significance of diversity within their organisation Occasionally breaks down information from customers by category of customer. This information may not lead to any specific action. Takes very few pro-active steps to hear the views of those who are under represented. Has minority groupings of service users who feel that the organisation is not taking serious steps to ensure that their opinions are heard.

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	users that all feel that the organisation is taking serious steps to ensure that their opinions are heard.	
<p>31.4 Partnerships</p> <ul style="list-style-type: none"> • How does the organisation ensure contact with its various communities? What is it doing to involve other agencies and partners? • How does the organisation ensure that it understands cultural requirements of service users? • How does the organisation ensure that its contractors and consultants are committed to diversity in service provision? • Does the organisation promote community cohesion? 	<ul style="list-style-type: none"> • Works with a wide base of other community organisations to ensure that services are tailored to local need. It can demonstrate that it has an understanding of different issues of relevance to diverse need and different local communities. • Is able to inform service users about other service providers as appropriate. • Has an understanding of the cultural issues of all significant minority groups where this is relevant to the service they receive. • Ensures that the needs of more hidden groups or sub groups are understood. For example the needs of travellers and gypsies and the way they engage with the settled community, the needs of Turkish women as distinct from the needs of the Turkish community taken as a whole. • Has a well-developed procurement policy, that does not exclude smaller groups and that requires consultants and contractors to demonstrate good practice and sign up to the organisations' policies. The performance of contractors and consultants is monitored and the results used to improve services. • Uses its position to develop and influence partnerships to promote community cohesion and address social exclusion. 	<ul style="list-style-type: none"> • Has contact with few community organisations and has a limited awareness of the communities and diverse needs that it serves. Staff can refer customers to only a limited list of other relevant service providers. • Has a procurement policy that is not well developed. There are limited requirements of consultants and contractors to meet standards on diversity. Has consultants and contractors who are aware of the organisation's policies or priorities on diversity, but their adherence to them is not being monitored. • Has limited involvement in local or community initiatives to address community cohesion and social exclusion. It does not take a leading or active role in this, and exerts limited influence as a result. • Has few mechanisms to assess the effectiveness of its role as a partner, and limited resources to assist in this work have not been fully identified.

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	<ul style="list-style-type: none"> Actively promotes its role within the locality to develop partnerships and influence the debate around cohesion and exclusion. Has strategies in place to address its role locally, review the contribution that it makes and divert resources to enable the aims of promoting cohesion and addressing exclusion to be met. 	
<p>31.5 Harassment and domestic violence</p> <ul style="list-style-type: none"> Does the organisation have an effective approach to dealing with harassment and domestic violence? Are there effective means of offering support to residents who suffer harassment? Is there a clear message to residents on the stand that the organisation takes against those who harass and in support of those who suffer harassment? Does the organisation encourage a community 	<ul style="list-style-type: none"> Identifies different types of harassment and offers fast and effective action including support to those suffering harassment. Has staff that understand the policies and procedures, and the actions taken are appropriate and timely. Where appropriate evicts perpetrators of domestic violence leaving the person suffering the violence with the same or equivalent tenancy. Can and does give support in a number of different ways to those experiencing harassment and violence including through a variety of agencies. Promptly deals with offensive graffiti and vandalism committed with intent to harass. Has residents that are aware of the stance that the organisation takes against harassment and domestic violence. They know that perpetrators can lose their tenancies and that support is available for those who face harassment or domestic violence. Works where relevant with resident organisations and other community groups to help tackle harassment 	<ul style="list-style-type: none"> May be aware of the different types of harassment but its approach to dealing with these is inconsistent and may leave the victim feeling vulnerable and subject to further harassment or intimidation. Has staff that mostly understand the policies and procedures but actions may not be appropriate or timely. Can provide some kind of support to those experiencing harassment. It does not have experience or contact with enough organisations to support many of the minority groups that could be subject to harassment. Has many residents who are not aware of the stance that the organisation takes against harassment and domestic violence. Has only rarely worked with residents groups and other community organisations in addressing acts of prejudice where such things have occurred.

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response against harassment where appropriate	and promote positive attitudes and respect.	

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This is one of three cross-cutting KLOES which give more detail on our expectations of organisations in terms of access and customer care, diversity and, in this value for money: securing efficiency and effectiveness.

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<p>32.1 How do the organisation’s costs compare to others, allowing for local context, performance and policy choices?</p> <ul style="list-style-type: none"> • How has the organisation demonstrated that there is a clear relationship between costs, the level and quality of services provided? • Are resources and policy aligned? • Is accurate information on costs and services collected and is this used to decide priorities and strategically manage resources? • What have been the impact/outcomes for customers? 	<ul style="list-style-type: none"> • The organisation’s overall and individual service costs compare favourably with other similar organisations • Costs are commensurate with the service delivery, performance and the outcomes achieved – reflected in high quality services • There is a clear understanding of the organisation’s costs and quality of services provided • The organisation fully understands the link between activities and costs, including attributing 	<ul style="list-style-type: none"> • Overall and unit costs for key services are high compared to other organisations providing similar levels of services, allowing for local context • Costs are low but services are also of an average quality – this may reflect a conscious decision to keep costs low resulting in lower quality services being the outcome • Costs are not clearly related to the range, level and quality of services provided • There is a baseline level of information on costs but this is not used consistently to review cost-

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	<p>specific costs to particular activities and using this information to determine future procurement and investment decisions</p> <ul style="list-style-type: none"> • Cost data is accurate, timely and used to improve services • Resources have been allocated in accordance with policy decisions and are used to target and deliver organisational priorities • Policy decisions fully reflect resource availability and/or allocation 	<p>effectiveness</p> <ul style="list-style-type: none"> • Resources and policy are not aligned • Policy decisions do not fully reflect resource availability and/or allocation
<p>32.2 How well does the organisation manage and improve value for money?</p> <ul style="list-style-type: none"> • Is there a robust procurement strategy and is this being delivered? • Has the organisation fully explored what the market can potentially deliver, including contract 'packaging' and procurement? • How have procurement decisions made full use of modern procurement practices? • Has the organisation delivered demonstrable VFM through the application of a transparent framework that treats all potential partners on an equitable basis? • Has there been a sustained focus on VFM over time? Is a VFM culture embedded throughout the organisation? • Is the organisation contributing to the sector wide efficiency targets in: <ul style="list-style-type: none"> ✓ New Supply ✓ Capital Works ✓ Management and Maintenance 	<ul style="list-style-type: none"> • Procurement strategies embrace partnering and other modern procurement frameworks • The organisation follows positive practice in procurement and understands where the greatest potential benefits can be gained, including reconfiguring service delivery mechanisms and contract packaging • Procurement decisions are taken on an objective basis, using a transparent procurement framework which includes a comprehensive dialogue with a range of potential service providers • Staff at all levels demonstrate a clear awareness and application of the organisation's VFM and procurement principles over a sustained period. • Efficiency targets are challenging and being met. The organisation is routinely generating surpluses through improving efficiency - and reinvesting these to improve services in areas of need • Services are focused on the needs of the customer based upon an informed choice on cost and quality • Efficiency gains have been achieved without loss 	<ul style="list-style-type: none"> • Variable quality corporate/service specific procurement strategies and/or the inconsistent application and monitoring of these • Varied understanding of the benefits of partnering arrangements and how modern procurement principles are applied • Inconsistent application of robust challenge and competition to existing service providers • VFM objectives are not clearly contained within the organisation's core service aims and objectives • Performance management of services monitor processes and systems rather than manage or measure the outcomes and impact of procurement decisions • Inconsistent application of procurement and VFM considerations across all service areas • Targets are not routinely set for efficiency and cost-effectiveness and are not fully 'SMART' • Procurement frameworks and service reviews have not led to significant improvements in cost-effectiveness or efficiency

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<p>✓ Commodities</p> <ul style="list-style-type: none"> • Do VFM considerations focus on the costs and benefits to the customer? • How have customers and other stakeholders been involved in service design, procurement decisions, choice and delivery? • How has the organisation developed real and meaningful partnerships with existing and potential external stakeholders and suppliers, including the use of procurement consortia? • How is the organisation securing and then using resources to deliver Government and Housing Corporation priorities? • What have been the impact/outcomes for customers? 	<p>of quality</p> <ul style="list-style-type: none"> • Residents and other local stakeholders recognise that services have been designed to best meet their needs and aspirations within the financial constraints • Residents and stakeholders jointly determine the quality and range of services to be provided. • Investment and procurement decisions demonstrate the organisation is acting in the long-term interest of service users • A range of effective partnerships, reflected in positive stakeholder views of the organisation • Stakeholders share and are aware of the organisation's commitment to promoting and achieving VFM • Demonstrable efficiency gains and/or quality improvement through partnerships and corresponding improvements in services • Clear plans to achieve the delivery of key priorities including Decent Homes, Market Renewal, Sustainable Communities and Supporting People. From this the organisation has successfully secured additional resources where available 	<ul style="list-style-type: none"> • Service users are not routinely involved in decision making processes - consultation focuses on detail rather than principle and planning • Stakeholders are not fully engaged in determining service standards • The focus for procurement decisions is inconsistent with some being in the interests of the organisation/ workforce rather than service users • Varied levels of understanding of the value and purpose of partnering • Inconsistent approach to demonstrable efficiency gains and/or quality improvement and corresponding lower quality services • Plans consider Government and Housing Corporation priorities but fail to successfully secure available resources to deliver against these