

Housing Allocations

Show and Tell – November 2025

What we aimed to achieve...

With a focus on customers with medical needs:

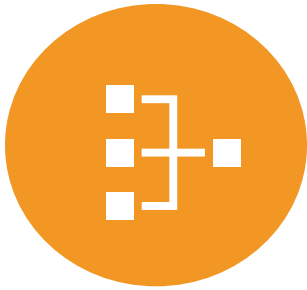
Understanding the customer experience

- Gain clearer understanding of customer satisfaction and expectations
- Understand how our processes and materials are currently working for customers and for us.
- Explore how our stakeholders experience the service, from their perspective and what they observe in our customers

Understanding the internal experience

- Improve understand of consistency and variation across individuals and teams
- Identify and understand barriers to alignment in decision making across the system.

What we've done...



Mapped current processes and reviewed materials

Assess how our process works and identified pain points



Explored customer demand and experience

Analysed themes in customer contact and conducted user research to understand user needs, expectations and behaviours



Engaged key stakeholders

Collaborated with Members, Citizens Advice and the MP's office to gather insights and feedback



Conducted peer research

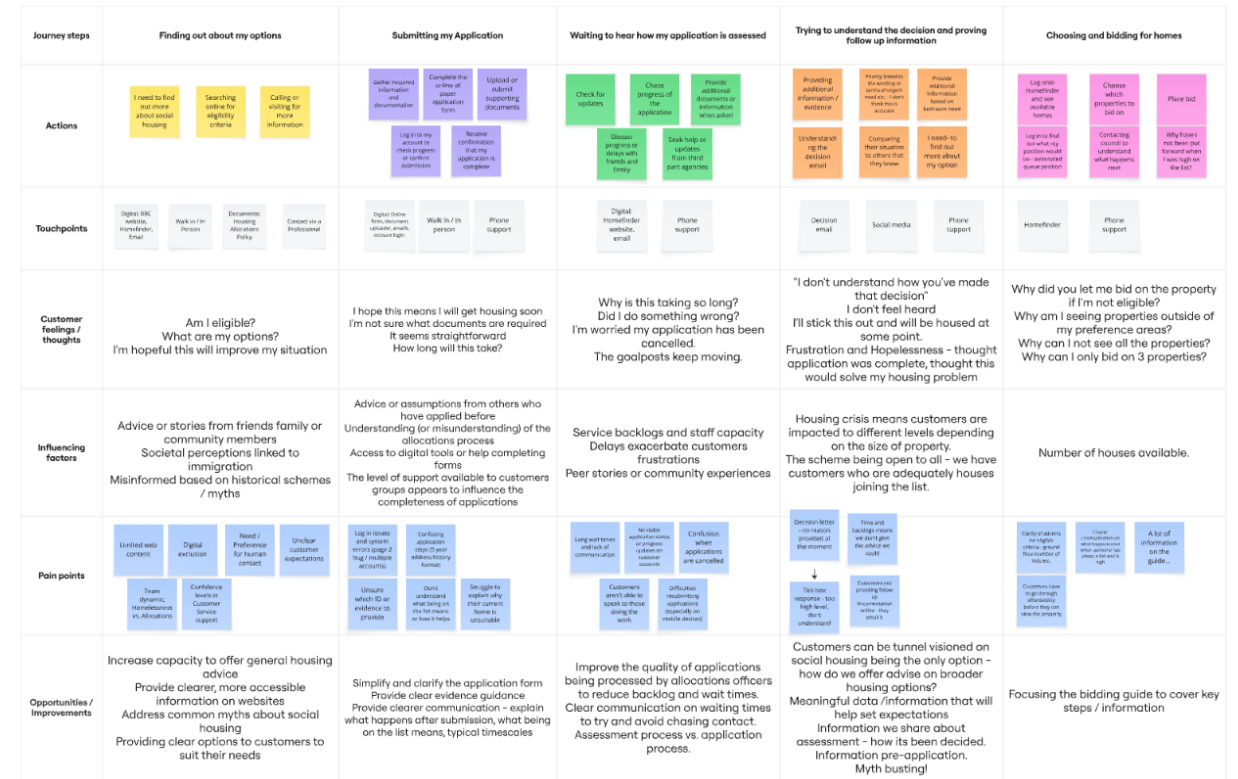
Explored how other local authorities deliver this service to identify best practices

Understanding the customer experience

Customer journey map

- Understand the customer's experience
- Identify pain points and opportunities
- Clarity on customer needs
- Track customer emotions during the process
- Improve service delivery and communication

Journey Map



Customer Journey – actions and touchpoints

Digital – RBC website and
Homefinder, Phone
and Email

Walk in

Documents: Housing
Allocations Policy

Contact via a professional

Digital – Homefinder website
(app form, document upload)
Email

Walk in

Phone Support

Digital – Homefinder website
(app form, document upload)
Email

Phone Support

Documents: Decision email,
Housing Allocations Policy

Social Media

Phone Support

Digital – Homefinder, Email

Phone Support

WHAT ARE MY OPTIONS?

I need to find out more
information

I need to understand my
options

Searching online for
eligibility criteria

SUBMITTING MY APPLICATION

Gather the required
information

Complete the application
form

Upload/submit supporting
docs

Log in to check
process/submission

Confirmation of
application

WAITING TO HEAR HOW MY APPLICATION IS ASSESSED

Checking for updates

Chasing progress

Provide additional
documents or information
when asked

Discuss process delay
with friends/family

Seek help or updates from
third party agencies

UNDERSTANDING THE DECISION

Trying to understand the
decision

Providing additional
information / evidence

Compare situation with
other peoples

I need to find out more
about my options

Requesting a review of the
assessment

CHOOSING AND BIDDING FOR A HOME

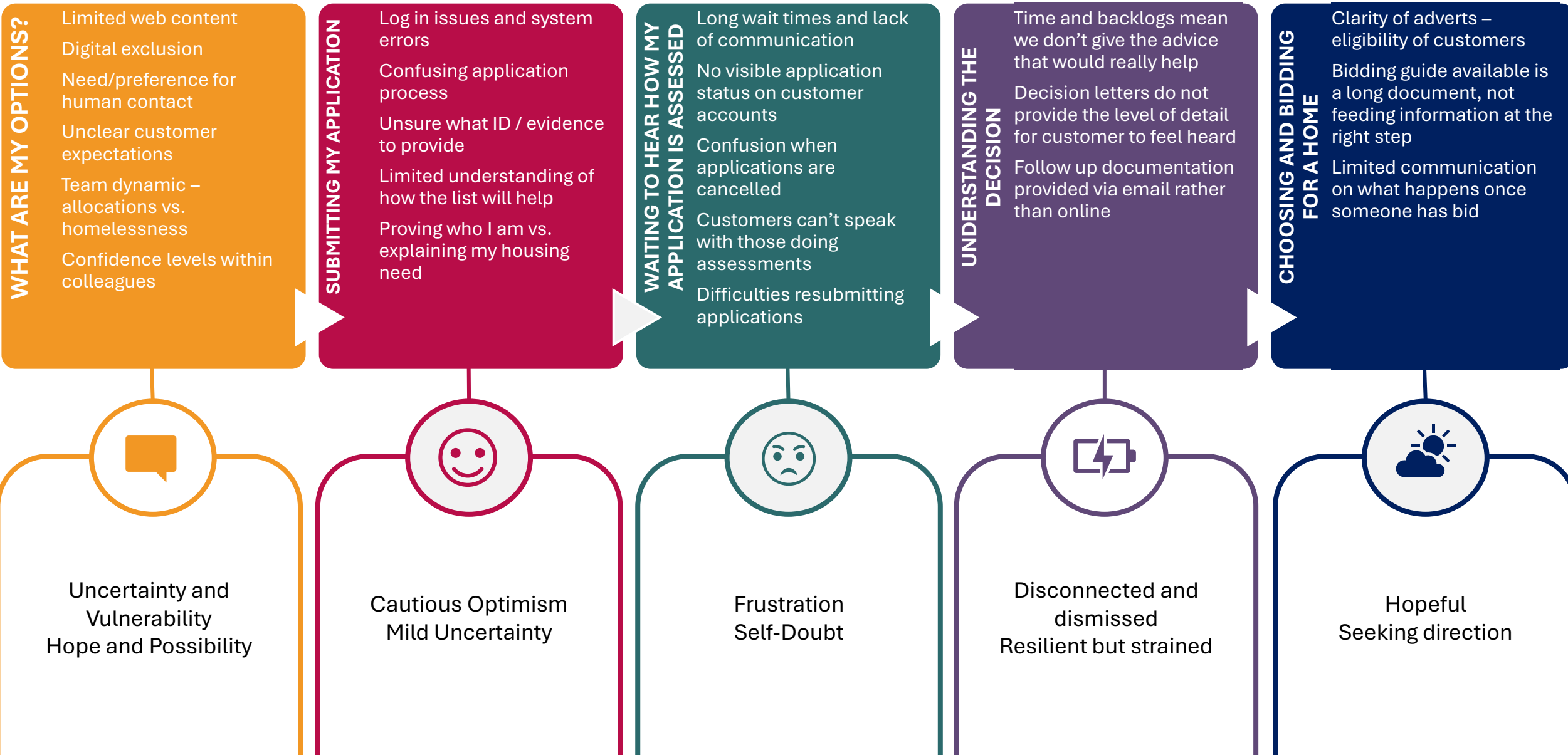
Log in to view available
homes

Choose which properties
to bid on

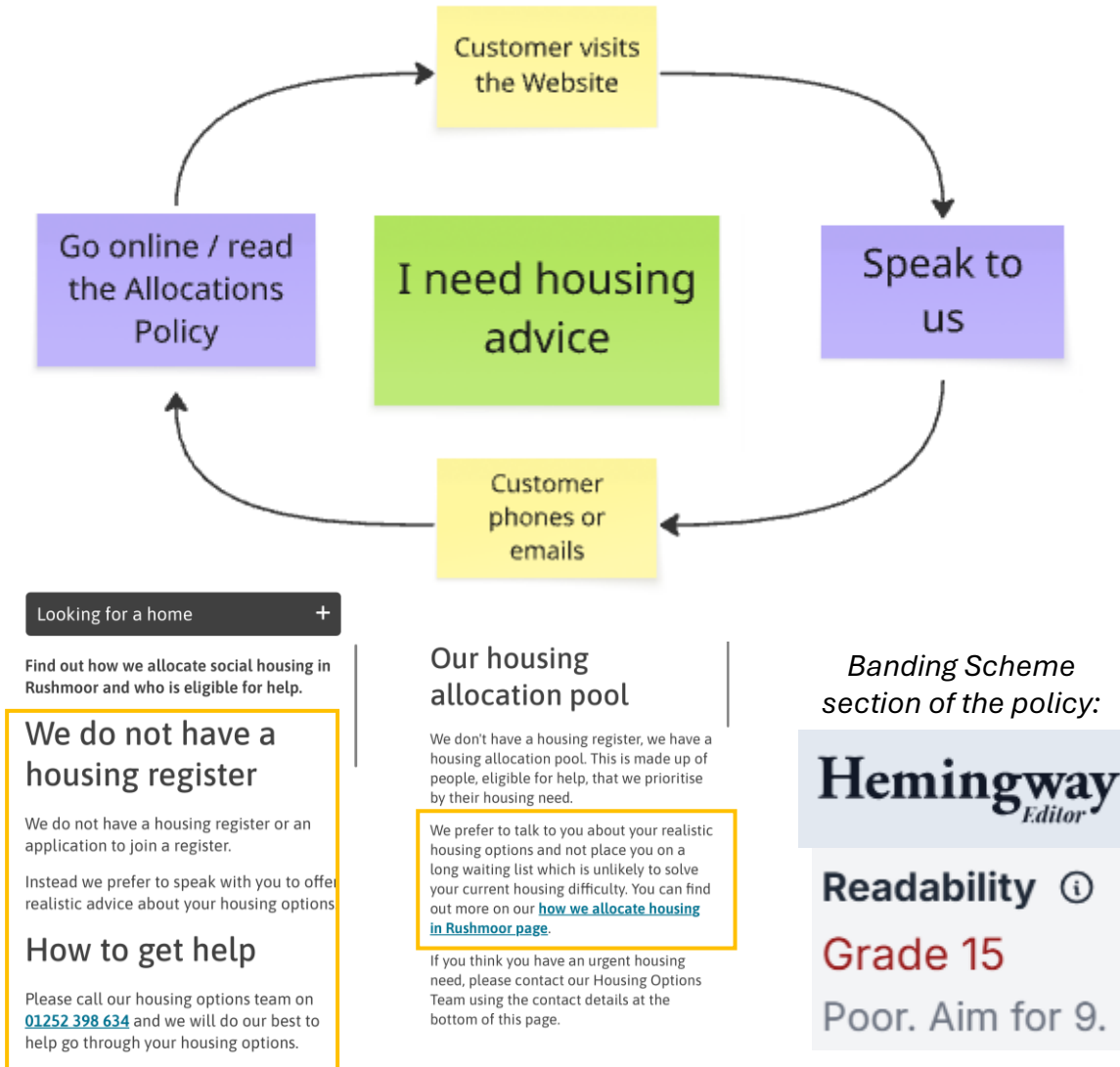
Place bid(s)

Understand more about
queue position and what
happens next

Customer Journey – pain points and feelings



Process findings – pre application

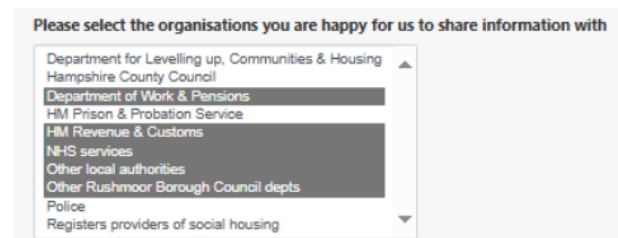
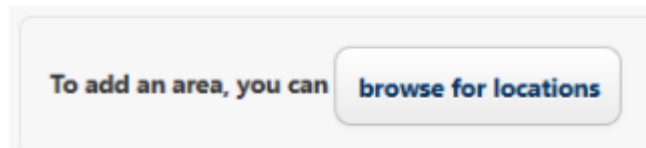


- **Limited understanding of customer needs**
 - Customers directed to general information sources without exploring their individual circumstances
 - Many proceed to join the housing register even when this may not be a realistic option for them
- **Inconsistent and fragmented content**
 - While content exist on other housing options its not presented in a joined-up way, making it difficult for customers to understand their options.
 - The advice available does not reflect how service is currently delivered – “*we prefer to talk to you*”
- **Overreliance on policy document**
 - Customers are regularly signposted to the Allocations policy (and high download rates) but its complexity makes it difficult for customers to understand.

= confusion, unmet expectations, disconnect between customers intent and outcomes.

Process findings – submitting the application

- Form prioritises collection of personal details over housing need/impact
- Volume of content is likely to overload customers, reducing engagement
- Use of unfamiliar language
- Unclear messaging about the assessment
- Unnecessary and optional questions & ID requirements

A screenshot of the 'Introduction' page of a housing application form. The page contains several sections: 'Introduction' with instructions to fill in all sections; 'BANDS' with a list of factors that might make a current home unsuitable; 'ABOUT YOUR HEALTH' with a list of questions about medical conditions and health impacts; 'IF YOU OR YOUR PARTNER IS PREGNANT' with instructions about providing a certificate; 'YOUR IMMIGRATION STATUS' with instructions about providing a certificate; 'DO YOU NEED HELP WITH THIS FORM?' with contact information; and a 'Privacy Policy' statement with a dropdown menu to select 'Please choose'.

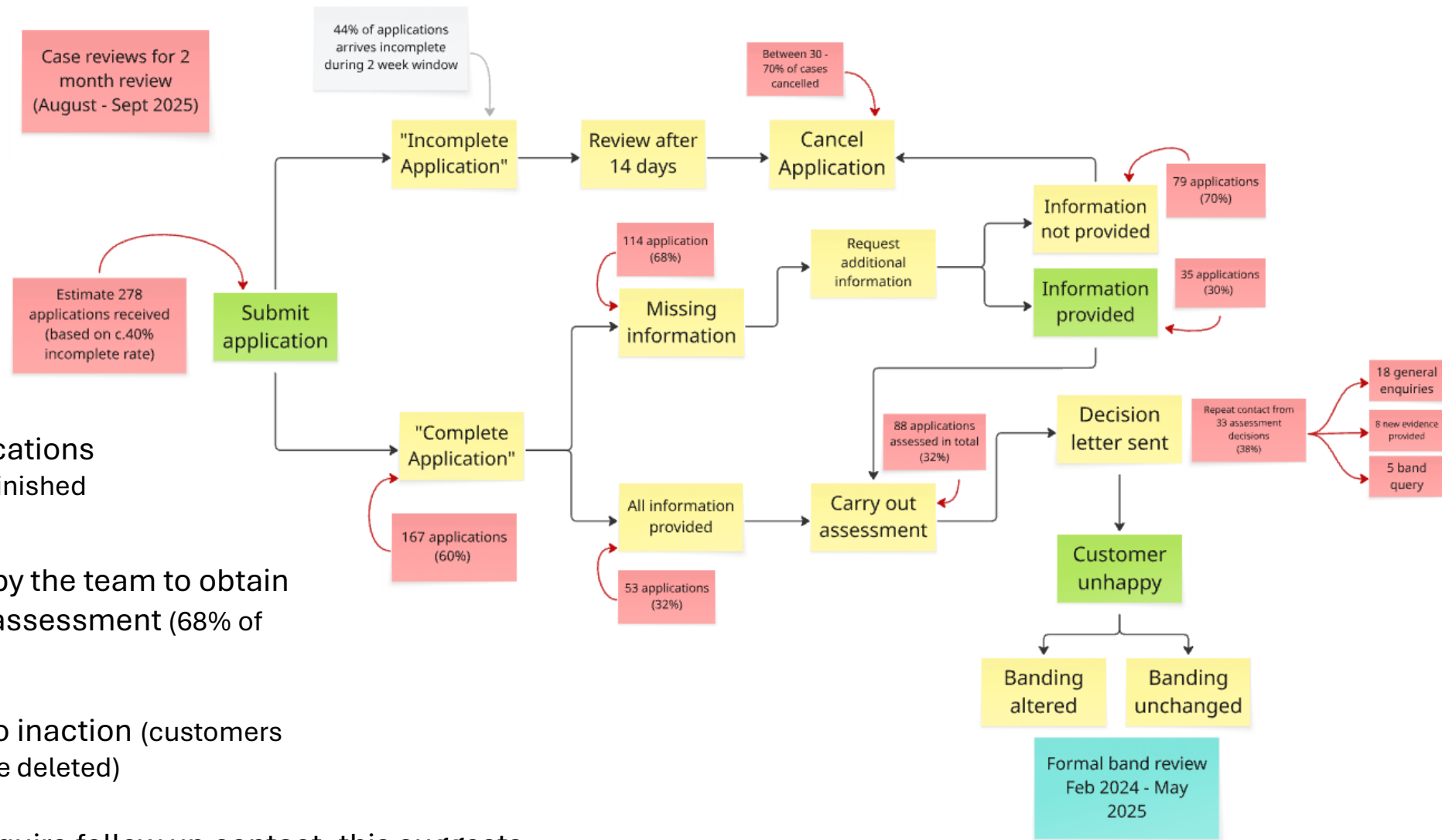
Introduction page includes over 700 words.

Current application process does not support a confident, informed experience for customers

- Simplify and refocus content
- Use plain, empathetic language
- Align questions with assessment criteria
- Clarity what happens after submission

Process findings

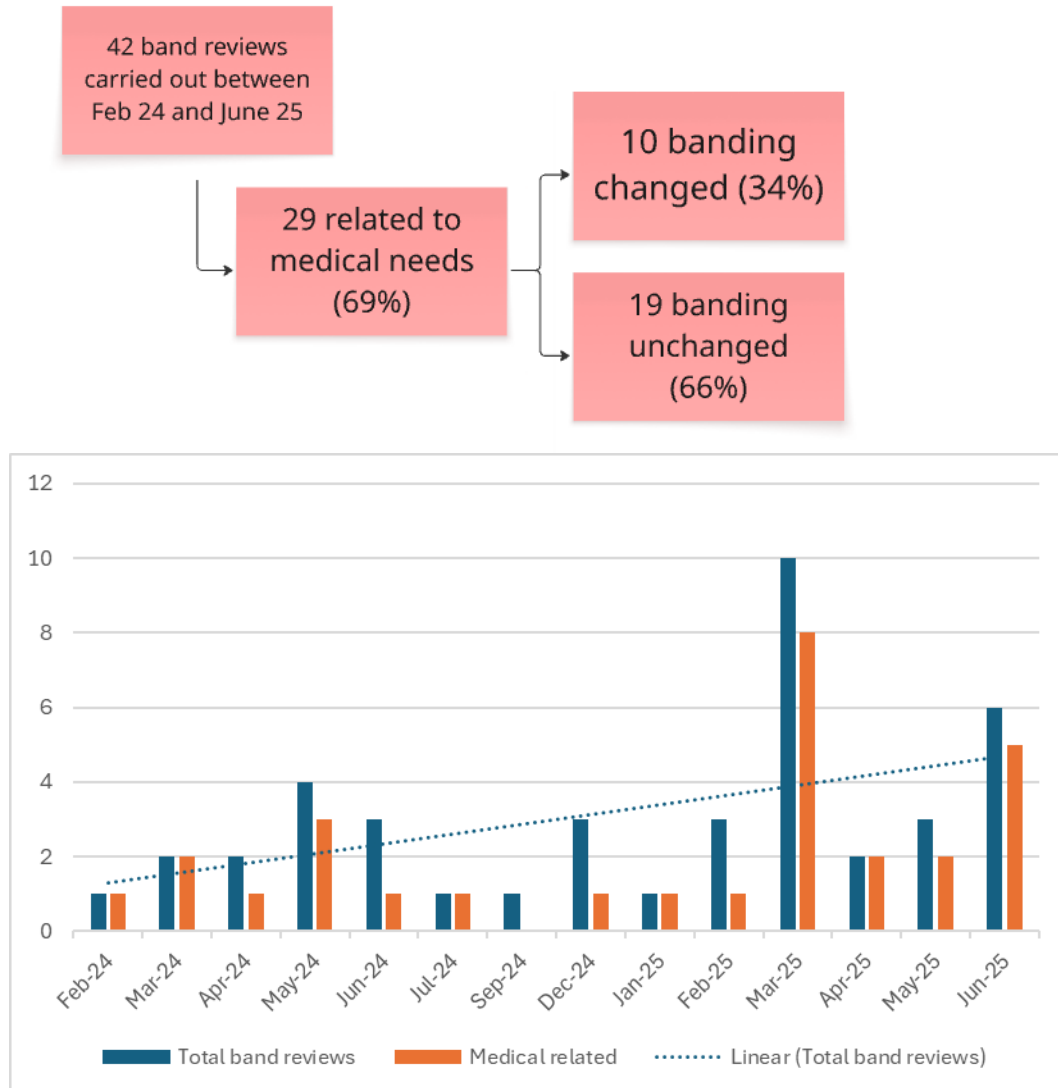
- High rate of incomplete applications
 - 40% total applications not finished
- High level of rework required by the team to obtain required information prior to assessment (68% of finished applications)
- Cancelling applications due to inaction (customers unaware save application could be deleted)
- 1/3 of cases (post banding) require follow up contact, this suggests customers are unhappy, confused or require more information
- Documentation currently being sent throughout the journey can be complex, rely heavily on the policy, and lack supportive and tailored customer advice.



= extra time, resources and effort in processing input quality issues

On average it takes 28 days to process an application.

Formal Banding reviews



Most prominent reasons why customers request reviews:

- **Mental health and housing conditions feel interconnected for customers** – they describe a relationship between poor housing and declining wellbeing
- **Safety and domestic abuse** are frequent triggers for reviews
- **Families with children who have additional needs** (autism, ADHD, anxiety) often feel their housing is unsuitable
- **Temporary housing** is perceived as unsafe especially for vulnerable households
- **Significant escalation and involvement** in an advocacy way from third parties – suggests customers may not fully understand or trust the process.
- **Customer dissatisfaction** in the way their case has been handled
- **Physical disability and mobility/access issues** – many approved cases raised concerned linked to mobility impairment, being housebound and emphasise physical barriers to their lives.

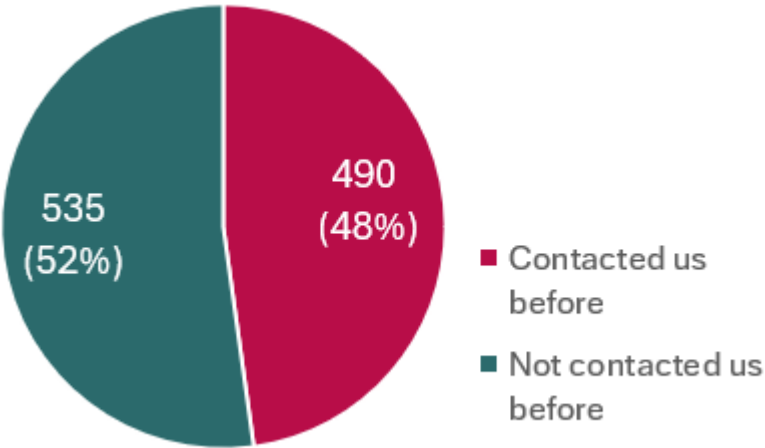
Customer demand findings

In total **1,129** emails were received into the @allocations mailbox during August and September 2025

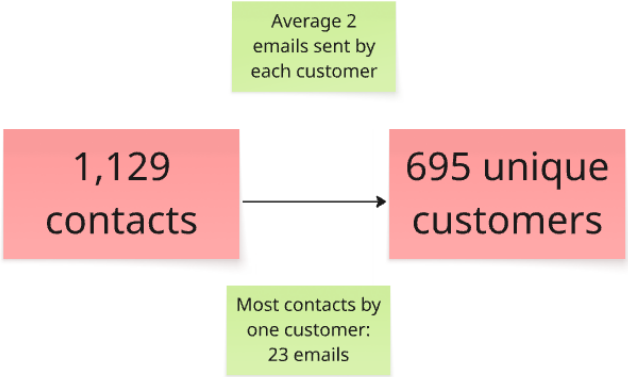
Top reasons for contact	Total contact	New customers	Existing customers
Sending in documents	277	179	99
Banding Review (medical grounds)	134	10	124
Homefinder log in issues	88	55	33
Advice on joining the scheme	85	74	11
Change of circumstances	75	3	72
Change to bedroom allocation	75	8	67

69% of band reviews were on medical grounds

112 of these were medical documents (40%)



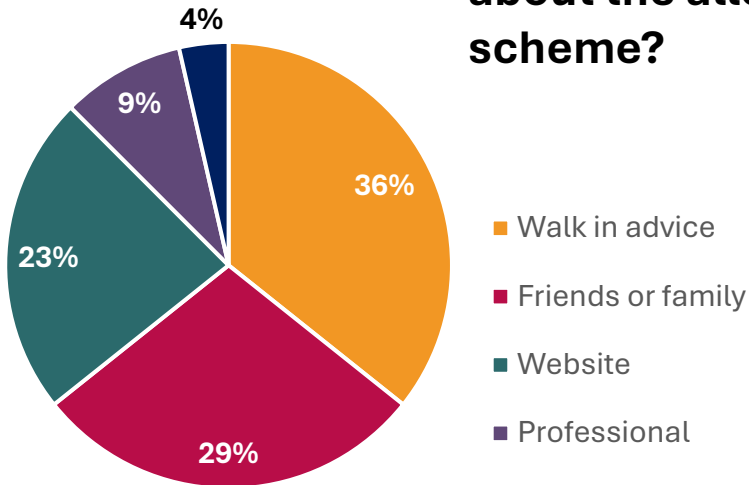
High repeat contact impacting process efficiency and customer experience



Customer demand findings

In total 68 phone calls for Allocations enquires were recorded during a 2-week period in September and October 2025

Top reasons for contact	Total contact
Bidding query	21
Advice on joining the scheme	16
Homefinder log in issues	8
Change of circs/app details	4

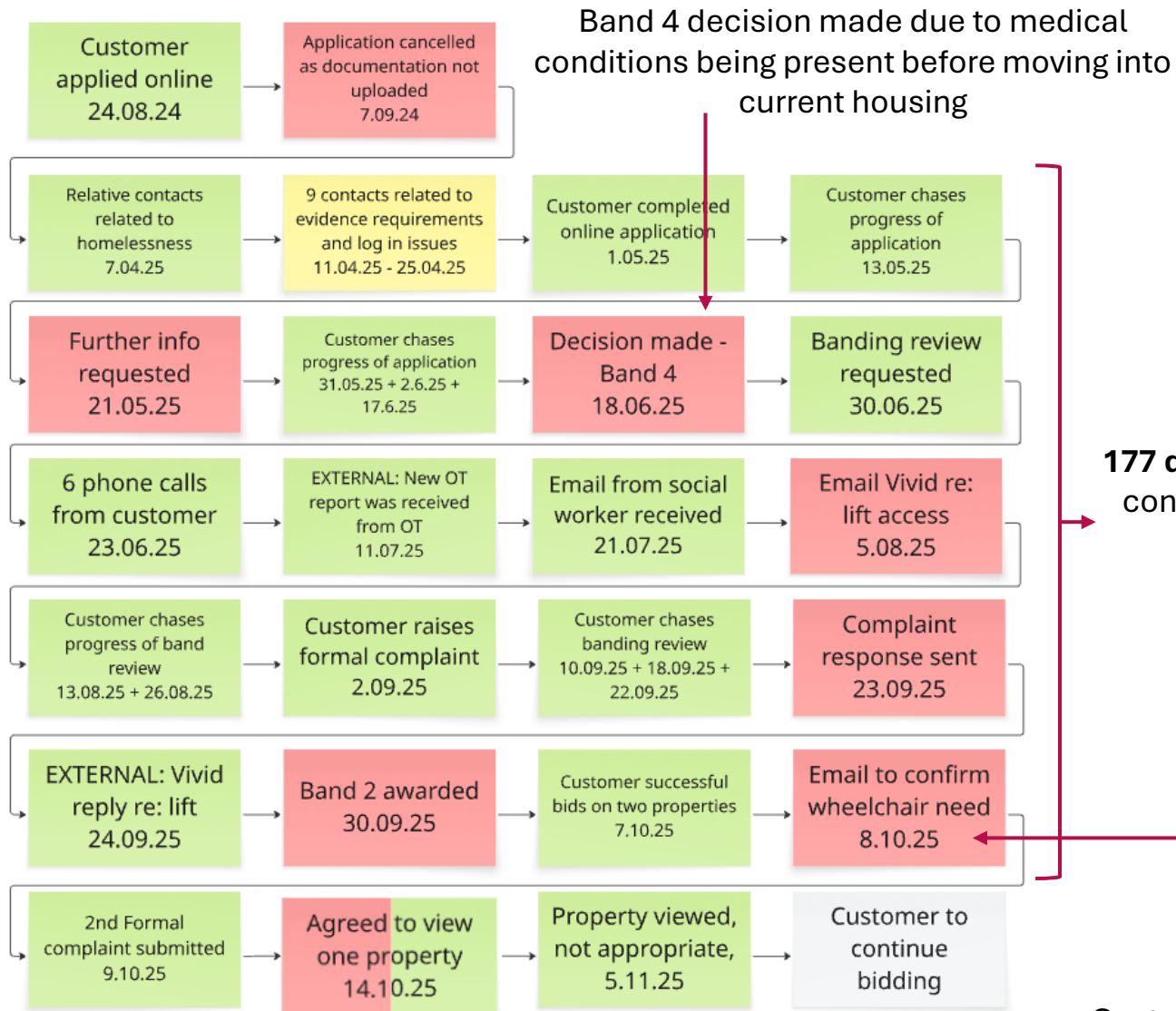


Demand capture carried out by the Customer Service Team; provide front line, telephone support to allocations customers

Over 90% of calls are dealt with, without any support from the Allocations Team

Differing levels of confidence in the Customer Service Team when dealing with allocations work

One customer's journey...



Case overview:

Customer originally treated as a homeless case due to unsuitability of property / unable to return

- 9 chasing contacts
- 1 banding review requested
- 2 Formal complaints

177 days from initial contact to Band 2 award

In contrast, Customer Service face to face support for the **Nepali community** is thought to increase efficiency and quality of cases – clear advice on document/evidence requirements, and referral to support services.

Properties were not wheelchair adapted – only ground floor

Customer wrongly advised that we have all the information needed to carry out the banding review

Customer demand and experience

User Research findings

- **5 user research sessions** carried out with customers who had applied in the last 4 months.
- Struggled to recruit customers – 3% take up rate
- Must bear in mind the representativeness of this research
- The group included a mix of genders and ages, but all individuals with known ethnicity were White British.

How did you first find out about social housing?

- Exploring where people get their information and what prompts them to apply.

What did you do once you found out about it – and how was that experience for you?

- Understanding first actions, expectations, and initial impressions.

How was the application process for you?

- Gathering insights into usability, accessibility, and overall experience.

How did you find out about the outcome of your application, and how did you feel about it?

- Exploring communication, understanding the banding, and emotional response to the outcome.

What worked well, and what could be improved?

- Identifying strengths, pain points, and opportunities for improvement.

Customer demand and experience

User Research findings

How did you first find out about social housing?

- Influenced heavily informally through friends/family/social media – risk of misinformation
- Using online resources but skimming
- How do we get messages out there – not just on websites but into communities – myth busting!

What did you do once you found out about it – and how was that experience for you?

- Most started online but needed follow-up for clarity
- Follow up was via email with links to apply and policy – helpful for some, others felt brushed off
- Extra support and human contact mattered and made a real difference for some customers.

How was the application process for you?

- Good news – relatively straightforward in terms of functionality
- Two core consistent pain points: clarity on information that's needed, and what happens next!

How did you find out about the outcome of your application, and how did you feel about it?

- Emotional impact sets in here – customers feel unheard
- Confused about how their case has been assessed

What could be improved?

- Be up front and set expectations early and appreciate the emotional impact the process has on people.

“I went online to start with, but I didn’t read too much as a family member had already explained how it all works to me”

“It wasn’t difficult, it was more confusing for me to understand how long it would take to be accepted... how long for my application to be processed and how long it will be before I’m offered a house.”



Key stakeholder engagement

Citizens Advice, Councillors, MPs office

Key issues for customers

- Fairness & Transparency
- Understanding the system/their options
- Communication & support
- Documentation & Process
- Practical Needs

What's working well vs. What's confusing?

- Face to face support
- Some spaces created for customers to feel heard
- Robust decision making communicated well at band review stage
- Clarity on banding system
- Medical needs and priority
- Documentation and evidence
- Formal guidance is missing

Future improvement and opportunities

- Setting expectations early
- Customer experience & empathy, human interaction
- Support for case building – help to customers, impact of deadline, document upload
- Policy changes
- Efficiency and collaboration
- Mindful of broader impact of suitable housing on customer's lives

Peer review – how other council do it

Examples aren't presented as solutions, but as useful insights that could help inform how we develop our own service and content.

Test Valley Borough Council	Using the same system as Rushmoor. Short, scannable information, using meaningful headings.
Bournemouth, Christchurch and Poole Council	Interactive “Advice Aid” tool offering tailored housing advice.
Dorset Council	Step by step guidance through eligibility, document prep and application.
London Borough of Hammersmith & Fulham	Co-designed service and content with their residents.

Home > Information > How to Use the Service

How to Use the Service

Step One - [Registration](#)

Step Two - [Choosing](#)

Step Three - [Offer](#)

Step Four - [Feedback](#)

RBC Guide to finding a home – 2,962 words on one page

How to Use the Service

Registration

Choosing

Offer

Feedback

Tell us about Changes

Who can Use the Service

Who cannot Use the Service

Qualification Criteria

Prioritising Applications

Frequently Asked Questions

Do it online

Services

My Account

Translate

Search

Home > Housing

The housing register

In this guide

About the housing register

Who can apply

Who should not apply

Waiting times

Medical assessment

Supporting evidence you will need to apply

How to upload your supporting evidence

What happens after you apply

Apply to be on the housing register

The housing register is the list of people who qualify for council housing and are waiting to be offered a property. There are currently around 3,000 people waiting for housing in Hammersmith & Fulham.

You also need to be on the H&F Council housing register to apply for housing from local housing associations.

We can't offer a home to everybody who applies for housing so only applicants with high levels of identified housing need will be accepted onto the housing register.

Our [Housing Strategies](#) and [Housing Allocations Scheme](#) aim to ensure that households with the greatest and the most pressing need for housing get housed.

Due to a shortage in housing, it can take up to 10 years for you to be offered a place.

Next: [Who can apply](#)

dorsetcouncil.gov.uk

Get housing advice

Using AdviceAid, you can get advice about:

how to solve problems affecting your housing situation

what to do if you have been asked to leave your property

how you can find somewhere else to live

how we can help you

You do not need to give any personal details about who you are or where you live unless you proceed to the self referral form.

Find out more about [what happens after you apply for help with homelessness](#).

Do not use this form if you are a professional making a referral, you can make a referral using the [duty to refer form](#).

Start now

Home > Housing > Housing register

> Step 1: Checking you are eligible to be on the housing register

Step 1:

Checking you are eligible to be on the housing register

Step 2:

Gather your evidence and start your housing register application

Key learning – understanding the customer experience

	Clarity and consistency of information	Human connection and communication	Process design and efficiency
	Customers struggle to find and understand information. Lacking clear, consistent information and advice that sets expectations.	The process can feel impersonal and unclear. Customers can feel unheard and receive limited guidance whilst chasing for updates.	The current system and touchpoints are not facilitating clear advice and clean applications. Impacting customer satisfaction and staff efficiency.
What we heard	"I don't understand the policy or what band I'm in"	"I don't feel listened to, I don't know what is happening"	"I sent the documents I thought were required but it wasn't enough"
What it means	We need clear, accessible content that sets expectations early.	Proactive and timely communications and more of a human touch.	Improvements to the process will impact application quality and reduce delays.

Any questions?

Understanding the internal experience

Consistency and variation within the team

Understanding and applying

Average confidence levels in the team were reported at 3.9/5.

- Generally good level of confidence however there's some uncertainties and variation in experiences.

“Team consistency is the problem, not so much confidence”

Experience and Familiarity

Confidence gained through longstanding experience in the team.

History of working under previous systems has strengthened their understanding.

Experience from related fields can contribute to confidence, particularly in understanding medical/mental health needs.

Knowledge of the policy

Some colleagues demonstrate high confidence due to direct involvement in writing, updating, using the policy regularly.

Gaps in knowledge and training for some team members, due to being new to the team or not regularly completing the banding work.

Interpretation of the policy / policy limitations

Inconsistent interpretation of the policy, particularly around medical and mental health needs.

Policy doesn't always support complex or specific situations

Decisions on banding can vary between team members (especially between band 2 and 3).

While seeking colleagues' advice helps align views it highlights the need for clearer guidance.

Support and Collaboration

Evidence of good collaboration within the team, colleagues seeking advice from others to check or confirm decisions.

Informal peer support helps to build confidence and consistency in decision making but indicates a reliance on collective judgement rather than structured training/guidance.

Consistency and variation within the team

Practice and approach

Differences in the way customers are processed:

- Perceived variation in how much effort staff invest in building rapport and setting expectations early with customers.
- Inconsistent use of social housing as a solution for similar customer situations.
- Perception that staff sometimes approach specific colleagues to get a preferred outcome, depending on the case.
- Cases involving customers threatened with homelessness are banded differently across the team.
- Customers in temporary accommodation are dealt with differently, limited consistency in duration of stay and moving on approaches.

Barriers to alignment of decision making

Why the differences exist

- Ambiguity or lack of clarity in the wording of the policy criteria can lead to different interpretations

Use of many adjectives and adverbs in trying to quantify impact: *Unsuitable, inadequate, chronic, extreme, severely, significantly.*

“What do we class as significant”

“My health is significantly impacting me”

- Some policy criteria do not have a clear purpose, our approach to other criteria would be firmed up through understanding other teams work/changes in legislation (i.e. Renters rights bill, Private Sector Housing)

“A person's accommodation is directly contributing to the downturn in their health.... extreme damp and mould.. cannot be remedied usually within six months”

- Decisions are made by a wide range of staff, with various levels of experience, which increases variation in judgement and approach

Use of the term “settled accommodation” – bearing in mind new legislation and do customers understand this wording?

- The team no longer have access to a dedicated health expert; this may be helpful for challenging cases to improve consistency and confidence in assess medical and health related cases.

Most authorities across Hampshire are not using an expert in carrying out assessments.

- Process issues already presented impact case quality which impacts how we make decisions.

- Some larger authorities use Panels, two LAs identified one using an internal MH nurse, one using Now Medical.
 - Internal screening before referral
 - Around a third of applications sent - £22.50 per app.
 - Officer learning – “In a lot of cases I know what the outcome will be”
 - Low levels of repeat contact from customers

Peer review – how other councils policy's look

Medical assessment



If a person has health issues we will ask them to provide information to confirm and in some circumstances, we may write to a GP, consultant and or social worker for more details. We may also ask the council's health advisor to assess information on a person's health or a member of their household.

We will consider the degree that the health of a person, or a member of their household, will improve by a move to alternative accommodation.

The assessment is not based on the seriousness of a medical condition, but the impact of their current housing on their condition and whether this would improve significantly through a move to alternative housing.

The council will decide which band to place a person in based on the information.



14.18 Medical Needs

The Council is required to give reasonable preference to people who need to move due to their health, disability or access needs.

14.19 Points in this category will not be awarded simply because an applicant has a medical condition. The assessment will consider:

- The degree to which the health condition of the applicant, or a member of their household, is negatively impacted by their housing circumstances
- The degree to which a change in housing circumstances would enable the applicant, or a member of their household living with mental health problems, to maximise their recovery potential and achieve enhanced social inclusion



Priority 1 (High)	Critical risk to life or significant risk to health The applicant or a permanent member of their household needs to be moved urgently as they have a life threatening or serious risk to their physical or mental health which cannot be alleviated in their current home with or without adaptations. The applicant or a permanent member of their household is currently in hospital and cannot be discharged into their current home with or without adaptations.
Priority 2 (Medium)	Moderate risk to health The applicant or a permanent member of their household is experiencing difficulties or that adaptations cannot be made to their current home and a move to alternative accommodation would reduce the effect considerably.
Priority 3 (Low)	Low risk to health The applicant or a permanent member of their household is experiencing low level difficulties in their current home and a move to alternative accommodation may reduce the effect.
No Priority	No risk to health The applicant or a permanent member of their household has a medical need but moving to alternative accommodation would not alleviate the condition.



Medical needs

Medical assessment	Paragraphs 14.18 – 14.21	10 points for the first household member and 5 points for each subsequent household member
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• Extreme

There is a critical need to move. The current housing situation is seriously injurious to health and interferes with quality of life to an intolerable degree.

• Major

The applicant is experiencing considerable difficult current housing, impacting the applicant on a daily basis. A move to more appropriate accommodation would reduce the adverse effect.

• Moderate

Where the applicant's current accommodation will have a clear impact on the applicant's health. Although not as significant as extreme or major, the health condition can be alleviated by the provision of alternative accommodation.

• Medical

Where the applicant's current accommodation will have some impact on the applicant's health and where alternative accommodation would alleviate the condition.



Appendix 2: Medical and Welfare Grounds for Reasonable Preference

- A mental illness or disorder
- A physical or learning disability
- Chronic or progressive medical conditions (for example; MS, HIV or AIDS)
- Infirmary due to old age
- The need to give or receive care
- The need to recover from the effects of violence or threats of violence, or physical, emotional or sexual abuse
- Ability to fend for self restricted for other reasons
- Young people at risk
- People with behavioural difficulties

- Need for adapted housing and/or extra facilities, bedroom or bathroom
- Need for improved heating (on medical grounds)
- Need for sheltered housing (on medical grounds)
- Need for ground floor accommodation (on medical grounds)
- Need to be near friends/relatives or medical facility on medical grounds
- Need to move following hospitalisation or long term care

- Most local authorities reviewed make it clearer that priority is **not awarded based simply on the medical condition**.
- Many other authorities do not outline in their policy how specific circumstances are used to determine housing bands, the **criteria detail in Rushmoor policy exceeds that provided by many other LAs**.
- Some good examples of where policies include **impacts on current housing** as well as demonstrating medical need – Bury Council.
- The Rushmoor policy **does not provide the same level of clarity on the assessment process**; other LAs share who makes the decisions, have specific medical forms, involvement of medical professionals, home visits etc.

Key learning – understanding the internal experience

Confidence without consistency

Staff feel generally confident in applying the policy, however an awareness of the inconsistency can reduce that confidence.

What we heard

“I’m fairly confident in what I’m doing but I know others may make a different call, so it does lead to doubt”

What it means

We recognise the link between current inconsistencies and confidence levels.

Policy ambiguity and interpretation

The policy, in absence of guidance, leaves room for interpretation, especially for complex cases, leading to different decisions.

“Some parts of the policy aren’t clear – two officers may deal with a case in different ways”

Having guidance alongside the policy would help decrease subjectivity and inconsistency.

Collective decision making

Peer support is strong, but decisions often rely on collective judgement rather than a structured framework.

“We’re good at working things out together, but sometimes its more about who's in the room than what’s the policy”

We need guidance and more structured procedures to seek advice and support.

Potential next steps



Any questions?