



Customer Service Excellence

Assessment Report

Name of Organisation
Harrogate Neighbours Housing Association – 24/3120



Contents

Introduction	Page 2
Section A: Scoring by Criterion	Page 3
Section B: Initial Assessment Report	Page 4
Section C: 12-month Review Report	Page 11
Section D: 24-month Review Report	Page 14
Section E: Notes	Page 16

Customer Service Excellence is a national quality mark that seeks to recognise organisations that have a truly customer-focused culture. It is also designed to promote continuous improvement. Certification to the *Customer Service Excellence* Standard is achieved through a rigorous assessment process including a review of documents submitted to an impartial assessor which demonstrate compliance against each element of the Standard, and an on-site visit to establish whether or not an organisation meets the requirements of the scheme.

This Assessment Report covers the whole of your organisation's/department's/team's three-year certification journey from initial assessment, through 12 and 24-month review visits. It is designed to reflect on your achievements against the CSE Standard and your response to areas for development identified by your assessor.

Centre for Assessment hopes that you find this report useful. Should you have any enquiries then please contact your Assessment Project Co-ordinator.

Notes for CfA Assessment Project Co-ordinator

On-site start and end dates and (total number of days spent on the project, including planning/document review/report writing)

Initial assessment: 18th September 2025 – 2.50 days

12-month review:

24-month review:

Number of certificates required, if certification decision agreed (including any Compliance Plus)

Initial assessment: 3

12-month review:

24-month review:

Section A: Scoring by Criterion

Initial Assessment

	1 – Customer insight	2- Culture of the organisation	3 – Information and Access	4- Delivery	5- Timeliness & Quality of Service
Non-Compliance	0	0	0	0	0
Partial Compliance	0	0	0	0	0
Full Compliance	11	11	11	13	10
Compliance Plus	0	0	1	0	0

12-month Review

	1 – Customer insight	2- Culture of the organisation	3 – Information and Access	4- Delivery	5- Timeliness & Quality of Service
Non-Compliance					
Partial Compliance					
Full Compliance					
Compliance Plus					

24-month Review

	1 – Customer insight	2- Culture of the organisation	3 – Information and Access	4- Delivery	5- Timeliness & Quality of Service
Non-Compliance					
Partial Compliance					
Full Compliance					
Compliance Plus					

Section B: Initial Assessment Report

Assessor name	Hugh Keachie	Date of report	18 th September 2025
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Context

In the late 1960's a meeting was attended by all the local churches in Harrogate and from this meeting it was agreed to form a charity, which was registered as Harrogate Neighbours Housing Association. The purpose was to provide a private care home for the needy elderly of Harrogate who could not afford a private home. In early 1969 a property just a mile from the town centre of Harrogate with an acre of land became available.

The property was purchased, and alterations and an extension were completed by August 1970. The first resident moved into Heath Lodge on 1st December 1970 and by the end of the month all 30 rooms were filled. Four years after the opening of Heath Lodge a suitable site for a second home was sought to meet the needs for sheltered housing. In March 1976, 42 Wetherby Road was purchased. The house was extended, and 10 bungalows were built in the grounds. The home was completed at the end of 1978 and tenants moved into Greenfield Court. In October 2018 the organization moved the tenants from Greenfield Court to its new site The Cuttings, a purpose built 55 apartments with a commercial kitchen to house Harrogate Food Angels and its head office. The old site was sold to fund the new development. In 2023 Heath Lodge moved to a site previously owned by North Yorkshire Council in Boroughbridge which has given Harrogate Neighbours opportunities to develop the site in the future. In 2024 we opened our Community Hub on the high street in Starbeck which is a facility open to the community as a drop in pay as you feel café, signposting of our services and other local services and a place to feel safe and secure. The hub is funded by grants and we have been successful in securing a 3 year grant from the council of £15,000 per annum and is managed on a day to day basis by the Hub Manager. In 2024 we also opened the daycare at The Cuttings which operates twice weekly for people within the community to access activities, well-being, and other facilities operated daily. We have been successful in grant applications which has included an electric community car, a caddy (community transport car) to bring people to day care and a new caddy for Heath Lodge.

The Association is governed by a Board, who ensure that the organisation's aims and objectives are upheld and developed. The Association is led by a Chief Executive who ensures that high standards of residents/tenant focused care are maintained and reviewed. The CEO is supported by a Director of Care and there are two registered managers of our CQC services – Heath Lodge and Greenfield Court Care domiciliary care agency. There is a Scheme Manager, at The Cuttings. All three managers oversee the wellbeing of the residents, clients and tenants, and ensure that the philosophy of care and the ethos of the association is maintained. They are supported by a team of dedicated and skilled staff, who aim to strive towards providing best value service that is effective as well as efficient, on both sites, to ensure the best level of quality care is provided. The meals service is run by the Meals on Wheels Manager and is supported by the Head Chef supported by Chefs and Hospitality Assistants. The catering team also manage the wider hospitality service. We recruited in 2024 a Communications and Development Manager to assist in the marketing and development of services and new business.

The above captures some of our activities which continue to grow and develop within the local community.

Summary

Harrogate Neighbours Housing Association (HNHA) continues to provide clear evidence of meeting the CSE Standard. They confirmed that from gaining the CSE standard they focus on the quality of service given to customers. Gathering customer information continues to prove to be a successful part of the organisation. Not only gathering the information but using this information to enhance the service on offer. From senior management to frontline staff all have a real commitment in providing a quality service. Through accurate information available online and direct contact with individuals customers have access to all information they require.

Having carried out the assessment process in accordance with the guidelines provided for Assessors by the Cabinet Office, the Assessor was satisfied beyond any doubt that you meet the requirements of Customer Service Excellence. The Assessor recommends to the Panel that you be recognised under the CSE standard. On behalf of Centre for Assessment Ltd. the Assessor would like to congratulate you and all the staff on their achievements so far.

Key Strengths

- Strong leadership seen throughout the assessment with a determination to provide a quality customer service.
- Individual staff commitment in providing a quality service seen during the assessment.
- HNHA has continued to develop and improve the service to all customers and confirmed that by using the CSE standard's principals has enabled them to progress as a company and continue to regularly update their policies and processes where appropriate.
- Partners again continue to work alongside HNHA and are committed to provide quality service to customers. Their involvement is monitored by HNHA and any dips in performance is rectified as soon as possible. Partners confirmed that regular meetings and updates enhance the partnerships and ensure the customer is central to all activity.
- During observation, Staff showed a professionalism when dealing with customers face to face and on the telephone. Emails and letters are scrutinised to ensure a plain English language is used at all times. Staff go above and beyond what is expected of them to ensure a quality service is given to customers.

Areas for Development

- It was noted from talking to customers that not all customers are informed of outcomes of asking for their opinion of activities at The Cuttings. Those on Facebook had access to this only. This should be available to all residents in a format available to all.
- Consider elements that can achieve a Compliance Plus score at the next assessment.
- Make sure where appropriate, that there is a continuation update for next year regarding the compliance plus elements for this year.

Impact of using CSE Framework

"Being part of the CSE framework has ensured continual focus on the customer journey at HNHA. How we consult, how we engage and feedback to all the people involved in our service including staff, partners, customers and other agencies. It gives us an opportunity with our assessor and the standards to look at what we do well and how we can strive to do better always raising the bar so we ensure outstanding excellent service all the time."

Criterion 1 – CUSTOMER INSIGHT

For each criterion the assessor should provide a short paragraph describing how the client meets the requirements and where there are any 'gaps' in evidence

Summary

It was clear from the evidence provided that HNHA are determined to understand as much as possible their customer requirements. To do this they gather information from various sources to ensure the service offered is what the customers need rather than what HNHA want to provide.

Through engaging and consulting their customers, HNHA are able to develop the service appropriately and provide relevant quality customer service. Strategies and policies are reviewed regularly which ensures correct methods provide reliable results. Customer satisfaction continues to rise, as questionnaires and surveys confirm. These results are publicised in the Newsletter as well as on the website.

Customer discussions during the on site visit confirmed their involvement and clear examples of their determination to enhance the existing high quality service were given.

The following information was prepared by the client:

“Customer Insight – We have developed a Marketing Strategy, and this was supported by an outside marketing specialist who contributed to its content and this has been signed off by the board.

The Business Development Manager has continued to be present at various community events, Harrogate Chamber of Commerce as well as introducing a Casino Night which was a fundraising evening as well as raising the profile of HN.

We were successful in putting a team in for the Knaresborough Bed Race which enabled customers and stakeholders to support the team and engage with the event.

Partial Compliance Elements

Element	Justification
NONE	

Compliance Plus Elements

Element	Justification
NONE	

Criterion 2 – THE CULTURE OF THE ORGANISATION

Summary

There continues to be strong leadership within HNHA putting the customer at the heart of the service delivery. Senior Management confirmed that the knowledge they had of their customers was key to informing their policies and strategies and to the development of the organisation. There is a real desire to develop the service and therefore through involving staff, partners and customers in this process has ensured quality is at the core of the business.

It was observed during the on site visit that Staff continue to provide a professional service to their customers. Attitude and approach to customers and their enquiries is vital to building relationships and shows a real interest in the individual. Staff also confirmed that they see the customer at the heart of HNHA where the quality of service given continues to grow.

Staff also confirmed that they are asked for their views on how to improve and develop the service and gave some examples of changes made recently. Feeling valued is one area that staff were keen to express. Various awards are offered regularly including staff members award evening where customers and staff have a vote for a member of staff.

The following information was prepared by the client:

The culture of the organisation – After looking at our values we have put these on all our staff badges, all paperwork, email signatures and around the sites. We are in the process of completing the cyber essential assessment process and are currently going through a third -year assessment which has enabled us to relook at all our data and check with our IT provider where we are and that we have remained on track.

We held our first Staff Awards evening which was well received by everyone, and we had independent judges of the awards, and this will be an annual event.

With the support of the board, we have undertaken a full restructure engaging with an outside specialist. This has taken 8 months which included staff engagement, 1-2-1's and a new structure has been shared with all staff. New Director roles are currently being advertised.

To support our sustainability programme, we have introduced a clothing bank and bra bank where we receive a small income at all our sites.

We have increased the well being support for the staff with a monthly massage clinic across both sites.

We have rolled out to all the staff a private health care scheme paid for by HN.

At our training centre at Boroughbridge as well as training all HN staff we have rolled out our first external training delivery.

Partial Compliance Elements

Element	Justification
NONE	

Compliance Plus Elements

Element	Justification
NONE	

Criterion 3 – INFORMATION AND ACCESS

Summary

As in previous assessments, information remains widely available to all customers. It was observed during the onsite visit on notice boards and TV screens relevant up to date information with performance levels alongside events taking place. In addition to this, leaflets and website access to a variety of information is available for customers to use should they not have access.

Customers spoken to were keen to promote HNHA and shared their experiences of the services they had received. They also were able to give comparisons of other similar organisations where services were not as professional. Customers are determined to ensure they receive a quality service from all departments of the organisation and to maintain their high level of satisfaction with the services

Partners spoke to are proud to be part of HNHA - working together for the benefit of the customers. Co-operative and collaborative working arrangements to provide quality services to customers. Some raising funds for HNHA – example of climbing Mountain Kilimanjaro and raising £6K.

The following information was prepared by the client:

Information and Access – We continue with our weekly newsletters to our residents as well as ¼ newsletter which continues to be sponsored.

Our positive PR has continued as we have been filmed by TV and we engaged with a local veteran car enthusiast to commemorate D Day with the residents and meals on wheels recipients.

We have recruited 3 new trustees to the board who have taken an active role in finance, data collection and care.

The hub has continued to flourish and has become an community anchor receiving 3-year funding from the local authority. Its biggest success was supporting local people during winter with access to soup and other hot food. At the hub we were also successful in obtaining a Digital Inclusion grant which enabled us to finance equipment, train volunteers, hold educational sessions, 1-2-1 support to individual's and run weekly sessions at the local library. We have bridged the gap with health inequalities engaging with local experts and other organisations.

Partial Compliance Elements

Element	Justification
NONE	

Compliance Plus Elements

Element	Justification
3.3.1	Digitalisation Grant – In 2025 we were successful in being awarded a digital grant which we have used to roll out a programme called 'The Digital Hub ' which not only provides access to equipment and support, but it has also made our own services more accessible by enabling people to engage with us online, use digital forms, and stay connected. This has been supported by Digital Ambassadors who hold weekly sessions at the local library at the Community Hub and visit people in their own homes using the equipment that was purchased via the grant. This means individuals who might otherwise be excluded can access both wider resources and our organisation's support more easily.

Criterion 4 – DELIVERY

Summary

HNHA are clear about their high standards of delivery outlined in several formats including their Corporate Plan available to their customers. Involving all connected with HNHA – Staff, Partners and Customers – they have gathered and used a vast experience to enhance the service on offer to their customers. This continues to enable HNHA to raise local standards. Monitoring standards and departmental and performance targets, they are kept up to date with the quality of service available to their customers.

Regular updates are given to their customers, these include: what they promise from the service, what has been delivered and what they can expect in the future. It is important that HNHA are aware of similar organisations and what can be learned from their experience. Looking closely at what can be used as best practice and sharing with others their experiences.

The following information was prepared by the client:

Delivery - We were successful in winning a grant for an electric vehicle which is being used across all our services and is used as a marketing tool.

We have updated our Complaints Policy and Procedure in line with the new rules introduced by the Housing Ombudsman and introduced a role as Member Responsible for Complaints (MRC) which has been undertaken by a board trustee. We made our first online submission.

Partial Compliance Elements

Element	Justification
NONE	

Compliance Plus Elements

Element	Justification
NONE	

Criterion 5 – TIMELINESS AND QUALITY OF SERVICE

Summary

As before, HNHA provided evidence showing their standards for quality and timeliness for all forms of customer contact. Customers were keen to confirm that they are advised of this through their newsletter as well as information on the website.

Both Staff and Partners are determined to provide a quality service to HNHA customers and this means sharing confidential information where appropriate to ensure continuity of service and reduce unnecessary contact for customers. Also keeping customers informed of any changes to agreed plans is key to maintain that quality of service expected by customers.

As outlined earlier in this report, monitoring performance levels enables any dips in performance to be recognised and dealt with appropriately and when benchmarking against similar organisations can see the quality and level of service they are providing to their customers.

The following information was prepared by the client:

Timeliness and quality of service –

We have introduced a Governance sub committee who had its first meeting earlier this month and this will look at key areas following the boards away day where the strategic plan and focus was discussed.

We continue to produce a weekly newsletter for the tenants where there is up to date information on activities, events, access to information and the opportunity to find out the latest news at Harrogate Neighbours. This is supported by the ¼ newsletter which continues to grow and expand.

We continue to benchmark against other organisations with costs as well as services and share.

The Future:

1. We are going to introduce a new Strategic Plan in line with the away day and focus on the plans for Boroughbridge development and the growth of the organisation and the restructure.
2. We are going to continue to raise funds and awareness through the annual events which include the ball, casino night, bed race and golf day
3. We are changing the landscape with our aging community and bridging the gap between independence and long-term resilience by supporting people to adopt preventive approaches, reducing hospital admissions and crisis interventions with a strength based and asset-based support through the Hub.

Partial Compliance Elements

Element	Justification
NONE	

Compliance Plus Elements

Element	Justification
NONE	

Section C: 12-month Review Report

Assessor name		Date of report	
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ASSESSMENT DAY VISIT - OUTLINE TIMETABLE

Date/ Time	Key People to be seen	Key issues to explore
09.30 to 11.00		Arrival and Opening Meeting Evidence/element matching activity with applicant
11.00 to 11.30	Staff (Group - up to 10) Names and positions to be confirmed	Questions may include: What changes have been made as a result of analysing customer experience, including improved customer journeys? (1.3.5) Give me an example of feeling empowered and encouraged to promote a customer focus culture in your organisation. (2.1.6) Give me an example of when you have suggested a change to a process in your department. (2.2.4)
11.30 to 12.30	Assessor Review Time and lunch	
12.30 to 13.00	Customers/Family members (Group - up to 10) Names to be confirmed	Questions may include: When looking for information about the services available how easy has it been? Has it been clear who you should contact? (3.1.1) What steps do staff take to ensure you have understood the information given to you? (3.2.2) What experience do you have of them working in your community? (3.4.3)
13.00 to 13.30	Assessor Review Time	
13.30 to 14.00	Customers (Group - up to 10) Names to be confirmed	Questions may include: What information are you given regarding the performance levels? (4.1.2)

		How much do you know about any dips in performance levels and any action being taken to put this right? (4.3.1) When making a complaint tell me about the process used and whether you felt this was appropriate. (4.3.6)
14.00 to 14.30	Assessor Review Time	
14.30 to 15.00	Partners Names to be confirmed	Questions may include: In working in partnership what are the benefits to the customers? (3.4.1) How have you developed co-ordinated working relationships? (3.4.2)
15.00 to 16.00	Closing meeting	Closing meeting with results

Changes in relation to the five criteria and areas for development

The assessor should provide brief bullet points for each of the criteria to show what new evidence has been provided.

New areas for development

Criterion 1 – CUSTOMER INSIGHT

Criterion 2 – THE CULTURE OF THE ORGANISATION

Criterion 3 – INFORMATION AND ACCESS

Criterion 4 – DELIVERY

Criterion 5 – TIMELINESS AND QUALITY OF SERVICE

Partial Compliance elements

Element	Justification

Compliance Plus elements

Element	Justification

Use of *Customer Service Excellence* logos

Provisional date for 24-month review visit	
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Section D: 24-month Review Report

Assessor name		Date of report	
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ASSESSMENT DAY VISIT - OUTLINE TIMETABLE

Date/ Time	Key People to be seen	Key issues to explore
09.30 to 11.00		Arrival and Opening Meeting Evidence/element matching activity with applicant
11.00 to 11.30	Staff (Group - up to 10) Names and positions to be confirmed	Questions may include: What changes have been made as a result of analysing customer experience, including improved customer journeys? (1.3.5) Give me an example of feeling empowered and encouraged to promote a customer focus culture in your organisation. (2.1.6) Give me an example of when you have suggested a change to a process in your department. (2.2.4)
11.30 to 12.30	Assessor Review Time and lunch	
12.30 to 13.00	Customers/Family members (Group - up to 10) Names to be confirmed	Questions may include: When looking for information about the services available how easy has it been? Has it been clear who you should contact? (3.1.1) What steps do staff take to ensure you have understood the information given to you? (3.2.2) What experience do you have of them working in your community? (3.4.3)
13.00 to 13.30	Assessor Review Time	
13.30 to 14.00	Customers (Group - up to 10) Names to be confirmed	Questions may include: What information are you given regarding the performance levels? (4.1.2) How much do you know about any dips in performance levels and any action being taken to put this right? (4.3.1)

		When making a complaint tell me about the process used and whether you felt this was appropriate. (4.3.6)
14.00 to 14.30	Assessor Review Time	
14.30 to 15.00	Partners Names to be confirmed	Questions may include: In working in partnership what are the benefits to the customers? (3.4.1) How have you developed co-ordinated working relationships? (3.4.2)
15.00 to 16.00	Closing meeting	Closing meeting with results

Changes in relation to the five criteria

The assessor should provide brief bullet points for each of the criteria to show what new evidence has been provided

Criterion 1 – CUSTOMER INSIGHT

Criterion 2 – THE CULTURE OF THE ORGANISATION

Criterion 3 – INFORMATION AND ACCESS

Criterion 4 – DELIVERY

Criterion 5 – TIMELINESS AND QUALITY OF SERVICE

Partial Compliance Elements

Element	Justification

Compliance Plus Elements

Element	Justification

Use of *Customer Service Excellence* logos

Provisional date for recertification visit	
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Section E: Notes

Section A

Definitions

The 57 elements in the CSE Standard can achieve one of four scores. These scores are defined below.

NON-COMPLIANCE: Your organisation/division/team has limited or no evidence of compliance, or what evidence you do have refers to only a small part of your organisation/division/team.

PARTIAL COMPLIANCE: Your organisation/division/team has some evidence that demonstrates compliance against the element but there are gaps.

FULL COMPLIANCE: Your organisation has good evidence that demonstrates that you comply fully with the requirements of the element. The evidence reflects that compliance is consistent across your organisation/division/team.

COMPLIANCE PLUS: Your organisation/division/team has shown that it has exceeded the requirements of the Standard against an element, demonstrated exceptional practice, or can be used as an exemplar for others within or beyond your sector.

To achieve *Customer Service Excellence* certification, an organisation/division/team:

- must not have any non-compliance scores;
- must have demonstrated compliance with 46 out of 57 elements in the Standard, within acceptable tolerances across the five criteria.

The maximum number of partial compliances allowed within each criterion is shown in the table below.

Criterion	1	2	3	4	5	Total
Number of elements in the criterion	11	11	12	13	10	57
Maximum number of partial compliances allowed	2	2	2	3	2	11

Section B

The scope of the assessment is to establish whether or not your organisation/division/team meets the requirements of the *Customer Service Excellence* Standard. Your report is based exclusively on factors which have been used to inform the assessor's recommendation about your certification to the scheme.

Section C

To maintain certification to the *Customer Service Excellence* Standard, your assessor is required to undertake annual review visits following your initial certification. The first review visit should be approximately 12-months after your initial certification.

The main focus for review visits will be to ensure that you remain compliant with the *Customer Service Excellence* Standard, to discuss changes have occurred over the past year, and to explore your response to development points/partial compliances raised at the previous visit.

Prior to your first annual review visit, your assessor will send you an assessment plan which will cover the following activities:

- talking to customers, staff and other stakeholders to obtain views on changes to the service
- observing the service in action (if appropriate)
- checking the correct use of the CSE logo
- reviewing development points, Partial Compliances and Compliance Plus scores.

They may also ask you to submit documentation which they will review before the 'on-site' phase of the assessment but a formal document review only takes place at initial/recertification assessments.

At the end of your 12-month review visit, the assessor will agree a provisional date for your 24-month review visit.

Section D

Please see the above notes for what to expect for your 24-month review visit.

At the end of this visit, your assessor will look at provisional dates for your recertification assessment.

CSE Assessment Report
Revision 16 – 24th May, 2021