Archie Homes

STAIRS Procedure

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Document checklist	
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Archie Homes will provide this document, on request at no cost, in large print, in Braille, in audio or other non-written format, and in a variety of languages.

1. Purpose

This procedure sets out the mandatory step-by-step process that Archie Homes staff must follow when receiving, processing, and closing resident information requests under the STAIRS Policy. It applies to all staff, contractors, and partner organisations who receive or handle resident information requests through any channel (portal, email, letter, phone, or in person).

This document should be read alongside the STAIRS Policy, which sets out the categories of information residents are entitled to access and the overarching response.

2. Procedure Overview

Step	Action	Primary Owner	Target Timeframe
1	Receipt and Logging	Receiving staff member	1 working day
2	Acknowledgement	Resident Services Team	2 working days
3	Identity and Eligibility Verification	Handling Officer	Within acknowledgement window
4	Accessibility Check	Handling Officer	Before response preparation
5	Information Retrieval and Preparation	Handling Officer / Supervisor (SARs)	Per policy timeframe

Step	Action	Primary Owner	Target Timeframe
6	Response and Delivery	Handling Officer	Per policy timeframe
7	Delay Management (if needed)	Handling Officer / Team Manager	Before deadline
8	Quality Assurance and Closure	Housing Team	Monthly
9	Escalation Handling (if needed)	Housing Management Team	As raised

3. Step 1 — Receipt and Logging

1. Any Archie Homes employee receiving a resident information request (by portal, email, letter, phone, or in person) must log it 1 working day of receipt.

2. The log must capture resident name and tenancy reference, date received, channel, request category (per STAIRS Policy Section 4), description of request, and any identified accessibility need.

3. Requests received outside office hours or via general inboxes must be triaged on the next working day.

4. Step 2 — Acknowledgement

1. An acknowledgement must be sent to the resident within 2 working days of receipt, confirming:

- The category the request has been logged under
- The applicable response timeframe
- The named officer or team handling the request

2. If the request is a Subject Access Request (SAR), it must be flagged and routed to the Data Protection Officer (DPO) within 1 working day, in parallel with the standard acknowledgement.

3. If the request is unclear or incomplete, the handling officer must contact the resident within 2 working days to clarify scope. The response clock does not formally start until the scope is confirmed.

5. Step 3 — Identity and Eligibility Verification

1. For requests involving personal, financial, or tenancy-specific data, the handling officer must verify the requester's identity against Archie Homes' tenancy records (name, address, date of birth, or account security questions).

2. Requests made on behalf of a resident (e.g., by a family member, advocate, or legal representative) require documented evidence of authorisation (signed consent or power of attorney) before information is released.

3. Where verification cannot be completed, the officer must inform the resident in writing of what is required and pause the response clock until resolved.

6. Step 4 — Accessibility Check

1. Before preparing the response, the officer must check the resident's record for any recorded accessibility or format preferences (large print, Braille, audio, translation, etc.).

2. If no preference is recorded but the request itself or prior contact suggests a need, the officer must confirm the preferred format with the resident before finalising the response and update the resident's record accordingly, so the preference is captured for future contact.

7. Step 5 — Information Retrieval and Preparation

1. The officer retrieves the relevant information from the appropriate source system:

- Tenancy and rent data: Housing Management System (1090)
- Repairs history: Repairs/Asset Management spreadsheet/Pinnacle
- Compliance certificates: Compliance tracker
- Personal data (SAR): coordinated centrally by the DPO across all systems

2. All information is reviewed for accuracy and currency before release. Any data more than 12 months old that may have changed (e.g., rent balances) must be refreshed prior to sending.

3. Third-party personal data (e.g., relating to other household members or neighbours in an ASB case) must be redacted in line with the Data Protection and Privacy Policy unless a lawful basis exists for disclosure.

4. A second-person check (peer or supervisor review) is mandatory for all SARs and any disclosure involving health, safety, or vulnerability data before release.

8. Step 6 — Response and Delivery

1. The response is sent via the resident's preferred or originating channel, in the confirmed accessible format, within the applicable timeframe.

2. The response must include: the information requested (or a clear reason for any information withheld, with reference to the relevant legal basis), and details of how to query or escalate the response.

9. Step 7 — Delay Management

1. If a response cannot be completed within the published timeframe, the handling officer must, before the deadline expires:

- Notify the resident of the delay, the reason, and a revised target date
- Escalate the case to their Team Leader/Manager
- Update our records/tracker to "Delayed" with justification recorded

2. Repeated or systemic delays (3 or more in a rolling month for one team) trigger a mandatory review by The Director of Housing & Support, including root-cause analysis and a remediation plan.

10. Step 8 — Quality Assurance and Closure

1. Closed requests are subject to monthly sample quality assurance review (minimum 10% of closed TIRs, or 100% of SARs), checking timeliness, accuracy, accessibility compliance, and tone of response.

2. Findings are recorded and reported to the Resident Services Manager, feeding into the quarterly STAIRS compliance report.

3. Any QA failures requiring correction (e.g., inaccurate or incomplete information sent) must trigger a corrective follow-up to the resident within 2 working days of identification.

11. Step 9 — Escalation Handling

1. If a resident raises dissatisfaction with the handling of their request, this is logged as a complaint under the Complaints Handling Policy and not treated as a new issue.

2. The original request record must be linked to the complaint record for full audit trail purposes.

3. The Housing & Support Director reviews all escalations relating to STAIRS requests monthly to identify systemic issues.

12. Records Retention

All TIR records, including correspondence and evidence of verification and delivery, are retained for 6 years from closure in line with Archie Homes' Data Retention Schedule, except SAR records, which follow the retention period set out in the Data Protection and Privacy Policy.

13. Exceptions

Any deviation from this procedure (e.g., extended timeframes due to system outage, exceptional volume, or complex multi-system SARs) must be authorised by the Housing & Support and recorded in the tracker with justification.

14. Related Documents

- STAIRS Policy (Social Resident Access to Information Requirements)
- Data Protection and Privacy Policy
- Complaints Handling Policy
- Data Retention Schedule
- Equality, Diversity and Inclusion Policy

15. Review

This procedure will be reviewed annually, or sooner in response to regulatory change, system changes, or audit findings. Review will be led by the Resident Services Manager with sign-off from the Customer & Resident Services Lead.