

# Compliance Assessment Survey Results 2025-2026

## About this report

This report summarises 39 completed responses to the Compliance Assessment survey. Providers can access the survey after completion of their compliance assessment through the portal home page in the Community Housing Regulatory Information System (CHRIS). A new survey process was implemented in June 2025, and these are the first results reported under the new arrangements; reporting of survey results before this time was fragmented, which makes earlier results difficult to use consistently as comparative data.

Survey results are used to understand provider experience, identify recurring strengths and improvement opportunities, and inform ongoing enhancements to CHRIS, guidance material, support resources and the compliance assessment process. Results are presented in aggregate and de-identified form to support public distribution. Free-text responses have been coded into themes and paraphrased, not attributed to individual providers or respondents.

## Important interpretation note

Results should be read as indicative feedback from participating respondents rather than a representative measure of all provider experience. Percentages are included to show the pattern of responses, but should be considered alongside the low response rate, valid response numbers and recurring themes from free-text feedback. **Valid responses** are the responses used to calculate percentages for each question; blank responses and, where relevant, Not applicable responses are excluded. The narrative focuses on findings that are consistent across the survey results and comments.

## Executive summary

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Overall feedback was positive. Respondents generally reported strong satisfaction with NRSCH information and resources, high confidence in the professionalism and understanding demonstrated by staff, and broad support for the reasonableness of evidence requirements. CHRIS feedback was also positive overall, although system usability and evidence management were the most common areas identified for improvement.

Survey feedback suggests recent investment in improved CHRIS functionality, knowledge articles and practical CHRIS resources is contributing to improved provider experience. Respondents identified knowledge articles, CHRIS steps, data definitions and guidance notes as useful examples of resources that supported the process. Feedback also pointed to the value of clearer upload pathways, navigation support and guidance on evidence expectations, while CHRIS accessibility and usability received positive overall ratings. Together, this indicates that clearer resources and system improvements are helping providers understand expectations, navigate the compliance process and complete returns with greater confidence.

- 87% of valid responses were satisfied or extremely satisfied with information and resources.
- 100% rated staff professionalism as good or very good, the strongest measured result.
- 89% of evidence ratings across the seven outcomes were appropriate or very appropriate.
- 82% were satisfied or extremely satisfied with CHRIS accessibility and usability, while free-text comments show clear opportunities to streamline navigation, evidence upload and document management.
- The most frequently selected benefits of the regulatory system were improved proactive management of services, assets and risks, improved business processes and systems, improved regulatory compliance and identifying areas for business improvement.

## Survey profile

The survey had a low response rate. Of the 220 surveys issued, 43 responses were received and only 39 surveys were completed. This represents a completed response rate of approximately 18%, which limits the extent to which the results can be treated as representative of all providers issued with the survey. The findings should therefore be read as indicative feedback from participating respondents rather than a comprehensive view of provider experience across the full survey population. Despite this limitation, the responses still provide useful insight into key strengths, recurring issues and practical improvement opportunities, particularly where themes are consistent across both quantitative results and free-text comments.

Future response rates may be improved by clearly explaining how feedback will be used and sending targeted reminder messages before the closing date. Participation may also increase if the survey is promoted through analyst contact with providers, particularly where analysts already have regular engagement with the organisation.

Table 1: Survey profile

| Item                      | Result                           |
|---------------------------|----------------------------------|
| Completed responses       | 39                               |
| Jurisdictions represented | 6                                |
| Source file               | Compliance Assessment survey CSV |

## Overall quantitative results

Positive responses are defined as satisfied or extremely satisfied, good or very good, or appropriate or very appropriate, depending on the response scale. Not applicable and blank responses are excluded from percentages.

Graph 1 and Table 2 data show consistently positive feedback across the key survey measures, with all positive response rates above 80%. Staff-related measures were the strongest results, particularly professional engagement at 100% and staff understanding of provider organisations at 97%. Evidence guidelines, recommendations, information and resources were also rated positively, while CHRIS accessibility and usability, although still favourable at 82%, was the lowest-rated measure and remains the clearest area for further improvement.

Graph 1: Positive response rate for each key survey measure



**Table 2: Positive response rates by survey measure**

| Measure                                                      | Positive responses | Valid responses | Positive % |
|--------------------------------------------------------------|--------------------|-----------------|------------|
| Information and resources satisfaction                       | 34                 | 39              | 87%        |
| Staff understood provider organisation/service model         | 38                 | 39              | 97%        |
| Professional engagement by staff                             | 39                 | 39              | 100%       |
| Consistency applying evidence guidelines                     | 37                 | 39              | 95%        |
| Evidence requirements were reasonable, all outcomes combined | 244                | 273             | 89%        |
| Recommendations were clear and achievable                    | 22                 | 24              | 92%        |
| Board/governing body engagement                              | 34                 | 39              | 87%        |
| CHRIS accessibility and usability satisfaction               | 32                 | 39              | 82%        |

### Response distribution for selected measures

Recommendations were rated clearly and achievable by most valid respondents, but the high number of *Not applicable* responses suggests not all providers received or needed recommendations. Board and governing body engagement was also viewed positively, with most respondents rating engagement as good or very good.

**Table 3: Response distribution of selected measures**

| Measure                              | Response            | Count | % of all responses |
|--------------------------------------|---------------------|-------|--------------------|
| Information/resources satisfaction   | Extremely satisfied | 19    | 49%                |
|                                      | Satisfied           | 15    | 38%                |
|                                      | Neutral             | 5     | 13%                |
| CHRIS accessibility and usability    | Extremely satisfied | 11    | 28%                |
|                                      | Satisfied           | 21    | 54%                |
|                                      | Neutral             | 6     | 15%                |
|                                      | Dissatisfied        | 1     | 3%                 |
| Recommendations clear and achievable | Very good           | 14    | 36%                |
|                                      | Good                | 8     | 20%                |
|                                      | Neutral             | 2     | 5%                 |
|                                      | Not Applicable      | 15    | 38%                |
| Board/governing body engagement      | Very good           | 16    | 41%                |
|                                      | Good                | 18    | 46%                |
|                                      | Neutral             | 4     | 10%                |
|                                      | Very Poor           | 1     | 3%                 |

# What is going well

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## Staff support and professionalism

Respondents consistently valued direct contact with analysts. Comments described tailored explanations, prompt clarification of queries, and helpful guidance during the return process.

## Information and resources

Evidence guidelines, knowledge articles, CHRIS steps, data definitions and guidance notes were repeatedly identified as useful. This suggests the core resource base is supporting providers to understand evidence expectations and complete returns.

## CHRIS improvement compared with previous experience

While system usability remains an improvement area, several respondents noted that the new platform is easier to use, better laid out, or a significant improvement on the previous system. Examples of improvements include clearer access to compliance returns through the provider portal, more practical CHRIS steps and knowledge articles, improved guidance on evidence requirements, and better-structured upload pathways that help providers understand what information is required and where it should be submitted.

## Regulatory value and business improvement

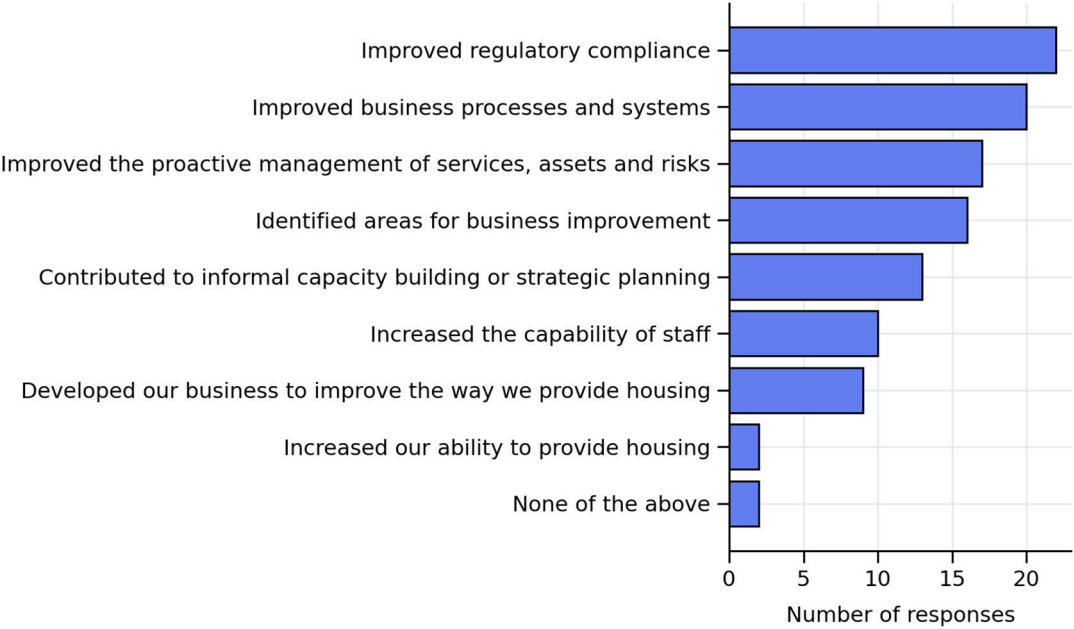
When asked about the benefits that regulation brings to their organisation, many respondents selected stronger risk management, better business processes, improved compliance and identification of improvement areas. Free-text feedback also indicates the process can support internal audit, governance focus and staff capability.

**Table 4 : Benefits selected through the survey**

| Benefit selected                                                | Count | % of responses |
|-----------------------------------------------------------------|-------|----------------|
| Improved regulatory compliance                                  | 22    | 56%            |
| Improved business processes and systems                         | 20    | 51%            |
| Improved the proactive management of services, assets and risks | 17    | 44%            |
| Identified areas for business improvement                       | 16    | 41%            |
| Contributed to informal capacity building or strategic planning | 13    | 33%            |
| Increased the capability of staff                               | 10    | 26%            |
| Developed our business to improve the way we provide housing    | 9     | 23%            |
| None of the above                                               | 2     | 5%             |
| Increased our ability to provide housing                        | 2     | 5%             |

Respondents could select more than one benefit, so counts and percentages for Graph 2 and Table 4 may add to more than the total number of completed responses.

Graph 2: Benefits of the regulatory system selected by respondents



# Opportunities for improvement

Opportunities for improvement are presented as practical areas where provider feedback can inform ongoing refinement of regulatory processes. While overall results were positive, respondents identified opportunities to make CHRIS easier to use, strengthen guidance and training, improve alignment with other reporting requirements, and continue building a more proportionate and consistent regulatory experience. These themes provide a useful basis for targeted action by Registrars and ongoing improvement across the NRSCH.

Improvement opportunities were identified from quantitative results and coded free-text responses. The themes below do not attribute feedback to individual organisations.

**Table 5: Opportunities for improvement by theme**

| Theme                                                             | Number of responses with theme |
|-------------------------------------------------------------------|--------------------------------|
| Better alignment with other reporting and jurisdictions           | 18                             |
| Improve CHRIS navigation, evidence upload and document management | 9                              |
| More practical guidance, examples and checklists                  | 8                              |
| Streamline and reduce regulatory burden                           | 7                              |
| Training, refreshers and videos                                   | 5                              |
| Review metrics, thresholds and regulatory scope                   | 4                              |

## 1. Continue to streamline the compliance process

Providers asked for a more proportionate, risk-based approach, particularly where organisations are smaller, have limited funded properties, or are already subject to other reporting requirements.

### How registrars are acting on feedback:

- Registrars are building on this feedback through a shared program of work to enhance the compliance process and make it more proportionate, consistent and easier to navigate. Recent practice reviews of the compliance and scheduling framework, data collection and reporting provide a strong foundation for ongoing improvement, with a review of the Financial Performance Report also underway.
- Registrars are also contributing to the current review of Australia's community housing sector and its regulatory systems, helping to identify practical opportunities to modernise regulation so it continues to support sector growth, protect public assets and remain fit for the future.

## 2. Strengthen CHRIS evidence management and navigation

Common suggestions included clearer upload areas by performance outcome, better visibility of uploaded and outstanding evidence, the ability to link documents across returns or entities, clearer labels for provider feedback or draft comments, improved document archiving, and support for multiple portal users.

### How registrars are acting on feedback:

- CHRIS enhancements are already being delivered to make the system easier for providers to use. In October 2025, new functionality was introduced for Nominated Main Contacts who manage

multiple provider accounts, allowing access to associated accounts through a single login and reducing administrative effort.

- Further improvements are continuing, including support for multiple portal users where there is a demonstrated business need. This functionality, implemented in January 2026, gives providers more flexibility to involve the right staff in preparing and submitting compliance information.

### 3. Provide more practical examples, checklists and templates

Providers asked for clearer examples of what good evidence looks like, checklists of documents required, more detailed guidance on calculations and figures, and advance notice of new or changed requirements.

#### How registrars are acting on feedback:

- Registrars are continuing to strengthen practical guidance for providers. Updated performance metric information was released in early 2026 to support clearer expectations, improve oversight and better align guidance with sector needs, drawing on established practice from the Victorian model.
- The NRSCH program of work also includes projects to:
  - develop standardised evidence templates or checklists for each Performance Outcome,
  - explore early access to compliance returns where operationally feasible, and
  - improve change management so providers have clearer expectations and more support when requirements change.

### 4. Expand training and refresher support

Feedback indicates value in short how-to videos, webinars, online refreshers and training in the lead-up to returns, especially for providers that do not use CHRIS regularly.

#### How registrars are acting on feedback:

- Registrars are expanding practical training and refresher support so providers can more easily understand and apply CHRIS changes. Short demonstration videos are being used to explain system updates in a simple and accessible way, allowing providers to revisit guidance at their own pace and at the point they need it.
- Improved documentation is also being made available through CHRIS knowledge articles, giving providers clearer step-by-step support and a consistent reference point during return preparation. This work is being complemented by ongoing system improvements that aim to make CHRIS more intuitive, reduce the need for manual guidance, and support users to complete key tasks with greater confidence.

### 5. Improve alignment and reduce duplication

Some feedback highlighted duplication with jurisdictional or funder reporting, including requests to align timing, data definitions and submission pathways where feasible.

#### How registrars are acting on feedback:

- NRSCH Registrars continue to work with Western Australia and Victoria Registrars to improve consistency, strengthen data definitions and better align reporting requirements where feasible.



This collaborative work supports a more joined-up regulatory experience for providers and helps reduce duplication across jurisdictions over time.

## 6. Review selected metrics, thresholds and scope questions

A smaller but important set of comments raised questions about eviction thresholds, tenant satisfaction scoring, affordable housing definitions, development project reporting and minimum information requirements. These matters may warrant further policy review or explanatory guidance.

### Summary - Response actions

The response actions below summarise how the survey findings can be translated into practical next steps. They distinguish between areas to maintain because they are working well, areas to improve through targeted operational changes, and areas to review where further analysis or policy consideration may be needed.

**Table 6: Summary of response actions**

| Category | Action                                                                                                                 |
|----------|------------------------------------------------------------------------------------------------------------------------|
| Maintain | Continue tailored analyst support and relationship-based guidance, as this was one of the strongest positive themes.   |
| Maintain | Keep evidence guidelines, knowledge articles, data definitions and CHRIS steps current and easy to find.               |
| Improve  | Develop a practical evidence checklist and examples of acceptable evidence by performance outcome.                     |
| Improve  | Add or refresh short training videos and webinar materials before major return periods.                                |
| Improve  | Prioritise CHRIS usability enhancements that improve evidence upload, navigation, document visibility and archiving.   |
| Review   | Consider options for a more proportionate compliance pathway for lower-risk or smaller providers.                      |
| Review   | Map areas of duplication with jurisdictional, funder or scheme reporting to identify feasible alignment opportunities. |
| Review   | Clarify regulatory scope and rationale for selected performance metrics where provider feedback shows uncertainty.     |

## Appendix A: Method and limitations

- The analysis uses completed survey records only. The non-response row containing benefit labels was excluded from all counts.
- Percentages are calculated using valid responses for the relevant question. Not applicable and blank responses are excluded where appropriate.
- For evidence reasonableness, ratings across all seven National Regulatory Code outcomes were combined to provide an overall evidence measure.
- Free-text responses were coded into themes using recurring language and concepts. The report paraphrases comments to protect respondent and provider confidentiality.
- This document is designed for publication and therefore does not reproduce respondent names, provider-specific comments or identifiable quotations.