



**15 January 2025**

<b>Title</b>	<b>ANNUAL COMPLAINTS AND COMPLIMENTS REPORT 2023/24 FOR ADULT SOCIAL CARE</b>
<b>Purpose of the report</b>	To note the report for information
<b>Report status</b>	Public report
<b>Report author</b>	Nayana George – Information Rights Services Manager
<b>Lead Councillor</b>	Councillor Gittings, Lead Councillor for Adult Social Care
<b>Corporate priority</b>	Healthy Environment
<b>Recommendations</b>	<ol style="list-style-type: none"><li>1. That the Committee notes the content of the report</li><li>2. That the action taken in response to learning from complaints, as described in the summary of Adult Social Care Complaints &amp; Compliments 2023/24, attached Appendix A to the report, be noted.</li></ol>

## **1. Executive Summary**

- 1.1. Adult Social Care recognises that there will be occasions when complaints are made. This report tells you how many complaints were received in 2023/24 and were dealt with using either the Council's Corporate Complaints Procedure or the Statutory Complaints Procedure for Adult Social Care. It also summarises the main types of complaints we have received and provides some examples where we have improved as a result of learning from these complaints.

## **2. Policy Context**

- 2.1. Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 require that Local Authorities operate a complaints procedure. In September 2009, the Department of Health introduced a complaint procedure to cover both adult social care and health services. This meant a 3 stage complaints procedure became a 1 stage complaints procedure. Following investigation of the complaint by the Council, if the complainant is not satisfied with the outcome the complainant is advised to contact the Customer Relations & Information Governance Service Manager, to share their concerns with a view to possibly reviewing them with a senior manager or proceed to the Local Government & Social Care Ombudsman.
- 2.2. Complaints relating to Adult Social Care that fall outside of the scope of the statutory process are investigated in accordance with the Council's Corporate Complaints Procedure. Reading Borough Council's Corporate Complaints Procedure gives an opportunity for those who are not 'qualifying individuals' under the social services legislation, to still be able to complain about Adult Social Care.

- 2.3. Qualifying individuals are defined in national guidance as the Service User or their appointed representative which can be a family member, friend, or Advocate. The timescale for responding to complaints is between 15 working days and three months, depending on the seriousness and complexity of the complaint. The guidance provides a risk matrix to assist the Customer Relations & Information Governance Service Manager, who is the designated Complaints Manager for the Council, to assess the complaint.
- 2.4. Compliments can be an indicator of when the Council has performed well and can highlight the positive outcomes for the public who are in contact with us or that we provide a service to.

### **3. The Proposal**

- 3.1. The purpose of this report is to provide an overview of complaints and compliments activity and performance for Adult Social Care for the period from 1 April 2023 to 31 March 2024.
- 3.2. During this period the service received 50 statutory complaints, which is a 55.1% decrease over the 89 received in 2022/23, and 7 corporate complaints, which is a decrease of 30% over the 10 received in 2022/23. We did not receive any requests for a corporate Stage 2 investigation during this period.
- 3.3. The main themes for the period 2023/24 for both corporate and statutory complaints are:
  - Quality of Service Provided = 43 (75%)
  - Staff Conduct = 5 (8.7%)
  - Financial = 5 (8.7%)
- 3.4. A summary of Adult Social Care Complaints and Compliments 2023/24 is at Appendix A. This will also be made publicly available through the Council's website after this committee meeting, in January 2025.
- 3.5. The Appendix highlights some examples of learning from complaints in the past year along with key service improvements as a result of the complaints received, which the Committee is invited to note.

### **4. Contribution to Strategic Aims**

- 4.1. The Complaints Service provided by the Customer Relations Team contributes to the Service's aims to enhance emotional wellbeing and deliver outstanding services for service users who may be dissatisfied with the Adult Social Care service and those needing protection through Adult Safeguarding. It does this by providing an impartial and supportive service to service users and their families who wish to complain or raise a concern and ensuring that there is learning from complaints.

### **5. Environmental and Climate Implications**

- 5.1. There are no environmental and/or climate implications arising from this report.

### **6. Community Engagement**

Information about the complaints or compliments process is provided verbally to service users via the Social Care Teams as well as the Customer Relations Team. Leaflets on the procedures are also widely distributed by the Social Care Teams and available in a variety of formats and languages on request.

- 6.1. Service Users and their carers are reminded of their right to complain or make a compliment and a leaflet is given out when the social care worker first meets with them.

Service users and/or their representative can also register a complaint via the web, email direct to the Customer Relations Team, in person, by phone, in writing or via an advocate.

- 6.2. State here whether any consultation, community engagement or information is required, or has been carried out voluntarily to help report authors consider the views of external people in preparing the report.
- 6.3. Translation services are provided for complainants whose first language is not English and advocacy support is available for service users who wish to make a complaint.

## **7. Equality Implications**

- 7.1. The Customer Relations & Information Governance Service Manager will ensure that the statutory complaints/compliments process is accessible to all customers regardless of their race, gender, disabilities, sexual orientation, age or religious belief.
- 7.2. The statutory complaints process is designed to ensure that any concern or issue faced by the service user, or their representative is addressed in a timely and impartial manner.
- 7.3. Due to the safeguards in process outlined above, there is no requirement to complete an Equality Impact Assessment in relation to this report.

## **8. Other Relevant Considerations**

- 8.1. There are none.

## **9. Legal Implications**

- 9.1. The Statutory foundations for the Adult Social Care Services Complaints Procedures are The Local Authority Social Services Act (1970), The Human Rights Act (1998), Statutory Instruments 2009 No.309 National Health Service, England Social Care, England, the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.

## **10. Financial Implications**

- 10.1. There are no Capital or Revenue implications arising from this report. The Council's Customer Relations Team provides value for money in effectively discharging the complaints process for the Council by attempting informal resolution of complaints. There are no specific financial risks arising from this report

## **11. Timetable for Implementation**

- 11.1. Not applicable.

## **12. Background Papers**

- 12.1. There are none.

## Appendix A

### 1. A summary of Adult Social Care Complaints and Compliments 2023/24

# ADULT SOCIAL CARE COMPLAINTS & COMPLIMENTS 2023/24 SUMMARY REPORT

## Introduction

This is a summary report of the data for complaints/compliments received by Adult Social Care for the financial year 2023/24.

The Council welcomes feedback through the complaints/compliments process which, as well as providing the opportunity to identify where services have not been provided as they should be, it also provides customer insight and helps identify any deficiency in practice, policies, and procedures. It is from these that the Service and those who work in it can continue to learn and improve practice and service delivery.

## Statutory Complaints Procedure

General complaints about Adult Social Care received from service users or their approved representatives (Family Member, Advocate or Power of Attorney) are dealt with through the statutory procedure. This will be one investigation by a senior officer in the relevant service area (Team Manager) and then signed off by either a Service Manager or Assistant Director.

At the Complainant's, or their representative's, request, an external, independent investigator can be appointed to investigate if the Information Rights Services Manager deems the complaints to be at medium or high risk. The following Risk Matrix is used to assess the complaint.

### **Risk Matrix**

The matrix below is used by the Customer Relations Team in confirming the level of risk once an expression of concern has been considered within the formal complaints procedure.

		LIKELIHOOD OF RECURRENCE				
		Rare	Unlikely	Possible	Likely	Almost certain
SERIOUSNESS	Low	Low	Low	Low	Moderate	Moderate
		Low	Moderate	Moderate	High	High
	Moderate	Low	Moderate	High	High	Extreme
		Moderate	Moderate	High	High	Extreme
	High	Moderate	High	High	Extreme	Extreme
		Moderate	High	Extreme	Extreme	Extreme

## Time Limits

Level of Risk	Maximum Time Limit for Completion
Immediate resolution	1 working day – confirm outcome
All accepted as formal complaints	Acknowledge within 3 working days
Low	15 working days
Moderate	25 working days
High	65 working days
Extreme	Up to 6 months

If the complainant feels that the issues they have raised remain unresolved, they have the right to request a meeting with the Service Manager/Assistant Director and the Information Rights Services Manager or refer their complaint to the Local Government & Social Care Ombudsman.

The Statutory Complaints process encourages the complainant and the Local Authority to consider resolving a complaint or concern informally through a face-to-face meeting or telephone discussion. It is the complainant's right to request the presence of the Information Rights Services Manager at any face-to-face meeting.

Some complaints may require immediate action including whether the matter should be considered as a safeguarding issue. If it is a safeguarding issue, the relevant procedures would take precedence over the complaints procedure.

### Corporate Complaints Procedure

The Corporate Complaints Procedure deals with complaints which do not meet the criteria for investigation through the Statutory Procedure (for example the complaint is made by a Provider or a family member who does not have consent from the service user to make the complaint) and is a 2-stage process. The first stage provides an opportunity for a local resolution of any problems which may arise, and it is expected that the majority of complaints will be resolved at this level, usually within 20 working days or less. Where the problems cannot be resolved to the complainant's satisfaction at a local level, Stage 2 of the process involves the investigation of the complaint by a more senior member of staff, usually within 30 working days or less and with a formal sign off by an Assistant Director.

Where the complainant feels that the issues they have raised remain unresolved, they have the right to refer their complaint to the Local Government & Social Care Ombudsman.

### Summary of Compliments and Complaints Activity, Quality Assurance & Learning

This report details information for the past year together with analysis of the data, quality assurance and information on service developments as a result of learning from complaints. Under the current monitoring system, information about complaints received directly by teams is reported to the Customer Relations Team upon receipt. This is to ensure that the Information Rights Services Manager is aware of all current complaints in order to monitor their progress and highlight cases that can be resolved through Alternate Dispute Resolution (ADR) to Team Managers and senior staff.

## Part 1 - Corporate Complaints

**Please Note:** The following tables include information for those complaints received and investigated at Stages 0 and 1 only, as complaints which go on to Stage 2 would count as being a duplicate complaint received for reporting purposes.

For information, the service did not receive any requests for a complaint to be investigated further at Stage 2 during this reporting period.

### Corporate Complaints Received

<b>Total Number of Corporate Complaints Received</b>	<b>Total No. Received</b>	<b>Stage 0</b>	<b>Stage 1</b>
2017/18	7	3	4
2018/19	9	1	8
2019/20	13	3	10
2020/21	17 (+30.8%)	2	15
2021/22	20 (+17.6%)	6	14
2022/23	10 (-50%)	2	8
2023/24	7 (-30%)	3	4

### Spread of Complaints Received across Teams

<b>Team</b>	<b>2023/24</b>	<b>% of Total</b>	<b>2022/23</b>	<b>% of Total</b>	<b>2021/22</b>	<b>% of Total</b>
CMHT	0	0	1	10%	2	10%
Commissioning	1	14.3%	3	30%	2	10%
Deputy's Office	0	0	1	10%	0	0
FAB Team	1	14.3%	0	0	1	5%
Finance	2	28.55%	0	0	1	5%
Localities Team	0	0	3	30%	3	15%
PBST	1	14.3%	0	0	3	15%
Public Health	0	0	1	10%	0	0
Safeguarding	2	28.55%	0	0	5	25%
Short-Term Team	0	0	0	0	3	15%
Wellbeing	0	0	1	10%	0	0
<b>Total</b>	<b>7</b>	<b>100%</b>	<b>10</b>	<b>100%</b>	<b>20</b>	<b>100%</b>

### Themes of Complaints Received

<b>Theme</b>	<b>2023/24</b>	<b>% of Total</b>	<b>2022/23</b>	<b>% of Total</b>	<b>2021/22</b>	<b>% of Total</b>
Communication	1	14.3%	1	10%	1	5%
Financial Issue	2	28.6%	0	0	7	35%
Lack of Support	0	0	0	0	2	10%
Policy Issue/Procedure	0	0	3	30%	4	20%

Quality of Service Provided	3	42.9%	3	30%	3	15%
Staff Conduct	1	14.3%	3	30%	3	15%
<b>Total</b>	<b>7</b>	<b>100%</b>	<b>10</b>	<b>100%</b>	<b>20</b>	<b>100%</b>

### How Complaint was Received

Method	2023/24	% of Total	2022/23	% of Total	2021/22	% of Total
E-mail	4	57.1%	3	30%	8	40%
Letter	1	14.3%	2	20%	2	10%
Telephone	2	28.6%	2	20%	8	40%
Webform	0	0	3	30%	2	10%
<b>Total</b>	<b>7</b>	<b>100%</b>	<b>10</b>	<b>100%</b>	<b>20</b>	<b>100%</b>

### Corporate Complaints Responded To

**Please Note:** As with the Complaints Received, this information relates to complaints which were responded to at either Stage 0 or Stage 1, but does not include any which were escalated to Stage 2 as these would be a duplication of the original complaint.

These figures may not be the same as for those received during the period, as some of the responses sent out were received during the end of the previous reporting year (2022/23)

For information, no responses to investigations were sent out during this reporting period.

### Outcomes for Complaints Investigated Formally to an Outcome

Outcome	2023/24	% of Total	2022/23	% of Total	2021/22	% of Total
Upheld	1	14.3%	1	10%	5	27.8%
Partially Upheld	0	0	0	0	5	27.8%
Not Upheld	3	42.85%	6	60%	8	44.4%
No Outcome	0	0	2	20%	0	0
Multiple Outcomes	3	42.85%	1	10%	0	0
<b>Total No. Sent Out</b>	<b>7</b>	<b>100%</b>	<b>10</b>	<b>100%</b>	<b>18</b>	<b>100%</b>

## Timescales for Complaints Investigated Formally to an Outcome

	2023/24	% of Total	2022/23	% of Total	2021/22	% of Total
Total No. Sent Out In Timescale	6	85.7%	7	70%	12	66.7%
Total No. Sent Out Over Timescale	1	14.3%	3	30%	6	33.3%

## Part 2 - Statutory Complaints

### Statutory Complaints Received

#### Total Number of Statutory Complaints Received

	Total No. Received	% Change over previous year	Stage 0	% Of total received	Stage 1	% Of total received
2017/18	79	+27.4%	22	27.8%	57	72.2%
2018/19	72	-8.9%	21	29.2%	51	70.8%
2019/20	84	+16.7%	30	35.7%	54	64.3%
2020/21	71	-15.5%	33	46.5%	38	53.5%
2021/22	93	+31%	50	53.8%	43	46.2%
2022/23	89	- 4.3%	58	65.2%	31	34.8%
2023/24	50	-55.1%	18	36.0%	32	64.0%

#### Total Number of Statutory Complaints Received, Split by Teams

Team	2023/24	% of Total	2022/23	% of Total	2021/22	% of Total
Advice & Wellbeing Hub	5	10%	2	2.2%	4	4.3%
Community Mental Health	0	0	1	1.1%	7	7.5%
Commissioning	7	14%	13	14.7%	7	7.5%
Community Reablement	2	4%	1	1.1%	0	0
Deputy's Office	0	0	0	0	2	2.2%
Discharge to Assess Team	0	0	3	3.4%	0	0
DoLS	0	0	1	1.1%	0	0
Finance	0	0	1	1.1%	1	1.1%
Financial Assessments & Benefits	2	4%	0	0	1	1.1%
Independent Living	0	0	1	1.1%	0	0



Learning Disabilities	2	4%	0	0	0	0
Localities	4	8%	27	30.4%	44	47.2%
Long-Term Team	4	8%	2	2.2%	1	1.1%
Mental Health Team	2	4%	12	13.6%	0	0
Occupational Therapists	3	6%	0	0	1	1.1%
Personal Budget Support	3	6%	8	9.0%	6	6.4%
Physical Disabilities and Older Persons' Team	1	2%	0	0	0	0
Preparation for Adulthood Team	0	0	8	9.0%	0	0
Primary Care Network	0	0	1	1.1%	0	0
Public Health	0	0	0	0	1	1.1%
Review Team	2	4%	3	3.4%	0	0
Safeguarding Adults	5	10%	2	2.2%	2	2.2%
Shared Lives Team	0	0	1	1.1%	0	0
Short-Term Team	6	12%	2	2.2%	16	17.2%
Supported Living	1	2%	0	0	0	0
Transformation Team	1	2%	0	0	0	0
<b>Total</b>	<b>50</b>	<b>100%</b>	<b>89</b>	<b>100%</b>	<b>93</b>	<b>100%</b>

### Total Number of Statutory Complaints Received, Split by Theme

Theme	2023/24	% of Total	2022/23	% of Total	2021/22	% of Total
Communication	2	4%	12	13.5%	19	20.4%
Data Breach	0	0	1	1.1%	0	0
Financial Issue	3	6%	10	11.2%	7	7.5%
Lack of Support	0	0	7	7.9%	5	5.4%
Policy Issue/Procedure	0	0	7	7.9%	6	6.5%
Quality of Service Provided	40	80%	40	44.9%	49	52.7%
Staff Conduct	4	8%	12	13.5%	7	7.5%
Time Taken to Resolve Issue	1	2%	0	0	0	0
<b>Total</b>	<b>50</b>	<b>100%</b>	<b>89</b>	<b>100%</b>	<b>93</b>	<b>100%</b>

## How the Complaints were Received

Method	2023/24	% of Total	2022/23	% of Total	2021/22	% of Total
E-mail	29	58%	48	53.9%	48	51.6%
Letter	6	12%	9	10.1%	9	9.7%
Telephone	11	22%	20	22.5%	24	25.8%
Webform	4	8%	12	13.5%	12	12.9%
<b>Total</b>	<b>50</b>	<b>100%</b>	<b>89</b>	<b>100%</b>	<b>93</b>	<b>100%</b>

## Statutory Complaints Responded To

**Please Note:** As with the corporate complaints, above, these figures may not be the same as for those received during the period, as some of the responses sent out were received during the end of the previous reporting year (2022/23)

Please note three of the 50 complaints received were withdrawn by the complainant once the investigation had commenced, with the remaining 47 being investigated to an outcome.

## Outcomes of Statutory Complaints Investigated Formally to an Outcome

Outcome	2023/24	% of Total	2022/23	% of Total	2021/22	% of Total
Upheld	9	19.1%	28	31.8%	12	27.9%
Partially Upheld	2	4.3%	9	10.2%	9	20.9%
Not Upheld	18	38.3%	31	35.2%	10	23.3%
No Outcome	0	0	4	4.5%	1	2.3%
Multiple Outcomes	18	38.3%	16	18.3%	11	25.6%
<b>Total</b>	<b>47</b>	<b>100%</b>	<b>88</b>	<b>100%</b>	<b>43</b>	<b>100%</b>

## Timescales for Responding to Statutory Complaints

**Note:** For the statutory complaints, we worked to an initial 15 working day response date extending to no more than 25 working days.

	2023/24	% of Total	2022/23	% of Total	2021/22	% of Total
Total No. Responded to in Timescale	<b>33</b>	<b>70.2%</b>	<b>62</b>	<b>70.5%</b>	<b>24</b>	<b>55.8%</b>
Total No. Responded to Over Timescale	<b>14</b>	<b>29.8%</b>	<b>26</b>	<b>29.5%</b>	<b>19</b>	<b>44.2%</b>

## **Learning & Service Improvements following Complaints received**

Complaints and concerns provide essential and valuable feedback from our service users and customers. Listening to customers and reflecting on examples of where we have not got it right can reveal or highlight opportunities for improvement (for example, a deficiency in practice, communication or service delivery). Even if a complaint is not upheld, lessons can be learnt from that complaint with service developments and improvements as a result. The complaints process and the feedback gained is an integral part of the quality assurance process, which feeds into the development and monitoring of services. Learning from complaints are reviewed by the Adult Social Care's Care & Quality Board to ensure lessons have been understood and are embedded into practice. Below are some examples of learning from complaints in the past year along with key service improvements as a result of the complaints received.

### **Examples of complaints and learning:**

#### Complaint 1:

A lack of availability of respite care and the process for applying for this provision.

#### Complaint partially upheld

#### Learning 1:

Ensure that allocated workers keep families informed of any delays in obtaining respite and alternative options available.

Working with care home providers to increase the availability and range of respite care for Reading residents.

#### Complaint 2:

Received poor service from the Reading Borough Council commissioned care provider. This poor service included bad timeliness (early and late calls), a missed care call, and false information in care notes.

#### Complaint Upheld.

#### Learning 2:

Reading Borough Council is investigating matters further in relation to this care provider. This includes further investigation from both our Commissioning and Provider Quality teams. In-person visits will form part of this investigation and will carry out their annual quality assessment.

#### Complaint 3:

Complainant stated you were unhappy with the 'passing information without your authority'. You had received a couple of calls from third parties but couldn't remember what about and assumes that someone at the Council had passed your contact details on to these third parties - Complaint Upheld.

#### Learning 3:

Remind staff of the importance of gaining and documenting consent to share information with other colleagues and the importance of good, regular, and effective communication with their service users.

Remind staff of expectations around documentation of all conversations, actions and meetings and staff should establish with the service user what information they (service user) want to be shared, with whom, and in what circumstances.

#### Complaint 4:

Requests to speak to the management team directly were denied.

Failure by the Care Team not to consider the prevailing market conditions and care availability within a reasonable distance has fundamentally undermined the service users right to family life.

#### Complaint – Partially upheld

#### Learning 4:

Entitlement & Assessment Officers to ensure the faire charging policy is not only given individuals but the process re contributions etc. also explained when carrying out financial assessments.

Team Manager to advise staff that its appropriate to share contact details with customers if they adhere to the basic lawful rules when sharing information.

Team Manager to ensure all staff involved keep all parties informed with any updates i.e., increase in personal budget.

#### **Service Improvements – in 2023/24:**

- ASC Quality and Contracts (Commissioning) Team have worked with 12 Providers in Reading to improve the quality of care provided by them, via either the Serious Concerns Framework (red flag) or Standards of Care Framework (amber flag). Of those twelve (12): Five (5) have been since green flagged which is a positive indication of their progress with their improvement planning and action plan. One (1) the Council no longer contract with due to a critical performance default, and in the interest of keeping residents safe. The remainder were either recently flagged or remain so, whilst the Council seek assurances of their improvement planning.
- ASC have invested in the Carers Partnership and the number of carers DPs has increased again to 199 from 146, the number of carers supported by advice and information, or assessments has increased to 1158 from 899. The Carers Partnership is assisting more carers so overall we have 1357 carers supported since October 2023 from 1045.
- The number of Care Act (1227 from 735) and short-term assessments (3100 from 2475) have increased dramatically
- ASC have cleared the Safeguarding referral backlog, with all new referrals seen within 48hrs
- The ASC Care and Quality Board continue to review all elements of care quality in the service, review lessons learnt from complaints and implement any agreed service improvements.

#### **Quality Assurance**

The Customer Relations Team carries out checks of all complaint responses to ensure the quality of the response and that the language and terminology used is made easy for the complainant to understand, particularly if the complainant has a disability. We have on occasion asked the investigating officer to translate reports and responses into Easyread.

Statistics indicate 100% of responses were checked by the Customer Relations Team before being sent out. The Information Rights Services Manager and her Team are also available to the complainant and the investigator for advice on best practice during the complaint investigation but remain impartial.

The Information Rights Services Manager will deliver training on investigating and responding to complaints on request. The Corporate Complaints Procedure is available on-line. The Adult Social Care statutory procedure is available on-line also. The Information Rights Services Manager attends Team Meetings to provide training and advice to Teams and Senior Managers when required. The Customer Relations Team has also improved processes to ensure upcoming responses are discussed and monitored at weekly meetings. The Social Care staff are in more regular contact with the Information Rights Services Manager and her team and are aware of their processes which has led to improved joint working for the benefit of the complainant. A case management system was introduced in July 2024 to assist with managing complaints across the Council and includes adult social care statutory complaints. Customers are able to log complaints via the RBC website into the new RBC case management system. A new webform was created and went live in July 2024.

## **Support Network**

The Information Rights Services Manager is the Chair to the Southern Region Complaints Managers' Group and a member of the National Complaints Managers' Group, which continues to support Customer Relations and Complaints Managers in sharing good practice, both nationally and locally. Where cases are complex the Information Rights Services Manager often seeks advice and guidance from Legal Services and the Local Government & Social Care Ombudsman's advice line.

## **Local Government & Social Care Ombudsman (LGSCO)**

The Local Government & Social Care Ombudsman's role is to investigate complaints about maladministration or administrative fault that led to injustice for the complainant. In some complaints the LGSCO may find evidence of administrative fault but no resultant injustice. The LGSCO should not investigate complaints about policy changes where the decision has been properly made.

Between 1 April 2023 and 31 March 2024, the Local Government & Social Care Ombudsman received 2 representations from dissatisfied service users for issues relating to Adult Care & Health Services, which is 3 less than the previous year. Of these 2 cases, one was about the Council's financial assessment and the customer's assessed contribution which the LGSCO investigated, the outcome was no fault found, the remaining one was about adult social care provided at home which was deemed premature and investigated at the LGSCO's request by the Council. The Council shared the findings with the LGSCO who closed the case without further investigation.

The LGSCO did not issue any formal reports finding maladministration by the Council.

## **Compliments**

The Customer Relations Team own the recording of compliments for the Council as a whole. Staff are reminded and encouraged to pass on all compliments to the Customer Relations Team's generic mailbox. As of July 2024, customers are encouraged to log their compliments via an online form on the RBC website.

In the year 2023/24, 12 compliments were received by the following Adult Social Care Teams: In the previous year 6 were recorded.

Examples:

ASC:

Just messaging to say thank you. Really appreciate you going out of your way to help my aunt. This has made a positive difference to both my aunt and myself.

ASC:

Dear W and R, both of you were very helpful today in spending time with my difficult patient. Many thanks for your input and taking time to speak so kindly and empathetically to patient and family. Your support and timely response was greatly valued. Kind regards. J

ASC:

Dear K, have a Lovely Merry Christmas and a happy new year! thank you very much for all your support, really appreciate

ASC:

J would like to send a big thank you to you all for helping her to return to her own home for Christmas. (Picture of J at home with thumbs up and a big smile!)

### **Contact Information: How to submit a compliment or a complaint**

Some complaints can be sorted out by discussing your problem with your Social Worker or a manager. If you want to make a complaint, you can contact the Council by telephone, letter, in person, by e-mail or via the website. [Complaint](#)

Telephone the Customer Relations & Information Governance Service Manager on 0118 937 2905 or e-mail: [Socialcare.Complaints@reading.gov.uk](mailto:Socialcare.Complaints@reading.gov.uk).

If you wish to make your complaint to us in writing, our address is: The Customer Relations Team, Reading Borough Council, Floor 2 South Rear, Civic Offices, Bridge Street, Reading, RG1 2LU.

Your complaint will be recorded and if we cannot sort out the problem immediately it will be passed for further investigation and action. The Customer Relations Team can take your complaint over the telephone and explain the complaints procedure in more detail or send you a leaflet explaining how to complain. The leaflet is also available in Council buildings or via the Council's website. You can also use these contact details to tell us if you have a concern (but do not want to make a complaint) or if you want to make a compliment about a service. [Login](#)