

Adult Social Care, Children's Services and Education Committee

14 January 2026



Reading
Borough Council
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Title	Annual Complaints and Compliments Report 2024/25 for Adult Social Care
Purpose of the report	To note the report for information
Report status	Public report
Report author	Nayana George – Information Rights Services Manager
Lead Councillor	Councillor Gittings, Lead Councillor for Adult Social Care
Corporate priority	Healthy Environment
Recommendations	<ol style="list-style-type: none">1. That the Committee notes the content of the report2. That the action taken in response to learning from complaints, as described in the summary of Adult Social Care Complaints & Compliments 2024/25, attached Appendix A to the report, be noted.

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 2024/25 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. The Council's Customer Experience Strategy includes key focus on complaints and listening to customers. It is part of our policy framework and strategic objectives.
- 2.5. 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 2024 to 31 March 2025.
- 3.2. During this period the service received 59 statutory complaints, which is an 18 % increase over the 50 received in 2023/24, and 13 corporate complaints, which is an increase of 85% over the 7 received in 2023/24. We received one Stage 2 request for a corporate complaint in 2023/24, however we did not receive any requests for a corporate Stage 2 investigation during this period.
- 3.3. The main themes for the period 2024/25 for corporate complaints are:
 - Financial Issue = 6 (46.1%)
 - Quality of Service Provided = 4 (30.8%)
 - Staff Conduct = 2 (15.4%)
 - Communication = 1 (7.7%)
- 3.4. The main themes for the period 2024/25 for statutory complaints are:
 - Quality of Service Provided = 23 (38.9%)
 - Staff Conduct = 10 (16.94%)
 - Communication = 10 each (16.94%)
 - Financial = 9 (15.2%)
- 3.5. A summary of Adult Social Care Complaints and Compliments 2024/25 is at Appendix A. This will also be made publicly available through the Council's website after this committee meeting, in January 2025.
- 3.6. 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.
- 4.2. The Council Plan has established five priorities for the years 2025/28. These priorities are:
 - Promote more equal communities in Reading
 - Secure Reading's economic and cultural success

- Deliver a sustainable and healthy environment and reduce our carbon footprint
- Safeguard and support the health and wellbeing of Reading's adults and children
- Ensure Reading Borough Council is fit for the future

4.3. In delivering these priorities, we will be guided by the following set of principles:

- Putting residents first
- Building on strong foundations
- Recognising, respecting, and nurturing all our diverse communities
- Involving, collaborating, and empowering residents
- Being proudly ambitious for Reading

4.4. Full details of the Council Plan and the projects which will deliver these priorities are published on the Council's website - [Council plan - Reading Borough Council](#). These priorities and the Council Plan demonstrate how the Council meets its legal obligation to be efficient, effective and economical.

5. Environmental and Climate Implications

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

6. Community Engagement

6.1. 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.

6.2. 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.

6.3. 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.

6.4. 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.

ADULT SOCIAL CARE COMPLAINTS & COMPLIMENTS

2024/25

SUMMARY REPORT

Introduction

This is a summary report of the data for complaints/compliments received by Adult Social Care for the financial year 2024/25.

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					
		RISK	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

Total Number of Corporate Complaints Received	Total No. Received	Change	Stage 0	Stage 1
2020/21	17	(+31%)	2	15
2021/22	20	(+18%)	6	14
2022/23	10	(-50%)	2	8
2023/24	7	(-30%)	3	4
2024/25	13	(+85%)	2	11

Spread of Complaints Received across Teams

Team	2024/25	% of Total	2023/24	% of Total	2022/23	% of Total
Community Mental Health Team	1	0	0	0	1	10%
Commissioning Deputy's Office	2	14.3%	1	14.3%	3	30%
FAB Team	1	14.3%	1	14.3%	0	0
Finance	2	28.55%	2	28.55%	0	0
Localities Team	0	0	0	0	3	30%
PBST	4	14.3%	1	14.3%	0	0
Public Health	0	0	0	0	1	10%
Safeguarding	1	28.55%	2	28.55%	0	0
Short-Term Team	1	0	0	0	0	0
Wellbeing	0	0	0	0	1	10%
Total	13	100%	7	100%	10	100%

Themes of Complaints Received

Theme	2024/25	% of Total	2023/24	% of Total	2022/23	% of Total
Communication	1	7.7%	1	14.3%	1	10%
Financial Issue	6	46.1%	2	28.6%	0	0
Lack of Support	0	0	0	0	0	0
Policy Issue/Procedure	0	0	0	0	3	30%
Quality of Service Provided	4	30.8%	3	42.9%	3	30%
Staff Conduct	2	15.4%	1	14.3%	3	30%
Total	13	100%	7	100%	10	100%

How Complaint was Received

Method	2024/25	% of Total	2023/24	% of Total	2022/23	% of Total
E-mail	3	23.1%	4	57.1%	3	30%
Letter	2	15.4%	1	14.3%	2	20%
Telephone	0	-	2	28.6%	2	20%
Webform	8	61.5%	0	-	3	30%
Total	13	100%	7	100%	10	100%

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.

Outcomes for Complaints Investigated Formally to an Outcome

Outcome	2024/25	% of Total	2023/24	% of Total	2022/23	% of Total
Upheld	5	38.4%	1	14.30%	1	10%
Partially Upheld	1	7.7%	0	-	0	-
Not Upheld	4	30.8%	3	42.85%	6	60%
No Outcome	1	7.7%	0	-	2	20%
Multiple Outcomes	2	15.4%	3	42.85%	1	10%
Total No. Sent Out	13	100%	7	100%	10	100%

Timescales for Complaints Investigated Formally to an Outcome

	2024/25	% of Total	2023/24	% of Total	2022/23	% of Total
Total No. Sent Out In Timescale	9	69.2%	6	85.7%	7	70%
Total No. Sent Out Over Timescale	4	30.8%	1	14.3%	3	30%
Total No. Sent Out	13	100%	7	100%	10	100%

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
2020/21	71	-15.5%	33	46.5%	38	53.5%
2021/22	93	+31.0%	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%
2024/25	59	+18.0%	18	36.0%	32	64.0%

Total Number of Statutory Complaints Received, Split by Teams

Team	2024/25	% of Total	2023/24	% of Total	2022/23	% of Total
Advice & Wellbeing Hub	7	11.6%	5	10%	2	2.2%
Community Mental Health	0	0	0	0	1	1.1%
Commissioning	2	3.2%	7	14%	13	14.7%
Community Reablement	2	3.2%	2	4%	1	1.1%
Deputy's Office	0	0%	0	0	0	0
Discharge to Assess Team	0	0%	0	0	3	3.4%
DoLS	0	0%	0	0	1	1.1%
Finance	0	0%	0	0	1	1.1%
Financial Assessments & Benefits	5	8.5%	2	4%	0	0

Team	2024/25	% of Total	2023/24	% of Total	2022/23	% of Total
Independent Living	0	0%	0	0	1	1.1%
Learning Disabilities	11	18.6%	2	4%	0	0
Localities	1	1.7%	4	8%	27	30.4%
Long-Term Team	0	0%	4	8%	2	2.2%
Mental Health Team	10	16.9%	2	4%	12	13.6%
Occupational Therapists	0	0%	3	6%	0	0
Personal Budget Support	3	6.0%	3	6%	8	9.0%
Physical Disabilities and Older Persons' Team	10	16.7%	1	2%	0	0
Preparation for Adulthood Team	0	0%	0	0	8	9.0%
Primary Care Network	0	0%	0	0	1	1.1%
Provider Services	1	1.7%	0	0	0	0
Public Health	0	0%	0	0	0	0
Review Team	6	10.2%	2	4%	3	3.4%
Safeguarding Adults	1	1.7%	5	10%	2	2.2%
Shared Lives Team	0	0%	0	0	1	1.1%
Short-Term Team	0	0%	6	12%	2	2.2%
Supported Living	0	0%	1	2%	0	0
Transformation Team	0	0%	1	2%	0	0
Total	59	100%	50	100%	89	100%

Total Number of Statutory Complaints Received, Split by Theme

Theme	2024/25	% of Total	2023/24	% of Total	2022/23	% of Total
Assessment Process	1	1.7%	0	0%	0	0%
Communication	10	16.9%	2	4%	12	13.5%
Complaints about provider	3	5.1%	0	0%	0	0%
Data Breach	0	0%	0	0%	1	1.1%
Failure to Resolve Issue	2	3.4%	0	0%	1	1.1%
Financial Issue	9	15.3%	3	6%	10	11.2%
Lack of Support	0	0%	0	0	7	7.9%

Theme	2024/25	% of Total	2023/24	% of Total	2022/23	% of Total
Policy Issue/Procedure	0	0%	0	0	7	7.9%
Quality of Service Provided	13	22.0%	40	80%	40	44.9%
Staff Conduct	10	16.9%	4	8%	12	13.5%
Service Provision	11	18.7%	0	0%	0	0%
Time Taken to Resolve Issue	0	0%	1	2%	0	0
Total	59	100%	50	100%	89	100%

How the Complaints were Received

Method	2024/25	% of Total	2023/24	% of Total	2022/23	% of Total
E-mail	45	76.3%	29	58%	48	53.9%
Letter	1	1.7%	6	12%	9	10.1%
Telephone	5	8.5%	11	22%	20	22.5%
Webform	8	13.5%	4	8%	12	13.5%
Total	59	100%	50	100%	89	100%

Statutory Complaints Responded To

Please note all 59 complaints were investigated to an outcome, none were withdrawn.

Outcomes of Statutory Complaints Investigated Formally to an Outcome

Outcome	2024/25	% of Total	2023/24	% of Total	2022/23	% of Total
Upheld	10	17.0%	9	19.1%	28	31.8%
Partially Upheld	9	15.2%	2	4.3%	9	10.2%
Not Upheld	18	30.5%	18	38.3%	31	35.2%
No Outcome	1	1.7%	0	-	4	4.5%
Multiple Outcomes	21	35.6%	18	38.3%	16	18.3%
Total	59	100%	47	100%	88	100%

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.

	2024/25	% of Total	2023/24	% of Total	2022/23	% of Total
Total No. Responded to in Timescale	34	57.6%	33	70.2%	62	70.5%
Total No. Responded to Over Timescale	25	42.4%	14	29.8%	26	29.5%
Total	59	100%	47	100%	88	100%

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:

Summary of complaint	Outcome	Learning
There was no contact to carry out R financial assessment before a letter dated 05 September 2024 was received confirming the financial assessment had been completed, despite being informed by Adult Care Services that Janet and Robert would be contacted to carry out the financial assessment.	Partially upheld	Unless indicated otherwise by the adult social care worker (on the financial assessment referral) the Financial Assessment and Benefits Officer completing the Financial Assessment should contact the service user (or their representative) directly when they carry out the assessment - for example, over the phone - to explain the financial assessment outcome and what that means in terms of invoices and how to pay.
There were no care charges invoices received between care starting in September 2024 and 19 March 2024.	Upheld	When reviewing Care Assessment and Support Plans, Adult Care Managers should ensure that there are appropriate next actions in place from the Care Assessment

		and Support Plan to purchase ongoing care, so as to avoid delays in paying provider invoices and avoid delays in raising invoices to service users for their assessed contributions.
Unhappy with the visit to mother on xxxx by, Social Work Apprentice; and the information shared about mother's care and support needs and how they are met at the care home.	Upheld	Care and support – completed. • Team Manager to monitor progress with assessment and outcomes for Mrs M – in progress. • All workers to be reminded of professionalism and clear, honest and respectful communication – completed.
<p>a) Non-compliance with the Care Act 2014 namely section 27 (delay to review of care and support plan or of support plan).</p> <p>b) Secondly that RBC are not following s42 of the Care Act 2014 (safeguarding Enquiry by local authority)</p>	<p>Upheld</p> <p>Not Upheld</p>	<p>Team Managers to ensure review of care and supports needs to be carried out without delay especially where safeguarding concerns are raised.</p> <p><u>S42</u> concerns raised have all been thoroughly investigated and it was concluded on all occasions that the concerns did not meet the three-parts safeguarding test.</p>

Service Improvements – in 2024/25:

- Adult Social Care has reduced the waiting time for a Care Act assessments
- There has been a reduction in the length of wait for a review and the number of people whose review is overdue
- Adult Social Care has Increase the number of carer assessments and the reduction in the length of wait for an assessment for the Service Users
- Has made improvements in the business intelligence data, enabling understanding of work allocated completed and due.
- There has been a reduction in waits for Safeguarding Concerns
- Increase in TEC in residents' home
- Increase the number of DoLs (Deprivation of Liberty safeguards) applications processed
- Robust Quality assurance of Provider Market is being carried out.

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 2024 and 31 March 2025, the Local Government & Social Care Ombudsman received 2 representations from dissatisfied service users for issues relating to Adult Care & Health Services, which is the same as the previous year. Of these 2 cases, one was about the Council refusing to give the complainant a direct payment to their partner to provide social care at home. The LGSCO did not find fault with how it decided it would not agree to the direct payment. However, the LGSCO found fault for the delay and issuing a care and support plan. The Council was asked to apologise to the complainant. The remaining case the LGSCO opened a case from the previous year about a disabled facilities grant and without investigating again asked the Council for an update of actions completed in the previous year.

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 2024/25, 20 compliments were received by the following Adult Social Care Teams: In the previous year 12 were recorded.

Examples:

- GS attended an OT assessment for S, a woman with complex mental health needs resident in Supported Living accommodation at Focus House this week. I was present at the appointment as this lady's Support Worker. We were so impressed! Prior to meeting GS, S had been feeling extremely low in mood. We were both ready to give up hope of getting her OT assessment. GS was reassuringly professional and thorough and rapidly gained S's trust. He gave us confidence that we would receive an excellent service. GS was patient and sensitive to S's complex needs. She spoke after this appointment of feeling her mood had begun to brighten. We look forward to receiving equipment soon. We both want to express our gratitude and sing GS's praises. We need more like him!
- Can I take this opportunity to say a very much appreciated thank you to J for her involvement for securing much needed extra help for P & L I know P is very grateful and feels on the whole his situation in looking after L more manageable and bearable from my part living 70 miles away but trying to do all we can for P & L I too personally feel more relaxed about their situation so, once again a Huge thank you to J for her quick response and actions in what I know more than ever is a demanding job
- Dear S, I would like to personally express my heartfelt gratitude for your outstanding performance yesterday during AMHP assessment. You really went extra mile to get your facts right which I must say it's unique. Your work ethic and excellent output made you extra ordinary. Your dedication, exceptional efforts, hard work, and sincerity its worth emulating. Your excellence is highly valued and appreciated.
- We would like to commend J for all her help and advice during a stressful time regarding organising my Dads care. Both in person, email and telephone, J has worked quickly and efficiently going above and beyond, especially given how busy you all are. The help given was clear and concise for us to understand as we have not been through this before and we were never made to feel unsupported during this process. The warmth and understanding is a skill you cannot learn during staff training, J is an asset. As a family we would like to send our gratitude to J and hope this recognition can be highlighted to the management and J on our behalf.
- D recently did a review for KK, who is only 44 and disabled following a stroke. His wife is his main carer and struggles with her own health after a cancer diagnosis, as well as looking after her husband. D did a thorough review taking both husband and wife's needs into consideration and 'really listened' according to the s/u wife. She said she 'doesn't just sit there and nod her head, she really listens. She understands what you're saying to her'. She couldn't speak highly enough of D and it was so clear to me that D really made a difference to that family – by listening, taking a person-centred approach and advising the family what is possible. I personally think D is an absolute star and an asset to RBC, so I'm really happy to be able to put this on paper and share this feedback from a s/u as well

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.

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.

<https://myaccount.reading.gov.uk/resident2/s/compliment>