

APPENDIX 1

LONDON BOROUGH OF RICHMOND UPON THAMES CORPORATE COMPLAINTS REPORT FOR 2024-25

1. MATTER FOR CONSIDERATION

RECOMMENDATIONS

1.1 **Recommendation 1: To review and note the report and associated appendices.**

2. EXECUTIVE SUMMARY

- 2.1. The report provides statistics and context to the complaints received and closed by Richmond Council for all services during the year 2024/25. Wherever possible comparative analysis with previous years is included.
- 2.2. The report has been produced to keep Members and senior officers informed of the overall numbers of complaints made to the London Borough of Richmond upon Thames Council, to provide details of the complaints which have followed one of the three complaints procedures at local and statutory levels, all of which may ultimately result in an investigation by the LGSCO.
- 2.3. A key part of an effective complaints system is to highlight areas for learning from those complaints that can inform ongoing improvement of services. Learning is set out throughout this report including specific directorate case studies which evidence where learning from complaints has directly resulted in service improvements. **Appendix 3** highlights outcomes and learning from Local Government and Social Care Ombudsman (LGSCO) and **Appendix 5** provides examples of learning from stage 2 corporate complaints across the Council.
- 2.4. **Section 2** sets out the background to the complaints process and the role of the Complaints Team. **Section 3** provides an overview of complaints. **Section 4** provides breakdowns by directorates. **Section 5** provides an overview of LGSCO complaints and Section 6 sets out the Complaint Team's key achievements this year.
- 2.5. This year Richmond Council closed 352 complaints which is a 3% decrease on the 362 complaints last year. It should be noted that only a very small proportion of interactions and contacts with the Council result in formal complaints, such context has been set out in greater detail in the report below.

- 2.6. Across all stages and processes, this year 152 (43%) of complaints were not upheld, compared to 163 (45%) last year. 99 (28%) were upheld compared to 85 (23%) last year, 96 (27%) were partly upheld compared to 114 (32%) last year and, additionally 4 (2%) of complaints were withdrawn.
- 2.7. In line with previous trends 'service delay or failure' was the most raised issue of complaint, raised in 53% of complaints, which is slightly lower than last year. Next staff error/attitude was raised in 21% of complaints which is slightly higher than previous years.
- 2.8. This year 265 (75%) of complaints at all stages and both corporate and statutory processes were responded to on time. Proportionately, this is 2% higher than the 265 (73%) complaints responded to on time last year.
- 2.9. The LGSCO considered on 73 Richmond cases (plus 9 cases brought forward from 2023-24) which resulted in 9 detailed investigations. This is a 31% increase on the 56 cases considered in 2023-24 and a 62% increase on the 45 case considerations in 2022-23. The number of detailed investigations has decreased by 36% in the last year and an average of 27% since 2022-23 (from 11 in 2022-23 to 14 in 2023-24 to 9 in 2024-25)
- 2.10. Richmond's average upheld rate of 89% equates to 4.1 upheld decisions per 100,000 residents which is lower than the average 9.1 per 100,000 residents of similar authorities.
- 2.11. The Council is performing well in relation to similar sized boroughs. The LGSCO upheld 89% of investigations for Richmond (or 8 complaints out of 9 cases investigated). This compares to an average of 85% of complaints across all London boroughs. Whilst Richmond's uphold rate is slightly higher at 89%, the Council only received 9 investigations compared to an average of 15.25 across its statistical neighbours.
- 2.12. The Council's reduced number of LGSCO formal investigations is despite a 31% increase in complaints received by the LGSCO this year (56 in 2023-24 and 73 in 2024-25). Additionally, out of the 8 complaint investigations upheld by the LGSCO, Richmond was found to have successfully remedied 3 during the Council's own complaints process.
- 2.13. There were no Public Reports for the Council this year, and the Council achieved 100% compliance in satisfactorily implementing LGSCO recommendations for the 5 cases where the ombudsman applied remedies.

3. BACKGROUND

- 3.1. The Corporate Complaints Team's role is to support the organisation to ensure that the Council has effective and efficient complaints procedures, in line with best practice and statutory requirements. The Complaints Team also have responsibility to train and support Council officers to respond effectively to complaints and ensure learning from complaints feeds directly into service improvement.

- 3.2. The Council's response to complaints it receives remains a key element of its approach to the delivery of quality services. Dealing positively and swiftly with complaints continues to be a high priority task for Directors, managers and staff at all levels. The Council encourages residents and businesses to provide feedback on services, to make a complaint or comment or to submit a suggestion, through various channels and online arrangements.
- 3.3. All councils in England and Wales are required to provide a complaints procedure for people who are in receipt of council services. In common with other councils, the London Borough of Richmond upon Thames follows three complaints procedures, summarised below:
 - a) The Corporate complaints procedure, revised 1 January 2021 and 1 April 2023¹
 - b) The Local Authority Adult Social Services and National Health Services complaint regulations 2009
 - c) The Children Act 1989 complaints procedure
- 3.4. The Council has a statutory duty to produce an annual report for the Adults and Children's complaints' procedures at (b) and (c) above – these are submitted separately to Adult Social Services Health and Housing Committee members, Director's Board and Education and Children's Services Committee.
- 3.5. Data gathered for both the Adults and Children's Social Care annual reports has been included in this report to provide a complete picture of all complaints that the Council dealt with during the past year, from 1 April 2024 to 31 March 2025.
- 3.6. There is a statutory duty on Monitoring Officers to report to Council Members where there has been maladministration or service failure. This annual corporate complaints' report details the organisation's performance against internal performance measures as well as steps being taken to continually improve.
- 3.7. The Council's corporate complaints procedure is available on the public webpages. A useful definition of a complaint is provided below, along with a description of other enquiries which have different procedures and are therefore not considered under the corporate complaints' procedure.
- 3.8. A complaint is:

“...an expression of dissatisfaction, however made, about the standard of service, actions or lack of action by the organisation, its own staff, or those acting on its behalf, affecting an individual or group of individuals”.
- 3.9. Other enquiries: In line with LGSCO guidance, the council logs minor problems such as missed refuse collections, street related issues, abandoned vehicles, graffiti and fly tipping as '**faults**' or '**service requests**'. They are often resolved quickly by the service or the relevant contractor. However, if the same issue occurs repeatedly (more than twice), it is elevated to the Council to address as a formal stage 1 complaint.

¹ The procedure will be updated again from 1 April 2025 to reflect changes following the LGSCO's introduction of a Complaints Handling Code

3.10. Some matters have a separate appeals procedure:

- Housing Benefit appeals
- Council Tax disputes
- Planning application appeals
- School admission appeals
- School exclusions
- Special Educational Needs decisions (Education, Health and Care Plan appeals)
- Penalty Charge Notice appeals
- Homelessness decisions

3.11. Wherever possible, a corporate complaint should be dealt with at stage 1. If, however, the complainant is not satisfied with the response received or the action taken, the matter can be referred to a senior manager for a review of the way the complaint was handled (stage 2). There are separate complaint regulations for Adult Social Care complaints and some statutory functions for Children's Social Care.

3.12. For this reporting year, the timescale to respond at stage 1 is 20 working days and the review at stage 2 is currently 25 working days (total 35 days). Further recourse is open to the complainant through the LGSCO or the HOS, who may choose to investigate the matter to see if there has been evidence of fault leading to injustice by the Council or possible maladministration. From 1 April 2025, timescale reduce to 10 working days at stage 1 and 20 working days at stage 2 in line with the LGSCO's Complaints Handling Code.

3.13. Complaints are counted in the year in which they were responded to or closed. Therefore 2024-25 complaint figures include complaints that will have been initiated in the previous year but then closed in the reporting year.

4. OVERVIEW OF COMPLAINTS

4.1. This section sets out the key messages regarding the number of complaints, the types of complaints, the timescales in which they were responded to, and a summary of the outcomes and learning.

4.2. Timescales and types of complaints for Adult and Children's statutory complaints have been separated as they follow a different process. Both Adult and Childrens statutory complaints have a separate more detailed report as required by the complaint's legislation. These reports will go separately to the relevant Scrutiny Committees².

4.3. Where available, specific learning examples are explored for each Directorate in **Section 6** below but some headline examples from stage 1 and 2 complaints this year are outlined below:

- By prioritising proactive contract monitoring and enhancing communication with residents, **Environment and Community Services (ECS)** has effectively addressed

² Education and Children's Services Committee 18th September 2025 and Adult Health and Housing Committee 15th September 2025

recurring issues in service delivery, particularly within waste collection and street cleansing.

- Officer training and the use of software for routine Council Tax enquiries have been introduced to improve efficiency and reduce delays in **Finance**.
- The **Housing and Regeneration Directorate** has focused on transparent, empathetic communication and regular updates for housing applicants. Additionally, assessment teams have been reinforced, and staff have received specialised training to enhance the overall customer experience.
- **Childrens Services (Achieving for Children)** has provided timely updates regarding the EHCP process and implemented reflective supervision with targeted staff development to address delays and maintain statutory compliance.
- **Adult Social Care** has focused on timeliness, early resolution, and comprehensive support, advising staff to communicate clearly, share assessments promptly, and consider how processes may affect families.
- Planning teams in the **Chief Executive's Directorate** have enhanced systems for accurate document uploads and clear public communication to reduce errors in planning applications.
- The **Change and Innovation Directorate** is prioritising ongoing staff training and communication to improve customer service quality.

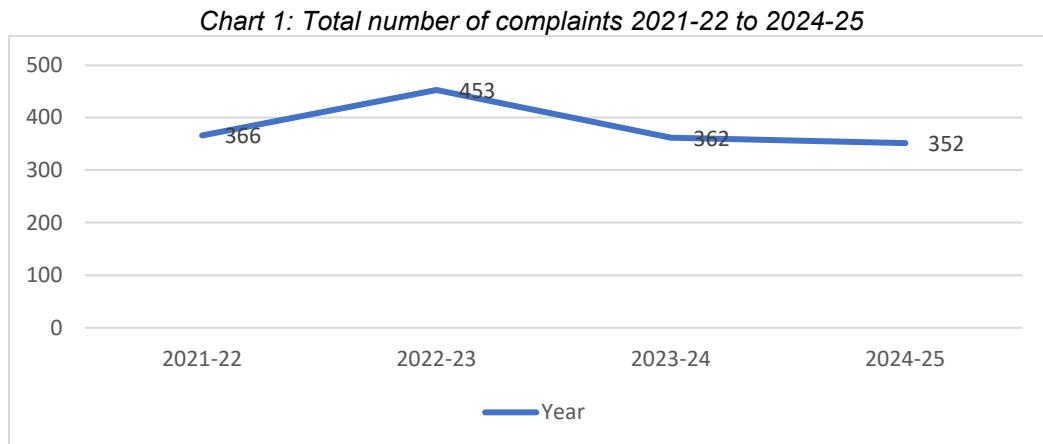
4.4. **Appendix 2 to** this report provides figures for the whole Council and shows all corporate complaints by type, level and time and includes information on complaints received via the statutory reporting processes and equalities data. Appendix 3 provides the learning arising from upheld LGSCO complaints. Appendix 4 provides the LGSCO Annual Review letter in respect of Richmond Borough Council. Appendix 5 provides examples of learning from upheld or partly upheld complaints across all directorates.

4.5. As **table 1 and chart 1** below show, the number of complaints resolved by Richmond Council in **2024-25 was 352**; this represents a 3% decrease or 10 less complaints than the previous year (2023-24) when the total was 462.

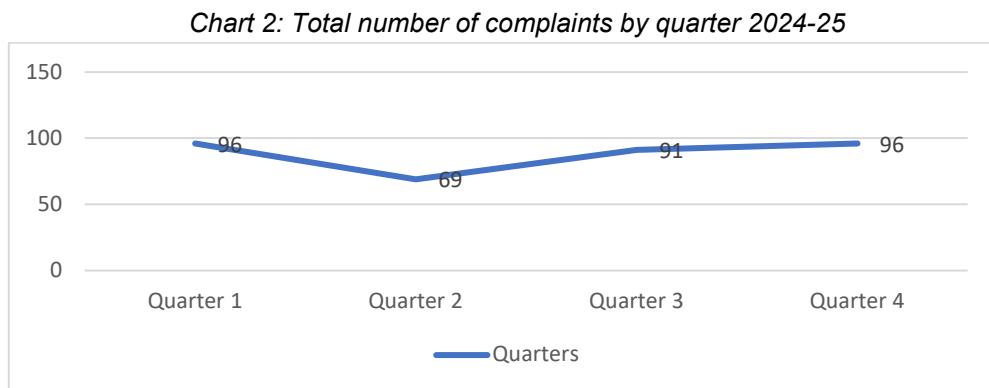
Table 1: LBRuT total number of complaints 2021-22- to 2024-25

Year	Number of Complaints
2021/22	366
2022/23	453
2023/24	362
2024/25	352

4.6. The volume of complaints should be set in context by looking at the overall level of contact and interaction the Council has with its residents and services users. For example, 352 complaints for 2024/25 is low given that Richmond Council's Customer Services handled 151,234 telephone contacts (including 390 callback requests), 42,000 emails and 3,492 webchats. This year Richmond Council also handled 2,780 Member Enquiries.



4.7. **Chart 2** below shows complaint numbers across the quarters. Whilst overall numbers have risen, most complaints were received in quarter 1.

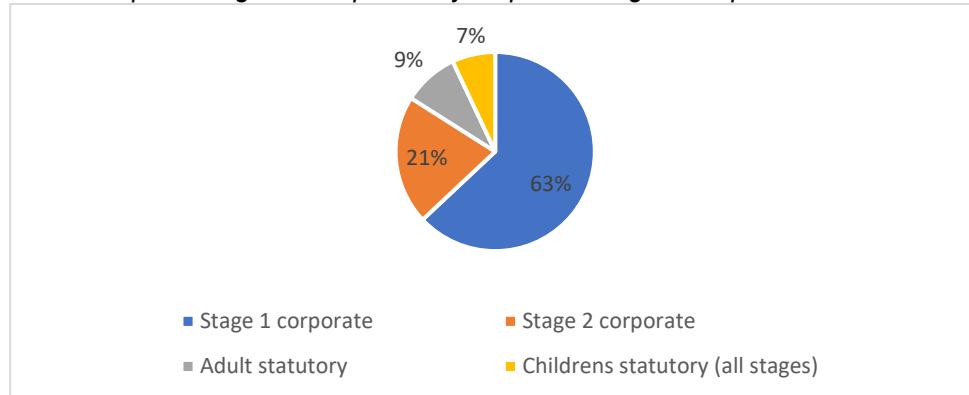


4.8. The following data shows the proportion of the **352** complaints across stages 1 and 2 of the corporate process and both statutory processes:

- At stage 1 of the corporate process, 220 (64%) were completed compared to 234 (or 64%) complaints last year. **This is a 6% decrease.**
- At stage 2 of the corporate process 74 (21%) were completed compared to 75 (or 21%) last year. **This is a 1% decrease.**
- Statutory complaints for Children's Services at all 3 stages accounted for 26 complaints (7%) compared to 29 (8%) last year. **This is a 10% decrease.**
- Statutory complaints for Adult Social Care accounted for 32 (9%) statutory complaints compared to 24 (7%) last year. **This is a 33% increase.**

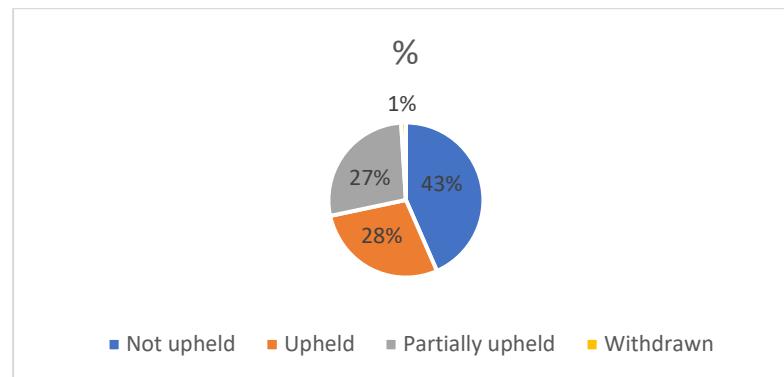
4.9. The 352 complaints represent an overall 3% decrease on the 362 complaints last year.

4.10. **Chart 3** below show the percentage of complaints by corporate and statutory process.

Chart 3: percentage of complaints by corporate stages and process 2024-25^[OBJ]

4.11. Across all stages and processes, this year 150 (43%) of complaints were not upheld, compared to 163 (45%) last year. 100 (28%) were upheld compared to 85 (23%) last year, and 97 (27%) were partly upheld compared to 114 (32%) last year. Additionally, 5 (2%) corporate complaints that started the process were withdrawn. **Chart 4** below details the split by percentage.

Chart 4 percentage of complaints by outcome across all stages and types 2024/25



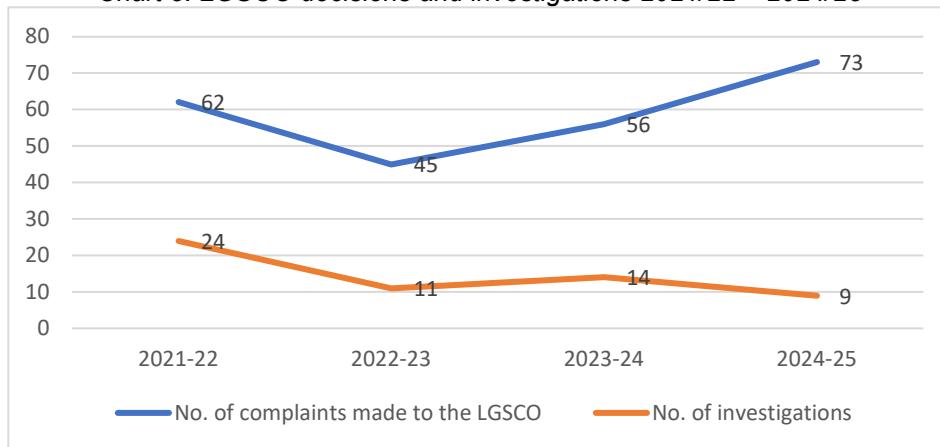
4.12. **Table 2** below shows outcome of complaints from for the past two years, following the removal of service requests from the complaints process. Across all three complaint outcomes, proportionally the numbers of complaints not upheld, upheld and partially upheld are similar.

Table 2: Outcome of complaints across all stages from 2021-22 to 2024/25

	2021/22		2022/23		2023-24		2024-25	
Upheld	84	20%	104	23%	85	23%	100	28%
Partially uph	101	22%	144	32%	114	32%	97	27%
Not upheld	181	58%	205	45%	163	45%	150	43%
Withdrawn	n/a		n/a		n/a		5	2%
Total	366		453		362		352	

4.13. In 2024-25 the LGSCO received and considered 73 Richmond complaints (plus 9 brought forward from 2023-24) which, following assessment, resulted in 9 complaints that warranted investigations. This is a 31% increase on the 56 complaints in 2023-24. It is positive that there has been a 36% decrease on the number of complaints that the LGSCO has decided to investigate following assessment.

Chart 5: LGSCO decisions and investigations 2021/22 – 2024/25



4.14. **Types of Corporate complaints by directorate**

4.15. This section sets out the type of complaints received, and the categories used for recording. **Table 3** shows the types of issues raised within 294 stage 1 and 2 Corporate complaints but does not include statutory complaints as these are categorised differently. Complaint types for statutory Adult and Children's social care complaints are analysed in detail within the 2024-25 Statutory Complaint reports. Therefore, analysis of the types of corporate complaints this year should be based on the proportion of times raised when compared to previous years.

4.16. In line with previous trends 'service delay or failure' was the most raised issue of complaint, raised in 53% of complaints, which is slightly lower than last year. Next staff error/attitude was raised in 21% of complaints which is slightly higher than previous years.

4.17. From 1 April 2025 that 'service delay or failure' has been split into two separate complaint categories to improve understanding of the cause of complaints.

Table 3: Types of corporate stage 1 & 2 complaints 2021-22 – 2024-25

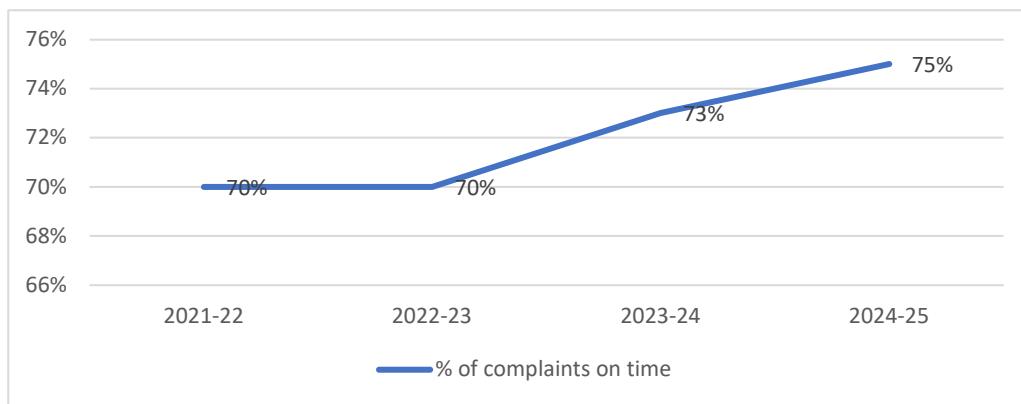
Type of complaint	2021-22	2022-23	2023-24 ³	2024-25
Service delay or failure	211 (58%)	267 (59%)	182 (59%)	157 (53%)
Outside service procedure	46 (13%)	26 (6%)	20 (6%)	28 (10%)
Staff error/attitude	43 (12%)	62 (14%)	59 (19%)	62 (21%)
Disagreement with/failure to implement assessment	27 (7%)	28 (6%)	12 (4%)	13 (4%)
Financial charges/billings/costs	26 (7%)	22 (5%)	9 (3%)	8 (3%)
Poor/incorrect information	13 (4%)	48 (11%)	27 (9%)	26 (9%)

5.19 A more detailed breakdown of types of stage 1 and 2 corporate complaints by Directorate is provided further in the report.

Timescales for responding to complaints

5.20 This section sets out compliance against complaint timescales. As shown in **chart 6**, this year 265 (75%) of complaints at all stages and both corporate and statutory processes were responded to on time. Proportionately, this is 2% higher than the 265 (73%) complaints responded to on time last year.

Chart 6: Overall % of complaints on time across corporate and statutory 2021-22 – 2024-25



5.21 Of the 220 stage 1 corporate complaints, 172 (78%) were on time compared to 189 (81%) last year.

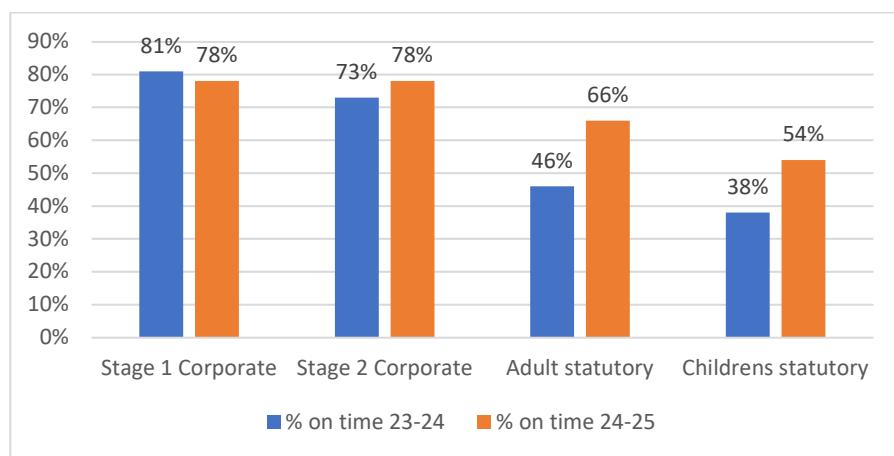
³ For 2023/24 and 2024/25 complaint types exclude statutory complaints

5.22 Of the 74 stage 2 corporate complaints, 58 (78%) were on time compared to 55 (73%) last year.

5.23 Of the Social Care complaints completed, Adult Social Care responded to 21 (66%) within the local target of 25 working days, compared to 11 (46%) last year. These complaints are within the six-month statutory resolution period and follow local targets. Adult social care complaints are complex and often require more time for investigation. The Complaints Team keeps complainants informed throughout the process.

5.24 Children's Services (Achieving for Children) completed 14 (54%) statutory complaints on time compared to 11 (38%) last year.

Chart 7: Number of complaints on time by stage and process 2023-24 and 2024-25



6 BREAKDOWN BY DIRECTORATE

6.1 This section focuses on the number of complaints, the timescales and the outcomes and learning for each of the Directorates.

Number of complaints per Directorate

6.2 **Table 4** below shows the breakdown of complaints completed per directorate (and includes statutory complaints) from 2021/22 to 2024/25. The most significant reductions are for the ECS and Housing and Regeneration.

6.3 Proportionally, the most significant increase at Directorate level is the increase in corporate complaints Chief Executive's Group, but this is because Place Services, that were part of Environment and Community Services, moved to Chief Executive's from April 2024. This will also account for some of the reduction in complaints for Environment and community Services.

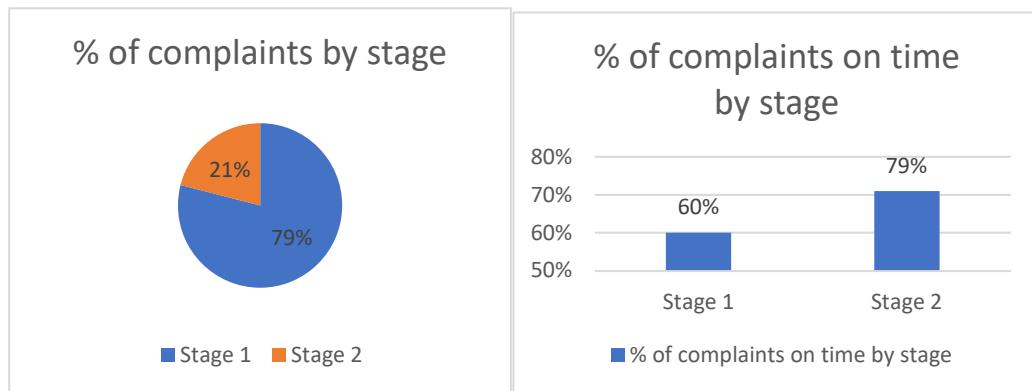
Table 4: Number of complaints – Directorate breakdown 2021/22 to 2024/25

	Directorate Totals				Directorate +/-% compared to last year	As a % of total complaints for LBRuT 24/25
	2021/22	2022/23	2023/24	2024/25	% +/-	
Environment and Community Services	163	185	122	66	-46%	19%
Finance	85	121	66	85	+28%	24%
Housing and Regeneration	15	26	40	31	-23%	9%
Children's Service (corporate and statutory combined pre 2022/23)						
Children's Services Corporate ⁴	23	67	63	78	+24%	23%
Children's statutory	32	27	29	26	-10%	
Adult Social Care Corporate and statutory combined						
Adults Social Care - Statutory	39	24	24	32	+33%	9%
Adult Social Care – Corporate	2	2	9	5	-44%	
Chief Executives Group	7	1	9	22	+144%	6%
Change & Innovation	N/A	N/A	N/A	7	N/A	2%
Total	366	453	362	352		

⁴ Numbers of corporate complaints for the adult and children's social care directorates were combined in previous reports up until 2021/22.

Environment and Community Services (ECS)

Chart 8: Percentage of corporate complaints completed by stage and 'on time' for ESC 2024/25



- 6.4 This year ECS completed 66 complaints compared to 122 last year which is a 46% decrease. The 66 complaints represents 19% of all complaints completed for Richmond council.
- 6.5 52 (79%) were at stage 1, which is a 43% decrease on the 91 stage 1 complaints last year. 14 (21%) were at stage 2 which is a 55% decrease on the 31 last year. ECS also handled 2,166 Member Enquiries.
- 6.6 In addition, 7 complaints for ECS escalated to the LGSCO (plus 2 brought forward from 2023-24) and following initial assessment, the LGSCO did not formally investigate any.
- 6.7 Across both stages, Environment responded to 64% of complaints on time compared to 76% last year.
- 6.8 Broken down, 31 (60%) of 52 stage 1 complaints were on time compared to 73 (80%) of 91 stage 1 complaints last year. 11 (79%) of the 14 stage 2 complaints were on time compared to 25 (81%) of the 31 stage 2 complaints last year.
- 6.9 For ECS Directorate, there was a reduction in complaints received for 2024/25 compared to the previous two years. It should be noted that as part of creation of new Place division within the CEX Group in 2024/25 a number of services that previously fell under ECS are now listed under CEX Group. These include Building Control and Development Management (Planning). Planning has historically contributed to overall volume of complaints in previous years due to the nature of this service.
- 6.10 Even after taking this into account the numbers of complaints for ECS has continued to decline over the last three years with a significant reduction for 2024/25 compared to both 2023/24 and 2022/23
- 6.11 In addition to some services moving to CEX Group (Place), the continued reduction in complaints is a welcome result of action taken by the Department to seek to improve service standards and strive to improve performance following complaints. This has involved attempts to significantly enhance the availability of information to residents and users of services about Council activity.

This has been the case for waste and street cleansing collection and for tree maintenance in parks and on street.

6.12 There has been continued investment to support better integration between the Council and council contractors and partners delivering vital front-line services. For Waste and Street Cleansing the Council has invested in additional contract monitoring officers to ensure contractors deliver the high standards expected for residents in the Borough

Table 5: Type of complaints for ECS 2024-24

Type of complaints	Times raised 2023-24	Times raised 2024-25
Service Delay or Failure	65 (53%)	37
Outside Service Procedure	2 (2%)	5
Staff Error/Attitude	34 (28%)	12
Disagreement with/failure to implement assessment within timescales	7 (6%)	4
Financial Charges/Billings/Costs	3 (2%)	4
Poor/Incorrect Information	11 (9%)	4
	122	66

Case Study stage 1: Improving Street Cleansing Oversight

Background

A resident submitted a Stage 1 complaint to Richmond Council regarding the street cleansing service. The complaint centred on the repeated failure to carry out cleansing on the advertised scheduled day and the lack of remedial action following reports. The resident expressed frustration at the absence of communication and resolution, despite multiple attempts to raise the issue through formal channels.

Investigation Findings

The investigation involved a review of internal systems, which track customer reports and contractor actions. It was found that the resident had submitted numerous complaints about inadequate street cleansing, yet only a minority were resolved within the five-day service level agreement. A site inspection conducted by the Waste and Street Cleansing team revealed minor litter and debris, but not to a level suggesting neglect. However, the investigation acknowledged that the issues raised extended beyond seasonal disruptions and were not confined to the leafing period or isolated incidents. The contractor's failure to consistently meet scheduled cleansing obligations, coupled with missed opportunities by the contract monitoring team to identify and address the recurring problem, contributed to the sustained dissatisfaction.

Learning

This case highlights the importance of proactive contract monitoring and the effective use of customer feedback data. The Council recognised the need to evolve its approach by implementing targeted monitoring based on trends and repeat issues. By leveraging internal systems more strategically, the contract monitoring team can intervene earlier and prevent escalation. The commitment to improving oversight and accountability within the cleansing service reflects a broader organisational learning: that sustained service failures require systemic change, not just reactive fixes.

Case Study Stage 2: Improving Complaint Handling and Communication in Waste Services

Background

A resident submitted a complaint regarding a missed garden waste collection. The complaint escalated to Stage 2 of the Council's corporate complaints procedure due to dissatisfaction with the timeliness and adequacy of the Stage 1 response. The resident expressed frustration over the delay in receiving a response and the lack of clarity provided, particularly in relation to the reasons given for the missed collection.

Investigation Findings

The investigation confirmed that the waste collection contractor had recorded the bin as "not out at edge of property" using their in-cab system. Although the resident maintained that the bin was accessible, the Council relied on the contractor's real-time records. The response also acknowledged that automated confirmation emails had been misleading, as they did not reflect the manual exception recorded by the collection crew. Additionally, the complaint handling process was found to be flawed: the initial complaint was incorrectly logged to the contractor rather than the Council's Waste and Recycling Team, and a subsequent complaint was misclassified as a service request. These errors led to delays and missed opportunities for resolution. The Council accepted that these procedural failures contributed to the resident's frustration and offered a goodwill payment of £150.

Learning from the Complaint

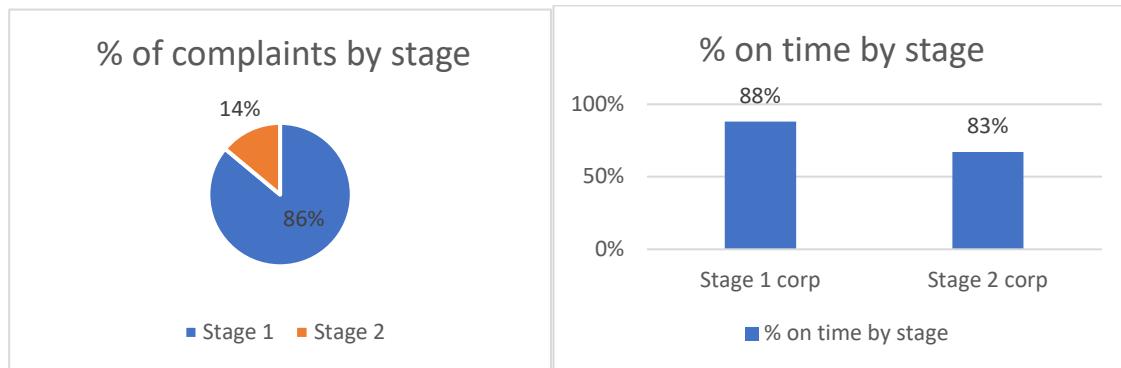
This case highlighted several areas for improvement in both service delivery and complaint handling. Key learning points include:

- The need to review and clarify automated communications to ensure they align with operational records
- The importance of correctly logging complaints to the appropriate internal teams to avoid unnecessary delays
- The necessity of reinforcing staff understanding of the complaints process through a briefing with the Complaints Team
- The value of clear public guidance on service expectations, such as the definition of "edge of property" for waste collection.
- The benefit of proactive engagement with residents who may require assisted services.

As a result, the Council committed to reviewing its waste service procedures, improving interdepartmental communication, and holding regular meetings between the Waste Service and Corporate Complaints Team to ensure timely and effective complaint resolution.

Finance Directorate

Chart 9: Percentage of corporate complaints completed by stage and 'on time' for Finance 2024/25



6.13 For **Finance Directorate**, the main learning from the complaints completed during 2024/25 was in relation to individual officer training and the implementation of software solutions for routine queries in Council Tax which has freed up officers to deal with more complex queries.

6.14 This year Finance completed 85 complaints compared to 66 last year which is a 29% increase. The 85 complaints also represent 24% of complaints completed for Richmond this year.

- 73 (86%) were at stage 1 which is a 22% increase on the 60 stage 1 complaints last year.
- 12 (14%) were at stage 2 which is a 20% increase on the 10 stage 2 complaints last year. As well as the 85 complaints, Finance completed 172 Member Enquiries and 52 MP enquiries.

6.15 Across both stages, Finance Directorate completed 74 (87%) of the 85 complaints on time. This compares to 56 (85%) of 66 complaints on time last year so performance has remained strong.

6.16 Broken down by stages 64 (88%) of 73 stage 1 complaints were on time, compared to 51 (85%) of 104 stage 1 complaints last year. 10 (83%) of the 12 stage 2 complaints were on time compared to 5 (83%) of 6 stage 2 complaints last year. 10 complaints for Finance were escalated to the LGSCO this year (and 1 brought forward from 2023-24) only 1 of which was investigated; the LGSCO did not find the Council at fault and did not uphold the complaint.

6.17 There has been a 29% increase in the number of complaints received (up to 85 from 66). The main increase was for complaints for Parking and Council Tax regarding billing, enforcement and recovery of PCN's. For context the directorate is responsible for processing in excess of 55,000 parking permits annually (resident, business and visitors permits), over 100,000 PCN's and also deals with other high-volume areas including over 12,000 benefit claims, over 80,000 Council Tax accounts and over 6,000 Business rate accounts.

6.18 The highest number of complaints fell into the 'Service Delay or Failure' category (41 complaints). For example, there were 22 regarding delays or issues obtaining parking permits. Other issues in this category included 10 for delays for either Benefit claims, Discretionary Housing Payment (DHP), or Appeals.

6.19 'Outside Service Procedure' (21 complaints) received the next highest level of complaints which related to issues such as being unhappy with recovery action taken, requests to waive Penalty Charge Notices or grant parking permits. This is followed by 'poor/ incorrect information' (14 complaints) which included incorrect reminders, administration errors or misinformation. The lowest number of complaints were in relation to 'disagreement with/failure to implement assessment within timescales' (2 complaints) closely followed by 'staff error or attitude' (5 complaints) and 'finance charges/ billings/ costs' (3 complaints) regarding Council Tax bills.

6.20 Within Finance Directorate, 29% (25) of complaints were upheld or partially upheld. Service Delay or Failure has been the main category of upheld or partially upheld complaints and the learning outcome has been mainly related to providing individual staff training, along with reviewing administrative processes and implementing software solutions.

Table 6: Types of complaints for Finance Directorate 2024-25

Type of complaints	Times raised 23-24	Times raised 2024-25
Service Delay or Failure	32 (49%)	41 (48%)
Outside Service Procedure	18 (27%)	21 (25%)
Staff Error/Attitude	4 (6%)	4 (5%)
Disagreement with/failure to implement assessment within timescales	0	2 (2%)
Financial Charges/Billings/Costs	4 (6%)	3 (4%)
Poor/Incorrect Information	8 (12%)	14 (16%)
	66	85

Case study stage 1: Delayed Council Tax Refund: A Learning Case Study on Service Standards and Statutory Constraints

Background

A resident submitted a Stage 1 complaint to the Council Tax Service regarding a delayed refund of £1,251.15 following the closure of their council tax account. The refund request was made on 16th September 2024, but the authorisation was not processed until 13th November 2024. The complainant also requested interest on the delayed refund, which was declined based on statutory limitations.

Investigation Findings

The investigation confirmed that the refund was due and had been correctly calculated following the account closure dated 15th May 2024. The delay in processing was attributed to an exceptionally high volume of work within the Council Tax Service, which impacted service delivery times. Despite the delay, no administrative errors were identified in the handling of the refund itself. The request for interest was reviewed and denied, as the Local Government Finance Act 1992 does not provide for interest payments on council tax refunds. The explanation provided clarified that council tax funds are governed by legislation and must be used strictly for public services, making interest payments impermissible.

Learning

This case highlights the importance of maintaining service standards even during periods of high operational demand. While the refund was ultimately processed correctly, the delay caused understandable frustration for the resident. The absence of administrative error does not negate the impact of delayed service, and this case serves as a reminder of the need for robust contingency planning to manage workload surges. Clear communication and timely updates to residents can help mitigate dissatisfaction and to mitigate future delays, the service has recently installed software that automatically completes routine enquiries freeing up resources to deal with more complex queries.

Additionally, the case reinforces the value of providing transparent explanations grounded in statutory frameworks when responding to complaints involving financial matters.

Case Study Stage 2: Preventing Administrative Errors in Council Tax Enforcement

Background

A resident submitted a Stage 2 complaint regarding the Council Tax Service, expressing concern that their account had been incorrectly referred to enforcement agents despite having previously informed the Council that their debts were subject to a bankruptcy order. The complainant also raised concerns about the tone of email communications received and the distress and inconvenience caused by the Council's actions, including potential impacts on their credit status.

Investigation Findings

The investigation confirmed that administrative errors had occurred in the handling of the complainant's Council Tax account. These errors led to incorrect enforcement action being taken, despite the complainant's prior notifications about their bankruptcy status. The Council had already acknowledged these failings and confirmed that the service provided fell below expected standards. While these findings were not revisited, the Stage 2 review focused on the issue of compensation. The Council recognised the distress and inconvenience caused and offered a goodwill payment of £200 in recognition of the time and effort the complainant had spent pursuing the matter.

Learning from the Complaint

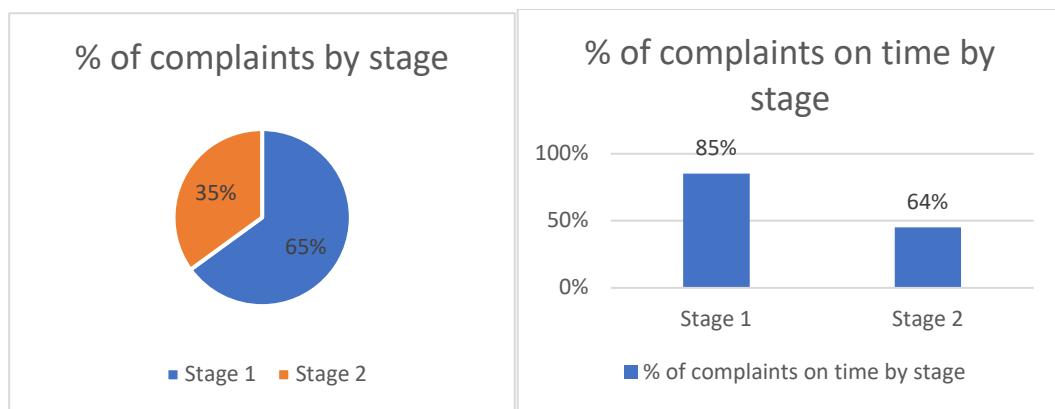
This case highlighted the importance of accurate and responsive administration in sensitive financial matters. Key learning points include:

- The need for robust internal checks to ensure that enforcement actions are not initiated without full consideration of all relevant information, particularly in cases involving bankruptcy.
- The importance of empathetic and professional communication when dealing with vulnerable residents or those experiencing financial hardship.
- The value of timely and appropriate compensation as a means of acknowledging service failures and restoring trust.

As a result of this complaint, the Council committed to revising its internal procedures to ensure that all relevant information is reviewed before recovery actions are taken. Additionally, further training is being provided to staff to improve their handling of complex and sensitive enquiries.

Housing and Regeneration Directorate

Chart 10: Percentage of corporate complaints completed by stage and 'on time' for Housing and Regeneration 2024/25



6.21 This year the HRD Business Support Team completed: 31 complaints compared to 40 last year which is a 23% decrease. For context complaints mainly concerned issues raised by potentially homeless households, those seeking moves for their households, or those on the Housing Register. Other areas of note were around the Temporary Accommodation team and Property Management team who oversee TA properties/placements.

6.22 The 31 complaints represent 9% of the total number of complaints completed for Richmond this year:

- 20 (65%) were at stage 1 compared to 26 (65%) last year.
- 11 (35%) were at stage 2 compared to 14 (35%) last year.

6.23 Additionally, 6 complaints escalated to the LGSCO (plus 1 carried forward from 2023-24) for HRD compared to 10 last year. Two of these cases resulted in a full investigation that resulted in findings of fault against the Council that mainly resulted in staff training and a policy review. HRD also responded to 314 Member Enquiries.

6.24 Across both stages, HRD completed 24 (77%) of complaints on time compared to 27 (68%) last year.

6.25 Broken down by stages, 17 (85%) of the 20 stage 1 complaints were on time compared to 18 (69%) of the 26 stage 1 complaints in the previous year. While for stage 2 complaints in 2024-25, 7 (64%) of the 11 complaints were on time compared to 5 (36%) of the 14 stage 2 complaints in the previous year.

6.26 This marks an increase from last year, although the department are aware of its need to continue to improve response times for stage 2 complaints. The Departmental Management team and Business Support team have worked together to agree more streamlined signoff processes, which has aided the improvement in the timeliness of complaint responses.

6.27 For HRD, the main topics of complaint concerned issues with the handling of housing /homelessness applications, dissatisfaction with the suitability of TA offered and issues with communication, particularly delayed responses from Council officers.

6.28 Learning from the stage 1 and 2 corporate complaints received during 2024/25 was primarily focused around:

- Organising regular refresher training for staff to ensure applicants are assessed accurately and ensure that acknowledgements for responses are sent in a timely manner.
- Ensuring in complex matters, where there are multiple parties involved, that there is a specific contact to ensure good communication lines are available for all.
- Completing prompt assessments of housing register applications whilst carefully considering information provided.
- Emphasising the importance of taking a proactive approach to dealing with repair issues pertaining to damp and mould in Property Management team managed properties.

Table 7: Types of complaints for HRD 2024-25

Type of complaints	Times raised 2023-24	Times raised 2023-24
Service Delay or Failure	16 (40%)	17 (55%)
Outside Service Procedure	0	0
Staff Error/Attitude	15 (38%)	8 (26%)
Disagreement with/failure to implement assessment within timescales	4 (10%)	5 (16%)
Financial Charges/Billings/Costs	1 (2%)	0
Poor/Incorrect Information	4 (10%)	1 (3%)
	40	31

Case Study Stage 1: Improving administrative processes in homelessness cases

Background

An individual submitted a homelessness enquiry to the local council in February 2025, citing harassment from a neighbour and its impact on their family's wellbeing. Supporting documentation was provided, including a police letter and evidence of an injunction. The case was initially handled by a Homeless Early Intervention Officer who conducted a triage assessment. However, due to an IT glitch, the call notes and follow-up email were not saved or sent, leading to a breakdown in communication. The individual expressed dissatisfaction with having to repeat the triage process and requested escalation to a senior officer. The matter was subsequently addressed by a line manager who attempted to resolve the issue through multiple calls and emails. Despite some documentation being submitted, key information remained outstanding, and the case was eventually allocated to a caseworker in late March 2025.

Investigation Findings

The investigation confirmed that the initial assessment was carried out as required, but the failure to save the record and send the follow-up email was due to a technical issue. This was not identified immediately, which contributed to the individual's frustration. The Council acknowledged this as an error and upheld the complaint on this point, offering an apology. However, the complaint regarding misrepresentation of facts was not upheld, as the omission was deemed unintentional. Similarly, the complaint about procedural delays was not upheld, as the Council had followed its standard processes for gathering information. The complaint concerning the failure to escalate the matter to management was also not upheld, as the line manager had intervened promptly and appropriately. The Council noted that while some documents had been submitted, the outstanding information was necessary to progress the case. The issue of local connection was deemed outside the scope of this complaint, as it related to a separate Housing Register application.

Learning

This case highlighted the importance of robust record-keeping and effective communication. The Council recognised that officers must take proactive steps to ensure that records are accurately saved and that key communications are successfully delivered. The delayed awareness of the technical issue highlighted the need for officers to verify that emails and case notes are properly documented. As a result, the service committed to implementing a standard follow-up procedure to reduce the risk of administrative errors and improve service quality. Additionally, the matter was raised with frontline staff during performance assessments to reinforce the importance of customer care and attention to detail. Training or refresher guidance was also provided to ensure best practices are consistently followed.

Case Study stage 2: Improving Homelessness Support and Communication

Background

A complaint was raised on behalf of a resident regarding the handling of her homelessness application and the support provided by the Council. The concerns included a rat infestation in the property, difficulties accessing the accommodation due to bins and stairs, noise and anti-social behaviour from a nearby pub, and a lack of consistent communication and support from the assigned Resettlement and Homeless Prevention Officer (RHPO). The complainant also expressed dissatisfaction with the learning outcomes from the Stage 1 complaint and sought clarity on future support.

Investigation Findings

The investigation confirmed that while the resident had experienced domestic abuse and continued to feel vulnerable, there was no current evidence of risk in her accommodation. The Council acknowledged that the RHPO did not maintain an adequate level of communication, failed to respond to the advocate's emails, and delayed issuing the Personalised Housing Plan (PHP). Although the RHPO claimed to have sent the Relief Duty Notification by post, it was recognised that email would have been more appropriate given the established communication method.

The Council had made referrals to the Private Sector team and Environmental Services to address the rat infestation and anti-social behaviour, albeit late in the process. The resident was also supported in her search for alternative accommodation, and a business case was submitted to remove her benefit cap. However, the Council maintained that the current accommodation remained suitable and reasonable for continued occupation.

Learning from the Complaint

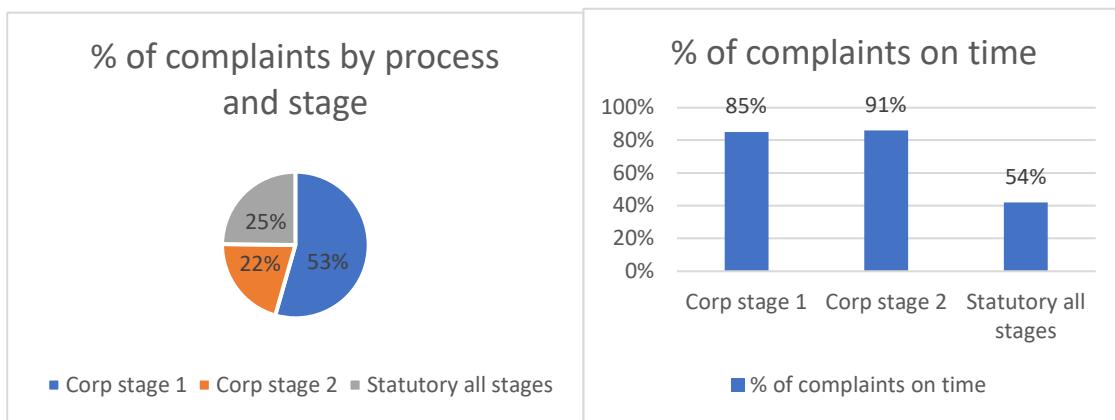
This case highlighted the importance of timely and effective communication between housing officers, residents, and their advocates. Key learning points include:

- Ensuring correspondence is sent through the most effective and agreed-upon channels, particularly when dealing with vulnerable individuals.
- Responding promptly to advocates acting on behalf of residents to maintain trust and transparency.
- Initiating referrals and enforcement actions at the earliest opportunity to address environmental and safety concerns.
- Providing clear and accurate information in complaint responses to avoid confusion and further distress.

As a result of this complaint, the Council committed to refresher training for staff on accurate assessments and timely communication. The RHPO involved has been addressed through supervision to reinforce expectations around communication and case handling. A financial remedy of £100 was offered in recognition of the stress and inconvenience caused by the shortcomings in service delivery.

Children's Services

Chart 11: Percentage of corporate complaints (by stage) and statutory complaints completed and 'on time' for Children's Services 2024/25



6.29 This year Achieving for Children (AfC) completed 104 complaints compared to 92 last year which is a 12% increase. The 103 complaints represent 30% of the total number of complaints completed for Richmond this year.

- 55 (53%) were at stage 1 of the corporate process compared to 43 (47%) last year. This is a 28% increase. Education which includes SEND accounted for 35 of the 55 stage 1 corporate complaints. The remaining 20 were social care complaints that fell outside of the statutory complaints' legislation.
- 23 (22%) were at stage 2 of the corporate process compared to 20 last year. This is a 15% increase.
- 26 (25%) complaints were children's statutory complaints compared to 29 last year which is a 10% decrease.

6.30 Across both corporate and statutory complaints, Achieving for Children completed 81 (78%) complaints on time compared to 61 (66%) last year.

6.31 In addition, 24 complaints for Achieving for Children escalated to the LGSCO this year (along with 4 brought forward from 2023-24). Following initial assessment, the LGSCO decided to formally investigate 4 of these complaints, unfortunately finding fault with the Council for all 4. All 4 investigations centred on delayed or lack of Education Health & Care Plan provision for SEN children in schools. However, the LGSCO did find that the Council had provided the appropriate redress for 1 case in its stage 2 response.

6.32 Broken down by stages:

- 47 (85%) of the 55 stage 1 corporate complaints were on time compared to 36 (84%) of the 43 complaints last year. Of the 36 stage 1 complaints for SEND and Education 35 were on time (97%). Of the 19 stage 1 social care corporate complaints, 12 were on time (63%).
- 20 (91%) of the 22 stage 2 corporate complaints were on time compared to 14 (70%) of the 20 stage 2 last year. Of the 17 stage 2 complaints for SEND, 16 were on time (94%). Of the 6 stage 2 corporate complaints for social care, 5 were on time (83%).

- 14 (54%) of the 26 statutory complaints were on time compared to 11 (38%) of the 29 statutory complaints last year.

6.33 **Learning from Children's Services (AfC) complaints:** across statutory children's social care services, all learning from complaints is implemented and monitored through the Performance and Quality Improvement Board (P&QIB). Learning from statutory social care complaints is explored in more detail in the Statutory Annual Complaints report scheduled for Richmond Council's September 2025 committee cycle, however, key learning focused on:

Parental/Family Engagement and Communication

- Respecting and documenting parental preferences for meeting formats (virtual or in-person).
- Ensuring both parents are consistently included in Child in Need (CiN) processes and have access to assessments and plans.
- Communicating any changes to family time arrangements promptly to relevant agencies.
- Ensuring actions agreed in meetings or visits are realistic and followed through to maintain trust and service consistency.
- When transferring families between teams (e.g., Referral and Assessment to Early Help), using the action plan to clarify process, timeframes, and exit plans for all family members.
- Using reflective supervision to understand cultural differences and communication styles.

Improving Assessments

- Using careful, respectful language when documenting assessment decisions.
- Balancing the child's narrative with their broader family context and relationships.
- Ensuring chronologies in assessments are relevant and focused; training was provided to improve this practice.
- Addressing and correct factual inaccuracies promptly when raised by families.
- Clearly articulating observed incidents, including sensory details and contextual analysis, whilst incorporating the perspectives of children and carers

6.34 For SEND, learning from complaints was shared with the Parental Engagement Lead to ensure lessons learnt are built into the training schedule for SEN officers. In summary key learning from stage 2 corporate complaints has focused on:

Communication and Information Sharing

- **Timely Updates:** EHCP Coordinators and Team Managers were reminded to provide regular updates to families, especially when there are challenges in delivering provisions outlined in EHCPs.
- **Clear Messaging:** Annual Reviews and SEND Panel decisions will be communicated promptly and clearly to parents and schools to avoid delays and confusion.
- **Avoiding Assumptions:** Miscommunication between schools and health providers highlighted the need to verify processes rather than rely on assumptions, particularly around referrals to services like OT.

- Internal Communication: Staff are reminded to promptly share correspondence and new requests internally to meet statutory timescales and reduce delays in decision-making.

Decision-Making and Accountability

- Escalation Protocols: AfC is considering co-designing an escalation route with the Integrated Care Board (ICB) to address delays caused by limited provider availability.
- SEND Panel Decisions: Managers were reminded to ratify decisions promptly and communicate them without delay.
- Statutory Compliance: Staff were reminded of the legal timescales for statutory reassessments and the importance of adhering to them.

6.35 **Types of complaint for Achieving for Children:** For corporate stage 1 and 2 complaints, the majority of complaints fell to 'service delay or failure' (62%). This is because the majority of complaints were for SEND and about EHCP processes. Whilst types for statutory complaints have not included this year, as they are categorised differently, it is notable that complaints about staff behaviour have reduced to 28% for corporate complaints.

Table 8: Types of complaints for Corporate stage 1 and 2 complaints 2024-25⁵

Type of complaints	Times raised 2023-24	Times raised 2024-25
	Corporate only	Corporate only
Service Delay or Failure	59 (93%)	48 (62%)
Outside Service Procedure	0	1 (1%)
Staff Error/Attitude	2 (3%)	22 (28%)
Disagreement with/failure to implement assessment within timescales	1 (2%)	3 (4%)
Financial Charges/Billings/Costs	0	1 (1%)
Poor/Incorrect Information	1 (2%)	3 (4%)
	63	78

⁵ For 2024/25, taken from 82 corporate complaints. Types of complaints for statutory social care complaints are analysed in the Statutory Complaints Report 2024-25

Case Study Stage 1: Learning from a Complaint about Social Work Practice in Child Protection

Background

A formal complaint was submitted by a parent regarding the conduct and decisions of a social worker, referred to here as Ms X, and their line manager, within the Referral and Assessment Team. The concerns included allegations of unprofessional behaviour, lack of communication and procedural irregularities.

Investigation Findings

The investigation involved a review of the case file, including a single assessment, and meetings with both Ms X and the team leader. It was found that Ms X arrived late to a scheduled visit due to an urgent safeguarding strategy meeting and subsequent joint visit with police, which was deemed necessary under statutory safeguarding procedures. While the delay was acknowledged, the complaint was only partially upheld due to the unavoidable nature of the circumstances.

Concerns about repeated and irrelevant phone calls were not upheld, as records showed only two calls were made in the context of assessment work. However, the complainant's perception of the tone used was acknowledged, and an apology was offered for any distress caused. Allegations of rude behaviour during an unannounced home visit were not substantiated, though Ms X expressed regret if their actions were perceived as such. The visit itself was considered within good practice due to prior unsuccessful attempts to make contact.

The complaint regarding visits to the children without parental consent was upheld. Although the visits occurred under a Section 47 investigation, it was recognised that good practice would have involved notifying the parent. Additionally, the failure to discuss the child protection medical with both parents was acknowledged, and this element of the complaint was also upheld.

Learning

This case highlighted the importance of clear and transparent communication with parents, particularly in safeguarding contexts. The authority recognised the need to improve how information about child protection medicals is shared, including the provision of explanatory materials for parents and children. Additionally, the team was reminded of the importance of seeking parental consent when visiting children, even under statutory investigations, and ensuring that all interactions are conducted with sensitivity and professionalism. These learnings were shared with the team to reinforce best practice and improve the experience of families engaging with children's services.

Case Study Stage 2: Improving EHCP Timeliness and Communication

Background

A parent submitted a Stage 2 complaint regarding delays and communication failures in the handling of their child's Education, Health and Care Plan (EHCP). The complaint focused on two main issues: the failure of the Local Authority (LA) to amend the EHCP in a timely manner following an Annual Review, and the lack of consideration given to a request for funding personal training sessions as part of the child's special educational provision.

Investigation Findings

The investigation confirmed that the LA did not meet statutory timescales for processing the EHCP amendment. There was a 15-week delay in receiving the Annual Review paperwork from the school, followed by a further 6-week delay in issuing a decision to amend the EHCP due to internal process issues and staff absence. Although a draft amended EHCP was eventually shared, the delay had already impacted the parent's right to appeal.

In addition, the investigation found that the parent's request for funding personal training sessions was not actioned promptly due to a breakdown in internal communication. Emails sent in August and September 2024 were not shared with the appropriate EHCP Coordinator, resulting in a delay until December 2024 before the request was considered. While the request was not formally recorded in the Annual Review paperwork, the delay in acting on the parent's direct communication was acknowledged as a service failure. The complaint was upheld in full at Stage 2, and a financial remedy of £325 was offered in recognition of the distress and inconvenience caused.

Learning from the Complaint

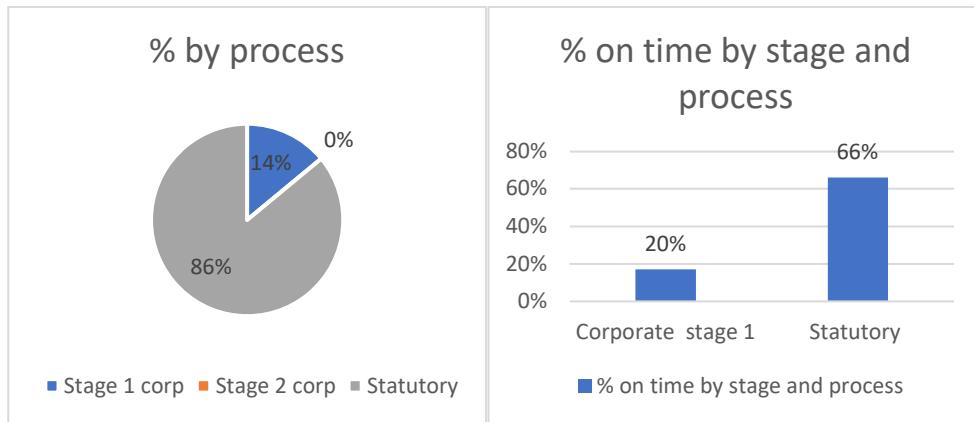
This case highlighted several areas for improvement in the administration of EHCPs:

- The importance of timely and accurate handovers between staff to avoid delays in decision-making.
- The need for proactive follow-up with schools to ensure timely submission of Annual Review paperwork.
- The critical role of internal communication in ensuring that all correspondence from families is shared and acted upon promptly.
- The value of post-complaint reflection sessions to identify process gaps and reinforce best practices.

As a result, the SEND Service committed to conducting thorough handovers when cases are reassigned, improving follow-up procedures with schools, and reinforcing the importance of internal communication among EHCP Coordinators and Assistants to ensure statutory timescales are met.

Adult Social Care and Public Health

Chart 12: Percentage of corporate (by stage) and statutory complaints completed and 'on time' for Adult Social Care 2024/25



6.36 Overall complaints performance in Adult Social Care has been good. There has been a healthy small increase (12%) in complaints which is a sign that complaint processes are open and transparent. Despite challenges with timescales, particularly for corporate complaints, complaints are being resolved at early stages, as very few complaints escalate past the first response; there were no stage 2 corporate complaints this year. Complaints for Adult Social Care can be complex and require input from several teams and getting it right for the complainant at an early stage, sometimes requires more time than our processes afford. It is also reassuring that a low number of complaints are escalated to the Ombudsman; only 6 complaints this year but none of these received a formal investigation following initial assessment by the Ombudsman.

6.37 This year Adult Social Care completed 37 complaints compared to 33 last year which is a 12% increase. There were no formal complaints for Public Health. The 37 complaints represent 9% of the total number of complaints completed for Richmond this year. As well as the 33 complaints, Adult Social Care handled 117 Member Enquiries.

- 5 (14%) were at stage 1 of the corporate process, compared to 6 completed last year. No stage 1 corporate complaints escalated to stage 2 this year.
- 32 (86%) complaints were statutory complaints which is 35% higher than the 24 statutory complaints completed last year.

6.38 In addition, 12 complaints for Adult Social Care escalated to the LGSCO this year, double the 6 last year. Positively, after initial assessment, the LGSCO only formally investigated 1 of these complaints and, although finding fault with the Council, did acknowledge that a suitable remedy had been provided in the Council's own complaint response.

6.39 Broken down by stages,

- Only 1 (20%) of the 5 corporate complaints was on time. Concerted efforts to improve timeliness are in place although notably corporate complaints have shorter timescales than statutory complaints, yet the issues can be as complex and require a multi-team response.
- 21 (66%) statutory complaints were completed within the 25-working day target compared to 11 (46%) last year. This is a notable improvement. For the 34% complaints that exceed 25 days, the average resolution time was 35 days, and well within the statutory timeframe.

6.40 When considering the response times for Adult Social Care statutory complaints, the Adult Social Care Statutory complaints legislation does not provide a required timescale to respond to complaints, other than to risk assess complaints and respond within an appropriate timescale (full resolution should be achieved within six months). This recognises the complexity of Adult Social Care complaints, which often require input from multiple teams, and at times, partner organisations. The focus within Adult Social Care is the quality of responses and achieving resolution within this process with no defined stages.

6.41 The department receives two types of complaint and deals with them under separate processes:

- Corporate complaints: these relate to complaints from people who have contacted Adult Social Care but are not receiving statutory social care services.
- Adult statutory complaints relate to complaints made by a person in receipt of social care services under the Care Act 2014 (or their representative if they have consent and are acting in the person's best interests)⁶.

6.42 This year key learning, mostly from statutory complaints, is briefly summarised as:

Delays

- Delays in sending out assessments and reviews were acknowledged, with commitments to monitor and address these through supervision and team meetings.
- Staff sickness and its impact on case progression were identified as a cause of delay, prompting discussions on better monitoring of outstanding tasks during absences.

Finance/Charging

- Staff were reminded to inform service users and families early about financial assessment contributions and to provide written information.
- Teams are reminded to clarify rent and benefit costs early, especially during transitions from Children's to Adults Services.

Lack of Support

- The need for a more holistic approach when multiple teams are involved with family members was highlighted.
- A commitment was made to improve how services consider the emotional and practical impact of their processes on families, particularly during hospital admissions and discharges.
- The importance of ensuring agreed support (e.g., carers support and direct payments) is in place before annual reviews was reinforced.

Quality of Assessment

⁶ A full breakdown and analysis of complaints made through the Adult Statutory Process is in the Statutory Annual Report 2024/25

- Staff were reminded to ensure assessments are shared promptly and documented properly.
- Teams were instructed to explore and record advanced decisions and LPAs (Lasting Power of Attorney) during assessments and reviews.
- A factsheet will be developed to explain the Section 117 Panel's role in discharge planning, improving transparency in assessment processes (Mental Health discharge aftercare).

Communication

- Clear, respectful, and timely communication with residents and families is a recurring theme and regularly discussed with teams and embedded in reflective supervisions.
- Staff were reminded to explain decisions clearly and ensure communication is appropriate, especially when multiple teams are involved.
- The Direct Payments team and finance teams are reviewing their communication frameworks to improve professionalism and clarity.
- Communication with neurodiverse residents has been discussed to ensure inclusivity and understanding.

6.43 Types of complaint for Adult Social Care

Table 9: Types of stage 1 and 2 corporate complaints for Adult Social Care 2024-25⁷

Type of complaints	Times raised 2023-24	Times raised 2024-25
	Corporate only	Corporate only
Service Delay or Failure	8 (89%)	3 (60%)
Outside Service Procedure	0	1 (20%)
Staff Error/Attitude	1 (11%)	1 (20%)
Disagreement with/failure to implement assessment within timescales	0	0
Financial Charges/Billings/Costs	0	0
Poor/Incorrect Information	0	0
	9	5

⁷ Types of complaints for statutory complaints are analysed in the Adult Statutory Complaints Report 2024-25

Case Study Stage 1 Corporate: Inclusive practice in Mental Health Act Assessments

Background

A parent raised a Stage 1 complaint regarding a Mental Health Act (MHA) assessment conducted for their child by an Approved Mental Health Professional (AMHP) from the Richmond and Wandsworth AMHP Service. The concerns related to communication, timeliness, and clarity during the assessment process. The service welcomed the feedback as an opportunity to reflect on practice and enhance the experience for families navigating complex and sensitive situations.

Investigation Findings

The investigation reviewed records and spoke with the complainant and AMHP. The AMHP made efforts to use the young person's preferred pronouns and discussed them with the family. However, clearer communication could have reassured the family, though this part of the complaint was not upheld.

The AMHP's late arrival was due to unforeseen circumstances but caused anxiety due to lack of communication. This complaint was upheld, and the AMHP apologized.

Regarding legal explanations, the AMHP provided appropriate information, but the parent felt it could have been clearer. This aspect was not upheld, but the AMHP acknowledged the need for better signposting to resources.

Communication regarding the nearest relative was legally accurate and appropriately handled, so this part was not upheld. The complaint about follow-up contact was upheld as there was a delay in reconnecting with the parent. The AMHP recognized this and apologised. The assessment was professional and thorough, despite the parent's perception of it being rushed. The AMHP had ensured the young person was informed and involved.

Learning

This case has provided valuable insights for the AMHP service. It reinforced the importance of timely communication, especially when delays occur, and the need to keep families informed throughout the assessment process. The team has been reminded of the impact that punctuality and proactive updates can have on reducing stress for service users and their families. The case also highlighted the benefit of equipping AMHPs with accessible resources to help families understand the implications of MHA assessments. As a result, the team has been encouraged to signpost to reliable online information where appropriate.

In addition, the service recognised the importance of consistently using and clearly communicating preferred pronouns. A review of internal processes is underway to ensure this is considered from the point of referral, and training on gender identity is being explored to support inclusive practice.

Finally, the case demonstrated the value of early and meaningful engagement with family members. While time constraints can be a challenge, the service is committed to creating space for fuller discussions wherever possible, recognising the reassurance and clarity this can provide during a difficult time.

Case Study Statutory Complaint: Supporting Adults with Complex Needs

Background

A family member raised a complaint regarding the adult social care support provided to their brother over the period of 2022 to 2024. The concerns included the adequacy of cleaning support, reimbursement for financial assistance provided by the complainant, delays and inconsistencies in housing assessments, and the conduct of a social worker during a meeting. The complainant expressed frustration over perceived miscommunications, unmet expectations, and a lack of continuity in care planning.

Investigation Findings

The investigation confirmed that a comprehensive assessment was conducted in 2022, which resulted in a care package including home care and floating support. While there was no evidence that cleaning support was not provided, there were limitations due to the service user's refusal to allow access to parts of the home. The complaint regarding reimbursement was not upheld, as there was no record of an agreement to reimburse the complainant, and alternative support options would have been pursued had the complainant not intervened.

Regarding housing, the investigation found no evidence that the complainant was told the assessment would take nine months. The care plan did include support for maintaining a habitable environment, and the assessment process was completed within a reasonable timeframe. In 2023, a change in social workers led to differing professional opinions about the most appropriate housing solution. While one social worker considered residential care, the successor recommended supported accommodation, which aligned more closely with the service user's assessed needs and promoted independence. The application for Extra Care was declined, but the individual was accepted onto the waiting list for Sheltered Accommodation.

The complaint also addressed concerns about the conduct of a social worker during a meeting. Although the complainant felt the social worker was provocative and discriminative, the investigation found that the meeting was conducted professionally and respectfully. Nonetheless, the social worker offered an apology for any unintended distress caused.

Learning from the Complaint

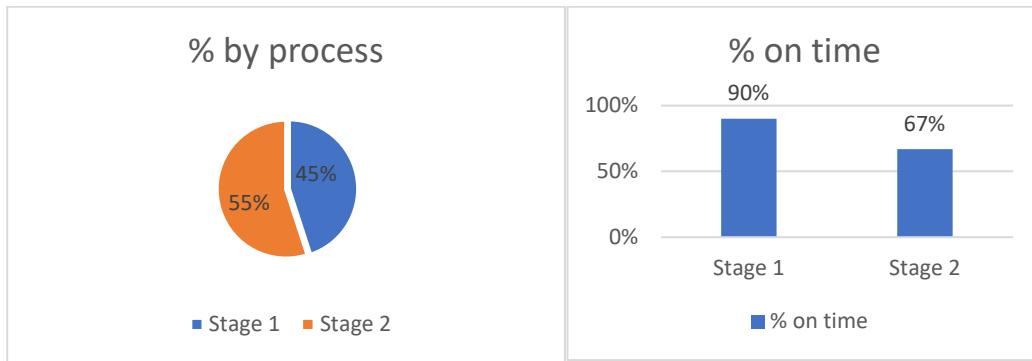
This case highlighted the importance of clear, consistent, and respectful communication between social care professionals and family members. Key learning points include:

- Ensuring that all decisions and professional judgments are clearly documented and explained to service users and their families.
- Maintaining continuity and transparency when cases are transferred between social workers to avoid confusion and distress.
- Reinforcing the importance of respectful and empathetic communication, particularly during sensitive discussions about care and housing.
- Acknowledging and addressing misunderstandings promptly to preserve trust and collaboration with families.

As a result of this complaint, the team committed to discussing the findings in a team meeting, reminding staff of the importance of clear communication and documentation, and arranging a review of the service user's current care and support needs to ensure appropriateness and responsiveness.

CHIEF EXECUTIVE'S DIRECTORATE

Chart 13: Percentage of corporate (by stage) complaints completed and 'on time' for Chief Executive's Directorate 2024/25



6.44 This year there were 22 complaints for the Chief Executive's Group compared to 9 last year. This increase is largely due to completion of the transfer of the ECS and HRD services to Place within the year as Place dealt with 8 stage 1s and 10 stage 2s during the year. In total the Chief Executive's Group dealt with 10 stage 1s and 12 stage 2s.

6.45 In addition, 14 complaints (and 1 brought forward from 2023-24) for the Chief Executive's Office were escalated to the LGSCO this year; 6 of these related to 1 complainant dissatisfied with various Council committee decisions affecting a Council Service whilst 7 other cases related to Building Control and Planning issues in Place. Following initial enquiries, the LGSCO decided to formally investigate 1 complaint and, whilst finding fault with the Council, acknowledged that appropriate remedy had been provided during the Council's complaint processes. Additionally, the Chief Executive's directorate responded to 12 Member Enquiries.

6.46 Of the 10 stage 1 complaints, 9 (90%) were on time and 8 (67%) of the 12 stage 2 complaints were sent on time. In addition to the Place complaints referenced above, there were complaints for the following service areas: Complaints, Democratic Services and Elections.

Table 10: Types of stage 1 and 2 corporate complaints for Chief Executive's Directorate 2024-25

Type of complaints	Times raised 2023-24	Times raised 2024-25
Service Delay or Failure	2 (23%)	10 (45%)
Outside Service Procedure	0	0
Staff Error/Attitude	3 (33%)	7 (32%)
Disagreement with/failure to implement assessment within timescales	0	2 (9%)
Financial Charges/Billings/Costs	1 (11%)	0
Poor/Incorrect Information	3 (33%)	3 (14%)
	9	22

Case Study Stage 2: Addressing Administrative Errors in Planning Applications

Background

A resident submitted a Stage 2 complaint to the Council regarding the handling of a planning application for a property in East Sheen. The complainant raised concerns that the Local Planning Authority (LPA) was misleading the public about its neighbour notification procedures, and that the LPA had breached the Data Protection Act by uploading an incorrect document to the planning portal.

Investigation Findings

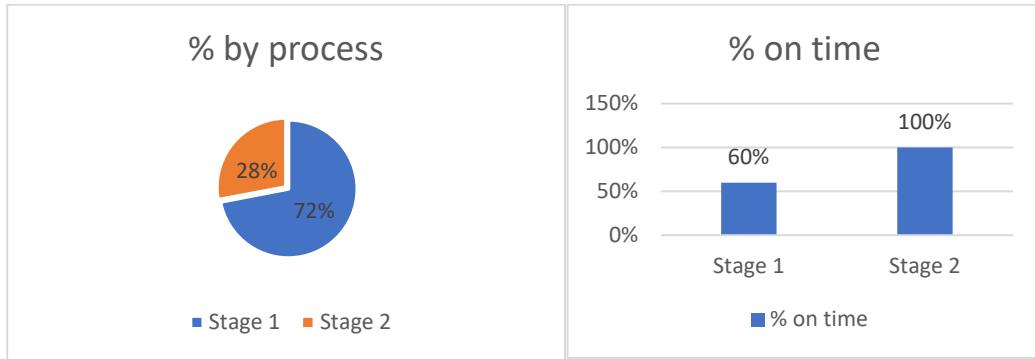
The investigation found that the Council's procedures were consistent with both statutory requirements and the information published on the Council's website. The Council had fulfilled its obligations regarding neighbour notification. An incorrect site plan had been temporarily uploaded to the planning portal due to a mistyped application number by an officer. While this was acknowledged as an administrative error, it did not constitute a data breach, as the document was already publicly available as part of another planning application. Apologies were offered for any confusion caused. The investigation concluded that, while there were administrative errors and miscommunications, these did not amount to a data breach or a failure in statutory duties. The complaint was partially upheld due to the acknowledged errors.

Learning

As a result of this complaint Planning Case Officers were reminded to ensure documents are uploaded to the correct planning application to prevent similar errors. Staff were advised to take extra care in communications with the public to avoid misunderstandings. The Council reiterated its commitment to high standards and transparency in its processes and provided information on how to escalate the complaint to the Local Government and Social Care Ombudsman if the complainant remained dissatisfied.

CHANGE & INNOVATION DIRECTORATE

Chart 13: Percentage of corporate (by stage) complaints completed and 'on time' for Change & Innovation Directorate 2024/25



6.47 This year there were 7 complaints for Customer Services within the newly formed Change & Innovation Directorate in April 2024. This is a 43% increase in complaints for Customer Services, who had 4 complaints whilst within the Chief Executive's Group last year. There were no complaints for the Change & Innovation Directorate escalated to the LGSCO this year.

6.48 Of the 5 stage 1 complaints, 3 (60%) were on time and 2 (100%) of the 2 stage 2 complaints were sent on time.

Table 10: Types of stage 1 and 2 corporate complaints for Customer Services in the Change & Innovation Directorate 2024-25

Type of complaints	Times raised 2023-24	Times raised 2024-25
Service Delay or Failure	0	1 (14%)
Outside Service Procedure	0	0
Staff Error/Attitude	2 (50%)	5 (72%)
Disagreement with/failure to implement assessment within timescales	0	0
Financial Charges/Billings/Costs	1 (25%)	0
Poor/Incorrect Information	1 (25%)	1 (14%)
	4	7

7 LOCAL GOVERNMENT AND SOCIAL CARE OMBUDSMAN

LGSCO decisions

- 7.1 The LGSCO issued Richmond's Annual Review letter for 2024-25 on 16 July 2025.
- 7.2 In her Annual Review, Amerdeep Somal highlighted that complaints about education and children's services are still dominating LGSCO casework, taking up 27% of casework and 47% of upheld investigations. Housing cases are now the second biggest area of complaints, accounting for 17% with an upheld rate of 85% and the third highest area is Adult Social Care, taking up 13% with a 78% uphold rate.
- 7.3 In 2024/25 the LGSCO registered a record number of complaints, exceeding 20,000 for the first time. This compares to 17,937 complaints last year and 15,488 in 2022/23. Of the complaints investigated by the LGSCO, 83% were upheld, which the LGSCO states illustrates the systemic nature of issues across local government. 4,298 were investigated and 3,552 were upheld.

Across all Local Authorities, 27% of complaints were for Education & Childrens Services, 17% were for Housing, 13% were for Adult Social Care, 11% were for Highways and Transport, 8% were for Planning and Development, 10% were for Environmental Services and Public Protection, ,6% were for Benefits and Tax and 5% were for other Corporate Services. A more detailed breakdown is provided in the LGSCO Annual review 2024-25 <https://www.lgo.org.uk/assets/attach/6814/LG-Review-2024-25-FINAL.pdf>

- 7.4 This year's Annual Letter reflected the LGSCO's view that an urgent change in national policy is needed to support young people with special educational needs and await the Government's White Paper in Autumn 2025. With regards to housing, nationally, complaints have highlighted how people are denied access to housing registers or not being treated fairly when faced with homelessness. Whilst there are challenges around supply whilst new homes are being built, the LGSCO are of the view that local authorities must implement policies fairly – as many do – with people at the heart of their approach.
- 7.5 When broken down for London Boroughs, 5,180 complaints were made to the LGSCO compared to 4,187 last year and 962 were investigated compared to 852 last year. The most complaints upheld by category were Housing and Education and Children's Services which is the same as last year.

LGSCO local level decisions and learning from complaints

- 7.6 There has been an increase in residents approaching the LGSCO this year as demonstrated on **Chart 5**, of this report, and this is in line with the increase nationally, with regards to the number of complaints the LGSCO have received across all councils. However, as set out below, this year the number of complaints that the LGSCO has formally investigated against Richmond has decreased.
- 7.7 The LGSCO received 73 complaints for Richmond (along with an additional 9 brought forward from 2023-24) which, following assessment, resulted in 9 investigations. This is 31% increase on the 56 complaints last year and a 62% on the 45 complaints in 2022-23.

7.8 However, despite the 31% increase in residents approaching the LGSCO to escalate complaints, formal complaints have decreased from 14 to 9 (36%). The LGSCO have confirmed that Richmond are successfully remedying more complaints at stage 2. This has directly reduced the number of formal investigations they have undertook.

7.9 Fault was found in 8 of the 9 investigations which led to an upheld rate of 89%. Richmond's average upheld rate of 89% equates to **4.1 upheld decisions per 100,000 residents** which is lower than the average 9.1 per 100,000 residents for London Boroughs (84%).

7.10 The Council is still performing well in relation to similar sized local boroughs. The average 'upheld' rate for the three statistical neighbouring boroughs with the closest profile to Richmond (Kingston, Hammersmith and Fulham, and Westminster) is 83% or 7.4 per 100,000 population. Whilst Richmond's upheld rate is slightly higher at 89%, the Council only received 9 investigations compared to an average of 14 across its statistical neighbours.

7.11 There have been no public reports this year and 100% adherence on the 5 compliance outcomes, as the LGSCO were satisfied the Council had successfully implemented its recommendations. This compares to an average of 100% in similar organisations

7.12 In 38% of the upheld cases (8 cases) the LGSCO found we had provided a satisfactory remedy before the complaint reached the Ombudsman. This compares to an average of 12% in similar organisations.

7.13 The number of Public Reports issued by the LGSCO against Richmond Council is in line with the average for its statistical neighbouring boroughs with 1 public report issued in the last five years. It was issued in 2019/20 regarding complaints about delays made by 3 families who were receiving SEND services from the Council. **In 2024-25 Richmond did not receive any new public reports.**

7.14 With regards to the 73 complaints received by the LGSCO (and 9 cases brought forward from 2023-24), setting aside the 9 detailed investigations (8 upheld, 1 not upheld), 50 complaints were closed after initial enquiries (including 9 where advice/signposting was given), 17 were referred back for local resolution (premature) and 6 were carried forward into 2025-26 whilst further enquiries were undertaken.

7.15 Learning from Ombudsman cases can be found in Appendix 3 but some examples are below:

Housing and Regeneration

- The Directorate recognised the importance of timely decision-making in homelessness cases and the need to ensure that applicants are not disadvantaged by unnecessary delays.
- Where errors were identified in the Homelessness and Prevention Service, including delays and poor communication regarding the applicant's position on the housing register, the directorate committed improving communication, maintaining accurate records throughout the process, backdating housing register positions or making symbolic payments where appropriate.

Children's Services (Achieving for Children)

- Where the Council failed to provide the support outlined in Education, Health and Care Plans (EHCPs), or delayed issuing or amending EHCPs, the Ombudsman found fault, AfC apologised and made symbolic payments to reflect the injustice caused.
- The Council's responses to complaints about social workers, child protection, or contact arrangements were not upheld, either because there was insufficient evidence of fault or because the matters were more appropriately considered by a court or tribunal. However, AfC were reminded to ensure robust investigation and communication with families regarding safeguarding concerns.

Finance

- Where administrative errors were made (e.g., in council tax accounts), the Directorate has accepted fault, apologised, and offered practical remedies such as deferring payments. The Directorate recognised the importance of acknowledging errors and providing practical solutions to remedy injustice.
- Complaints about housing benefit overpayments or discretionary housing payments were generally upheld, however, the Directorate committed to ensuring decisions are made in line with policy and reasons for decisions are communicated clearly.

Environment, Community Services

- Complaints about planning enforcement, street cleaning, waste collection, and highways were generally not upheld but in the small number where there was evidence of fault, the Directorate committed to ensuring communication is clearer including the reasons for decisions and that statutory processes are always followed.

7.16 There is duty under section 5(2) of the Local Government and Housing Act 1989 for the Monitoring Officer to prepare a formal report to the Council where it appears that the authority, or any part of it, has acted or is likely to act in such a manner as to constitute maladministration or service failure, and where the LGSCO has conducted an investigation in relation to the matter. A detailed analysis of the 8 upheld cases in 2024-25 is provided as Appendix 3.

8 HOUSING OMBUDSMAN SERVICE

8.1 Under the Localism Act 2011, the Housing Ombudsman Service (HOS) had its jurisdiction extended to all social housing in England from 1 April 2013. The HOS offers impartial dispute resolution for those in rented social housing, working with others to improve landlord and tenant relations.

8.2 Richmond Council does not have any housing stock: it was sold and transferred to Richmond Housing Partnership (RHP) in 2000 and RHP continues to own and manage all of Richmond's ex-Council housing.

Tenants' Champion

8.3 The role of Tenants' Champion was established by the Council in 2011, as part of the Council's commitment to better assist tenants and leaseholders living in housing association homes who

may be experiencing unresolved issues with social landlords. The Tenants' Champion develops expertise in housing and builds relationships with Housing Association colleagues to help provide solutions to long term complaints. In 2023-24 the role was held by Councillor Paulina Vassileva.

- 8.4 In 2024-25, the Tenants' Champion service assisted 145 households, compared with 138 in the previous year. Of these 116 were new cases (the same number as last year). The balance consisted of cases from previous years that continue to require ongoing support. 22 of the new cases were forwarded to the relevant ward councillor for help in the first instance.
- 8.5 Of the 116 new cases 63% (or 92) concerned repairs, 18% (or 26) concerned transfers, 17% (or 24) concerned anti-social behaviour with 2% (or 3) covering other issues.
- 8.6 During 2024-25, in addition to casework Cllr Vassileva led the twice yearly Tenants' Champion Interagency Forum (which includes Housing Associations, Community Safety Team, Housing staff, Mental Health Social Care, Mental Health Trust, Voluntary Sector, MP's offices, Police and Fire Brigade, and Lead Council members for Housing), attended monthly CMARAC meetings and continued to hold regular meetings with the 4 main Housing Associations in the Borough and with other advocates such as Citizens Advice, RUILS, Richmond Aid and the borough's 3 MPs.
- 8.7 More details on the service and for a copy of this year's Tenants' Champion Annual report can be found on the following link: [Tenants' Champion - London Borough of Richmond upon Thames](#).

9. KEY ACHIEVEMENTS IN 2024/25

- 9.1 This year, the Complaints Team has demonstrated a strong commitment to ensuring the council remains fully compliant with the Complaints Handling Code jointly developed by the Local Government and Social Care Ombudsman (LGSCO) and the Housing Ombudsman Service (HOS). Through continuous review and refinement of internal processes, the team has worked diligently to embed the principles of fairness, transparency, and accountability into every stage of complaint handling. Regular training, a new Corporate Complaints Policy, adding complaint handling responsibilities to all new job descriptions, improving induction information on complaints practice, and collaborating with service areas have fostered a culture of learning and improvement. The Complaints Manager also held a session with the Think Bigger Network to look at complaints through the perspective of storytelling, to further embed a positive complaints culture that prioritises listening to our residents. As a result, the council is better equipped to respond to complaints effectively and in line with national standards, reinforcing public trust and driving service excellence.
- 9.2 This work led to the Complaints Team being honoured with the Team of the Year award at the December 2024 Staff Awards for exemplifying the organisational value of Leading By Example. This value recognises that leadership is not confined to roles or titles - it's about stepping up, taking responsibility, and setting a standard that others aspire to. Throughout the year, we consistently demonstrated dependability, professionalism, and a commitment to continuous improvement. We tackled complex and sensitive complaints with empathy and integrity, supported each other and staff through challenging cases, and proactively refined processes to improve outcomes for residents. Beyond our own performance, we played an important role in supporting services across the organisation to improve their own complaint handling. Through

tailored guidance, collaborative briefings, and constructive feedback, we have helped further embed a culture of learning and accountability, enabling services to respond more effectively, robustly, more confidently and compassionately to residents' concerns.

10. COMMENTS OF THE EXECUTIVE DIRECTOR OF FINANCE

10.1 The cost of dealing with all complaints is met from within existing approved resources.

11. COMMENTS OF THE MONITORING OFFICER

11.1 The Monitoring Officer maintains an oversight of decisions of the LGSCO where the complaint is upheld; in most cases, provided the recommendations of the LGSCO are followed, there will be no need for further action. In Richmond's case, all recommendations have been implemented. There have been no public reports, so it has not been necessary to refer any reports on individual complaint investigations to Full Council.

12. APPENDICES

Appendix 2 – Data tables

Appendix 3 – LGSCO Upheld Decisions 2024/25

Appendix 4 – LGSCO Annual Review Letter 2024/25

Appendix 5 – Learning from stage 2 corporate complaints

CONTACT

Jon Evans
Assistant Chief Executive (Policy and Performance)
London Borough of Richmond upon Thames

Nancy Kurisa
Statutory and Corporate Complaints Manager
London Borough of Richmond upon Thames

Appendix 2

Corporate Stage 1 Complaint Data

Total completed

	Q1	Q2	Q3	Q4	Grand Total
Adult Social Care - Corporate	1	1	1	2	5
Change & Innovation		3		2	5
Chief Executive's Office	4	2	2	2	10
Childrens Corporate	9	11	14	21	55
Environment & Community Services	15	9	16	12	52
Finance	25	14	20	14	73
Housing & Regeneration	3	3	6	8	20
Grand Total	57	43	59	61	220

Outcome

	Not Upheld	Partially Upheld	Upheld	Withdrawn	Grand Total
Adult Social Care - Corporate	2	1	2		5
Change & Innovation	2		3		5
Chief Executive's Office	7	1	2		10
Childrens Corporate	17	23	14	1	55
Environment & Community Services	21	10	21		52
Finance	52	3	18		73
Housing & Regeneration	5	8	7		20
Grand Total	106	46	67	1	220

Complaints completed within timescales

	Y	N	Grand Total
Adult Social Care - Corporate	1	4	5
Change & Innovation	3	2	5
Chief Executive's Office	9	1	10
Childrens Corporate	47	8	55
Environment & Community Services	31	21	52
Finance	64	9	73
Housing & Regeneration	17	3	20
Grand Total	172	48	220

% completed in timescale: 78%

Complaint Type

	Adult Social Care - Corporate	Change & Innovation	Chief Executive's Office	Childrens Corporate	Environment & Community Services	Finance	Housing & Regeneration	Grand Total
101 Service Delay or Failure	3		4	35	29	38	12	121
102 Outside Service Procedure	1				4	19		24
103 Staff Error/Attitude	1	4	3	18	10	3	6	45
104 Disagreement with/failure to implement assessment within timescales					4		2	6
105 Financial Charges/Billing/Costs					3	1		4
106 Poor/incorrect information		1	3	2	2	12		20
Grand Total	5	5	10	55	52	73	20	220

Equalities Data

Ethnicity

	Adult Social Care - Corporate	Change & Innovation	Chief Executive's Office	Childrens Corporate	Environment & Community Services	Finance	Housing & Regeneration	Grand Total
400 White British (English, Welsh, Scottish, Northern Irish)		2	1	1	11	14	2	31
401 White Irish						1		1
404 White Other					2		1	3
407 Mixed White & Asian							1	1
408 Mixed Other						1		1
409 Indian					1	1		2
412 Chinese			1					1
413 Other					2			2
416 Other					1			1
Black/Caribbean/African								
Not disclosed	5	2	8	54	29	48	16	162
Prefer not to say		1			6	8		15
Grand Total	5	5	10	55	52	73	20	220

Religion

	Adult Social Care - Corporate	Change & Innovation	Chief Executive's Office	Childrens Corporate	Environment & Community Services	Finance	Housing & Regeneration	Grand Total
Buddhist					1			1
Christian		1			4	7	1	13
Jewish						2		2
Muslim					1			1
No religion		1	2		10	8	2	23
Not disclosed	5	2	8	55	26	48	16	160
Other		1						1
Prefer not to say					10	8	1	19
Grand Total	5	5	10	55	52	73	20	220

Sexuality

	Adult Social Care - Corporate	Change & Innovation	Chief Executive's Office	Childrens Corporate	Environment & Community Services	Finance	Housing & Regeneration	Grand Total
Gay/ Lesbian		1				1		2
Heterosexual/straight		1	2	1	15	13	3	35
Not disclosed	5	2	8	54	30	48	16	163
Prefer not to say		1			7	11	1	20
Grand Total	5	5	10	55	52	73	20	220

Status

	Adult Social Care - Corporate	Change & Innovation	Chief Executive's Office	Childrens Corporate	Environment & Community Services	Finance	Housing & Regeneration	Grand Total
Married/Civil Partnership/Co-habiting		1	1		9	11	1	23
Not disclosed	5	2	8	55	30	48	16	164
Prefer not to say					6	8		14
Single		2	1		6	5	3	17
Other					1	1		2
Grand Total	5	5	10	55	52	73	20	220

Disability

	Adult Social Care - Corporate	Change & Innovation	Chief Executive's Office	Childrens Corporate	Environment & Community Services	Finance	Housing & Regeneration	Grand Total
No	1	1	2	2	12	15	1	34
Not disclosed	4	2	8	52	28	48	16	158
Prefer not to say		1			7	7	1	16
Yes		1		1	5	3	2	12
Grand Total	5	5	10	55	52	73	20	220

Age

	Adult Social Care - Corporate	Change & Innovation	Chief Executive's Office	Childrens Corporate	Environment & Community Services	Finance	Housing & Regeneration	Grand Total
25 - 34					1	3	2	6
35 - 44					4	4	1	9
45 - 54		2	1	1	5	6		15
55 - 64			1		2	4		7
65 - 74		1			3	7	1	12
75+					4	2		6
Not disclosed	5	2	8	54	28	41	16	154
Prefer not to say					5	6		11
Grand Total	5	5	10	55	52	73	20	220

Corporate Stage 2 Complaint Data

Total completed

	Q1	Q2	Q3	Q4	Grand Total
Adult Social Care - Corporate					
Change & Innovation			1	1	2
Chief Executive's Office	4	2	3	3	12
Children's Services	8	1	4	10	23
Environment & Community Services	4	2	4	4	14
Finance	5	1	3	3	12
Housing & Regeneration	4	2	3	2	11
Grand Total	25	8	18	23	74

Complaint Categories

	Adult Social Care - Corporate	Change & Innovation	Chief Executive's Office	Childrens Corporate	Environment & Community Services	Finance	Housing & Regeneration	Grand Total
101 Service Delay or Failure		1	6	13	8	3	5	36
102 Outside Service Procedure				1	1	2		4
103 Staff error/attitude		1	4	4	2	1	5	17
104 Disagreement with/failure to implement assessment within timescales				2	3	2		7
105 Financial Charges/Billing/Costs				1	1	2		4
106 Poor/incorrect information				1	2	2	1	6
Grand Total		2	12	23	14	12	11	74

Outcome

	Not upheld	Partially upheld	Upheld	Withdrawn (early resolution)	Grand Total
Adult Social Care - Corporate					
Change & Innovation	1			1	2
Chief Executive's Office	10	2			12
Childrens Corporate	2	14	6	1	23
Environment & Community Services	7	3	4		14
Finance	7		4	1	12
Housing & Regeneration	3	5	2	1	11
Grand Total	30	24	16	4	74

Timescales Met

	Y	N	Grand Total
Adult Social Care - Corporate			
Change & Innovation	2		2
Chief Executive's Office	8	4	12
Childrens Corporate	20	3	23
Environment & Community Services	11	3	14
Finance	10	2	12
Housing & Regeneration	7	4	11
Grand Total	58	16	74

% completed on time: 78%

Appendix 3 : Richmond LGSCO complaints upheld 2024-25

Reference	Authority	Category	Decided	Decision	Remedy	Details	Service Improvements
23013927	London Borough of Richmond upon Thames	Education & Childrens Services	13/12/2024	Upeld	Apology,Financial redress	<p>Complaint: The Council's failure to notify that there was no place available for their child at their preferred school until the day before they were due to start there and a lack of alternative education provision..</p> <p>Outcome: The LGSCO found fault due to the Council's poor communication, but no fault with the Council's handling of alternative education provision.</p> <p>Agreed Action: The Council apologised and paid £400 for the distress and uncertainty caused by its poor communication.</p>	N/A
23015533	London Borough of Richmond upon Thames	Chief Executive's Group (Policy and Performance)	09/04/2024	Upeld	Injustice remedied during organisation's complaint processes	<p>Complaint: The delays and poor customer service the complainant experienced from an agency acting on the Council's behalf.</p> <p>Outcome: The LGSCO considered the Council's apology and actions to ensure the agency recognised and addressed customer services issues was an acceptable remedy to the complaint.</p> <p>Action taken during Council's complaint process: The Council had apologised to the complainant and had raised the matter with the agency and had obtained a report from it about the issues raised that included lessons learned and actions being taken to improve its customer service.</p>	The agency reviewed and improved its Customer Service processes.
23018891	London Borough of Richmond upon Thames	Housing and Regeneration	11/09/2024	Upeld	Apology, Financial Redress,Provided training and/or guidance to staff.	<p>Complaint: The Council's handling of their housing application.</p> <p>Outcome: The LGSCO found with the Council as it had not accepted it had a main housing duty to the complainant when it had already determined that they were homeless by accepting the relief duty.</p> <p>Agreed Action: The Council apologised and paid £1000 for the failings identified, and provided detailed guidance to appropriate staff.</p>	Detailed guidance was issued to appropriate staff.
23021056	London Borough of Richmond upon Thames	Education & Childrens Services	27/11/2024	Upeld	Apology,Financial Redress,Provided information/advice to person affected,	<p>Complaint: The Council's failure to secure a child's ongoing therapy provision as stated in their EHCP when their original therapist left.</p> <p>Outcome: The LGSCO found that the Council had caused a significant and ongoing injustice as the failure to secure ongoing therapy was at a crucial period in the child's education, whilst studying for exams and preparing for post 16 education.</p> <p>Agreed Action: The Council apologised and paid £3,000 (and a further £450 for each term of ongoing missed therapy) for the failings identified and took action to secure therapy provision as soon as possible, providing regular updates and ongoing advice to the parent until therapy was secured.</p>	Reconsidered its therapy provision responsibilities with the ICB to identify alternative routes to secure required therapy provision for children with Education Health and Care Plans.

24003662	London Borough of Richmond upon Thames	Housing and Regeneration	27/02/2025	Upheled	Apology, Financial redress, Procedure or policy change/review	<p>Complaint: The Council's handling of their housing application and placement in unsuitable accommodation.</p> <p>Outcome: The LGSCO found fault with the Council for its actions during the complainant's homelessness application process which led them to living in unsuitable accommodation for over a year.</p> <p>Agreed Action: The Council apologised and paid £3,500 for the failings identified, reviewed its procedures and monitoring of suitability checks to ensure household's needs were appropriate before making a housing placement.</p>	Housing suitability procedures were reviewed and appropriate monitoring was put in place.
24004043	London Borough of Richmond upon Thames	Education & Childrens Services	25/11/2024	Upheled	Apology, Financial redress: Avoidable distress/time and trouble	<p>Complaint: Complaint regarding the handling of education provision and the arrangements for a child with an EHCP.</p> <p>Outcome: The LGSCO found fault with the Council for its handling of the situation.</p> <p>Agreed Action: The Council apologised and paid £300 for the avoidable distress and faults identified.</p>	N/A
24008550	London Borough of Richmond upon Thames	Education & Childrens Services	10/02/2025	Upheled	Injustice remedied during organisations complaint processes	<p>Complaint: The Council's handling of their child's therapy provision as set out in the EHCP.</p> <p>Outcome: The LGSCO found fault with the Council due to the missed therapy provision, but acknowledged that the Council had upheld the complaint and accepted fault during its own complaint handling process.</p> <p>Action taken during Council's complaint process: The Council had apologised to the complainant and paid £10,790 for the missed therapy and avoidable distress, time and stress caused.</p>	Reviewed how it monitored ongoing therapy provision and liaised with the ICB to try to seek alternative ways of securing such provision.
24017040	London Borough of Richmond upon Thames	Adult Care Services	25/03/2025	Upheled	Injustice remedied during organisations complaint processes	<p>Complaint: The Council's complaint about inappropriate communication with family about adult social care provision to a relative.</p> <p>Outcome: The LGSCO found fault with the Council but acknowledged that the Council had accepted fault and taken appropriate action to remedy the complaint and prevent a reoccurrence when handling the complaint.</p> <p>Action taken during Council's complaint process: The Council apologised to the complainant and reminded staff of the need for clear and sensitive communication with relatives in such circumstances.</p>	Staff were reminded of the communication requirements.

21 May 2025

By email

Mr Travers
Chief Executive
London Borough of Richmond upon Thames

Dear Mr Travers

Annual Review letter 2024-25

I write to you with your annual summary of complaint statistics from the Local Government and Social Care Ombudsman for the year ending 31 March 2025. The information offers valuable insight about your organisation's approach to complaints, and I know you will consider it as part of your corporate governance processes. We have listened to your feedback, and I am pleased to be able to share your annual statistics earlier in the year to better fit with local reporting cycles. I hope this proves helpful to you.

Your annual statistics are available here.

In addition, you can find the detail of the decisions we have made about your Council, read the public reports we have issued, and view the service improvements your Council has agreed to make as a result of our investigations, as well as previous annual review letters.

In a change to our approach, we will write to organisations in July where there is exceptional practice or where we have concerns about an organisation's complaint handling. Not all organisations will get a letter. If you do receive a letter it will be sent in advance of its publication on our website on 16 July 2025, alongside our annual Review of Local Government Complaints.

Supporting complaint and service improvement

In February we published [good practice guides](#) to support councils to adopt our [Complaint Handling Code](#). The guides were developed in consultation with councils that have been piloting the Code and are based on the real-life, front-line experience of people handling complaints day-to-day, including their experience of reporting to senior leaders and elected members. The guides were issued alongside free [training resources](#) organisations can use to make sure front-line staff understand what to do when someone raises a complaint. We will be applying the Code in our casework from April 2026 and we know a large number of councils have already adopted it into their local policies with positive results.

This year we relaunched our popular [complaint handling training](#) programme. The training is now more interactive than ever, providing delegates with an opportunity to consider a complaint from receipt to resolution. Early feedback has been extremely positive with delegates reporting an increase in confidence in handling complaints after completing the training. To find out more contact training@lgo.org.uk.

Yours sincerely,



Amerdeep Somal
Local Government and Social Care Ombudsman
Chair, Commission for Local Administration in England

London Borough of Richmond upon Thames - Annual Complaint Report 2024-25				Appendix 5
KEY LEARNING SUMMARY FROM UPHELD AND PARTIALLY UPHELD CORPORATE COMPLAINTS at Stage 2 2023-24				
Service complained about	Outcome at S2	Complaint Summary	Learning/Issue needing addressing	Management response
CEX Group (Place)				
Development Management	Partially upheld	Complaint regarding the handling of a planning application	Clarity of communication & accurate record-keeping	Planning Case Officers have been reminded to ensure that: documents are attached to the correct Planning Application; information given is clear and cannot be misunderstood
Building Control	Partially upheld	Complaint regarding the handling of a report of a potentially dangerous wall.	Communication	The service has been reminded to ensure that timely communications are provided and that updates of webpages occur as and when required.
Children's (AFC) - Corporate				
SEND	Upheld	Complaint regarding their child repeatedly not receiving the therapy provision set out in the EHCP.	Communication alongside process and procedure	EHCP Coordinators and Team Managers, schools and outside providers have been reminded of the importance of ensuring that they provide regular updates to all parties involved, particularly if there are challenges regarding delivery of Section F provision. The service will also consider a co-designed escalation route with the ICB (Integrated Care Board) for parties to follow if appropriate. Staff have also been reminded to double-check processes rather than applying assumptions to ensure that missing provision is followed up as quickly as possible.
SEND	Partially upheld	Complaint regarding the lack of therapy provision for their child.	Monitoring of joint working partnerships.	This case highlights the need for increased oversight and joint working with health and care colleagues to avoid future gaps in provision delivery, particularly where mental health is impacted.
SEND Transport	Partially upheld	Complaint regarding SEND transport options and provision.	Monitoring of 3rd party provision and complaint handling.	Transport routes have been reorganised so that clusters of children's homes are grouped together more efficiently, reducing journey times whilst ensuring that the use of the service's fleet is maximised. In addition to existing audits, random spot checks will now also be completed across our taxi routes to confirm assigned passenger assistants are regularly travelling when they should. Staff have also been reminded of the Council's corporate complaints procedure.
Safeguarding	Partially upheld	Complaint regarding dissatisfaction with comments featured in a set of core group meeting minutes (a child protection function that generally sits outside the statutory process).	Accuracy & timeliness of receipt, of meeting minutes	The team will be reminded of the need to adhere to the policy and procedures regarding timely recording of Core Group minutes. This requirement will also be discussed at the next team meeting. This will allow all attendees to raise any queries about the minutes within a timely manner and prevent such issues arising in the future.
Environment & Community Services				
Waste Management	Partially upheld	Complaint regarding failure to respond to faults and damage reported to the Council	Process & procedural development & monitoring	This complaint has highlighted the need to develop processes for yellow lines to be implemented to prevent parked cars restricting access for large vehicles accompanied by the required monitoring and enforcement actions to ensure processes are adhered to.
Leisure (Pools On The Park)	Upheld	Complaint regarding opposite sex cleaner in changing rooms	Signage improvements and contractor monitoring	Monitoring of the cleaning arrangements, including the display of the changing room signage will be reinforced within the daily building checklists.

London Borough of Richmond upon Thames - Annual Complaint Report 2024-25				Appendix 5
KEY LEARNING SUMMARY FROM UPHELD AND PARTIALLY UPHELD CORPORATE COMPLAINTS at Stage 2 2023-24				
Service complained about	Outcome at S2	Complaint Summary	Learning/Issue needing addressing	Management response
Culture and Leisure	Upheld	Complaint regarding library staff	Staff training & development	Staff on library front desks will undertake training to ensure that they understand when it is appropriate to enact the various library policies and that some conversations with customers may be required to be held more discreetly.
Waste Management	Upheld	Complaint regarding a missed collection and the length of time it has taken to resolve.	Process and procedural development & staff training/development.	The Waste and Street Cleansing Team along with the Customer Service Contact Centre will review the current processes and procedures relating to missed waste collections and their early resolutions, specifically automating emails to notify our waste contractors rather than Council admin staff whilst managing residents expectations accordingly. Staff have also undertaken a briefing on the Councils Corporate Complaints process.
Finance				
Revenue Services - Council Tax	Upheld	Complaint regarding the attendance of bailiffs at their home when a bankruptcy order included Council Tax debt.	Policy & Procedure development and, Staff training/development	Adjustments are being made to the Council's internal procedures to ensure that further information is sought from all relevant parties before further recovery action is initiated in such circumstances. In addition, further training is being carried out to ensure that officers are better equipped to deal with enquiries of this nature.
Revenue Services - Parking Compliance	Upheld	Complaint regarding a parking permit application and associated lack of communication	Communication Delays and Staff training/Development	The omission and delays in responding to correspondence has been identified as a training and performance issue. Staff have also been reminded of the imperative requirement for timely replies to customer correspondence and this will be closely monitored by management.
Revenue Services - Benefits	Upheld	Complaint regarding the failure to apply Council Tax Reduction to their Council Tax account.	Staff training & Development	Staff have been reminded of the need to explain how to apply for backdating and for any appropriate refunds when responding to queries from new benefit claimants regarding possible earlier benefit entitlement at the earliest opportunity.
Housing & Regeneration				
Housing Services	Partially upheld	Complaint regarding the wording used within the decision letter received.	Accurate decision-making.	This complaint has highlighted the need for officers to cross-reference all the documents available and to ensure that accurate statements are made in their decision-making process. Staff will be reminded of this and, the Council will be taking action to ensure greater monitoring of decision-making is undertaken.
Housing Services - Homelessness Prevention and Solutions	Upheld	Complaint regarding antisocial behaviour in the environs of their home	Monitoring of tenancy breaches.	Health and safety visits will be undertaken in the estate so that prompt formal action can be taken where tenancy breaches are observed. Communication will be maintained with you so that you can raise any further concerns in the most appropriate way.
Housing Services (Assessment & Adaptation)	Partially upheld	Complaint regarding homelessness application assessment and care need assessment	Communication & Reasonable Adjustments	A review of current processes will be undertaken to establish how the homelessness service can improve communications and ensure that client requests for reasonable adjustments are properly recorded from the outset of any process.

London Borough of Richmond upon Thames - Annual Complaint Report 2024-25				Appendix 5
KEY LEARNING SUMMARY FROM UPHELD AND PARTIALLY UPHELD CORPORATE COMPLAINTS at Stage 2 2023-24				
Service complained about	Outcome at S2	Complaint Summary	Learning/Issue needing addressing	Management response
Housing Services - Accommodation and Procurement	Partially upheld	Complaint regarding communication failures and the treatment of them in the provision of temporary accommodation by citing their health issues and pet ownership to explain why suitable accommodation cannot be found.	Cohesive interdepartmental service provision.	Housing and Adult Social Services to improve communication between the teams to support vulnerable households in accommodation