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### Cabinet Member for Adult Services

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**Time and Date**

2.00 pm on Monday, 4th March, 2024

**Place**

Diamond Room 1 - Council House

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**Public Business**

1. **Apologies**
2. **Declarations of Interest**
3. **Minutes** (Pages 3 - 8)
  - a) To agree the minutes of the meeting held on 4 December 2023.
  - b) Matters arising
4. **Quarter Three Performance 2023/24 - Adult Social Care** (Pages 9 - 28)

Report of the Director of Adults and Housing
5. **Adult Social Care Complaints and Representations Annual Report 2022/23** (Pages 29 - 72)

Report of the Director of Adults and Housing
6. **Outstanding Issues**

There are no outstanding issues
7. **Any other items of public business which the Cabinet Member decides to take as matters of urgency because of the special circumstances involved**

**Private business**

Nil

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Julie Newman, Director of Law and Governance, Council House, Coventry

Friday, 23 February 2024

Note: The person to contact about the agenda and documents for this meeting is Tom

Robinson, Governance Services, Email: tom.robinson@coventry.gov.uk

Membership: Councillors L Bigham (Cabinet Member) and S Nazir (Deputy Cabinet Member)

By invitation: Councillor B Mosterman (Shadow Cabinet Member)

**Public Access**

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**Tom Robinson**

**Governance Services, Email: tom.robinson@coventry.gov.uk**

**Coventry City Council**  
**Minutes of the Meeting of Cabinet Member for Adult Services held at 9.00 am on**  
**Monday, 4 December 2023**

Present:

Members:                                   Councillor L Bigham (Cabinet Member)  
  Councillor S Nazir (Deputy Cabinet Member)

Employees (by  
Directorate):

Adult Services                           P Fahy (Director), N Byrne, S Caren, C Elliot, A Errington

Law and Governance                   T Robinson

Apologies:                               Councillor B Mosterman (Shadow Cabinet Member)

## **Public Business**

### **6.       Declarations of Interest**

There were no disclosable pecuniary interests.

### **7.       Minutes**

The Minutes of the meeting held on 11 September, 2023 were agreed and signed as a true record.

There were no matters arising.

### **8.       Quarter Two Performance 2023/24 - Adult Social Care**

The Cabinet Member considered a report of the Director of Adult Services and Housing that provided an update to Adult Social Care performance for quarter two 2023/24 alongside actions in place to improve performance and proposed next steps.

Adult Social Care performance is measured in line with the Department of Health and Social Care (DHSC) national Adult Social Care Outcomes Framework (ASCOF) and this performance is reported nationally at year end.

Adult Social Care (ASC) also measures a series of locally defined indicators, which are reported to the Adult Social Care Management Team on a quarterly basis.

Alongside providing an opportunity for the Cabinet Member to provide comment, the report also gave an update on the Adult Social Care involvement approach including engagement and user experience work undertaken in the previous quarter. This is important alongside numerical performance as it provides a

context for what people with care and support needs and their carers consider important and should be used to inform areas for improvement.

An appendix to the report outlined the ASCOF figures for each of the four domains and indicators set out in the report, demonstrating the quarter two improvement of key areas in comparison to 2021/22 and 2022/23 figures. Directional arrows were displayed to summarise performance compared to previous years against these indicators. It also provided a useful comparison between Coventry City Council's figures and those at a regional and national level.

The Director of Adult Services and Housing outlined the information in the report with the Cabinet Member, providing clarification as to any significant changes in the indicator figures as well as the steps implemented to ensure continued improvement. The Head of Adult Care and Support summarised that no major concerns or trends had been highlighted in the data, with exception to the around 10% drop in the proportion of adults with learning disabilities who live in their own home or with their family – these results were however likely due to a data issue and not a performance issue. It was also noted that, while the numbers in relation to paid employment remained low, lots of work was being undertaken to address this.

Additionally, the Service Manager for Adult Communication updated the Cabinet Member on the engagement work being undertaken, especially with regard to the Service's engagement with Adult Social Care providers, recruitment events, internship providers, communication with disability confident employers, and work done with the voluntary sector.

The Cabinet and Deputy Cabinet Member asked questions, sought assurances and received responses on a number of matters including:

- Collaborations with the Job Shop to help those in care access voluntary and paid employment.
- Colour printing for the agenda, especially with regard to Appendix 1 and its colour indicators.
  - (Note: An accessible online colour agenda is provided to all Members, attendees and the public 5 working days before the meeting.)
- The Worker's Carer's Association, online training programs and the release of old IT equipment for those in care to access online training courses.

**RESOLVED that the Cabinet Member for Adult Services endorses the action taken in relation to the Adult Social Care quarter two 2023/24 performance including the next steps as outlined in the report.**

## 9. **Coventry Carers Action Plan 2024-26**

The Cabinet Member considered a report of the Director of Adult Services and Housing that outlined the updated Coventry Carers Action Plan 2024-26.

In context to the action plan, the report indicated that according to the 2021 census 27,391 Coventry residents identified themselves as unpaid carers (8% of all Coventry residents). This was a reduction from 31,900 (10% of residents) in 2011. However, the 2021 census was undertaken during the coronavirus (COVID-

19) pandemic. This may have influenced how people perceived being a carer and how individuals accepted unpaid care. It is estimated that around 10% of the Coventry population are unpaid carers. The estimated value of unpaid care in Coventry is £680 million per annum (Valuing Carers 2015).

Therefore, the report provided an update on carers' needs in Coventry, and the resulting action plan to improve the Service's support to carers in the context of these needs. This understanding of needs has been derived from analysis of the biennial Survey of Adult Carers in England 2021/22, a local 'Let's Talk' Coventry Carers Survey undertaken in 2023 and using national information and data sets.

The Carers Action Plan 2024-26 focuses predominantly on adult carers, with some alignment with young carers where required. The plan is a working document, and it is aimed to continue to work with local carers and third sector organisations to shape the priorities and actions moving forward.

Delivery is expected to be achieved within existing resources across a partnership of the City Council, NHS and third sector partners, although any opportunities to lever in additional resources will be explored.

Appendices to the report included the Carers Action Plan 2024-26 in its entirety and the Equality Impact Assessment.

The Director of Adult Services and Housing outlined the information in the report, drawing the Cabinet Member's attention to the fact that under the current plan carers in Coventry do not feel well served. The new plan aims to provide support to carers which makes them feel listened to.

The Service Manager for Adult Communications further highlighted that since the last action plan, the Service has worked on a series of key priorities and made the following improvements:

- The recommissioning of The Carers Trust.
- Work and collaboration with Admiral Nurses.
- The introduction of the Carers Self-Assessment that allows carers to access an assessment at a time that best suits them.
- The launch of the carers bulletin – 3000 subscribers receive updates to keep well informed and are connected to other areas of the Council such as finance and housing.
- Work with General Practitioners (GPs) to encourage their support for carers and collaboration with them through The Carers Trust.
- Feedback from The Carers Trust about the service and the challenges carers face on a day-to-day basis – including but not limited to finances, health and wellbeing, and isolation.

Additionally, the Service Manager for Adult Communications, highlighted that currently work is being undertaken to analyse the data collected from carers and align that to the action plan and progress through a series of priorities over the coming years. In year 1, the plan will focus on recommissioning the action plan with the aim to holistically improve the social contact of carers and work with third sector organisations to buy back care for carers to provide them with more spare time. In year 2, the focus will turn to getting carers more support, including more technological and IT support to give them a break and avoid any potential periods

of social isolation alongside improved advice and information with regards to ongoing issues such as the cost of living.

It was also noted that initial feedback from carers as to the plan has been positive, but as more data is collected from a national and local level the more the Service will engage with differing carers groups.

In summarising, prior to its official launch this month, officers stressed that they want the plan to evolve and will continue to make improvements and updates to make sure it is progressing with Adult Social Care.

The Cabinet and Deputy Cabinet Member asked questions, sought assurances and received responses on a number of matters including:

- Accredited GPs, their locations in the city, and ease of access for carers.
- The provision of instant and emergency support – the role of The Carers Trust in providing emergency support.
- The Milan Carers Group and the extremely beneficial support they provide.
- Resolving annual data lag with direct carer engagement and local surveys.
- Young carer engagement.
- Ensuring people recognise that they are carers – the role of the pandemic in keeping carers housebound and working with other Council services and third-party shareholders to reach out to unforthcoming carers to make them aware of available support.

**RESOLVED that the Cabinet Member for Adult Services endorses the action taken in relation to the Carers Action Plan 2024-26 including the next steps as outlined in the report.**

#### 10. **Adult Social Care Workforce Strategy 2023-26**

The Cabinet Member considered a report of the Director of Adult Services and Housing that outlined the Adult Social Care Workforce Strategy 2023-26.

The report emphasised that above all, a valued and respected workforce is critical to the delivery of Adult Social Care. The Service supports and develops the workforce, both their own and those of their partners, wherever possible to ensure they have the necessary skills, knowledge, values and attributes to provide effective care and support. We recognise that our workforce is key to the delivery of our Adult Social Care Offer in Coventry.

This Adult Social Care Workforce Strategy focused on Adult Social Care's workforce, both internally within the Council and the external social care providers and the challenges they face together. It was also a statement of their workforce priorities and the action taken to deliver them. Coventry's Adult Social Care workforce is diverse with people working for the independent sector, local authority, and for people in receipt of direct payments.

The Adult Social Care Workforce Board and Adults Joint Commissioning Group will have oversight of the Adult Social Care Workforce Strategy and associated action plans. They will receive reports on progress and take the lead in ensuring the Strategy is reviewed and refreshed and that actions are being delivered.

Appendices attached to the report included both the Workforce Strategy 2023-26 in its entirety and an Equalities Impact Assessment.

The Head of Practice Development and Safeguarding outlined to the Cabinet Member the importance and far-reaching impact of delivering a workforce strategy for around 10,000 Adult Social Care staff in Coventry altogether. With this in mind, it was felt that the strategy should be simple and digestible to ensure it is widely read. Specifically, workforce planning was a key focus of the strategy, especially in posts where it is traditionally hard to recruit. Engagement events and 'work packs' were also highlighted as key aspects of the work being done as part of the strategy.

The Cabinet and Deputy Cabinet Member asked questions, sought assurances and received responses on a number of matters including:

- Rising salaries and the inability to effectively provide the appropriate salaries equivalent to ASC roles.
- Career paths – making the image of carers more appealing through training and visualising the value of the work.
- Majority female carers and how to engage other genders to come forward and join the carers workforce – socialised, stereotypical and gender biased roles and the issues caused in the health sector as a result.

The Cabinet Member gave her thanks to officers for the comprehensive report and the work being done to implement such a vital workforce strategy for Adult Social Care.

**RESOLVED that the Cabinet Member for Adult Services endorses the Adult Social Care Workforce Strategy 2023-26.**

**11. Outstanding Issues**

There were no outstanding issues.

**12. Any other items of public business which the Cabinet Member decides to take as matters of urgency because of the special circumstances involved**

There were no other items of urgent public business.

(Meeting closed at 9.55 am)

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Cabinet Member for Adult Services:

4<sup>th</sup> March 2024

**Name of Cabinet Member:**

Cabinet Member for Adult Services – Councillor L Bigham

**Director approving submission of the report:**

Director of Adults and Housing

**Ward(s) affected:**

All

**Title:**

Quarter Three Performance 2023/24 – Adult Social Care

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**Is this a key decision?**

No - although adult social care is city wide, covering all wards, this report does not contain any specific proposals.

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**Executive summary:**

Adult Social Care performance is measured in line with the Department of Health and Social Care (DHSC) national Adult Social Care Outcomes Framework (ASCOF) and this performance is reported nationally at year end.

Adult Social Care (ASC) also measures a series of locally defined indicators, which are reported to the Adult Social Care Management Team on a quarterly basis.

This report outlines performance against these key indicators for quarter three 2023/24. Directional arrows are displayed to summarise performance compared to previous years against these indicators.

This report updates the Cabinet Member for Adult Services on the quarter three performance, actions in place to improve performance and proposed next steps. It also provides an opportunity for the Cabinet Member to provide comment and steer of the directorate.

The Cabinet Member for Adult Services will be provided with a quarterly report on performance which feeds into the Adult Social Care Annual Report and annual performance report received by the Cabinet Member and Health and Care Scrutiny Board.

The report also gives an update on our Adult Social Care involvement approach including engagement and user experience work undertaken in the previous quarter. This is important alongside numerical performance as it provides a context for what people with care and support needs and their carers consider important and is used to inform areas for improvement.

**Recommendations:**

**The Cabinet Member for Adult Services is recommended to:**

- 1) Note and endorse the action taken in relation to the Adult Social Care quarter three 2023/24 performance including the next steps as outlined in this report.
- 2) Provide any comments in relation to the report and specific actions required as a result.

**List of Appendices included:**

The following appendices are attached to the report:

Appendix 1 - Summary ASCOF 23-24 outlines the Quarter Three ASCOF measures.

**Background papers:**

None

**Other useful documents**

None

**Has it or will it be considered by Scrutiny?**

No

**Has it or will it be considered by any other Council Committee, Advisory Panel or other body?**

No

**Will this report go to Council?**

No

## **Report title: Quarter Three Performance 2023/24 – Adult Social Care**

### **1. Context (or background)**

- 1.1 Adult Social Care performance is measured in line with the Department of Health and Social Care (DHSC) national Adult Social Care Outcomes Framework (ASCOF) and this performance is reported nationally at year end.
- 1.2 The Adult Social Care Outcomes Framework also measures a series of locally defined indicators, which are reported to the Directorate Management Team on a quarterly basis.
- 1.3 This report outlines performance against these key indicators for quarter three of 2023/24. Directional arrows are displayed to summarise the direction of movement for these measures. Also outlined is information on how Coventry benchmarks against other local authorities based on most recent benchmarking information from 2022/23.
- 1.4 There has been a revision of ASCOF measures for the 2023/24 reporting year, and as such, the year-end performance report for 2023/24 will include these revised measures. This does present some challenges in terms of benchmarking data not being available for these measures until around November 2024.
- 1.5 2022/23 marked a substantial improvement in performance across some areas which is important context for 2023/24 where we will aim to consolidate improved performance in a number of areas as well as progress further in others.
- 1.6 ASCOF Performance is reviewed regularly by the senior management team supported by a performance dashboard.

### **2. Performance**

Adult Social Care regularly monitors performance against the indicators at operational and strategic levels. This enables remedial actions to be put in place. For Q1 and Q2 and Q3 there has been focus on safeguarding activity, reviewing and working across the Council to identify employment alternatives for those adults with a learning disability and improving engagement with carers.

#### ASCOF National Indicators

In respect of specific performance indicators quarter three commentary is as follows: (All comparator data is for 2022/23. Note that between quarters it would be unexpected to see a marked change in any indicator but there will be normal fluctuations in performance over time. What is important to identify is where a marked change has occurred, or an upward or downward trend is developing over time.

#### **2.1 Domain 1 below sets out the section on ‘Enhancing the quality of life for people with care and support needs’.**

##### **2.1.1 Proportion of adults receiving self-directed support**

99% of people are receiving self directed support as at the end of Q3. This is in comparison to the West Midland comparator Figure of 95.4%. (2022-23 figure). This is a marginal change that is reflective of normal variation throughout the year.

### **2.1.2 Proportion of carers receiving self-directed support**

100% of carers are receiving self directed support as at the end of Q3. This is in comparison to the West Midland comparator Figure of 85.4 %. This is a sustained performance for the service.

### **2.1.3 Proportion of adults receiving direct payments**

22.3% of people are receiving direct payments as at the end of Q3. This is in comparison to the West Midland comparator figure of 26.7%. There has been no change from Q2. Work continues to review our Direct Payment approach and we have developed new promotional materials including videos from those receiving a payment which have been produced to support uptake and understanding.

### **2.1.4 Proportion of carers receiving direct payments for support direct to carer**

66.7% of carers are receiving direct payments for support direct to them - this is an improvement on Q2 and our outturn in the last 2 years but remains lower than the West Midland comparator figure of 77.9%. Work continues to review our Direct Payment approach and we have new promotional materials to support uptake. Recognising this as an area requiring further improvement, the Carers Action Plan contains a specific priority to promote and increase uptake of carers assessments, of which will explore the use of direct payments to support carers in a tailored way. Our Coventry Carers Survey highlighted that awareness of direct payments amongst carers is low; work is currently underway to create carer-specific direct payment information and leaflets and increase awareness of their use with practitioners to ensure these are fully explored with carers at assessment. Coventry City Council also commission specific carers support via the Carers Trust Heart of England to ensure carers are adequately supported with or without a direct payment.

### **2.1.5 Proportion of adults with learning disabilities in paid employment**

2.2% at Q3 (16 adults) with a learning disability known to Adult Social Care are in paid employment. This position has slightly improved from Q2 but is lower than the West Midland comparator figure of 3.2%. Work continues to be undertaken by the Commissioning team in partnership with the Adult Education Team. The goal of this is enhancing recruitment prospects for individuals in Coventry with an Education, Health and Care Plan (EHCP) facing learning barriers including learning disabilities, mental ill health, Autism, physical disabilities.

### **2.1.6 Proportion of adults with learning disabilities who live in their own home or with their family**

79.8% of adults with learning disabilities live in their own home or with their families. This compares with the West Midlands comparator of 71.4% in 2022/23 and has increased from 70.7% in Q2. Improved data quality linked to a mandatory requirement on major assessment forms since 1<sup>st</sup> April 2023 will have impacted on this improvement.

## **2.2 Domain 2 sets out the section for 'delaying and reducing the need for care and support'.**

### **2.2.1 Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population.**

In the last year we saw a reduction in numbers of working age adults admitted to long term residential and nursing care. Whilst the estimate is 24.3 per 100,000 (a reduction on the previous year it remains higher than the West Midlands average of 17.8. There has been

significant emphasis on the development of alternative provision for adults with enduring mental ill health and/or learning disability and new models of support planned to reduce admission further. Whilst there was an increase in admissions between periods this is subject to seasonal variation

### **2.2.2 Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population.**

The estimated end of year figure is that of 641 older adults (65+) admitted to residential and nursing homes per 100,000 population. The West Midlands comparator figure is 607.9. In 2022-23 there were 723 residents overall admitted showing an improvement based on the current trajectory. However there has been an increase in the end of year estimate from 587 to 641 from Q2 to Q3. Whilst there was an increase in admissions between periods this is subject to seasonal variation

### **2.2.3 Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation (effectiveness of the service)**

At Q3 84.3% of people aged 65+ were still at home 91 days after discharge a small decrease between quarters which can vary based on seasonal impacts. This compares positively with the West Midlands figure of 81.6%. In 2022-23 Coventry's figure was 81.1% showing an improvement.

### **2.2.4 Proportion of those that received a short-term service during the year where the sequel to service was either no ongoing support or support of a lower level**

76.4% of people in Q3 received a short-term service with little or no ongoing support a small decrease from Q2 but this is subject to variation throughout the year. In 2021-22 this figure was at 75% showing an improvement. The West Midlands comparator figure is 74.1%. This is due to the Adult Social Care Promoting Independence model and therapeutic front door approach leading to improved independence outcomes. Performance in quarter three this year is impacted positively by the Improving Lives work programme across local NHS organisations and Social Care.

## **2.3 Adult Social Care Local indicators**

In respect of directorate indicators quarter 3 commentary is as follows:

### **2.3.1 Reviews for people in long term support for 12+ months**

1404 out of 2696 clients accessing long-term services for more than 12 months had a planned/unplanned review during 2023/2024. By the end of the Q3 53.4% of people received a review, which is an improvement on Q2 49.6%.

Number and proportion of people receiving reviews are increasing year on year:  
Please Note: The COVID-19 pandemic continued to affect reviews from 2020-22

- 42.5% in 2020-21
- 44.9% in 2021-22
- 49.2% in 2022-23

Coventry ranked 101<sup>st</sup> nationally, where national average was 57% and 9<sup>th</sup> out of 14 regionally, where West Midlands average was 64% in 2022-23.

There is an improvement plan in place with an aim of achieving 60% compliance within Adult Social Care. Our performance of 53.4% at quarter 3 gives a good level of assurance that we will achieve 60% reviews by the end of 2023/24, with a focus on the longest waiting for a review.

Our review performance has been lower in previous years due to the prioritisation of new requests over and above reviewing activity. Targeting resources in this way has been necessary to ensure that those without care provision are safeguarded, supported and the impact on the NHS is reduced. Equally, and despite the additional contacts in the last 12 months this has enabled the focus on promoting independence and enablement that has ensured our conversion into long term support provision has improved from 5% to 4.4% as at February 2024

Whilst outturn performance is lower than the national average, significantly more people in receipt of services will have been consulted on their support provision either through the annual reviews undertaken by Internally Provided Services or via the DoLS assessment process. This offers greater assurance particularly for those placed out of city.

### **2.3.2 Completion timescales for comprehensive Care Act Assessment (average of days)**

An assessment starts as soon as the local authority begins to gather information about the person. This is essentially at the point the person contacts the local authority; however, many people require a comprehensive assessment to support the determination of whether needs are eligible for care and support from the local authority and understanding how the provision of care and support may assist the adult in achieving their desired outcomes. The initial contact with the person enables us to consider their immediate needs and associated risks and therefore this discussion starts the assessment process. The timescale from the point the person contacts the local authority to completion of a comprehensive assessment is on average 84 days which is an improvement on the average of 110 days overall during the year 2022-23. There has been a slight decrease from Q2 from 96 days to 80 days wait time in Q3 2023-24.

In the period between assessment start and assessment completion the management of risk is a priority, with regular contact taking place to monitor changing circumstances and levels of risk. It is also critically important to appreciate that over this period people are not left without support where it is needed with support often put in place as an interim measure while assessment is ongoing, with the assessment determining whether the support provided is effective and what support would be required, if any, on an ongoing basis.

### **2.3.3 Completion of comprehensive Care Act Assessment (number of people)**

As in paragraph 2.3.2, an assessment starts as soon as the local authority begins to gather information about the person. In Q3 388 people have an uncompleted Care Act Assessment. This is an improvement on the 461 at the end of the year 2022-23 but an increase from the Q2 figure of 330. The number of people with an uncompleted assessment is reducing overall.

Our commitment to Promoting independence remains one of our core principles and we make best use of short-term services for new people contacting Adult Social Care to promote independence as well as reduce demand on long term services.

## **2.4 Safeguarding Performance**

Safeguarding concerns can be received by Customer Services, Community Discharge Team (Hospital) or directly by practitioners undertaking casework with each of our teams completing safeguarding work.

Decisions in relation to safeguarding concerns and requirement to undertake enquires are primarily led by Intake and Hospital Teams. A performance report is produced that includes data covering the 'end to end' safeguarding process, enabling the tracking of activity, comparison to previous year's performance and identification of any variance in performance. At the end of Q3 5,151 safeguarding concerns had been received (projection for end of year 6,868 compared to 6,278 in 2022-23. 995 safeguarding enquiries have started (projection for end of year 1327, 1055 in 2022-23. The current conversion rate from concern to enquiry is 19% (West Midlands regional median is 16%). As of end of Q3, 94% of safeguarding enquiries resulted in risk being reduced or removed and 80% of safeguarding enquiries were completed in 3 months.

As safeguarding is undertaken across different teams this whole service information is supplemented by a regular report to Adult Social Care Management Team identifying the numbers of safeguarding concerns received, enquiries concluded, categories of abuse recorded and open safeguarding cases. Safeguarding public information as well as in English is now available in the 6 main languages used in Coventry Polish, Punjabi, Urdu, Arabic, Romanian and Tigrinya.

## **2.5 Adult Social Care Involvement and Engagement Approaches**

### **Carers**

2.5.1 The Carers Action Plan 2024-26 was formally approved by Cabinet Member for Adult Services on 4<sup>th</sup> December 2023. The action plan was informed by direct carer feedback and will focus on three priorities:

- a. Empowering carers with flexible respite options, ensuring they can take breaks.
- b. Delivering the right support, at the right time, and in the right place.
- c. Maximising the reach of carers assessments to benefit more carers.

A further update on progress of the action plan will be provided for the Q4 2023/24 report.

2.5.2 Support for carers has been ongoing throughout quarter 3. On 10<sup>th</sup> October, Adult Social Care colleagues attended an event hosted by Carers Trust to inform carers of support available. The team hosted a stall with printed resources for attendees, informing and answering questions on topics such as financial entitlement, cost of care, and activities. These pop-up events are popular with adults in Coventry and offer meaningful information sharing on a personalised basis and a key way of reaching different demographics in the City.

2.5.3 On 1<sup>st</sup> November, the Adults Commissioning Team attended a carers group organised by the Alzheimer's Society for carers of adults with dementia. The Adult Commissioning Team hosted a presentation to inform carers of support available via community organisations and adult social care. The session was attended by over twenty carers and was well received, further sessions based on feedback from carers are to be arranged during the year and a 'What do I do if' leaflet based on questions raised in this session is in production.

2.5.4 On 2<sup>nd</sup> November, the Adult Commissioning Team attended a community workshop organised by Carers Trust. The workshop aimed to facilitate links between community organisations supporting carers. The workshop explored barriers to supporting carers, how we can overcome them, and how organisations present could support each other to improve outcomes. The event hosted over 20 community organisations and stakeholders and was an opportunity to share good practice and develop partnership working. The Adult Commissioning Team will be utilising contacts made through this session in Quarter 4 and onwards to further support carers.

- 2.5.5 To further raise the profile of carers, the Adult Commissioning Team celebrated Carers Rights Day on Thursday 23<sup>rd</sup> November. The team arranged for the city to be lit up in blue in support of unpaid carers and Carers Trust facilitated a range of activities such as craft, information pop ups and social groups. All events were well attended by carers. The Carers Trust also continue to arrange groups with carers to socialise and take part in different activities to improve wellbeing, such as flower arranging and virtual yoga.
- 2.5.6 Quarter 3 saw additional work undertaken to support carers by the Commissioning Team in the production of the Working (unpaid) Carers Network for internal Council staff. The first network meeting took place in December with over 30 attendees. The meeting covered various topics with a focus on carers' rights in the workplace and understanding what members would like to benefit from the network moving forward.
- 2.5.7 The Network has grown to over 90 members over this quarter. To continue to support carers through the network, the Working (unpaid) Carers Network will host its first in-person event in Quarter 4 and facilitate a MSTeams chat to share information, resources, and allow members to network.

### **Provider engagement and events**

- 2.5.8 Following the in-person provider forum in Quarter 2 for residential Learning Disability and Mental Health service providers, further engagement was undertaken with residents during Quarter 3. The Adult Commissioning Team visited care homes to engage with residents to further understand their lived experience, specifically in respect of quality, choice and control, satisfaction, and safety. Results of this engagement were largely positive, illustrating that residents are generally satisfied with their social care provider and residential experience. To progress this work, further engagement will be undertaken during Quarter 4 to obtain feedback from family and carers of adults in Learning Disability and Mental Health residential services. All feedback gathered will then be analysed and used to inform both the upcoming commissioning activity for learning disability and mental health residential framework and improve delivery of existing provision.
- 2.5.9 Quarter 3 also saw a continuation of the Adult Commissioning Team's aim to improve rates of paid employment for adults with a learning disability or mental ill health. There were further developments with the Adult Education team's Supported Internship programme which the Commissioning Team had previously assisted to expand its remit to include Adult Social Care employers. Supported Interns receive a 9-month supported placement and are often permanently hired before the 9 months end. In November, an intern was placed within Coventry Resource Centre for the Blind (CRCB) to work in a social media placement; with two further Adult Social Care providers currently ready and available to facilitate a supported intern.
- 2.5.10 Additionally, a workshop was held with a focus group of several teams and external organisations to improve levels of paid employment of adults with a learning disability, autism or mental ill health and explore potential areas for joint working. It was decided in this workshop that there is potential for multi-organisational partnered working moving forwards. Therefore, a further workshop is planned for Quarter 4 to explore this in more detail with additional organisations. Work in this area continues through the promotion of the GovUK Disability Confident Scheme in the Adult Social Care Provider Bulletin and provider forums to encourage meaningful employment practice amongst Adult Social Care providers.
- 2.5.11 In continuation of the recruitment and retention offer delivered by the Commissioning Team to the market in Quarter 1, the Commissioning team undertook two recruitment events in Quarter 3. On October 10<sup>th</sup>, a recruitment event was held at Job Centre+ to enhance recruitment and retention within Adult Social Care. Job Centre+ identified pre-screened candidates looking for



Adult Social Care roles with the Commissioning Team providing 8 employers with live vacancies. The event was in a 'speed-dating' format to enable informal conversations between potential candidates and employers, with over 20 jobseekers in attendance resulting in at least 3 successful candidates. Learning from this, future events in this format will take place on a smaller scale to enable quality conversations and networking opportunities for candidates.

2.5.12 On 6<sup>th</sup> December, a second recruitment event was held with the Job Centre+ for Quarter 3. This event was held at their West Orchards site to attract a wider demographic of recruits. The Job Centre+ again provided pre-screened candidates with timed appointments. The Adult Commissioning team invited 3 Adult Social Care providers with multiple live vacancies. The event led to various follow-up interviews, trial shifts and the employment of at least 3 people as a result of the event. One Adult Social Care provider in attendance fed back "I thought it was brilliant!! It certainly took away all the prep work and hassle of no shows for me. I invited three candidates to complete unpaid shadow shifts and they were all happy to join. So, all in all, 3 out of 18 interviewed is a great result for me." The Adult Commissioning Team will continue to facilitate recruitment events and build links between the provider market and Job Centre+ through Quarter 4, working towards this area requiring minimal commissioning input moving forward.

2.5.13 On 18<sup>th</sup> October, the quarterly Older People's residential and nursing provider forum took place with approximately 15 providers in attendance. The agenda included speakers from CV Life promoting wellbeing activities for residential home residents 50+, resulting in 3 providers linking in with CV Life to arrange activities for residents. The Adult Social Care Commissioning Team will continue to work with CV Life throughout 2024 to facilitate activities to increase wellbeing through active movement, which will be promoted in future provider forums. Providers can access details of these forums through their Contract Officers or the events calendar on the Adult Social Care Commissioning Microsite.

2.5.14 On October 24<sup>th</sup>, to continue supporting providers based on needs identified through various engagement, an information session was held for providers with the theme of Safeguarding. This session was led by the Safeguarding Team and hosted 100+ attendees via Teams. The session included a run-through of the safeguarding process with a high engagement and interest throughout. The Coventry Safeguarding Board will be creating a stakeholder forum with two providers set to participate to offer a provider perspective. In addition, dedicated escalation inboxes for safeguarding concerns and payment-related queries have been created to ensure we are meeting providers needs in a timely manner.

2.5.15 The Adult Commissioning Team will continue to provide information sessions for providers, including additional safeguarding sessions as requested by the market, and will update the Adult Social Care Commissioning Microsite with additional safeguarding resources. Further resources such as a safeguarding information leaflet will be produced and shared with providers.

2.5.16 In continuation of the Adult Social Care outreach work to engage with diverse communities across Coventry, an additional Adult Social Care Open Day took place on 15<sup>th</sup> November 2023 at the Cheylesmore Community Centre. The location, selected at the request of a local councillor, highlighted Cheylesmore as an area whose communities would benefit from additional information and resources. Approximately 15 Adult Social Care stalls were hosted by various internal and external teams and a total of 60 plus people in attendance. These events will continue throughout 2024 working to target diverse areas and demographics of the city. The team continue to prioritise proactively bringing information into communities and supporting the voluntary sector to make valuable links with other local organisations.

- 2.5.17 Continuing from Quarter 2, on 1<sup>st</sup> November, the second Voluntary, Community and Social Enterprise (VCSE) event was held in Friargate to ensure professionals are fully informed on services and support available. The Winter VCSE event targeted Adult Social Care practitioners and other council colleagues to inform of the support offered by various community organisations to adults in Coventry with care and support needs. Over 20 community organisations had stalls ranging from support for unpaid carers to hoarding therapies. The event was well attended by over 100 colleagues from a range of teams. These events will continue to be held twice a year, allowing organisations to network and make key links with other professionals.
- 2.5.18 In-between events, practitioners can access the ASC Practitioner Hub developed by the Commissioning Team on the internal Intranet. The Hub serves as a centralised resource to save time and share information and resources. The Practitioner Hub continued to be updated throughout Quarter 3 and updates will be ongoing throughout 2024. To date, the Hub has received 659 views.
- 2.5.19 The Adult Social Care Commissioning Team have worked throughout the year in partnership with the internal Digital Transformation Officer to enhance uptake of digitisation within the Adult Social Care sector. Digitisation of social care records was a particular priority to safely record and update care plans with an approved digital provider. This was facilitated by the West Midlands Combined Authority Digital Transformation Fund (DTF) grant funding.
- 2.5.20 On 5<sup>th</sup> December, the team held a Digital Information Event to inform providers of what support is available to them to enhance their services through the use of digital innovation. Over 25 providers attended the session and were informed on digital support available such as grant funding and information sessions. A total of 28 providers have accessed grant funding since the promotion of the grant began.
- 2.5.21 Consistent email communications have been sent to providers throughout Quarter 2 and 3 to promote uptake of the DTF Grant, how to achieve Data Security Protection Toolkit (DSPT) compliance, benefits of using digital social care records (DSCR), and promoting the use of NHS Email. Providers seem to be supportive to this, evidenced by 'Digital Transformation' being in the top 2 most visited pages of the ASC Commissioning website in November. To continue this work, the ASC Commissioning Team will continue to communicate digital support to providers such as the January 2024 DTF Grant window and the grant window for Falls Prevention and Detection Technology funding.
- 2.5.22 Feedback is continuously sought from people accessing support via the Experience Survey which is a real-time survey enabling Adult Social Care to have an ongoing picture of how services are viewed, rather than relying solely on the annual survey which gives a snapshot in time. However, there is a need to increase the number of respondents to the Experience Survey. At the end of Q3 a total of 109 surveys had been completed. To obtain an alternative comparable picture to the annual statutory postal survey the target is to receive 300 completed surveys for 2023/24. People are also asked if they want to receive more information about Adult Social Care and 'get involved', helping to grow the group of people who engage with the service.
- 2.5.22 Survey responses when compared with postal surveys and ASCOF returns identify more positive responses to a person's quality of life, feeling safe and satisfaction with services.
- 2.5.23 Stakeholder groups and partnership boards including the Adult Social Care Stakeholder Group, the Coventry and Warwickshire Learning Disability Partnership Board and the Autism Partnership Board continue to be supported.

2.5.24 Moving forward, activities to continue to strengthen the communication and feedback loop are being undertaken:

- Continue to grow the number of people who want to be involved and hear their views. Where ASC have acted on feedback, this will be shared on the ASC webpages via a new 'We asked, you said, we did' page.
- The work of Adult Social Care continues to be supported by the ASC Stakeholder Group, who meet regularly to discuss any updates and influence the improvements of the service. The group is made up of Coventry residents who are experienced in how services work.
- Continued engagement activity in communities across the city such as ASC Open Day's, pop-up stalls, drop-in sessions and presence at partner events.
- Attendance at faith group events and venues are planned to take place during the next quarter

### **3. Options considered and recommended proposal**

3.1 There are no specific options associated with this report.

### **4. Results of consultation undertaken**

4.1. Consultation is not specifically required on the content of this report, however the detail included in the Adult Social Care involvement approach above, demonstrates how we are seeking to engage on an ongoing basis with people who require support from Adult Social Care and their carers.

### **5. Timetable for implementing this decision**

5.1. The process of performance management and performance improvement is continual, so no specific timescales are associated with this report. Further quarterly reports will be brought to demonstrate performance as the year progresses.

### **6. Comments from Director of Finance and Resources (Section 151 Officer) and Director of Law and Governance**

6.1. Financial Implications

There are no direct financial implications arising from this report.

6.2. Legal Implications

Whilst there are no specific legal implications arising from the contents of this report at this stage, it is of note that the Local Authority's general responsibility in delivering services to local people is to promote individual well-being and ensure a vibrant, diverse and sustainable market in services for meeting care and support needs for people in its area. The Adult Social Care Outcomes Framework measures how well local care and support services achieve the outcomes that matter to most people and assist in setting national and local priorities for care and support.

### **7. Other implications**

## **7.1. How will this contribute to the One Coventry Plan?**

7.1.1 The performance information and associated improvements outlined within this paper will contribute towards the following One Coventry Plan priorities:

- Improving outcomes and tackling inequalities within our communities
- Increasing the economic prosperity of the city and region
- Council's role as a partner, enabler and leader
- Continued financial sustainability of the council

7.1.2 Throughout the quarter, the objective of the One Coventry Plan, which aims to prioritise carers, was put into action. This involved facilitating training and support sessions, conducting engagement activities to encourage participation in the Unpaid Carers Survey, and maintaining a presence from the Commissioning Team at various carer events and activities across the city.

7.1.3 Adult Social Care has also continued to expand its reach into communities to support improving outcomes and tackling inequalities through a series of events and initiatives. This has also encompassed collaboration with a range of partner organisations reinforcing the Council's role as a partner, enabler and leader.

7.1.4 Many of the strengths-based approaches used within Adult Social Care practice will help support the continued financial sustainability of the Council and also helping to increase the economic prosperity of the city and region by enabling people to remain independent, access employment and activities within the community whilst reducing the reliance upon services. With approximately 9,600 adult social care jobs within Coventry the workforce is also making a significant contribution towards helping to increase the economic prosperity of the city and region.

## **7.2. How is risk being managed?**

7.2.1 Adult Social Care are working on a number of Improvement Plans to help support positive progress in a number of service areas specifically relating to waiting times for assessment and delays in the undertaking of Annual Reviews for those in receipt of services.

7.2.2 The use of a risk management tool "Responding to Needs Assessment Requests", introduced in 2022, also supports in mitigation of risk, enabling practitioners to make well informed decisions when managing demand.

7.2.3 The Adult Social Care Management Team continuously monitor risk within services through the use of an Adult Social Care Risk Register and the Corporate Risk Register, with the support of the council Insurance Manager.

## **7.3. What is the impact on the organisation?**

None

## **7.4. Equalities / EIA**

Equalities information and data is continuously monitored within Adult Social Care.

**7.4 Implications for (or impact on) climate change and the environment?**

None

**7.5 Implications for partner organisations?**

None

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**Enquiries should be directed to the above person**

<b>Contributor/approver name</b>	<b>Title</b>	<b>Service Area</b>	<b>Date doc sent out</b>	<b>Date response received or approved</b>
Sally Caren	Head of Adult Social Care and Support	Adult Services and Housing	09.02.24	14/02/24
Aideen Staunton	Head of Service Partnerships and Social Care Operations	Adult Services and Housing	9.02.24	09.02.24
Tracey Denny	Head of Service Localities and Social Care Operations	Adult Services and Housing	09.02.24	15/02/2024
Andrew Errington	Adults Principal Social Worker	Adult Services and Housing	02.02.2024	07.02.24
Jon Reading	Head of Commissioning and Quality	Adult Services and Housing	02.02.24	14.02.24
Ewan Dewar	Head of Finance	Finance	11.02.24	12.02.24
Thomas Robinson	Governance Services Officer	Law and Governance	19.02.24	19.02.24
Lisa Lawson	Programme Manager	Adult Services and Housing	09.02.24	15.02.24
Oluremi Aremu	Head of Legal and Procurement Services	Law and Governance	16.02.24	16.02.24
<b>Names of approvers for submission: (officers and members)</b>				
Pete Fahy	Director of Adult Services and Housing	Adult Services and Housing	11.02.24	16.02.24
Councillor L Bigham	Cabinet Member for Adult Services	Member Services	12.02.24	15.02.24

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## Adult Social Care Outcomes Framework (ASCOF) 2017/18 to 2023/24

Red = 2021/22 as not available in 2022/23

Indicator	Brief Description	Coventry									Improvement	Peer Group 2022/23	West Mids 2022/23	England 2022/23	Rank - England 2021/22	Rank - England 2022/23	Quartile 2022/23	Improvement Return to move to next quartile
		2017/18	2018/19	2019/20	2020/21	2021/22	2022-23	2023-24 Q1	2023-24 Q2	2023-24 Q3								
<b>Domain 1 - Enhancing quality of life for people with care and support needs</b>																		
1A	Social care-related quality of life	18.7	19.1	19.2	N/A	18.9	18.6	NA	NA	NA	NA	18.7	19.1	19	70	112	3	19
1B	Proportion of people who use services who have control over their daily life	70	78.5	75	N/A	73.7	74%	NA	NA	NA	NA	73.1	77.7	77.2	121	121	4	74.7
1C1A	Proportion of adults receiving self-directed support	88	87.8	88.3	88	86.8	100%	99.8%	99.7%	99.0%	↓	98.1	95.4	93.5	132	1=	1	=
1C1B	Proportion of carers receiving self-directed support	20	43.1	44.7	51	37.1	100%	100.0%	100.0%	100.0%	↔	85.3	85.4	89.3	143	1=	1	=
1C2A	Proportion of adults receiving direct payments	23	22.7	23.9	23	23.4	23%	22.0%	22.0%	22.3%	↔	29.2	26.7	26.2	90	94	3	25.2
1C2B	Proportion of carers receiving direct payments for support direct to carer	20	43.1	44.7	51	37.1	54%	52.3%	62.4%	66.7%	↑	71	77.9	76.8	128	118	4	66.1
1D	Carer-reported quality of life	NA	7.5	NA	N/A	7	7	7	7	7	↔	7.1	7.2	7.3	94	N/A	3	7.2
1E	Proportion of adults with learning disabilities in paid employment	4 (27)	3 (19)	3.3 (24)	3 (23)	2.6 (19)	1.9 (15)	1.9 (14)	1.9 (14)	2.2 (16)	↑	3.6	3.2	4.8	111	128	4	2.7
1G	Proportion of adults with learning disabilities who live in their own home or with their family	78	79	78	80	77.5	80%	79.0%	70.7%	79.8%	↑	75.4	71.4	80.5	99	86	3	81.8
1I1	Proportion of people using services reporting they had as much social contact as they would like	45	47.3	42.3	N/A	41.7	45%	NA	NA	NA	NA	43.5	47.1	44.4	55	69	2	48.1
1I2	Proportion of carers who reported that they had as much social contact as they would like	NA	38.2	N/A	N/A	24.6	24.6%	25.8%	25.8%	25.8%	↑	28.4	29.4	28	103	N/A	3	26.7
1J	Adjusted Social Care-related quality of life - impact of Adult Social Care Services	0.39	0.391	0.408	N/A	0.439	0.423	NA	NA	NA	NA	0.408	0.422	0.411	10	50	2	0.429
<b>Domain 2 - Delaying and reducing the need for care and support</b>																		
2A1	Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population	18	18.9	32.7	25.8	35.1	24.8	5.1 estimated end of year 17.1	12 estimated end of year 23.6	18.6 estimated end of year 24.3	↓	15.6	17.8	14.6	147	141	4	17.8
	Number of admissions	42	45	79	62	87	56	11	26	42								40
2A2	Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population	684.3	768.5	766.5	634.1	810.5	723	159 estimated end of year 557	297 estimated end of year 587	501 estimated end of year 641	↓	550.5	607.9	560.8	138	128	4	669.6
	Number of admissions	322	384	385	321	409	367	80	150	254								339

2B	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation (effectiveness of the service)	81	81.5	80.3	82	84	81.1%	82.7%	85.9%	84.3%
2B2	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (offered the service)	4.6%	3.8%	4.5%	6.5%	6.9%	6.0%	NA	NA	NA
2D	Proportion of those that received a short term service during the year where the sequel to service was either no ongoing support or support of a lower level	74.7	72.3	66.8	60	65.1	75.0%	82.6%	79.5%	76.4%



83.7	81.6	82.3	78	95	3	83.5
4.5	4.4	2.9	8	15	1	=
74.4	74.1	77.5	110	89	3	78.3

**Domain 3 - Ensuring that people have a positive experience of care and support**

3A	Overall satisfaction of people who use services with their care and support	60	63.4	63.1	N/A	62	60.5%	NA	NA	NA
3B	Overall satisfaction of carers with social services	NA	40.1	NA	N/A	32	32%	33.2%	33.2%	33.2%
3C	Proportion of carers who report that they have been included or consulted in discussion about the person they care for	NA	73.7	NA	N/A	66.5	66.5%	69.2%	69.2%	69.2%
3D1	Proportion of people who use services who find it easy to find information about services	69	65	69.8	N/A	66.2	70.5%	NA	NA	NA
3D2	Proportion of carers who find it easy to find information about services	NA	60.1	NA	N/A	58.7	58.7%	60.4%	60.4%	60.4%

NA



NA



61.7	65.1	64.4	103	118	3	64.7
35.9	34.6	36.3	110	N/A	3	36
64.1	61	64.7	50	N/A	2	68.1
66.1	65.6	67.2	61	39	2	71
54.7	54.8	57.7	60	N/A	2	61.8

**Domain 4 - Ensuring people are safe and protected from avoidable harm**

4A	Proportion of people who use services who feel safe	72	69.7	76.7	N/A	72.0	69.9%	NA	NA	NA
4B	Proportion of people who use services who say that those services have made them feel safe and secure	86	84	80.9	N/A	85.3	87.4%	NA	NA	NA

NA

NA

68.0	71.3	69.7	36	79	2	73
85.4	89	87.1	87	77	3	87.7

LOCAL	Reviews for people in long term support for 12+ months	58.7%	67.0%	59.8%	42.5%	44.9%	49.2%	48.4%	49.6%	53.4%
LOCAL	Waiting times for Care Act Assessment (average of days)					146	114	92	96	80
LOCAL	Waiting list for Care Act Assessment (number of people)					466	461	284	330	388

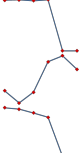




54%	64.0%	57%	102	101	3	58%
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




# Adult Social Care Outcomes Framework (ASCOF) 2017/18 to 2023/24

Red = 2021/22 as not available in 2022/23



Indicator	Brief Description	Coventry							% Change	Trend Line	Annual Trend	Peer Group	West Mids	England	Rank - England	Rank - England	Quartile	Improvement
		2017/18	2018/19	2019/20	2020/21	2021/22	2022-23	2023-24				2022/23	2022/23	2022/23	2021/22	2022/23	2022/23	Outturn to move to next quartile
<b>Domain 1 - Enhancing quality of life for people with care and support needs</b>																		
1A	Social care-related quality of life	18.7	19.1	19.2	N/A	18.9	18.6		-0.3		↓	18.7	19.1	19	70	112	3	19
1B	Proportion of people who use services who have control over their daily life	70	78.5	75	N/A	73.7%	73.8%		0.1%		↔	73.1	77.7	77.2	121	121	4	74.7
1C1A	Proportion of adults receiving self-directed support	88	87.8	88.3	88	86.8%	100%		13.2%		↑	98.1	95.4	93.5	132	1=	1	=
1C1B	Proportion of carers receiving self-directed support	20	43.1	44.7	51	37.1%	100%		62.9%		↑	85.3	85.4	89.3	143	1=	1	=
1C2A	Proportion of adults receiving direct payments	23	22.7	23.9	23	23.4%	23%		-0.7%		↔	29.2	26.7	26.2	90	94	3	25.2
1C2B	Proportion of carers receiving direct payments for support direct to carer	20	43.1	44.7	51	37.1%	54%		16.6%		↑	71	77.9	76.8	128	118	4	66.1
1D	Carer-reported quality of life	7.5	7.5	7.5	7.5	7	7	7	0%		↔	7.1	7.2	7.3	94	N/A	3	7.2
1E	Proportion of adults with learning disabilities in paid employment	4 (27)	3 (19)	3.3 (24)	3 (23)	2.6 (19)	1.9 (15)		0		↔	3.6	3.2	4.8	111	128	4	2.7
1G	Proportion of adults with learning disabilities who live in their own home or with their family	78	79	78	80	77.5%	80%		2.7%		↑	75.4	71.4	80.5	99	86	3	81.8
1I1	Proportion of people using services reporting they had as much social contact as they would like	45	47.3	42.3	N/A	41.7%	45%		3.3%		↑	43.5	47.1	44.4	55	69	2	48.1
1I2	Proportion of carers who reported that they had as much social contact as they would like	38.2%	38.2%	38.2%	38.2%	24.6%	24.6%	25.8%	0%		↔	28.4	29.4	28	103	N/A	3	26.7
1J	Adjusted Social Care-related quality of life - impact of Adult Social Care Services	0.39	0.391	0.408	N/A	0.439	0.423		-0.016		↔	0.408	0.422	0.411	10	50	2	0.429
<b>Domain 2 - Delaying and reducing the need for care and support</b>																		
2A1	Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population	18	18.9	32.7	25.8	35.1	25.9		-9		↑	15.6	17.8	14.6	147	141	4	17.8
	Number of admissions	42	45	79	62	87	56											40
2A2	Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population	684.3	768.5	766.5	634.1	810.5	728		-83		↑	550.5	607.9	560.8	138	128	4	669.6
	Number of admissions	322	384	385	321	409	367											339

2B1	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation (effectiveness of the service)	81	81.5	80.3	82	84%	81.1%	-2.9%		↓	83.7	81.6	82.3	78	95	3	83.5
2B2	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (offered the service)	4.6	3.8	4.5	6.5	6.9	6	-0.9		↓	4.5	4.4	2.9	8	15	1	=
2D	Proportion of those that received a short term service during the year where the sequel to service was either no ongoing support or support of a lower level	74.7	72.3	66.8	60	65.1%	75.0%	9.9%		↑	74.4	74.1	77.5	110	89	3	78.3

**Domain 3 - Ensuring that people have a positive experience of care and support**

3A	Overall satisfaction of people who use services with their care and support	60	63.4	63.1	N/A	62%	60.5%	-1.5%		↓	61.7	65.1	64.4	103	118	3	64.7	
3B	Overall satisfaction of carers with social services	40.1%	40.1%	40.1%	40.1%	32.0%	32.0%	33.2%	1.2%		↓	35.9	34.6	36.3	110	N/A	3	36
3C	Proportion of carers who report that they have been included or consulted in discussion about the person they care for	73.7%	73.7%	73.7%	73.7%	66.5%	66.5%	69.2%	3%		↓	64.1	61	64.7	50	N/A	2	68.1
3D1	Proportion of people who use services who find it easy to find information about services	69%	65%	69.8%	69.8%	66%	70.5%	4.3%		↑	66.1	65.6	67.2	61	39	2	71	
3D2	Proportion of carers who find it easy to find information about services	60.1%	60.1%	60.1%	60.1%	58.7%	58.7%	60.4%	1.7%		↑	54.7	54.8	57.7	60	N/A	2	61.8

**Domain 4 - Ensuring people are safe and protected from avoidable harm**

4A	Proportion of people who use services who feel safe	72	69.7	76.7	N/A	72%	69.9%	-2.1%		↓	68.0	71.3	69.7	36	79	2	73
4B	Proportion of people who use services who say that those services have made them feel safe and secure	86	84	80.9	N/A	85%	87.4%	2.1%		↑	85.4	89	87.1	87	77	3	87.7

LOCAL	Reviews for people in long term support for 12+ months	58.7%	67.0%	59.8%	42.5%	44.9%	49.2%
LOCAL	Waiting times for Care Act Assessment (average of days)					146	114
LOCAL	Waiting list for Care Act Assessment (number of people)					466	461

58.7%	67.0%	59.8%	42.5%	44.9%	49.2%
				146	114
				466	461



## Public Report

Cabinet Member

Cabinet Member for Adult Services

4<sup>th</sup> March 2024

**Name of Cabinet Member:**

Cabinet Member for Adult Services – Cllr L Bigham

**Director approving submission of the report:**

Director of Adults and Housing

**Ward(s) affected:**

All

**Title:**

Adult Social Care Complaints and Representations Annual Report 2022/23

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**Is this a key decision?**

No - although the proposals affect more than two electoral wards, the impact is not expected to be significant.

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**Executive summary:**

Adult Services have a statutory duty arising from the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009, to provide a system for receiving complaints and representations from people who use its services, or those acting on behalf of service users. There is also a duty under the regulations to produce and publish an annual report.

This report sets out the details of the complaints and representations across Coventry's Adult Services in 2022/23. It highlights the service improvements and learning from feedback and includes information on future developments in complaint handling and reporting.

**Recommendations:**

**The Cabinet Member for Adult Services is recommended to:**

- 1) Approve publication of the Council's Annual Report in relation to complaints and representations in Adult Social Care for 2022/23.

**List of appendices included:**

Appendix I – Adult Social Care complaints and representations annual report 2022/23

Appendix II – Complaints handling guidance

**Background papers:**

None

**Other useful documents**

Adult Social Care Comments, Compliments and Complaints

[https://www.coventry.gov.uk/info/194/have\\_your\\_say/562/](https://www.coventry.gov.uk/info/194/have_your_say/562/)

Complaints Managers' Group (May 2016) Good Practice guidance for handling complaints concerning adults and children social care services <https://www.adass.org.uk/media/5360/good-practice-guidance-final-09062016.pdf>

Local Government and Social Care Ombudsman Guidance for bodies in our jurisdiction to support good complaint handling <https://www.lgo.org.uk/information-centre/reports/guidance-notes>

**Has it been or will it be considered by Scrutiny?**

No

**Has it been or will it be considered by any other Council Committee, Advisory Panel or other body?**

No

**Will this report go to Council?**

No

## **Report title: Adult Social Care Complaints and Representations Annual Report 2022/23**

### **1 Context (or background)**

1.1 Adult Services have a statutory duty arising from the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009, to provide a system for receiving complaints and representations from people who use its services, or those acting on behalf of service users. The system provides a means for listening to the views of those who use or are affected by adult services and for resolving issues arising. Where things have gone wrong it enables the Council to put things right, learn from the experience and make the necessary improvements.

### **2 Complaints and Learning**

2.1 There were 66 statutory complaints made within the year 2022/23, compared to 50 in 2021/22. 30 (45%) of these complaints were fully or partially upheld, compared to 22 (44%) in 2021/22.

2.2 In addition to formal complaints a number of concerns are raised informally. Most informal complaints are received by social care providers directly who act upon feedback received but occasionally complaints received by the Council are dealt with on an informal basis where appropriate. In 2022/23 14 informal complaints were received compared to 21 in 2021/22. These are complaints resolved/handled at the point of delivery. In line with our complaints policy and best practice, most concerns are dealt with on an informal basis, for example by social care providers, and may not be reflected in the figures in this report.

2.3 In 2022/23, the Local Government and Social Care Ombudsman (LGSO) considered 7 complaints or enquiries regarding Adult Social Care, of which 3 were investigated and upheld. This compared to 9 complaints or enquiries with 3 upheld in 2021/22.

2.4 Adult social care services are committed to learning from customer feedback. Where complaints highlight where matters have gone wrong, managers must identify any remedial and developmental action required to improve service delivery. Feedback from compliments provides an equally valuable message; clearly affirming when services make a difference and personal qualities have added value to the outcome for users and carers. Learning point examples are as follows:

- Improvements in communication in relation to when assessments are delayed and to ensure that processes and outcomes are completed in a timely manner and a prompt resolution to enquires are sought;
- Advice could be given to social workers that they can offer carers assessments to anyone providing informal care, regardless of the care in place for the cared person \*
- Processes to be reviewed in intake to ensure persons/families are contacted and appropriately supported through the safeguarding process, and any necessary care changes.
- Continued staff training to ensure care providers leave properties secured.

2.5 While there are no externally prescribed timescales for the resolution of complaints, the Council's internal guideline is to resolve complaints within 20 working days. Performance on this standard is monitored by the Adult Social Care Management Team. It is normal practice to inform complainants should an extension be required. Most often, extensions are sought due to the complexity of particular complaints, including where the complainant

supplies additional information/evidence part way through an investigation. In 2022/23, 65% of complaints (43 of 66) were resolved within 20 working days, compared to 2021/22, 64% (32 of 50) a year ago.

2.6 Appendix I sets out the trends in complaints and representations across Coventry's adult services in 2022/23. It highlights the service improvements and learning from feedback and includes information on future developments in complaint handling and reporting. Key issues for 2022/23 include: communication between adult services and service users, decisions, delays/waiting time for assessment decisions and, managing service users' expectations.

2.7 Appendix II sets out the Council's complaints handling guidance.

### **3 Results of consultation undertaken**

3.1 None identified or undertaken.

### **4 Timetable for implementing this decision**

4.1 Areas for development and improvement have been included within the divisional and relevant team plans for 2023/24.

### **5 Comments from the Director of Finance and Resources (Section 151 Officer) and Director of Law and Governance**

#### **Financial and Legal implications**

#### **5.1 Financial implications**

There are no direct financial implications associated with this report. Financial remedies resulting from any complaints are typically paid out of service budgets. In 2022/23, two complaints to the Local Government and Social Care Ombudsman were investigated and upheld. These cases resulted in a total amount of £13,720.79 being paid as Remedy actions. All complaints relating to financial issues were investigated and rectified accordingly.

#### **5.2 Legal implications**

In accordance with the Local Authority Social Services and NHS Service Complaints (England) Regulations 2009, the Council must make arrangements for dealing with complaints and is ultimately required to prepare an annual report for each year (being a period of 12 months, ending on 31<sup>st</sup> March) which must:

- (a) specify the number of complaints received.
- (b) specify the number of complaints which were decided to be well-founded;
- (c) specify the number of complaints which the responsible body has been informed have been referred to the Local Commissioner to consider under the Local Government Act 1974; and
- (d) summarise:
  - (i) the subject matter of complaints that the responsible body received;
  - (ii) any matters of general importance arising out of those complaints, or the way in which the complaints were handled and
  - (iii) any matters where action has been or is to be taken to improve services as a consequence of those complaints.

The Local Authority is further required to ensure that its annual report is available to any person on request.



The preparation and publication of the Annual Report is therefore completed to ensure compliance with the Council's statutory responsibility in this regard.

## **6 Other implications**

### **6.1 How will this contribute to achievement of the One Coventry Plan?**

This annual report sets out the progress made by the service towards the One Coventry Plan vision to be locally committed, by improving the quality of life for Coventry people, by contributing to the priority to protect our most vulnerable people.

### **6.2 How is risk being managed?**

There are reputational as well as financial risks when things go wrong. It is, therefore, important that the Council takes action and learns from the outcome of complaints. The Adult Social Care Management Team routinely considers complaints as part of regular performance management.

### **6.3 What is the impact on the organisation?**

The co-ordination and management of complaints involves considerable officer time. Therefore, where things have gone wrong, it is important for the Council to put things right, learn from the experience and make the necessary improvements. The feedback that is received from complaints and other representations is reported to managers on a regular basis to inform service planning and improvements.

### **6.4 Equalities/Equality Impact Assessments (EIA)**

EIAs have been built into the delivery of work within adult social care services. As part of continuous improvement, the service will continue to review the integration of equality and diversity into operational practice and performance monitoring.

This year, the complaints officer began collecting data on complainants by protected characteristics such as ethnicity, sex and disability status. This will enable the Council to identify if its complaints policy is operating as intended, eliminate discrimination and advance equality of opportunity in line with the public sector equality duty.

### **6.5 Implications for (or impact on) climate change and the environment**

None

### **6.6 Implications for partner organisations?**

Although the Council directly provides some adult services, the majority of provision is commissioned from independent organisations in the private or voluntary sector. Although the Council retains responsibility for the quality of contracted services, there is equally a responsibility of partner agencies to comply with specified quality standards and, in the case of regulated services meet the requirements of national care standards inspected by the Care Quality Commission.

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Andrew Errington	Head of Practice Development & Safeguarding	Adult Services	22/12/2023	15/01/2024
Rachael Sherwood	Customer Service Manager – Improvement * Development	Customer Services	22/12/2023	15/01/2024
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Jon Reading	Head of Commissioning and Quality	Adult Services	22/12/2023	15/01/2024
Suzanne Bennett	Governance Services Officer	Law and Governance	23/12/2023	23/12/2023
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Peter Fahy	Director of Adults and Housing	Adult Services	22/12/2023	15/01/2024
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Julie Newman	Director of Law and Governance	Law and Governance	22/12/2023	15/01/2024

Councillor L Bigham	Cabinet Member for Adult Services		22/02/2024	22/02/2024
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This report is published on the Council's website: [www.coventry.gov.uk/councilmeetings/](http://www.coventry.gov.uk/councilmeetings/)

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# Adult Services Complaints and Representations Annual Report 2022-23



## Adult Social Care 2022/23 Complaints & Representations key facts & figures



There were **3595** adults in long-term support as of 31 March 2023



In 2022/23, the Council received **66** complaints about Adult Social Care, compared to 50 in 2021/22

Of the 66 complaints, just under half were at least partially upheld:



The Council aims to resolve complaints within 20 working days. In 2022/23, **65%** were resolved within 20 working days, 64% in 2021/22 and 55% in 2020/21

The most common things people complained about were...



In 2022/23, we received **253** compliments; down by 29 compared to last year. These were all about the standard of care provided at care homes for older people.

If a complainant remains unhappy after completing the Council's complaints process, they may take their complaint to the Local Government and Social Care Ombudsman (LGSCO). In 2022/23, the LGSCO received **7** Adult Social Care cases. A total of **3** cases were upheld

Listening to service users' complaints helps services improve by helping Managers identify changes that are required. Key learning points from 2022/23 include: Ensuring effective communication. Outcomes, delays/waiting times for assessment decisions. Information relating to finance to be shared with service users/family members and for information to be accurate.

### Comments, Compliments and Complaints about Adult Social Care

You have the right to receive a good level of service. Listening to your views helps Adult Social Care Services to put things right and improve things for the future, so your comments, compliments, complaints and suggestions are important and always welcome. You can contact the Adult Social Care Complaints Officer by phone to **08085 834 333** or online at [www.coventry.gov.uk/form\\_speakup/](http://www.coventry.gov.uk/form_speakup/) or by email to [AdultSocialCareCustomerRelations@coventry.gov.uk](mailto:AdultSocialCareCustomerRelations@coventry.gov.uk)

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## Welcome

Welcome to the 2022/23 complaints and representations annual report. As part of the Council's commitment to openness, quality assurance, service development and listening and learning from service users, this report provides summary information from comments, compliments and complaints received under the statutory procedures in relation to Adult Social Care provided by or commissioned by Coventry City Council for the year 1 April 2022 to 31 March 2023.

## Background

Local Authorities are required to have a system for receiving representations by or on behalf of people in need of adult social care support who have a range of support needs due to a disability or frailty (Local Authority Social Services and National Health Services Complaints (England) Regulations 2009.) Services cover assessment and case management, direct service provision or the arrangement of a range of services, including support at home, day opportunities, supported housing, intermediate, residential and nursing care or provision of equipment.

Representations are defined as comments, compliments and complaints.

Local Authorities are required by law to appoint a complaints officer to oversee all aspects of the procedure. Some complaints received do not meet the criteria to be dealt with under the statutory procedure. When this is the case, these are registered under the Council's corporate complaints procedure. The arrangements for handling these complaints are different from the statutory process in terms of timescales and the independence of the people who investigate and review the complaints.

The Local Authority has a nominated officer assigned to the management of representations for Adult Social Care.

The purpose of the comments, compliments and complaints system is to ensure that:

- The views and experiences of people who use services are heard.

- Positive feedback is used to develop services and acknowledge good practice.
- Things that have gone wrong are put right.
- The organisation learns from both positive and negative feedback; and the organisation sustains its focus on service users / customers / citizens.

Within this report reference is made to the range of representations received and responses to them and specific trends and issues that emerged in the reporting period.

## Summary

In 2022/23 the service received a total of 85 complaints and of these 66 were **statutory complaints**, compared to 50 in 2021/22. 45% of these complaints were fully or partially upheld, compared to 44% in 2021/22. The increase in complaints could relate to a number of influencing factors but in the last year we have seen increasing numbers of people accessing our services.

The main themes of complaints received over this period were as follows:

- Method/Quality of communication
- Standard of Service
- Standard of work

In addition to the statutory complaints above, the service received 14 informal complaints during 2022/23, a reduction from 21 Informal complaints in 2021/22 along with 3 Stage 1 Corporate complaints and 2 Stage 2 Corporate Complaints. These are complaints resolved/handled at the point of delivery. In line with our complaints policy and in line with best practice, most concerns are dealt with on an informal basis, for example, by social care providers; and may not be reflected in the figures in this report.

### Description of Complaint Types

Coventry City Council's complaints policy sets out how individual members of the public can complain to the Council, as well as how the Council handles compliments, comments and complaints. A complaint can be made to an employee either by telephone, social media, e-mail or in writing.

#### Informal

Where possible, complaints should be resolved informally and for a number of complaints this is what we try to do in the first instance. If this is not possible, complainants can formally complain to the Council. Informal matters can also be related to concerns that require resolution or follow up investigation outside of the formal process.

#### Statutory

Complaints about Adult Services including care homes and other providers commissioned by the Council follow the statutory process for representations made by or on behalf of an adult using social care services provided by / commissioned by the Council arising from the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009.

All other complaints relating to Council services are dealt with by the corporate complaints policy.

#### Corporate

A Corporate complaint example would be as follows: When a member of the public who is not a service user or a holder of parental responsibility for a young person, requests that their concerns are investigated formally. An example of a corporate complaint could be a member of the public who has raised concerns regarding a



service that they are not personally involved with such as, seeing a social worker act in a way they do not deem appropriate or witnessing a poor level of service.

# Feedback

## Promoting feedback

Representations from people who came into contact with Adult Social Care and their families provide a useful source of information about quality-of-service delivery, professional practice and the outcome of decisions we make that affect their care and support. A key part of the complaints process is how the Council learns from negative experiences and use this to improve what we do. Adult Social Care always welcomes feedback, whether this is positive or negative and there are a number of ways in which people can make their views known and these include:

- During the assessment process we will engage with individuals and their carers about what is important to them and incorporate this into their support plans
- At the conclusion of the assessment and/or review we will invite individuals and their families to use our 'real time survey' so that we have immediate feedback on their experience
- We use surveys for individuals and for carers to obtain wider feedback.
- We listen to experts by experience and our Stakeholder Group in respect of strategic or service changes.

## Providing feedback

Where possible, issues/complaints should be handled at the point of delivery. When a person feels that they are still not satisfied, then it is recorded as a formal complaint and investigated as such. The length of time to investigate and resolve complaints depends on their complexity. Where there are particular complexities that will require an elongated period of investigation, a timescale is agreed with the complainant.

People can provide feedback directly to the service or team; to customer services; or to the Complaints Officer. Further information about how to make a complaint, access advocacy or support, and the complaints process is available on the Council's website at [www.coventry.gov.uk/complaints/](http://www.coventry.gov.uk/complaints/).

It is vitally important that the comments, complaints and compliments system is easily accessible. This maximises the opportunities for individuals to make their views known. Complaints can be accepted through the contact centre via a visit to the centre, by letter, by an online form or by telephone. Complaints may also be made directly to the team that is providing them with a service. Sometimes, complaints are also made via elected members (Councillors), the Chief Executive, or directly to senior managers. Complaints can also be referred to the Council from the Local Government and Social Care Ombudsman (LGSCO). Complainants who contact the complaints team directly are encouraged to use the contact centre to ensure that their complaint can be processed efficiently.

In 2022/23, the majority of complainants chose to make a complaint via email or through the Council's contact centre.

# Complaints

The number of statutory complaints has increased from 50 in 2021/22 to 66 in 2022/23, which has resulted in an increase in complaints of 32%.

The number of complaints and their outcomes are detailed below.

## Complaints 2021/22 vs 2022/23

Outcome	2021/22		2022/23	
Upheld	5	10%	10	15%
Partly Upheld	17	34%	20	30%
Not upheld	21	42%	15	23%
Complaint withdrawn	7	14%	19	29%
Open	0	0%	2	3%
<b>Total</b>	<b>50</b>		<b>66</b>	100

## How people complained

Method	2021/22	2022/23
Email	34	42
Contact Center/Form	15	22
Letter	1	2
Phone	0	0
<b>Total</b>	<b>50</b>	<b>66</b>

## Complaints by service area

The below table shows a breakdown of complaints received and investigated by each service area team

Service Area	2021/22	2022/23
All Age Disability (Assessment & Case Management)	9	13
Adult Commissioning	9	8
Assessment & Case Management OP	0	18
Adult Safeguarding	1	3
ASC Enablement & Therapy Services	0	3
Mental Health	5	3
The Opal/ Therapy Services	10	2
Community Discharge Team	0	2
Older Adults/Dementia	0	1
Finance	0	3
Learning Disabilities	0	1
Hospital Team	4	2
Telecare Service	0	1
Promoting Independence	0	5
Physical Impairment	1	0
Older People Team	6	1
<b>Total</b>	<b>50</b>	<b>66</b>

# Complaints regarding external providers

Providers of residential and domiciliary care services must have a complaints procedure that complies with the Care Homes Regulations 2001, the Care Standards Act 2000 and the National Minimum Standards stipulated by the Care Quality Commission. There is an expectation that the individual pursues a complaint with provider organisations through the provider’s own complaints procedures in the first instance. However, if the individual is dissatisfied with the response of the provider or, if they wish to pursue the complaint through the Statutory Adult Social Care Complaints Process, they have the right to do so. Where possible, we encourage complainants to utilise the providers’ complaints procedures in the first instance as this enables the complaint to be dealt with at source as opposed to through the Council.

Complaints regarding external providers are monitored through contract monitoring and, where required, providers are expected to make immediate improvements and/or to produce action plans to deliver service improvements with delivery monitored through contractual mechanisms.

## Timescales

There are no externally prescribed timescales for the resolution of complaints. The only stipulation within the regulations is that timescales should be reasonable, and that the complaints process should be concluded within six months. It is acceptable to extend this deadline with the agreement of the complainant.

As there is no specific requirement, the approach taken is to agree a timescale with the complainant. It is normal practice to inform complainants should an extension be required. Most often, extensions are sought due to the complexity of complaints, including where the complainant supplies additional information/evidence part way through an investigation. In these instances, the complainant is contacted with an explanation for the delay and the likely revised timescale.

As a benchmark for monitoring the timescale for completion of complaints, Adult Social Care applies an internal guideline that complaints should be completed within 20 working days. Performance on this standard is monitored by the Adult Social Care Management Team. This year’s performance against the target is shown in the table below:

<b>Complaint Stage</b>	<b>Timescales</b>	<b>2021/22</b>	<b>2022/23</b>
Stage 1	Within 20 working days	32 (64%)	43 (65%)
	Over 20 working days	18 (36%)	23 (35%)
	Still Open	0 (0%)	0 (0%)
<b>Total</b>		<b>50</b>	<b>66</b>

Where the 20-working day response timescale has been exceeded, this can be due to the requirement to involve other professionals, including health care professionals in other organisations and is relevant to Mental Health complaints. The responses received from other organisations are at times outside of the 20-working day time-frame. This can then impact on the investigation period which occasionally can be out of the direct control of the Local Authority.

The overall percentage on complaints being resolved within the 20 Working Day timescale has shown a marginal improvement given the increased number of complaints but more have been processed within the 20 days). The improvements could be a result of Team Managers being more involved in the case management and with potential complaints at an earlier stage, allowing them to discuss with the complainants to provide explanation and

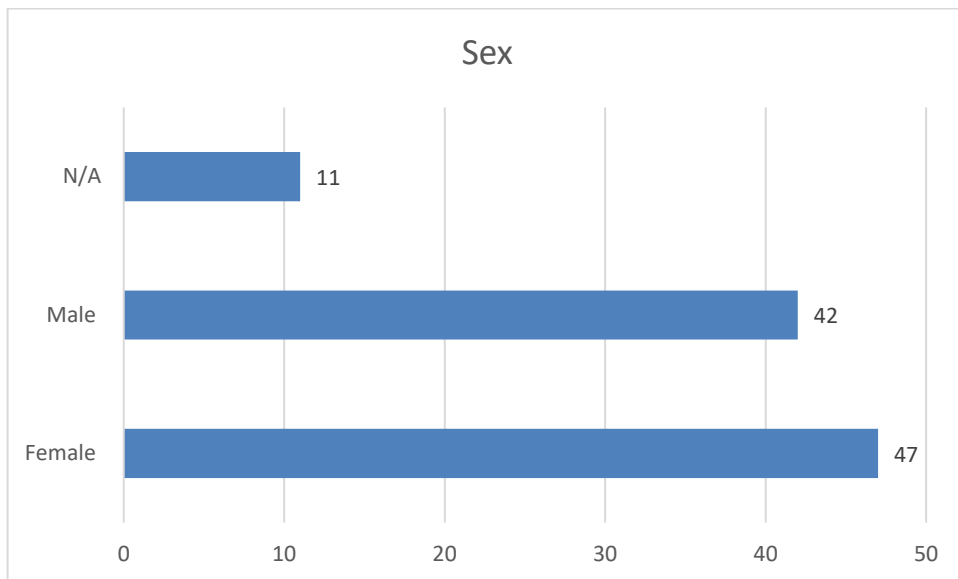
support. This enables them to provide the formal responses more easily and within timeframe.

Issues such as complaints becoming more complex with coordination required across departments for example: All Age Disability with Commissioning, impacting on investigation time frames. Although 65% of complaints received have been responded to within 20 working days, 35% (23 complaints) have gone over timescale and the reasons for this need further consideration to understand the underlying cause and trends.

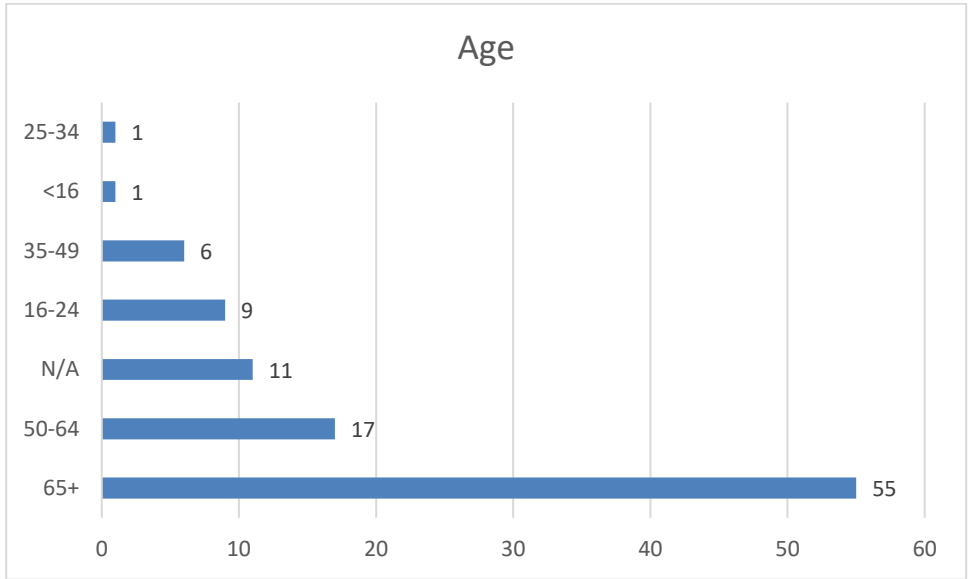
# Equality

The Local Authority has a system in place to capture the equality data required to support the complaints process. Information is only ever recorded in relation to who the service user is. The below graphs illustrate the data captured but this does not include complaints submitted for the Ombudsman. Data was obtained from Adult Social Care case recording systems, and, on that basis, it has not been possible to capture information pertaining to every complainant, only those with an existing case record. These are recorded as 'not available' (N/A).

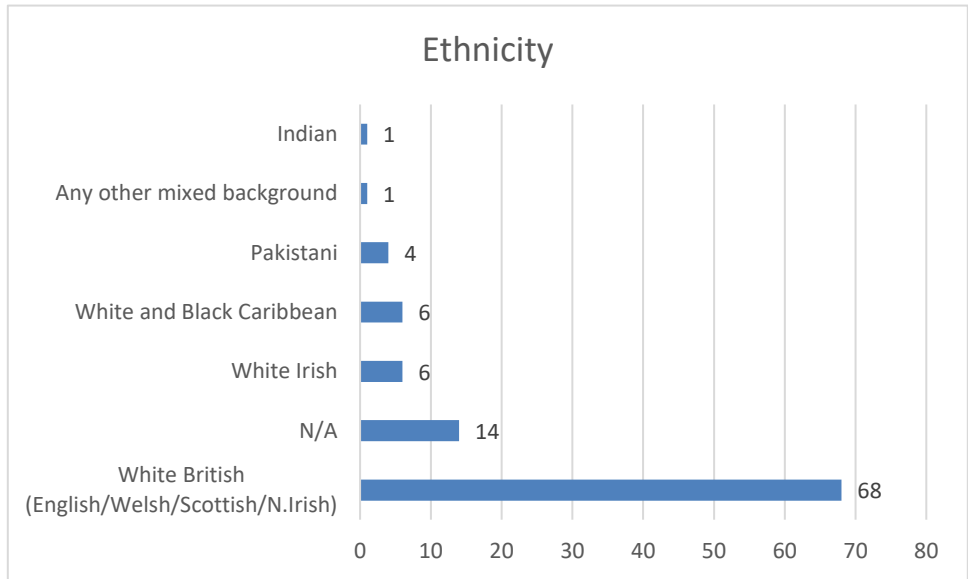
The below graph shows out of the 66 complaints received in 2022-23 (excluding Ombudsman), 28 complaints (42%) were from male complainants/service users, 31 complaints (47%) were from female complainants/service users and 7 (11%) were not available (N/A).



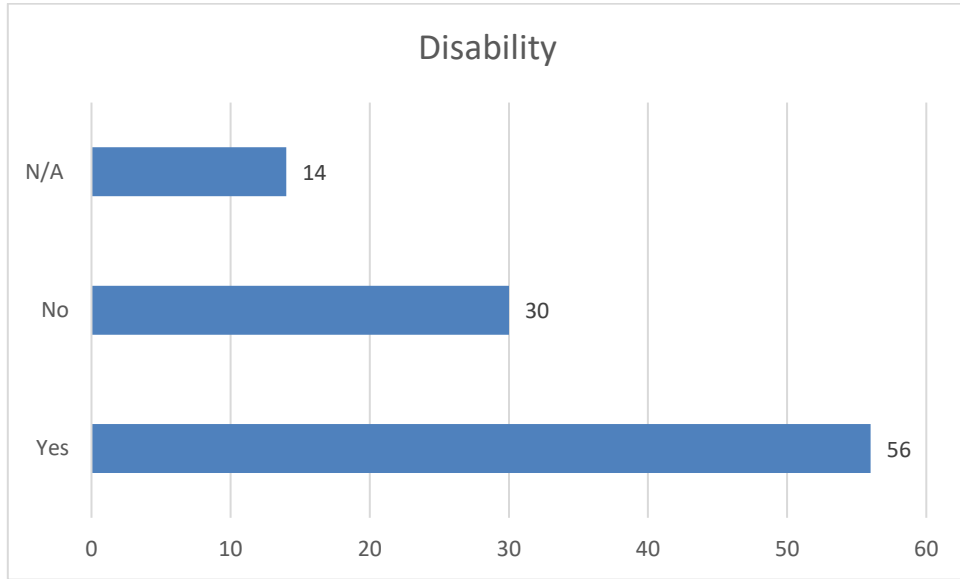
The below graph shows the age range of the complainant or service user. 6 complaints (9%) of the complaints received during 2022- 23 (excluding Ombudsman) were from or submitted on behalf of service users aged 16-24. 1 complaint (1%) was also received or submitted on behalf of service users aged 25-34. 4 complaints (6%) were received/submitted from service users aged 35-49. 11 complaints (17%) were received/submitted from service users aged 50-64. 36 complaints (54%) were received/submitted from service users aged 65+. 1 (1%) complaint received related to a service user under 16, this complaint received by parents regarding home adaptations and this service sits within Adult Services but for equality information we capture the service user details. The information was not available (N/A) for 7 (11%).



The majority of complainant's/service users in 2022-23 (excluding Ombudsman) were White British with a total of 45 (68%), followed by 4 (6%) with a White Irish background. 4 (6%) with a White and Black Caribbean background. 2 (4%) with a Pakistani background. Any other mixed background and Indian, all had 1 (1%) complaint each. 9 (14%) of the complaints received were N/A.



Out of the 66 complaints received, 37 (56%) had a disability and 20 (30%) did not, with 9 (14%) logged as (N/A).



# Ombudsman

In 2022/23 Adult Social Care received 7 new cases, the outcomes of which were as follows:

- 3 Cases Upheld
- 1 Case Not Upheld
- 2 Cases required no further action.
- 1 Case was decided as premature and referred for local resolution,

This compared to 2021/22 which had 9 new cases, the outcome of which were 2 Cases Upheld, 3 Cases required no further action, 1 Case was outside of the Ombudsman's jurisdiction, 1 Case was decided as premature and referred back for local resolution, 2 Cases were still under investigation and subsequently closed in 2022/23.

Out of the 7 Cases 3 Upheld cases received financial remedy or reimbursement.

A summary of the 7 cases received from the Ombudsman in 2022/23 are as follows-

## Case 1-

Ms. C complained that Coventry City Council started charging for a service that was provided free and should have stayed so. She mentioned Coventry City Council have never been able to justify that charge and have ignored the question repeatedly. The case was referred to the Council by the ombudsman as it had not completed the complaints process and was fully investigated through the complaint's procedure. The Council issued a final response to the complainant rectifying changes and issuing a full refund.

## Case 2-

Mrs D complained that Coventry City Council didn't make her aware about the possibility of receiving direct payments for her mother's care. As a result, the family paid for care privately. This was fully investigated by the Ombudsman and *Fault and Injustice* was found. The Council agreed to apologise, make a payment for the backdated amount of £12,170.69, and ensure it has procedures in place to give people information about the care system when they initially approach the Council for assistance The remedy had been deemed complete and satisfactory by the Ombudsman and this case was closed.

## Case 3-

Mrs P complained about the Council taking a long time to assess Ms B's care needs and arrange care. The Council continued to invoice her for several months for care Ms B was not receiving and did not consider her dispute about the invoices. The ombudsman found there was fault by the Council causing injustice. The Council agreed to apologise, make a payment of £500 in respect of the loss of service and £250 in respect of the distress, frustration and uncertainty. A fresh care needs assessment and if she accepts, a fresh financial assessment, in writing that it has waived the outstanding amount and that it will not make any further demands for payment. The remedy was deemed complete and satisfactory by the Ombudsman and this case was closed.

## Case 4-

Mr. G complained that the Council had failed to properly consider the guidance when he re-applied for a blue badge. Despite there being no change to his medical condition, Mr G said the Council declined his application and failed to provide a reason. The Ombudsman did not find fault in the Council's actions. This case was closed after initial enquires as no further action was needed.

## Case 5-

Ms B complained about the care her late father, Mr C received from his Care Provider prior to his death. Ms B was concerned Mr C did not receive appropriate medical intervention or fluids. Ms B says she was not contacted or invited to end of life planning for Mr C. The ombudsman concluded they will not investigate this late complaint about care provided to Ms B's father, Mr C. The case was closed after initial enquires as it was out of jurisdiction.

#### Case 6-

This was a complaint from a Council employee. The ombudsman confirmed they will not be investigating the complaint and they do not disclose details of such complaints to the Body in Jurisdiction. However, we were informed by the ombudsman so that our complaint numbers match theirs.

#### Case 7-

Mrs C complained the Council had failed to act on safeguarding referrals that she made to the Council regarding her parents, Mr and Mrs C and the threat posed by her brother, Mr D. She mentioned the Council failed to listen to Mrs C and failed to provide Mrs C with appropriate representation. The ombudsman confirmed the Council should have tried to speak to Mrs C with an interpreter on one occasion when there were conflicting reports on whether Mrs C wanted her son to visit her home. The Council's failure to do so was at fault and the council had to remedy the injustice. The remedy was deemed complete and satisfactory by the Ombudsman and this case was closed.

### Cases received 2021/22 and closed in 2022/23

#### Case 1:

Mr and Mrs K complained about a delay in their son Mr A's diabetes being diagnosed, and about a care provider destroying Mr A's care records. The Ombudsman found fault by the care provider in destroying Mr A's records and in how it responded to the complaint however the ombudsman did not find fault with the care provider about the timeframe of Mr A's diabetes diagnosis, or by the Council and NHS Trust also involved in Mr A's care. The care provider, in liaison with the Council, agreed to take action to improve its services, and to pay a financial remedy to Mr and Mrs K. £350 in recognition of delay and inconvenience and £250 a remittance that has been made to diabetes UK.

#### Case 2:

Ms C complained there was a lack of continuity in the homecare support provided to meet her partner's care needs. This meant her partner was not supported with the equipment needed for the medical condition. Ms C said as a result her partner's life could have been at risk and because she was the only person who could use the equipment, her return to work was delayed. The ombudsman found that there were failings in the care provider's communication with Ms C and in the Council's failure to provide a copy of the revised care plan. The care provider and the Council agreed they will apologise to Ms C and pay her £200 to recognise her distress and inconvenience.

The Local Government and Social Care Ombudsman (LGSCO) publish an annual report regarding Adult Social Care each year, this year's can be found at- <https://www.lgo.org.uk/information-centre/reports/annual-review-reports/adult-social-care-reviews>

### Cases escalated to the Ombudsman – Regional comparison

The table below shows the number of complaints that were escalated to the Ombudsman in the West Midlands region in 2022-2023. Coventry has a relatively low number of complaints escalated, given the size of the city. This data is newly added, and it is difficult to speculate on response satisfaction levels on this data alone. It would be useful to know how many of these complaints were upheld before escalating. We will continue to draw on this data where useful and look to expand the narrative on future reports.



Authority Name	Adult Social Care
Birmingham City Council	37
City of Wolverhampton Council	5
<b>Coventry City Council</b>	<b>8</b>
Dudley Metropolitan Borough Council	10
Herefordshire Council	6
Sandwell Metropolitan Borough Council	21
Shropshire Council	15
Solihull Metropolitan Borough Council	5
Staffordshire County Council	42
Stoke-on-Trent City Council	10
Telford & Wrekin Council	3
Walsall Metropolitan Borough Council	7
Warwickshire County Council	15
Worcestershire County Council	21
<b>Totals</b>	<b>205</b>

## Compliments

Feedback from compliments provides an equally valuable message, clearly affirming when services make a difference and personal qualities have added value to the outcome for users and carers. We have as much to learn from what works well as when it goes wrong and the service actively considers compliments made.

**253** compliments were received in **2022/23** compared to **282** in **2021/22**. These were all related to the quality and standard of care provided to older people. Compliments came from service users and their family members, thanking individual members of staff and teams for the ongoing support and care provided by social workers, care teams and departments. Compliments are received by forms, thank you cards, letters and emails.

The below tables show the % of compliments compared to all complaints received during 2021-22

Month	No. Complaints	No. Compliments	% Of Compliments compared to Complaints received
<b>April</b>	4	10	150%
<b>May</b>	10	29	190%
<b>June</b>	4	40	750%

Month	No. Complaints	No. Compliments	% Of Compliments compared to Complaints received
<b>July</b>	8	28	350%
<b>August</b>	5	12	240%
<b>September</b>	13	16	123%

<b>Month</b>	<b>No. Complaints</b>	<b>No. Compliments</b>	<b>% Of Compliments compared to Compliments received</b>
<b>October</b>	6	10	167%
<b>November</b>	9	16	177%
<b>December</b>	7	30	429%

<b>Month</b>	<b>No. Complaints</b>	<b>No. Compliments</b>	<b>% Of Compliments compared to Complaints received</b>
<b>January</b>	5	23	460%
<b>February</b>	5	27	540%
<b>March</b>	8	12	150%

Below are examples of compliments received during 2022-23.

*Compliment to Staff Member*

*As always [name], fantastic support from the manager and the Team at EWH for supporting us in an emergency late yesterday evening, we as a Brokerage team are truly grateful for the continued support your team offers to us*

*Compliment to Quinton Lodge*

*Thank you for the amazing food we had at the party.*

*Compliment to Eric Williams House*

*We just wanted to say thank you to you for looking after our mum. She came on leaps and bounds because of the care that she received while staying with you. Thanks again for everything you did for her.*

*Compliment to ASC Enablement & Therapy Services [Name] was amazing, he listened to everything I said, he explained things in detail, he was attentive a really nice bloke. In fact it was nice just talking to him, as I've not been great lately. Please tell him how much I appreciated him. The contractor was great too.*

*Compliment for Eric Williams House*

*Please can I say a massive thank you to you and your teams/staff – great response and fabulous teamwork – please pass on my thanks to all involved*

*Compliment to Cottage Farm Lodge*

*I'd like to thank you for your professionalism during my stay*

*Compliment to Quinton Lodge*

*I cannot thank you enough for all you did for my nan. She loved it here at Quinton. The staff, especially [name] and [name] who were so good to nan. She loved you guys. You made sure her last year's/months were happy ones*

*Compliment to ASC Enablement and Therapy Services*

*I am writing to you to thank you for getting my bathroom done for me. I would like to tell you how delighted I was with the service received. It was so good. The 2 men that attended made a great job of the bathroom. They worked very hard and made a beautiful job of it. I would recommend to everyone. The boss came round every day to see how things were going, great job done. Thank you again.*

*Compliment for Assessment and Case Management (AAD)*

*I hope you don't mind me emailing you, but I just wanted to pass on some positive feedback from myself regarding [NAME]. I recently supported a complex [NAME] customer who [NAME] also supported. I worked alongside [NAME] around this challenging individual to try and support him in a multi-agency approach. [NAME] really went above and beyond in the high standard of support he offered this individual despite his unpredictable and aggressive behaviours. I just wanted to pass on my high regards of how [NAME] managed and handled the hostile situations, always remaining in calm, professional and empathetic manner. We don't praise hard work and dedication like this enough, and I'm sure you are proud to have [NAME] on your team!*

*Compliment to Quinton Lodge*

*We just wanted to take a moment to acknowledge the incredible care my mum received at Quinton Lodge thank the amazing staff for all their help and support.*

*Compliment for Learning Disabilities*

*[name] has just left my home.*

*I want to pass on my thoughts about my experience with her. Firstly, she is so amiable and makes me feel comfortable in her presence.*

*Secondly, she comes across as very competent in her knowledge of the intricacies of going through bankruptcy.*

*And finally, which I think is the most important, she inspires me to feel a better person.*

*I look forward to her visits and her positive outlook on life. You have a diamond there!*

*Compliment for Therapy & Comm Equipment*

*I just I have just taken a call from [name] who has asked me to pass on her thanks to the driver who visited her this morning. She said he was very polite, efficient, and helpful*

# Service improvements and learning points

Adult Social Care is committed to learning from service user and customer feedback. Where complaints highlight that matters have gone wrong, managers must identify any remedial and development action required to improve service delivery.

## Most common areas of feedback

When complaints are received, they are recorded on a database and each concern raised within the complaint is logged under a 'reason of complaint code'. These codes include main categories and subcategory subjects. An example of this would be Standard of Service which has the subcategory reason codes *service level/care plan dispute lack of/access to/eligibility for service and delay in receiving service*. It is not unusual for a complainant to raise more than one concern in the same complaint. For example, a complainant may submit a complaint about communication and finance issues experienced during the same incident, and both concerns along with any additional subcategories within the complaint codes would be recorded accordingly under that complaint.

The table below highlights the different types of concerns raised within the complaints received in 2022/23 compared to 2021/22 under the main category. This does not show the actual number of complaints received but only the main reasons of complaints data. Currently our system does not capture an individual complaint code breakdown of the outcome of each concern – so the figures below reflect the alleged complaint, rather than whether a complaint was upheld or not within those specific categories.

Category	2021/22		2022/23	
Standard of Service	58	48%	60	90%
Communication	53	43%	48	72%
Protection	3	2%	2	3%
Environment/property	3	2%	1	1%
Financial issues	5	5%	4	6%

The 2 main categories of concerns raised are, Standard of Service and Communication.

## Communication

72% of complaints received in 2022/23 (compared to 43% in 2021/22) were related to communication. This is a significant increase on the previous year. When service users and their families are referred for support, they require information on subjects they may have not encountered before. They also need to be kept informed of progress and decisions in processes that are complex and often appear confusing. These may be services directly provided by the Council or those delivered through independent sector provision and can include care and support delivered in care homes, housing with care support and a range of other community support services. Representations of this nature are categorised in terms of the provision, quality, method and timelessness of information as well as accuracy. The Communication themes seen during 2022/23 were as follows: Social workers not attending planned meetings, changing of meeting times without informing the customer, not being invited to meetings. The lack of communication from social workers, inaccurate assessment records and the tone in which social workers were alleged to have spoken to complainants were also highlighted. Other issues centered around the lack of communication with service user's relatives and not being kept updated with developments.

The service takes this feedback seriously and in each case individuals involved will have been made aware of the feedback in relation to their practice.

## Standard of Service

90% of complaints received in 2022/23, compared to 48% in 2021/22, were related to standard of service and reflect an increase of 42%. Standard of Services includes service delivery, assessment of eligibility for services and timeliness in receiving services. Not all adults will be eligible for services from Adult Social Care following assessment. This can inevitably result in challenge and disagreement on how individual needs can be met. These are often emotive and challenging situations which can stimulate complaints where people do not agree with the practitioner's views or level of service received. Delays may also be incurred due to sourcing the right support, again leading to a complaint. The Standard of Service themes seen during 2022/23 were as follows. Concerns were raised regarding the delay in receiving assessment, the requirement to have a financial assessment/contribution, allegations of neglect in relation to the care of residents and service users being discharged from hospital without an adequate package of care. Other issues highlighted included the lack of information relating to direct payments, delays in funding panel decisions, the delay in adaptations taking place.

It is inevitable that with the increasing number of people accessing our services, waits for the completion of assessments or review alongside practical support exist. In response we have employed contact assessment workers who will be making calls to those waiting to update them on progress and determine whether their situations are changed. In addition we are actively promoting information on direct payments through videos on their benefits and information about practical application.

## Compliments

The improvement initiative is continuing whereby compliments are captured by the complaints team and sent on a monthly basis to the Adults Principal Social Worker which are then published in the Adult Social Care internal news bulletin. In 2022/23 compliments have slightly decreased by 5% compared to the previous year. This still reflects positively on the service provided by Adults Services.

Compliments to date reflect well on Adult Services. In 2022/23 Adult Commissioning received the highest number of compliments, these were mostly from care homes regarding the excellent service and level of care provided. Service areas need to ensure compliments are shared with the complaints team, so these are logged and recorded accordingly going forward.

## Responding to and learning from complaints

The learning elements from complaints are captured in service areas on a regular basis as part of the business management process and further evaluation of complaint data is reviewed for ongoing learning and improvements. Across Adult Social Care various processes to address learning and outcomes of quality and assurance are in place, and the learning from complaints is regularly discussed on an on-going basis with management teams and social care staff. There needs to be a consideration of an achievable and deliverable timescale for responses to complaints. We do monitor achievements against this, with the continuation of the RAG reporting process and quarterly data capturing. Upon completion of the complaint investigations, service improvements can be identified to change practice. Examples of these changes are:

- Adult Social Care is as keen to learn from what works well as we do from what goes wrong. We continue to collate the compliments as well as complaints and look at themes, learning and where good practice exists, we share this via our internal Let's Talk meetings and briefings with colleagues across the services as well as with individuals on a one-to-one basis.
- In addition to this, an internal centralized database is being developed to capture our learning, best practice and areas of improvement.
- Management oversight of complaints into the service is now embedded into regular updates from colleagues in the Customer Relations Team into the Adult Social Care Management Team enabling greater oversight of how the process is managed and any delays.
- The Commissioning Team have developed protocols and processes for the quality management of contracted services.
- All concerns in relation to communication, especially where this can improve, are taken seriously and dealt with at an individual level to ensure all workers uphold professionalism and reflect on their actions to ensure reflections and learning from complaints informs future practice.

- Prior to a full quality assurance visit being carried out Contracts Officers and Clinical Support Nurses review the previous six months concerns and complaints to identify any trends in order to focus their quality visit and focus our support around the trend identified.

### Adult Services Complaint Literature

In 2023/24 we are to review Adults Services complaints literature to provide 2 new complaints leaflets, to include an easy-to-read option. The complaint leaflets are to be available in multiple languages to ensure it is accessible to all communities/background.

### Service Recovery Team

The current complaints team has been re-launched as the Service Recovery team and has expanded and taken on two additional Service Recovery Officers alongside additional administration support. This will help ensure more timely responses to internal & external queries and to provide a more robust case management support to service areas.

### Internal Complaints Investigation Form

An Internal Investigation Form was launched in 2020/21. This form is for investigating officers to capture additional learning and understanding of complaint concerns to ensure service areas and teams consistently improve their services and implement any learning necessary. This is achieved by sharing the internal investigation forms are shared with Heads of Service on a quarterly basis.

### Investigating Officer Guidance External Web Page

A step-by-step guide for investigating officers had been in launched in 2022 on our external website. The guide is to provide support and guidance for investigating officers on statutory, corporate, and informal complaints and this will be updated and refreshed on a yearly basis.

### Complaints and Ombudsman Training Module

All officers who deal with complaints attended a complaints overview training session delivered by the Ombudsman. The course focused on the complaints journey and how best to maximise the contact made with the complainant, e.g., understanding the motivators for complaints and the types of outcomes people hope to achieve by complaining. The course also looked to share best practice when responding to complaints so that we take an empathetic and supportive approach to complaint resolution. There will also be an in-house complaint training module for staff to undertake in 2024.

### Specific service area improvements/learning which have been identified

#### Adult Commissioning

Five complaints were investigated by the adult commissioning team during the year. Only 2 of these complaints had elements that were upheld. One complaint centered around home support call duration and a particular task being missed. The learning from this is that some of the basic expectations of home support providers may on occasion not be delivered. The commissioning team have worked with the provider to try and ensure future contractual compliance. The second upheld complaint was in relation to incorrect information regarding records management. Learning points included a requirement to further encourage providers to update electronic record systems due to risks around paper records being lost.

#### Community Social Care (65+) and All Age Disability

Complaints remain low as the demand for support required and the complexity of people's needs increases in both of these areas. The few issues that are upheld relate to administration or data errors, where these issues have occurred individual staff members have been spoken to and reminded of our recording standards and learning has also then been shared wider with teams. A few issues highlighted linked with our Hospital Discharge teams and



Occupational Therapy Teams, in these circumstances there has been good joint working to provide a full response to the complainant. No themes have been highlighted across either area so although it is important for us all to reflect on the learning there was nothing to address regarding service improvement.

### Hospital, Therapy, and Intake Teams

There have been a small number of complaints upheld which mainly relate to communication, expectations and delays.

All concerns in relation to communication, especially where this can improve, are taken seriously and dealt with at an individual level to ensure all workers uphold professionalism and reflect on their actions to ensure reflections and learning from complaints informs future practice. In some circumstances, expectations differ between a service user and worker, however we would expect workers to clearly communicate what is within their remit and role to do and ensure this is understood by all involved.

Where improvements have been identified, managers ensure immediate improvements and actions are taken. Any issues raised about a lack of communication between a staff member and service user have been raised on an individual level and staff reminded of our Adult Social Care standards

### Financial Assessment Team

As a result of our learning, from two complaints received, additional checks have been implemented within the Financial Assessments Team processes to ensure the accuracy of invoices prior to authorisation and issue. Staff within the Financial Assessments Team endeavor to secure all relevant information in order to respond to, and resolve, queries from clients or their representatives satisfactorily.'

### Mental Health

Formal complaints in relation to Mental Health Services for ASC remain low and decreased in the last year. Our interventions are often at a time of great distress to individuals and their families and communicating the finer elements of statutory responsibility can be difficult and this is apparent in each complaint received again this year. Complaints are also influenced by differing perceptions of mental capacity and managing the need to consider people's personal and sensitive data. Investigating Officers continue to provide direct feedback into the service to enable greater consideration of the impact of our interventions.

### Practice Development & Safeguarding

The service area receives a relatively low number of complaints as we seek to ensure the process is fair and transparent to those involved. Complaints we received and investigated this year were complex in nature and reflect the impact of the various legislative frameworks we must follow. And whilst complaints might not be fully upheld there are always things for us to learn. Learning points identified included that minute takers should be present during face-to-face meetings, minutes should be shared promptly with all in attendance, to allocate sufficient time to scheduled conferences and ensure that there is no avoidable drift in safeguarding investigations.

# Adult Social Care 2022/23

## Complaints and representations key facts and figures



Adult Social Care (ASC) has always taken complaints very seriously

and it is a priority that we learn from them, improving individual practices but also practice throughout the whole of the Adult Social Care Directorate

There has been a slight increase in the number of complaints received in 2022/23, which may be due to an increased number of people being supported by Adult Social Care during this period and the complexity of the casework constantly increasing. However, even though we have seen an increase in number there has also been an improvement in the number of complaints responded to within timescales.

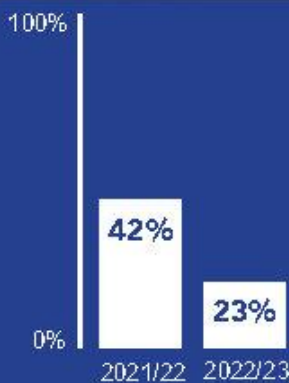


In 2022/23 Compliments have remained consistently high.

- a. Average timeframe to investigate complaints has remained high.
- b. Themes of Complaint: maintained theme of communication with no other areas of service standing out.
- c. 65% of cases were resolved within timescale, improving on performance last year.



The number of complaints responded to in timescales, and learning that can be taken forward, is regularly reported throughout the year to ASCMT. It is important that we all know the areas where we can improve and that this is supported by senior managers.



The percentage of complaints not upheld has fallen to 23% in 2022/23 compared to 42% in 2021/22. The percentage of complaint partially upheld has fallen to 30%



# Further information

Further information about complaints and representations and a copy of the Council's complaints policy and [complaints handling guidance](http://www.coventry.gov.uk/complaints/) is available at [www.coventry.gov.uk/complaints/](http://www.coventry.gov.uk/complaints/).

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Coventry City Council

# Complaints Handling Guidance

Guidance for managers and officers dealing with comments, compliments, and complaints



**COMMENTS  
& COMPLIMENTS  
& COMPLAINTS**



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# Introduction

## About this guide

This document is an internal document that provides guidance for managers and officers dealing with comments, compliments and complaints. It is to be read in conjunction with the complaints policy at [www.coventry.gov.uk/complaints/](http://www.coventry.gov.uk/complaints/). In line with the Council's values to be open, honest and transparent, this guide is made available to members of the public too.

## Making things right

Coventry City Council is committed to putting local people and their needs at the heart of what it does. As employees of the Council, we work to ensure that people have a positive and trouble-free experience with us in all transactions and interactions. However, sometimes things go wrong. When things go wrong, we encourage people to speak up, so that we can make things right.

Effective management and resolution of complaints, as well as learning from complaints, help ensure that Council services meet the needs of local residents and communities, and helps build a foundation of trust in order for the Council to have new conversations with residents, communities and partners to enable people to do more for themselves as active and empowered citizens. A key principle of this is continuous improvement, and this includes reviewing the Council's complaints processes and systems to ensure consistency and improve the way the Council serve the people of Coventry.

## The complaints policy

Coventry City Council's complaints policy sets out how individual members of the public can complain to the Council, as well as how the Council handle compliments, comments and complaints. Where possible, complaints should be resolved informally. If this is not possible, they can formally complain to the Council.

The complaints policy can be found at: [www.coventry.gov.uk/complaints/](http://www.coventry.gov.uk/complaints/). The policy defines complaints as *"any expression of dissatisfaction about the standard of service, actions, or lack of action by the Council or its employees, which the customer feels should have been provided"*.

Depending on the subject and nature of the complaint, a different pathway is followed:

- complaints about **Children's Services** including care homes and other providers commissioned by the Council follow the statutory process for representations made by or on behalf of children using social care services provided by / commissioned by the Council arising from the Children Act 1989;
- complaints about **Adult Services** including care homes and other providers commissioned by the Council follow the statutory process for representations made by or on behalf of an adult using social care services provided by / commissioned by the Council arising from the Local Authority Social Services and National Health Services Complaints Regulations 2009;
- **all other complaints** relating to Council services are dealt with by the corporate complaints policy.

Note that complaints about non-Council services, for instance, schools, hospitals; complaints by employees; or complaints about elected members (councillors) are outside the scope of the complaints policy.

The Council strives to act in accordance with best practice. This includes:

- the National Complaints Managers' Group (May 2016) [Good Practice guidance for handling complaints concerning adults and children social care services](#);
- guidance from the Local Government and Social Care Ombudsman (LGSCO):
  - [guidance on good complaint handling](#) (for instance, running a complaints system; managing unreasonable complaint behaviours and remedies); and
  - [single complaints statement](#) guidance for councils and care providers on best practice in receiving and dealing with comments, complaints and feedback about their services.

## The Local Government and Social Care Ombudsman

The LGSCO is the final stage for complaints about councils, all adult social care providers (including care homes and home care agencies) and some other organisations providing local public services. It is a free service that investigate complaints in a fair and independent way; and provides a means of redress to individuals for injustice caused by unfair treatment or service failure.

If a complainant has exhausted all of the Council's own complaints process, and remain dissatisfied with the Council's decision and/or its handling of the complaint, they have the right to take the complaint to the LGSCO. When a complaint has exhausted the Council's complaints procedure, they are informed of this right – and provided detail with how to contact the LGSCO.

# Roles and responsibilities

## Customer services

Complaints by members of the public should typically be made through customer services:

Web: [https://www.coventry.gov.uk/form\\_speakup](https://www.coventry.gov.uk/form_speakup)  
 Email: [customer.services@coventry.gov.uk](mailto:customer.services@coventry.gov.uk)  
 Telephone: 08085 834 333

Members of the public may also choose to seek help and advice from elected members (councillors) or from agencies (such as Citizens Advice, or the Ombudsman) for help and support in making their complaint. These complaints should also be passed to customer services to ensure it is recorded and tracked on Dash.

## Resident experience team

When a resident asks to make a complaint, the advisor will select 'Resident experience team' as the function area. This team will then triage all complaints, before sending them to the relevant areas of the organisation. This team have been put in place to actively welcome and encourage resident feedback, and they will aim to resolve complaints informally. Depending on the nature of the complaint, the Resident experience team may just hand it straight off to the service recovery team who will handle it as a formal complaint.

## Investigating officers

Complaints should be dealt with by the individual service area in line with the complaints policy. The officer leading the complaint response is known as the investigating officer.

## Complaints co-ordination

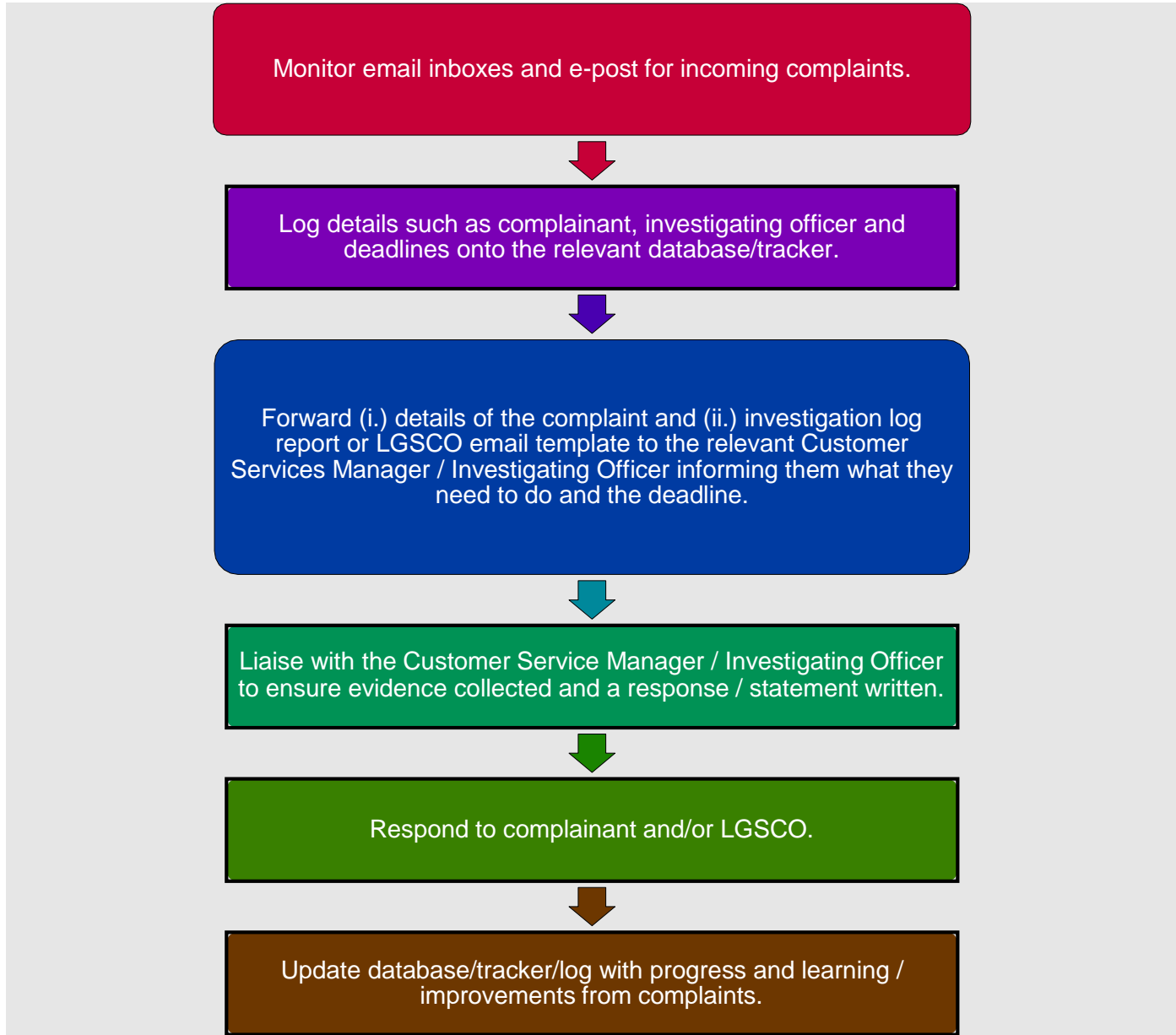
The Complaints Team provides a co-ordination function for social care, corporate and complaints escalated to Ombudsman. The complaints co-ordination function also:

- manages the 3Cs Info Hub, a one-stop shop on the intranet;
- holds regular meetings with managers and advocacy services to provide progress updates and discuss cases;
- appoints independent investigators and facilitate service investigations and reviews, in conjunction with children's services and commissioning;
- provides regular reports and statistics on complaint numbers, timescales and key messages to senior management; and
- produce annual reports.

# Complaint's co-ordination role

## Process flowchart

The following flowchart sets out how the complaints co-ordination process handles complaints and representations from members of the public:



## Getting help

### The complaints information hub

Further guidance, reports and information available for Council staff on the Complaints, Comments and Compliments Information Hub (**3Cs Info Hub**) at <https://coventrycc.sharepoint.com/sites/3CsInfoHub/>.

### Getting help

If an investigating officer needs help in responding to a complaint, please speak to your line manager at first instance. If you need further help, please contact:



### Statutory social care complaints

- Adult social care complaints: [AdultSocialCareCustomerRelations@coventry.gov.uk](mailto:AdultSocialCareCustomerRelations@coventry.gov.uk)
- Children's social care complaints: [CLYPCustomerRelations@coventry.gov.uk](mailto:CLYPCustomerRelations@coventry.gov.uk)

### Corporate complaints

- Corporate complaints: [Customer.Services@coventry.gov.uk](mailto:Customer.Services@coventry.gov.uk)

### Ombudsman Link Officer

- Coventry City Council's Ombudsman Link Officer: [Ombudsman@coventry.gov.uk](mailto:Ombudsman@coventry.gov.uk)

# Complaint processes, stages and escalation

The key stages of the Council's complaints processes are as follows:

Type	Corporate	Adult social care	Children's social care	LGSCO
<b>Stages</b>	Resident experience team will work towards Informal resolution. Stage 1: service investigation Stage 2: service investigation review	Informal resolution  Stage 1: local resolution	Informal resolution  Stage 1: local resolution Stage 2: investigation Stage 3: review panel	Enquiry and assessment  Investigation Decision and remedy
<b>Timescales</b> (in working days)	Acknowledgement: 3 days Stage 1: 10 days Stage 2: 20 days  Please note that between Stage 1-2 escalation, we will always try to resolve issues informally before progressing to the next stage.	Acknowledgement: 3 days Stage 1: 20 days	Acknowledgement: 3 days Stage 1: 10 (to 20 <sup>1</sup> ) days Stage 2: 25 (to 65 <sup>1</sup> ) days Stage 3: 30 days  Please note that between Stage 1-3 escalation, we will always try to resolve issues informally before progressing to the next stage.	Enquiry: 1-3 days Investigation: 20 days Draft decision: 5-10 days Remedy: as set out in the final decision statement
<b>Services</b>	All other services <sup>2</sup>	Adult social care	Children's social care	All
<b>Recording</b>	On the corporate customer relationship management system, <a href="#">Dash</a> .	On the corporate system, <a href="#">Dash</a> plus the <a href="#">social care complaints database</a> .	On the corporate system, <a href="#">Dash</a> plus the <a href="#">social care complaints database</a> .	On the <a href="#">Tracker</a> on the Local Government and Social Care Ombudsman management portal.
<b>Reporting</b>	Quarterly summary trends and indicators on the <a href="#">3Cs Info Hub</a> <sup>3</sup> .	Weekly progress reports provided on the <a href="#">3Cs Info Hub</a> and regular progress meetings held with relevant managers. Quarterly trend and context provided to relevant management team and via dashboards. Annual report to the relevant Cabinet Member.		Upheld complaints referred to the Monitoring Officer for follow-up action. Quarterly trends and context on the <a href="#">3Cs Info Hub</a> . Annual report to relevant committees and relevant Cabinet Member.

### Escalation of complaints

If the complainant is not satisfied with the outcome of the investigation, and they consider that one or more of the following apply: relevant information was not taken into account in investigating the complaint; procedures have not been properly applied in handling the complaint; there has been an incorrect interpretation of Council policy, they can ask for the complaint to be reviewed via a service investigation review. The review will either be conducted by a senior manager of the service or, a senior officer or manager outside the line management of the service depending on the circumstances.

<sup>1</sup> This is the maximum extension for complex cases as defined by the statutory guidance.

<sup>2</sup> All other services, e.g.: adult education; benefits and tax; children's transport; corporate, finance and legal; education and libraries (except schools or education admissions appeals); environmental services (including household waste collections, noise complaints); housing services; planning; parking, etc.

<sup>3</sup> Indicators currently provided on the corporate dashboard accessible via the 3Cs Info Hub and the Performance Hub.



The complainant will be expected to explain, in writing or verbally, the grounds for seeking a review. With children's social care complaints, in line with the Department for Education statutory guidance for local authority children's services on representations and complaints procedures, a complaint may be escalated to a Stage 2 investigation or Stage 3 review panel if a complainant wishes for it to do so. When this happens, a senior officer will always work with the complainant to see if the complaint can be resolved without escalation first.

### Escalation to the Local Government and Social Care Ombudsman

If a complainant is unhappy about the way the Council has dealt with their complaint, they can contact the LGSCO. The LGSCO would normally expect a complaint to be made within twelve months of when the complainant first knew of the problem that they are complaining about, and normally require all complainants to go through all stages of the Council's own procedure before considering the complaint. However, in certain circumstances the LGSCO has the discretion to waive this requirement. Note that a complainant can approach the LGSCO at any stage of the complaints process.

### Remedies, compensation and financial redress

The key principle for any financial remedies paid is that a remedy should, as far as possible, put the complainant back in the position they would have been in but for the fault identified. Any financial redress should be agreed with the relevant director, in line with LGSCO guidance set out at <https://www.lgo.org.uk/information-centre/reports/guidance-notes>. Where a complaint has gone to the LGSCO, the local authority has the option of suggesting a remedy to resolve the complaint – or to accept the LGSCO's recommendation.

### Learning from complaints: the complaints investigation log report

It is important for services to treat complaints as an opportunity to learn lessons from previous experiences. By learning from complaints, services can become more responsive to the needs of residents. Upon completion of a complaint investigation, investigating officers are asked to complete a complaints investigation log report. This will provide additional learning from the complaints received, for example, improvements to training or to inform changes to procedures. The Council regularly publishes reports on complaints, including lessons learned, to ensure that complaints are properly communicated to elected members.

### Equality monitoring

It is important to ensure any equality dimensions identified through complaints are addressed and rectified. Operationally, it is important that equality data such as the protected characteristics such as ethnicity, sex and disability status is collected as part of handling complaints; and issues are raised to the strategic equality, diversity and inclusion project board. This will enable the Council to identify if its complaints policy is operating as intended, eliminate discrimination and advance equality of opportunity in line with the public sector equality duty.

## Privacy and information governance

**Please remember that complaints, investigations and information about it are private and confidential and must not be disclosed to third parties.**

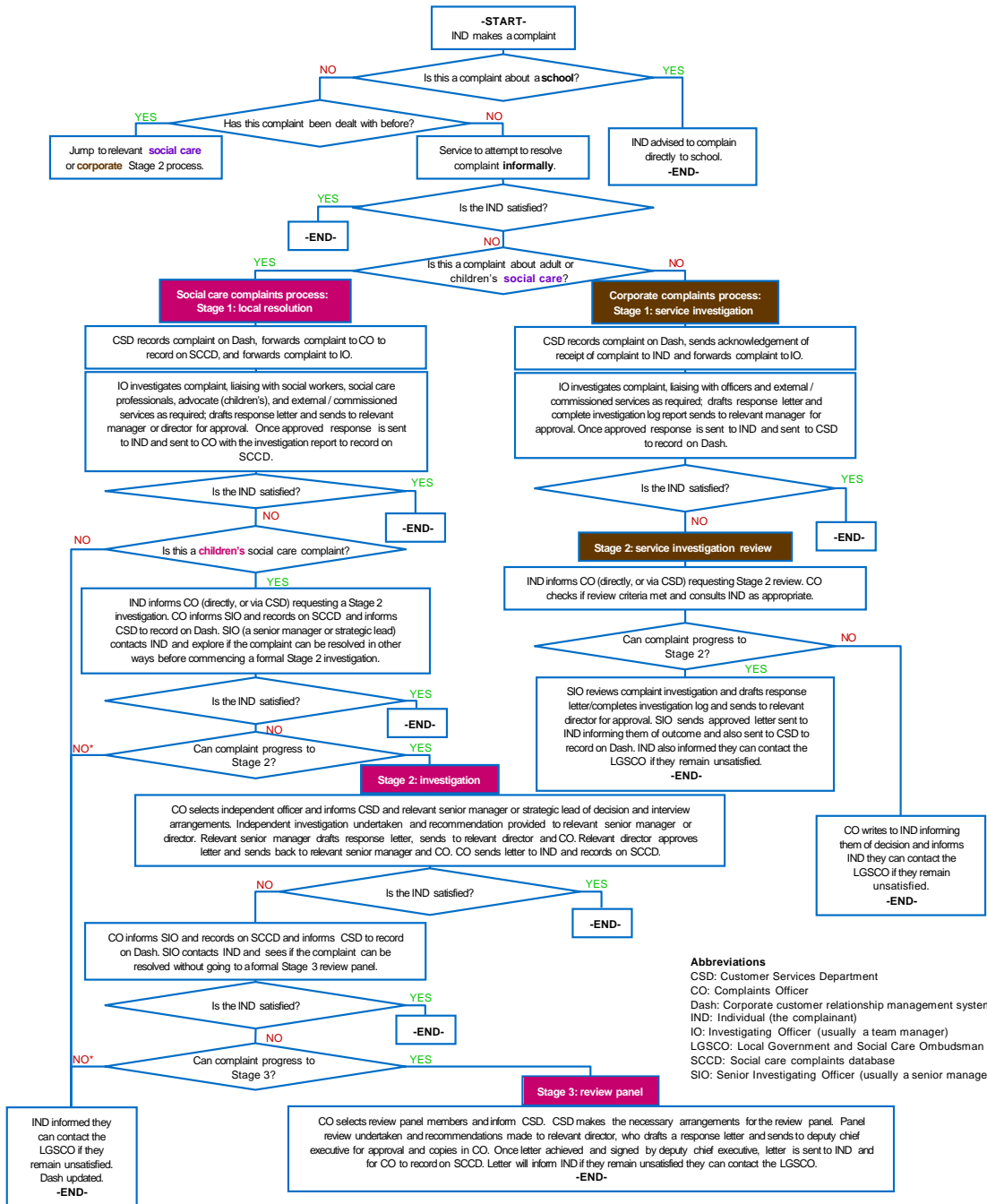
Our summary privacy notice states:

We will use the information you provide to handle your complaint in line with the Council's complaints policy available at [www.coventry.gov.uk/complaints/](http://www.coventry.gov.uk/complaints/). We may share this information with other organisations which may include independent external investigators, children's advocacy services and the Local Government and Social Care Ombudsman. We will only share your information if this is part of solving your complaint. More information on how we handle personal information and your rights under the data protection legislation can be found in the full Privacy Notice: [www.coventry.gov.uk/privacynotice/](http://www.coventry.gov.uk/privacynotice/).

You can help ensure that we protect people's information by ensuring that you follow the Council's information governance and data protection policies. In particular, please:

- **ensure that any correspondence containing personal or confidential data is sent in a password protected zip archive** with the **password provided in a separate email**; and
- **double-check** people's names, contact details, email addresses, mailing addresses and telephone numbers!

# Social care and corporate complaints process flowchart



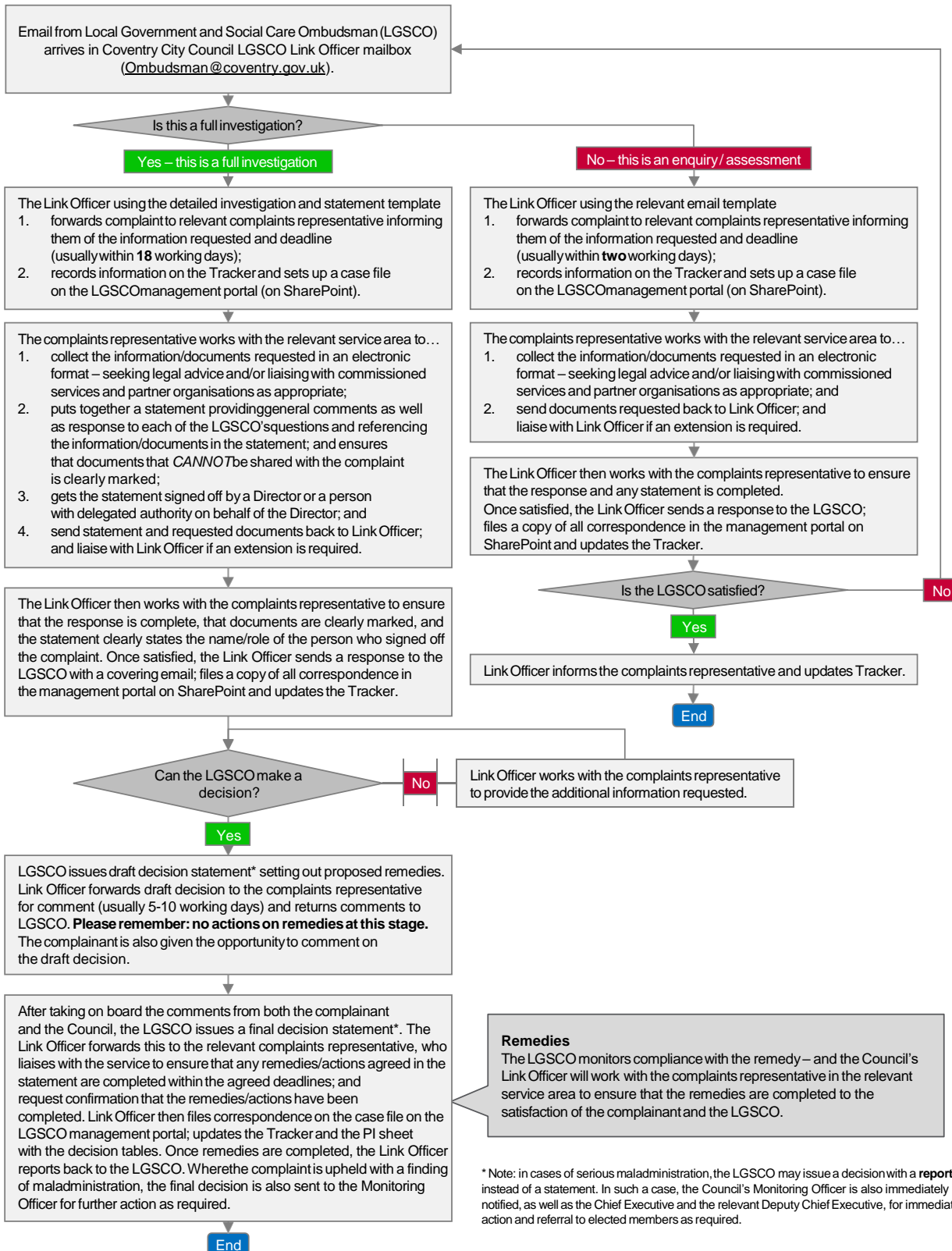
\* on rare occasions a complaint may not progress to the next stage, (e.g. out of timescale)

**Abbreviations**  
 CSD: Customer Services Department  
 CO: Complaints Officer  
 Dash: Corporate customer relationship management system  
 IND: Individual (the complainant)  
 IO: Investigating Officer (usually a team manager)  
 LGSCO: Local Government and Social Care Ombudsman  
 SCCD: Social care complaints database  
 SIO: Senior Investigating Officer (usually a senior manager)

# Local Government and Social Care Ombudsman process complaints guidance

Stage	Notes
Enquiry / assessment	The request will have a short deadline of between <b>1 to 3 working days</b> . At this stage, the LGSCO will ask the Council for a copy of its formal complaint responses; and confirmation that the complaint has fully completed the Council's complaints process. The request will not include any new actions and should be returned to the Link Officer by the date specified.
Premature	If a complaint has not completed the Council's own complaints process, the LGSCO Intake team will ask the complainant to contact the Council. Alternatively the LGSCO will return the complaint as a "premature" complaint for consideration under the Council's complaint process. The Link Officer will send the relevant department the information using the premature email template. It is important to remind complainant of their right to complain again to the LGSCO when they exhaust the Council's complaints process. Following completion of the complaints process (whether it is resolved or not), a copy of the final response should be sent to the Link Officer.
Investigation	The Link Officer will send a covering email using the Ombudsman detailed investigation template which includes the statement document requesting a written response to the LGSCO's questions. This needs to be returned by a set deadline, usually within <b>18 working days</b> , so that the deadline (within 20 working days) can be met. The response must be provided as a <b>statement</b> , providing general comments as well as responses to each of the questions. It must also include the name and role of the author, and be <b>signed off by the Director</b> or a nominated person. Any supporting evidence must be provided as electronic attachments and referenced in the statement. Any information that cannot be shared with the complainant should be clearly marked and packaged separately. It may be necessary to seek legal advice and/or liaise with commissioned services and partner organisations as appropriate. The Link Officer needs confirmation that this has been done (in the form of an email trail). If the LGSCO investigator has asked us to consider whether we are prepared to remedy any injustice that may have been caused – we should comment on this as this is an opportunity for us to resolve the issue.
Draft decision	Following the investigation, the LGSCO will typically issue a draft decision <b>statement</b> . This will state whether the complaint was <b>upheld</b> or not, and detail the investigator's findings and explains the decision made. At this stage, the Council is asked whether it agrees with the decision and remedy. This is an opportunity to comment on the decision, and suggest any changes or corrections. At this stage, remedial actions must <b>not</b> be taken yet – remedies should only be completed after the final decision. We are usually requested to respond within <b>5-10 working days</b> . <i>Note: the investigator may choose to issue a decision as a <b>report</b> (under Section 30(1) of the Local Government Act 1974) in which case the Council's Monitoring Officer is notified.</i>
Final decision	The final decision letter and statement should be circulated, as appropriate, to everyone who was involved in the investigation and everyone who needs to know of the investigation outcomes. Action on remedies should now be completed. In cases where the LGSCO makes a finding of <b>maladministration</b> , the final decision letter and statement is also forwarded by the Link Officer to the Monitoring Officer. The Monitoring Officer will decide if any further action is required.
Remedy	The LGSCO aims to remedy personal injustice when its investigations reveal there has been fault. Remedies are not intended to be punitive and are not just about money: the remedies also look into the root causes and recommend improvements to systems when they haven't worked properly, so that others do not suffer the same problems in future. The LGSCO monitors compliance with the remedy – and the Link Officer will work with the complaints representative in the relevant service area to ensure that the remedies are completed to the satisfaction of the complainant and the LGSCO. Confirmation and evidence that all actions required, as per the final decision letter and statement. This can be as soon as within <b>5-10 working days</b> ; or longer for more complex issues.

# Local Government and Social Care Ombudsman process flowchart



# Version control

## Document Location

Published location: <https://smarturl.it/cov-complaints-guide>

SharePoint: [https://coventrycc.sharepoint.com/teams/ChiefExec/PublicHealth/Insight/Documents/Complaints handling guidance 2020.docx](https://coventrycc.sharepoint.com/teams/ChiefExec/PublicHealth/Insight/Documents/Complaints%20handling%20guidance%202020.docx)

## Reviewing arrangements

This guidance is reviewed annually with the annual complaints report.

## Revision History

Revision date	Summary of Changes
13/09/2018	3.1 Integrated guidance, combining previously separate complaints handling guidance for the Local Government and Social Care Ombudsman and People Directorate and social care into one document.
04/09/2019	4.0 Updated with new section on roles and responsibilities, updated with the new complaint's investigation log and statement template.
20/09/2019	4.1 Added section on equality monitoring.
14/09/2020	5.0 Updated to clarify changes in Ombudsman handling procedure regarding premature complaints and reflect organisational changes.
19/09/2021	6.2 Updated Complaint, Process, Stages and Escalation table to reflect an informal review between each stage of the complaint's procedure before escalation to the next stage.
09/06/2022	Complaints Policy page 3 Social care changed to services
23/02/2024	Information relating to 'Resident experience team' has been added.





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