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### Cabinet Member for Adult Services

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**Time and Date**

2.00 pm on Thursday, 25th September, 2025

**Place**

Diamond Room 1 – Council House

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**Public Business**

1. **Apologies**
2. **Declarations of Interest**
3. **Minutes** (Pages 3 - 6)
  - a) To agree the minutes of the meeting held on 24<sup>th</sup> February 2025
  - b) Matters arising
4. **Quarter Four Performance 2024/25 - Adult Social Care** (Pages 7 - 22)

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

There are no outstanding issues.
6. **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**

None

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

Wednesday, 17 September 2025

Note: The person to contact about the agenda and documents for this meeting is Tom Robinson Email: [tom.robinson@coventry.gov.uk](mailto:tom.robinson@coventry.gov.uk)

Membership: Councillors L Bigham (Cabinet Member), B Mosterman (Shadow Cabinet Member) and D Toulson (Deputy Cabinet Member)

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**Tom Robinson**

**Email: [tom.robinson@coventry.gov.uk](mailto:tom.robinson@coventry.gov.uk)**

**Coventry City Council**  
**Minutes of the Meeting of Cabinet Member for Adult Services held at 10.00 am on**  
**Monday, 24 February 2025**

Present:

Members:                      Councillor L Bigham (Cabinet Member)  
                                    Councillor B Mosterman (Shadow Cabinet Member)  
                                    Councillor D Toulson (Deputy Cabinet Member)

Employees (by Service  
Area):

Adults and Housing:        P Fahy (Director), A Errington, M Kuharenoka, A Staunton

Law and Governance:      S Bennett

## **Public Business**

### **20.      Declarations of Interest**

There were no disclosable pecuniary interests.

### **21.      Minutes**

The minutes of the meeting held on the 20 November 2024 were agreed and signed as a true record.

There were no matters arising.

### **22.      Adult Social Care Direct Payment Strategy 2024-2029**

The Cabinet Member for Adult Services considered a report of the Director of Adults and Housing which detailed the Adult Social Care Direct Payment Strategy 2024-2029.

Adult Social Care aims to support people to live full and active lives in their local communities and be in control of their care and support wherever possible. Self-directed support enables people to identify their own needs and make choices about how and when they are supported to live their lives. Direct Payments are a type of self-directed support, and the Care Act 2014 identifies that the local authority have a key role in ensuring that people are given relevant and timely information about Direct Payments.

The Direct Payments Strategy set out an ambition for people who wish to be in control of the support they are eligible to receive from Adult Social Care and professionals that arrange, deliver or have a supporting role in this. The aim is to support people to have power and control over their lives and see 'self-directed support' being essential to achieve this as well as setting a clear path to convert the ambitions of the strategy into impact for people with care and support needs.

The report highlighted how the Direct Payment Strategy had been developed in order for Adult Social Care to set out how they will continue to develop their Direct Payment offer. In developing and implementing the Strategy, the importance of promoting the use of direct payments to enable people to make requests in an efficient way was noted. As a result, this fully engages people to consider direct payments and how they could be used to meet needs.

The Strategy set an approach to self-directed support in the coming years to ensure Adult Social Care have in place the structures, systems, and support needed to achieve good quality self-directed support and address the factors which influence the success and uptake of Direct Payments.

An appendix to the report detailed the Direct Payments Strategy 2024-29 in full.

**RESOLVED that the Cabinet Member for Adult Services approves the Adult Social Care Direct Payment Strategy 2024-2029**

23. **Renewal of the Section 75 Agreement between Coventry City Council and Coventry and Warwickshire Partnership Trust**

The Cabinet Member for Adult Services considered a report of the Director of Adults and Housing which sought the renewal of the Section 75 Agreement between Coventry City Council and Coventry and Warwickshire Partnership Trust.

The City Council entered into a Section 75 Agreement on 1 April 2014 following Cabinet approval initially for a three-year period but with provision for annual extensions. The agreement has been extended over a number of years and has been formally reviewed on two separate occasions. The reviews have upheld the decision to enter into this agreement and this is also reflected in the Section 75 Annual Review 2024. For the future, the Annual Review will act as a review mechanism for this agreement.

The report updated the Cabinet Member on the Section 75 Partnership Agreement which provides the legal framework to underpin joint working in Adult and Older People's Mental Health Services. Under this framework, joint Health and Social Care teams deliver mental health services from a single line management structure led by CWPT with designated Council staff seconded, and the delegation of specific social care duties, namely the Care Act 2014. Although the service delivery elements are integrated the financial responsibilities for health and social care remain separate with this separation to continue under the extended agreement.

Coventry City Council (CCC), Warwickshire County Council (WCC) and CWPT remain committed to integrated working practices as a means for delivering joined up support to people with mental ill health across Coventry and Warwickshire, the S75 agreement continues to provide a suitable vehicle through which to deliver this and to meet the national expectations for integrated care provisions.

An appendix to the report outlined performance of the partnership arrangements to provide integrated mental health services in Coventry and Warwickshire.

**RESOLVED that the Cabinet Member for Adult Services:**

- 1) Notes the Annual Review report that will form the basis of review of the arrangements going forward.**
- 2) Approves a further extension of the Section 75 Agreement between Coventry City Council and Coventry and Warwickshire Partnership Trust for a period of 5-years from 1st April 2025 to 31st March 2030.**
- 3) Delegates authority to the Director of Adult Service and Housing, following consultation with the Chief Operating Officer at CWPT, to finalise the terms, conditions and legal agreements required to facilitate its delivery in terms of Information Governance.**

**24. Outstanding Issues**

There were no outstanding Issues.

**25. Any other items of urgent public business**

There were no other items of urgent public business.

(Meeting closed at 10.30 am)

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Cabinet Member for Adult Services:

September 25<sup>th</sup> 2025

**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 Four Performance 2024/25 – 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 four 2024/25 and provides an end of year position. 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 four 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 the work 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 the Health and Social Care Scrutiny Board (5).

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 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 four 2024/25 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 A - Summary ASCOF 24-25 outlines the Quarter Four 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 Four Performance 2024/25 – 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 four of 2024/25. 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 2023/24.
- 1.4 There has been a revision of ASCOF measures for the 2024/25 reporting year, and as such, the year-end performance report for 2024/25 will include these revised measures. This does present some challenges in terms of benchmarking data not being available for these measures until around November 2025. However, for completeness the previous ASCOF measures have been consistently monitored until year end.
- 1.5 ASCOF Performance is reviewed regularly by the senior management team supported by a performance dashboard.
- 1.6 As of 31<sup>st</sup> March 2025 there were 3714 people in receipt of long term support and 450 people in receipt of short term services.

### **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 the year 2024-25 there has been focus on safeguarding activity and improving engagement with carers.

#### **Summary of key changes and improvements**

Since quarter four in the 2023/24 performance report there have been the following notable changes:

There have been improvements in 11 ASCOF indicators since Q4 2023/24 many of these changes are relatively small in percentage terms but nevertheless support an overall improving position with most significant improvements being in:

- The overall satisfaction of people who use services and their care and support has improved from 64.6% in 2023/2024 to 67.1% in 2024/25
- Carers receiving direct payments for support direct to carers have increased from 64.2% in 2023/24 to 100% in 2024/25.

- The proportion of people who receive long-term support who live in their own home or with family has increased from 52.3% in 2023/24 to 67.7% in 2024/25
- The proportion of people who use services who report having control over their daily life. There has been an improvement from 78.9% in 2023/2024 to 82.2% in 2024/25
- Reviews for people in long term support for 12+ months has seen an improvement from 55.6% in 2023/24 to 66.4% in 2024/25

We have also seen 5 ASCOF indicators decline. Although the changes in percentage terms for all are minor the most notable of these are:

- The proportion of people who use services who feel safe has declined from 74.3% in 2023/24 to 72.6% in 2024/5
- The proportion of Section 42 safeguarding enquiries where a risk was identified, and the reported outcome was that this risk was reduced or removed declined from 94% in 2023/24 to 93% in 2024/25
- The proportion of older people (65 and over) who were still at home 91 days after discharge from hospital declined from 81.2% in 2023/24 to 79.8% in 2024/25

### **ASCOF National Indicators**

In respect of specific performance indicators quarter four commentary is as follows: (All comparator data is for 2023/24). 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**

100% of people are receiving self-directed support as at the end of Q4. This is in comparison to the West Midland comparator Figure of 94%. (2023/24 figure).

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

100% of carers are receiving self-directed support as at the end of Q4. This is in comparison to the West Midland comparator Figure of 90.5 %. This is a sustained performance for the service.

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

22% of people are receiving direct payments as at the end of Q4. This is in comparison to the West Midland comparator figure of 25.8%. Work continues to review our Direct Payment approach, and we have developed new promotional materials including videos of those receiving a payment which have been produced to support uptake and understanding. We have also translated our DP information leaflets into Punjabi, Urdu, Arabi and Gujarati given the known ethnicity of those receiving a DP. In 2025 we published a Direct Payment Strategy 2024-2029 developed in order for us to set out how we will continue to develop our Direct Payment offer

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

100% of carers are receiving direct payments for support direct to them - this is an improvement on Q3 and our outturn in the last 2 years and is higher than the West Midland comparator figure of 82.3%. We are also seeing increased range in the use of carers direct payments indicating more person-centred practice and a preference for the use of Direct Payments as opposed to indicative budgets. 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, with work currently underway to recommission this support offer in line with the Carers Action Plan 2024/26 and feedback from local carers.

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

82.5% of adults with learning disabilities live in their own home or with their families. This is higher when compared with the West Midlands comparator of 77.2% in 2023/24 and has increased from 80.3% in Q3.

### **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 an increase in numbers of working age adults admitted to long term residential and nursing care. Whilst the estimate was 26.8 per 100,000, the final figure for Q4 is 27 (Remains on the similar lines to the previous year and remains higher than the West Midlands average of 16.4) A total of 8 people (13% of the overall number) counted for this indicator were placed in hybrid residential / supported living type placements (person has their own front door). The model of support is recovery focused with a limited length of stay expected for up to 2 years with the aim for the person then to move into a community setting. During the last two years CCC have commissioned an additional 20 beds of this style of accommodation.

#### **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 end of year figure is 654 older adults (65+) per 100,000 population admitted to residential and nursing homes. The West Midlands comparator figure is 603.8. In 2023-24 there were 680 residents overall admitted showing an improvement based on the current trajectory. 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 Q4 79.8% of people aged 65+ were still at home 91 days after discharge. This a decrease from Coventry's 2023/24 figure which was 81.2%. This compares with the West Midlands figure of 84.4%.

### **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**

77.2% of people in Q4 received a short-term service with little or no ongoing support, which remains lower than Q3, but this is subject to variation throughout the year. In 2023/24 this figure was at 76.7% showing an improvement. The West Midlands comparator figure is 77.9%. This is due to the Adult Social Care Promoting Independence model delivered via local integrated Teams and a therapeutic first contact approach leading to improved independence outcomes.

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

In respect of directorate indicators quarter 4 commentary is as follows:

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

1901 out of 2807 clients accessing long-term services for more than 12 months had a planned/unplanned review during 2024/25. By the end of the Q4 66.4% of people received a review, which is an improvement on Q3's (48%).

The 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
- 55.6% in 2023-24
- 66.4% in 2024-25

Coventry ranked 82 nationally, where national average was 59% and, where West Midlands average was 64% in 2023-24.

There is an improvement from 55.6% in 2023-24 to 66.4% in 2024/25. Our performance in 2024/25 shows a good level of improvement compared to the previous 3 years with the focus being the longest waiting for a review with an internal objective to ensure that there

are no intervals of greater than two years between reviews, as well as quarterly targets within Teams.

Our review performance has been lower in previous years due to the prioritisation of new requests and safeguarding concerns 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.

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 that although we are some way from reviewing all service users and unpaid carers each year we do have other ways to oversee people care and support arrangements, 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 it has been identified that an assessment is required to completion of a comprehensive assessment is on average 59.4 days which is an improvement on the average of 106 days overall during the year 2023/24. There has been an improvement from Q3 from 77 days to 59.4 days wait time in Q4 2024/25.

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. In addition, people may also receive equipment, information and advice or an Occupational Assessment to support.

### **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 Q4 87 people have an uncompleted Care Act Assessment. This is an improvement on the 106 at the end of the year 2023-24 and a

decrease from the Q3 figure of 314. 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 and therapeutic interventions 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 Q4, 5733 safeguarding concerns had been received compared to 6796 in 2023-24. 1055 safeguarding enquiries have started (1353 in 2023-24). The conversion rate from concern to enquiry is 18% (West Midlands regional is 14%). As of end of Q4, 93% of safeguarding enquiries resulted in risk being reduced or removed and 70% 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**

2.5.1 Coventry City Council has completed its programme of Digitisation of social care records, achieving a total of 83% coverage of Coventry and Warwickshire providers who have transitioned to using Digital Care records from paper-based records.

### **2.5.2 Engagement and events**

In February 2025, Adult Social Care attended the Muslim Resource Centre for a Health and Wellbeing Event, a partnership event with the Coventry Muslim Forum and Coventry and Warwickshire Integrated Care Board. The event was busy throughout the day, and we were able to support a number of people with enquiries about Adult Social Care and carers support. The session takes place yearly in the lead up to Ramadan supporting local communities with their wellbeing during this time.

The Adult Social Care Stakeholders Group which meets bi-monthly met in March 2025. During this session we focused on refreshing the terms of reference of the group, a

look back on key achievements of the group since it's conception and embedding the sessions around Think Local Act Personal – Making It Real Themes. As a group we also discussed the use of an online platform for those who are unable to make face to face sessions.

The Strategic Commissioning Team continues to hold regular provider forums, fostering peer learning, disseminating critical information, and problem-solving. In Quarter 4, three provider forums (Older Peoples, Home Support, Housing with Care) were held in person with strong attendance and active participation and a further online forum was held for Mental Health providers, which aided a high attendance.

Adult Social Care continues to produce a range of bulletins for providers (192 recipients), carers (4353 recipients), Adult Social Care (2140 recipients), and internal staff-bulletin. These bulletins contain valuable information, advice, public health messages, and community event details, with contributions from multiple partners.

### **2.5.3. – Accelerated Reform Fund – Supporting Innovation in ASC**

Quarter 4 activity focused upon the implementation of the four identified Accelerated Reform Fund projects:

- **Shared Lives Recruitment Campaign** – During this quarter we launched the media campaign for Shared Lives which started with radio adverts, followed by bus back advertising. Later in the quarter advertising for shared lives was incorporated in council tax notifications, this generated the most amount of enquiries to the service. A video was also launched later in the quarter which has generated some interest. A number of enquiries resulted from the advertising.
- **My Time Project** – Quarter 4, 2025, saw the successful recruitment to the co-ordinator and administrator post meaning that the project was able to commence during the beginning of January 2025. During this quarter the focus of activity was around seeking out initial opportunities and building partnerships with the Carers Trust Heart of England. By the end of Quarter 4 the project had secured its first opportunities, partnerships with Coombe Abbey Hotel and Coventry Rugby Club.
- **Bridgit Online Support Tool** – The Bridgit app continued to grow in usership giving us a greater insight into its utilisation. By the end of Quarter 4 2025, 748 people have accessed the site, with 857 self-help plans created for carers. The pattern of usage indicates people are using the app outside of office hours and weekends, suggesting the added value in the platform for people requiring support outside of working hours.
- **Supporting Carers in Hospital Settings** – During this quarter we worked with procurement and legal colleagues to vary the current grant aid agreement for carer support to incorporate a new project which has enhanced support for carers in hospital settings. Successful recruitment took place during quarter 4 to create additional provision of a Hospital Liaison support officer at University Hospital Coventry and Warwickshire with the worker starting in June 2025.

## **3.0 Options considered and recommended proposal**

3.1 There are no specific options associated with this report.

#### **4.0 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.

#### **5.0 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.

#### **6.0 Comments from Director of Strategic 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.

#### **7.0 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 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.

7.1.3 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 several 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. The report outlines several examples of activities that support equalities.

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

None

## **7.6 Implications for partner organisations?**

None

Report author(s):

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**Service: Adult Social Care**

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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>
Kirstin Clarke	Assistant Director Adults Social Care	Adult Services and Housing	06.08.25	14.08.25
Aideen Staunton	Head of Service Partnerships and Social Care Operations	Adult Services and Housing	06.08.25	11.08.25
Tracey Denny	Head of Service Localities and Social Care Operations	Adult Services and Housing	06.08.25	11.08.25
Andrew Errington	Adults Principal Social Worker	Adult Services and Housing	06.08.25	06.08.25
Jon Reading	Head of Commissioning and Quality	Adult Services and Housing	06.08.25	07.08.25
Christopher Whiteley	Finance Manager	Finance	06.08.25	05.09.25
Lisa Lawson	Programme Manager	Adult Services and Housing	06.08.25	08.08.25
Claire Coulson-Haggins	Team Leader, Legal Services	Law and Governance	06.08.25	05.09.25
Tom Robinson	Governance Services Officer	Governance Services	04.09.25	08.09.25
<b>Names of approvers for submission:</b> (officers and members)				
Pete Fahy	Director of Adult Services and Housing	Adult Services and Housing	06.08.25	14.08.25
Councillor L Bigham	Cabinet Member for Adult Services		04.09.25	04.09.25

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Appendix A - Adult Social Care Outcomes Framework (ASCOF) 2024/2025

Indicator	Ind Old	Brief Description								Improvement	Annual Trend	Peer Group	West Mids	England	Rank - England	Rank - England	Rank - England	Quartile	Improvement	
			2021/22	2022-23	2023-24	2024-25	2024-25	2024-25	2024-25			2023/24	2023/24	2023/24	2021/22	2022/23	2023/24	2023/24	Outturn to move to next quartile	
						Q1	Q2	Q3												
Objective 1: Quality of life																				
1A	1A	Quality of life of people who use services	18.9	18.6	19.1	NA	NA	NA	19.6	↑		↑	18.74	19.10	19.10	70	112	72	2	19.4
1B	1J	Quality of life of people who use services (Adjusted)	0.439	0.423	0.415	NA	NA	NA	0.437	↑		↑	0.403	0.435	0.417	10	50	80	N/A	0.416
1C	1D	Quality of life of carers	7.0	7	7.0	NA	NA	NA	NA				7.0	7.4	7.3	94	N/A	106	3	7.2
1D	3A	Overall satisfaction of people who use services with their care and support	62%	60.5%	64.6%	NA	NA	NA	67.10%	↑		↑	61.5%	66.3%	65.4%	103	118	80	3	64.8
1E	3B	Overall satisfaction of carers with social services (for them and for the person they care for)	32%	32%	33.2%	NA	NA	NA	NA				33.3%	38.6%	36.7%	110	N/A	105	3	36
Objective 2: Independence																				
2A	2D	The proportion of people who received short-term services during the year - who previously were not receiving services - where no further request was made for ongoing support.	65.1%	75.0%	76.7%	76.9%	80.0%	78.1%	77.20%	↓		↑	76.2%	77.9%	79.4%	110	89	86	3	78.3
2B	2A1	The number of adults aged 18 to 64 whose long-term support needs are met by admission to residential and nursing care homes (per 100,000 population)	35.1	24.8	27	6.5 estimated rate end of year 26	14.4 estimated end of year 28.8	20.1 estimated end of year 26.8	27	↓		↔	17.8	16.4	15.2	147	141	146	4	19
Number of admissions			87	56	61	15	33	46	62											43
2C	2A2	The number of adults aged 65 and over whose long-term support needs are met by admission to residential and nursing care homes (per 100,000 population)	810.5	723	680	173 estimated end of year 692	354 estimated end of year 708	513 estimated end of year 684	654	↑		↑	529.6	603.8	566	138	128	118	4	668
Number of admissions			409	367	345	88	180	261	333											339
2D																				
2D Part 1	2B	The proportion of older people (65 and over) who were still at home 91 days after discharge from hospital	84%	81.1%	81.2%	80.8%	82.7%	78.7%	79.80%	↑		↓	85.6%	84.4%	83.8%	78	95	103	3	85.2
2D Part 2	2B2	The proportion of older people aged 65 and over offered reablement services following discharge from hospital.	6.9%	6.0%	NA	NA	NA	NA	NA				4.4%	4.7%	3.0%	8	15	13	1	=
2E Part 1	1G	The proportion of people who receive long-term support who live in their home or with family with LD aged 18-64	77.5%	80.2%	81.2%	80.6%	80.4%	80.3%	82.50%	↑		↑	78.7%	77.2%	81.6%	99	86	87	3	82.6
2E Part 2		The proportion of people who receive long-term support who live in their home or with family (LD only up to 23-24)	39.8%	43.5%	52.3%	54.9%	55.1%	57.1%	67.70%	↑		↑	NA	NA	NA	NA	NA	NA	NA	NA

INDICATOR	Ind OLD	Brief Description	2021/22	2022-23	2023-24	2024-25 Q1	2024-25 Q2	2024-25 Q3	2024-25	Improvement	Annual Trend	Peer Group 2023/24	West Mids 2023/24	England 2023/24	Rank - England 2021/22	Rank - England 2022/23	Rank - England 2023/24	Quartile 2023/24	Improvement Outturn to move to next quartile
Objective 3: Empowerment - information and advice																			
3A	1B	The proportion of people who use services who report having control over their daily life.	73.7%	74%	78.9%	NA	NA	NA	82.20%	↑	↑	74.5%	76.6%	77.6%	121	121	67	3	80%
3B	3C	The proportion of carers who report that they have been involved in discussions about the person they care for	66.5%	66.5%	69.2%	NA	NA	NA	NA			64.3%	66.9%	66.4%	50	N/A	52	2	70.8
		3C																	
For 3C part 1 (users):	3D1	The proportion of people who use services who have found it easy to find information about services and/or support	66.2%	70.5%	65.3%	NA	NA	NA	73.5%	↑	↑	66.2%	65.3%	67.9%	61	39	110	2	68.80%
For 3C part 2 (carers):	3D2	The proportion of carers who use services who have found it easy to find information about services and/or support	58.7%	58.7%	60.4%	NA	NA	NA	NA			55.8%	60.8%	59.1%	60	N/A	65	2	61.8
		3D																	
3D Part 1a:	1C1A	adults aged 18 or over receiving self-directed support	86.8%	100%	100%	100%	100%	100%	100.00%	↔	↔	96.3%	94.0%	92.2%	132	1=	1	1	=
3D Part 1b:	1C1B	carers receiving self-directed support	37.1%	100%	100%	100%	99%	99.6%	100.00%	↔	↔	93.3%	90.5%	89.7%	143	1=	1	1	=
3D Part 2a:	1C2A	adults 18 or over in receipt of care and receiving direct payments.	23.4%	22.7%	22.5%	22.0%	21.0%	22.0%	22.00%	↔	↓	25.6%	25.8%	25.5%	90	94	93	3	24.9
3D Part 2b:	1C2B	carers receiving direct payments for support direct to carer.	37.1%	53.7%	64.2%	57.0%	57.3%	59.6%	100.00%	↑	↑	81%	82.3%	77.4%	128	118	116	4	71.1
Objective 4:Safety																			
4A	4A	The proportion of people who use services who feel safe	72%	69.9%	74.3%	NA	NA	NA	72.60%	↓	↓	68%	72.5%	71.1%	36	79	31	1	75
4B	NEW	The proportion of section 42 safeguarding enquiries where a risk was identified, and the reported outcome was that this risk was reduced or removed	93%	94%	94%	96%	96%	95%	93%	↓	↓	NA	NA	NA			N/A		
Objective 5: Social connections																			
		5A																	
5A part 1 (users)	111	Proportion of people using services reporting they had as much social contact as they would like	41.7%	45%	47.3%	NA	NA	NA	49.60%	↑	↑	42.88	46.2	45.6	55	69	55	2	48.5
5A part 2 (carers)	112	Proportion of carers who reported that they had as much social contact as they would like	24.6%	24.6%	25.8%	NA	NA	NA	NA			27.69	32.2	30	103	N/A	118	3	26.7

INDICATOR	Ind OLD	Brief Description	2021/22	2022-23	2023-24	2024-25 Q1	2024-25 Q2	2024-25 Q3	2024-25	Improvement	Annual Trend	Peer Group 2023/24	West Mids 2023/24	England 2023/24	Rank - England 2021/22	Rank - England 2022/23	Rank - England 2023/24	Quartile 2023/24	Improvement Outurn to move to next quartile
Objective 6: Continuity and quality of care																			
6A	New	The proportion of staff in the formal care workforce leaving their role in the past 12 months	24.6%	25.6%	NA	NA	NA	NA				N/A	28.20%	28.3%					
6B	New	The percentage of residential adult social care providers rated good or outstanding by CQC	63.5%	63.9%	65.3%	63.9%	63.9%	63.9%	63.90%			74.9	73.5	78.5					
6B outstanding	New	The percentage of residential adult social care providers rated outstanding by CQC	1.4%	1.4%	1.4%	NA	NA	NA	1.40%										
6B good	New	The percentage of residential adult social care providers rated good by CQC	62.2%	62.5%	63.9%	NA	NA	NA	62.50%										
6B other	New	The percentage of residential adult social care providers rated other by CQC	29.7%	33.3%	33.3%	NA	NA	NA	33.30%										
6B not yet rated	New	The percentage of residential adult social care providers not yet rated by CQC	6.8%	2.8%	1.4%	NA	NA	NA	2.80%										
LOCAL		CQC IR5 Reviews for people in long term support for 12+ months	44.9%	49.2%	55.6%	53.1%	50.9%	48.0%	66.40%			54%	64.0%	57%	102	101	82	3	58%
LOCAL		CQC IR5 People in Long term support who were assessed/reviewed within the last 18 months	63.0%	73.0%	81.0%	83.4%	81.3%	76.2%	88.30%										
LOCAL		CQC IR5 Waiting times for Care Act Assessment (average of days)	146	124	106	70	58	77	59.4										
LOCAL		CQC IR5 Waiting list for Care Act Assessment (number of people)	466	461	403	301	385	314	87										
LOCAL		CQC IR5 Median waiting time for a review	NA	NA	130	158	197	228	157										
LOCAL		CQC IR9 Number of people waiting for an OT assessment	NA	NA	NA	260	192												
LOCAL		CQC IR9 Median waiting time for an OT assessment	35	37	46	64	61	38											
LOCAL		CQC IR9 Median waiting time for equipment	NA	NA	43	36	36	32	35										
LOCAL		CQC IR29 Number of Dols applications waiting to be allocated to BIA	337	301	266	224	240	180	130										
LOCAL		CQC IR29 Median waiting time for Dols application to be allocated to a BIA	62	44	39	46	32	16	19										

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