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### Cabinet Member for Adult Services

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**Time and Date**

1.00 pm on Wednesday, 1st April, 2026

**Place**

Diamond Room 6 - Council House

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**Public Business**

1. **Apologies**
2. **Declarations of Interest**
3. **Minutes** (Pages 3 - 4)
  - a) To agree the minutes of the meeting held on 25<sup>th</sup> September 2025
  - b) Matters arising
4. **Adult Social Care Annual Representations Report 2024/25 (Comments, Compliments and Complaints)** (Pages 5 - 42)

Report of the Director of Care, Health & Housing
5. **Quarter Three Performance 2025/26 - Adult Social Care** (Pages 43 - 62)

Report of the Director of Care, Health & 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**

None

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

Tuesday, 24 March 2026

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)

**Public Access**

Any member of the public who would like to attend the meeting in person is encouraged to contact the officer below in advance of the meeting regarding arrangements for public attendance. A guide to attending public meeting can be found here: <https://www.coventry.gov.uk/publicAttendanceMeetings>

**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 2.00 pm on**  
**Thursday, 25 September 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            L Hay  
Law and Governance         T Robinson

## **Public Business**

### **1.        Declarations of Interest**

There were no disclosable pecuniary interests.

### **2.        Minutes**

The minutes of the meeting held on the 24 February 2025 were agreed and signed as a true record.

There were no matters arising.

### **3.        Quarter Four Performance 2024/25 - Adult Social Care**

The Cabinet Member for Adults Services considered a report of the Director of Adults and Housing that provided an update to Adult Social Care performance for quarter four 2024/25, 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.

The report updated the Cabinet Member on the quarter four performance, provided a summary of key changes and improvements, and outlined actions in place to improve performance and proposed next steps. It also provided an opportunity for the Cabinet Member to provide comment.

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 four 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 Cabinet Member was provided with a detailed assessment of the variations in the ASCOF figures and the work undertaken to gradually improve every indicator figure. The Cabinet Member was also updated on the engagement work being undertaken, especially with regard to the digitalisation of ASC and the introduction of the Bridget Tool to provide carers with crucial information and opportunities for short breaks whenever needed. The Cabinet Member spoke to personal stories of carers who have benefited from the tool and therefore acknowledged, supported and welcomed these improvements.

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

- 1) Notes and endorses 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) Encourages the use of case studies in subsequent Adult Social Care Quarterly and Annual Reports.**

**4. Outstanding Issues**

There were no outstanding issues.

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

(Meeting closed at 2.40 pm)



## Public Report

Cabinet Member

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Cabinet Member for Adult Services

1 April 2026

**Name of Cabinet Member:**

Cabinet Member for Adult Services – Councillor L Bigham

**Director approving submission of the report:**

Director of Care, Health & Housing

**Ward(s) affected:**

All

**Title:**

**Adult Social Care Annual Representations Report 2024/25 (Comments, Compliments and Complaints)**

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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 comments, compliments and complaints from people who use its services, or those acting on behalf of them. There is also a duty under the regulations to produce and publish an annual report.

This report sets out the details of the representations received across Coventry's Adult Services in 2024/25. 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 approve publication of the Council's Annual Representations Report in relation to Adult Social Care for 2024/25 as attached as Appendix 1 to this report.

**List of appendices included:**

Appendix I – Adult Social Care Annual Representations Report 2024/25

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 – However the information in this report has been reviewed by Scrutiny Co-ordination Committee in their governance capacity as the “Body Responsible for Complaints”

**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 Annual Representations Report 2024/25 (Comments, Compliments and Complaints)**

### **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 comments, compliments and complaints from people who use their services, or those acting on behalf of them. This provides a means for listening to the views of those who use or are affected by Adult Services and for resolving any issues arising. Where things have gone wrong it enables the Council to put things right, learn from the experience and make the necessary improvements.
- 1.2 This report highlights the positive culture of learning and continuous improvement within Adult Social Care. By actively seeking and valuing feedback through comments, compliments, and complaints, the Council are committed to openness, quality assurance, and developing our services to better meet the needs of our community. The insights and experiences shared by people using services and their families are at the heart of our progress, helping us to shape and enhance the care and support we provide.

### **2 Complaints and Learning**

- 2.1 There were 85 statutory complaints made within the year 2024/25, rising by 26 cases (44%) from 59 in 2023/24.
- 2.2 43% (34) of these complaints were fully or partially upheld, compared to 49% (29) in 2023/24.
- 2.3 There were also a number of concerns raised and resolved informally through early local resolution. In 2024/25 the Council doubled the number of complaints resolved informally (42 cases, compared to 21 in 2023/24), while other concerns were addressed at the point of service delivery as business-as-usual, for example by social care providers, and so not reflected in the figures in this report.
- 2.4 In 2024/25, the Local Government and Social Care Ombudsman (LGSO) considered 10 escalated complaints regarding Adult Social Care, of which 4 were investigated and upheld. This compared to 10 complaints of which 2 were upheld in 2023/24.
- 2.5 Adult Services are committed to a learning-focused approach, using every piece of feedback as an opportunity for growth. An 'Investigation Outcome Form' is completed by the investigating officer for every complaint, setting out the resolution and any actions to be taken forward. By fostering a culture where learning from lived experience drives service improvement, we ensure our work remains responsive, person-centered, and effective for all those we serve. (A summary of the key lessons learnt or remedial actions taken are included as an appendix to the report).
- 2.6 Compliments provide an equally valuable message, serving as important indicators of where staff and service areas deliver exceptional service, often exceeding

expectations. Such positive feedback provides valuable insights into what is working well and helps us further enhance services and outcomes for everyone we support. A selection of compliments received have been included in the report.

- 2.7 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.
- 2.8 In 2024/25 the average response time improved by 5 working days (to 17) compared to 2023/24, while there was a 27% increase in cases responded to within 20 working days. 73% of complaints (62) were resolved within 20 working days in 2024/25, compared to 46% (27) in 2023/24. This was accomplished despite the 44% rise in the volume of cases overall.
- 2.9 Appendix I sets out the Adult Services Annual Representations Report for 2024/25, highlighting themes that have arisen from comments, compliments and complaints and the learning and service improvements that have resulted from the feedback received.
- 2.10 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 2024/25.

### **5 Comments from the Director of Finance and Resources and the Director of Law, Governance and Safer Communities**

#### **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 2024/25, 4 complaints to the Local Government and Social Care Ombudsman were investigated and upheld, resulting in a total of £1250 being paid by way of financial remedy. A further £3120 was paid in remedies by the service, together with a refund of £17,902 from an upheld charges recalculation complaint. 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 Council 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.

The Service Recovery Team will collect data on complainants by protected characteristics such as ethnicity, sex and disability status from 2025/26 onwards. 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.

#### **Report author(s):**

##### **Name and job title:**

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Claire Coulson-Haggins	Team Leader, People Team	Legal Services	24/02/26	02/03/26
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Councillor L Bigham	Cabinet Member for Adult Services		24/02/26	25/02/26

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 Social Care Annual Representations Report 2024-25



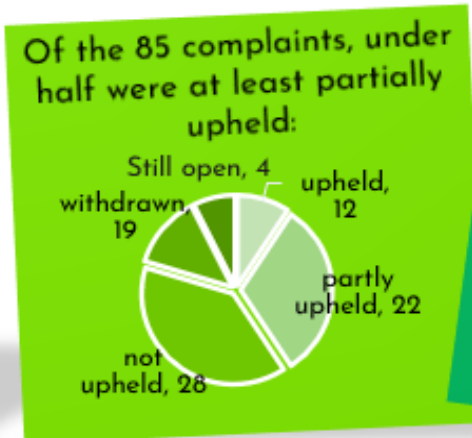
Coventry City Council

[coventry.gov.uk](https://www.coventry.gov.uk)  
Page 13

# Adult Social Care - What People Say - 2024-25

 There were 3709 adults in long-term support as of 31 March 2025

 In 2024/25, the Council received 85 complaints about Adult Social Care, compared to 59 in 2023/24



 In 2024/25, we received 185 compliments; up by 12 compared to last year. These were all about the standard of care provided at care homes for older people.

The most common things people complained about were...

communication	21%
standard of service	53%
financial	4%

 The Council aims to resolve complaints within 20 working days. In 2024/25, 73% were resolved within 20 working days, 46% in 2023/24 and 62% in 2022/23

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 2024/25, the LGSCO received 10 Adult Social Care cases. A total of 4 cases were upheld

Listening to service users' comments, compliments and complaints helps us identify changes we can make to improve our services. Key learning points from 2024/25 include: Developing guidance around a "whole family" approach, training to be provided for when informal carers may need additional support, improve communication and meet statutory timeframes.

## 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 Service Recovery Team 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).

# Contents

Infographic – What People Say.....	1
Introduction .....	3
Summary .....	3
Number of complaints received .....	4
Response times .....	4
Outcomes .....	5
Reasons for Upheld / Partially Upheld complaints .....	5
Ombudsman investigations.....	7
Remedies provided.....	8
Compliments received .....	8
Appendix 1: Summary of Lessons learnt and / or remedial actions taken .....	11
Appendix 2: Equalities and protected data.....	13

## Introduction

Welcome to the 2024-25 Adult Social Care Annual Representations Report. This report highlights the positive culture of learning and continuous improvement within Adult Social Care at Coventry City Council. By actively seeking and valuing feedback through comments, compliments, and complaints, we are committed to openness, quality assurance and developing our services to better meet the needs of our community. The insights and experiences shared by people and their families are at the heart of our progress, helping us to shape and enhance the care and support we provide.

Throughout the year 1 April 2024 to 31 March 2025, Adult Social Care has embraced a learning-focused approach - using every piece of feedback as an opportunity for growth. Our services encompass assessment and case management, direct service delivery and the coordination of a wide range of support options, from help at home and day opportunities to supported housing, intermediate, residential and nursing care, as well as the provision of equipment. By fostering a culture where learning from lived experience drives service improvement, we ensure our work remains responsive, person-centred, and effective for all those we serve.

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). Representations are defined as comments, compliments and complaints.

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

- The views and experiences of people who use our services are heard
- Things that have gone wrong are put right
- The Council learns from both positive and negative feedback to develop and improve our services
- We ensure that customers / service users remain at the heart of all we do

Some complaints received do not meet the criteria to be dealt with under the statutory procedure. Where this is the case, these are registered and actioned 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. Full details are available on our website [www.coventry.gov.uk/complaints](http://www.coventry.gov.uk/complaints) .

## Summary

In 2024-25 Adult Social Care services received 148 complaints, up from 94 in 2023-24. 85 of these were **statutory complaints**, compared to 59 statutory complaints in 2023-24. 42% of these complaints were fully or partially upheld, a reduction from 49% in 2023-24.

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

- Delays in or no communication
- Quality of communication
- Delays in providing services
- Standard of service / work

## Number of complaints received

	2022-23	2023-24	2024-25
<b>Corporate</b>	6	6	11
<b>Informal</b>	14	21	42
<b>Statutory</b>	66	59	85
<b>Ombudsman</b>	7	10	10
<b>Total</b>	93	96	148

We have seen a notable increase in total complaints this year, rising by 52 cases (+55%) compared to the previous year, with statutory complaints up by 26 (+44%). Importantly, this shift has highlighted our commitment to continuous improvement and responsiveness in our culture. Most encouragingly, we have doubled the number of complaints resolved informally at the point of delivery or through early local resolution (+21 cases). This reflects our proactive approach to listening and learning, ensuring concerns are addressed promptly and positively, and often without the need for a formal investigation. This positive development demonstrates how our evolving culture is leading to more constructive outcomes for all involved.

## Response times

The local target for a formal response is 20 working days, although the regulations do permit up to 6 months to provide a detailed investigation and response. Drawing from our ongoing commitment to a positive and responsive culture, we achieved notable progress this year: the average response time improved by 5 days compared to 2023-24, and there was a 27% increase in cases responded to within 20 days. This was accomplished even as we managed a 44% rise in the volume of cases, reflecting how our collective learning and cultural focus have enabled us to effectively meet greater demand with enhanced efficiency.

	2022-23	2023-24	2024-25
<b>Average days open</b>	21	22	17
<b>Response &lt;20 days</b>	41 (62%)	27 (46%)	62 (73%)
<b>Response &gt;20 days</b>	25 (38%)	32 (54%)	23 (27%)

## Outcomes

	2022-23	2023-24	2024-25
<b>Upheld</b>	<b>10 (15%)</b>	<b>6 (10%)</b>	<b>12 (15%)</b>
<b>Partially Upheld</b>	<b>20 (30%)</b>	<b>23 (39%)</b>	<b>22 (27%)</b>
<b>Not Upheld</b>	<b>15 (23%)</b>	<b>12 (20%)</b>	<b>28 (34%)</b>
<b>Withdrawn</b>	<b>21 (32%)</b>	<b>18 (31%)</b>	<b>19 (23%)</b>
<b>Total</b>	<b>66</b>	<b>59</b>	<b>81*</b>

\* This excludes 4 complaints still open at year end.

This year, we experienced a 44% increase in the number of statutory complaints, reflecting our unwavering commitment to responsiveness and continuous learning. The number of Upheld complaints (12) was double that of 2023-24, yet this represented only a 5% rise percentagewise. The figure for Partially Upheld complaints remained almost unchanged, though the percentage dropped by 12%. In total, Upheld or partially Upheld outcomes increased by 5 (to 34), but, encouragingly, the proportion of complaints where an element of 'fault' was identified fell by 7%, down to 42% in 2024-25 compared to 49% the previous year. These results underscore our dedication to listening to feedback, addressing concerns promptly, and fostering a culture of continuous improvement.

## Reasons for Upheld / Partially Upheld complaints

Where complaints are Upheld or Partially upheld the number of concerns raised will usually total more than the number of complaints themselves, as each may raise several issues or span multiple service areas.

AAD = All Age Disability (Assessment & Case Management)

COM = Adult Commissioning

MH = Mental Health

PRI = Promoting Independence team

OLD = Older People (Assessment & Case Management)

OT = Occupational Therapy and Enablement / STMSI

CDT = Community Discharge Team

OTH = All others

	AAD	COM	MH	PRI	OLD	OT	CDT	OTH	TOTAL
<b>Stat complaints received</b>	<b>19</b>	<b>6</b>	<b>9</b>	<b>6</b>	<b>19</b>	<b>10</b>	<b>8</b>	<b>8</b>	<b>85</b>
<b>Number Upheld</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>12</b>
<b>Number Partially Upheld</b>	<b>5</b>	<b>2</b>	<b>1</b>	<b>0</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>4</b>	<b>22</b>
<b>Issues / concerns raised</b>									
Delays in / no communication	5	1	1		4	4	3	2	<b>20</b>
Quality of communication	4		1	1	5	3	3	2	<b>19</b>
Delay in providing service	3	1			3	3	3	3	<b>16</b>
Standard of service	2	2		1	4		2	2	<b>13</b>
Access to service	3	1			2	3	1	1	<b>11</b>
Poor quality of care / Level of service	2	2	1		2	1		2	<b>10</b>
Incorrect information given	2				3	3	2		<b>10</b>
Standard of work		1		1	1	5		1	<b>9</b>
Financial assessment / charges	1		1	1	2			2	<b>7</b>
Attitude / Rudeness					1	1	1		<b>3</b>
Other matters	2			1	1	1	1	1	<b>7</b>
<b>Total Issues Upheld or Partially</b>	<b>24</b>	<b>8</b>	<b>4</b>	<b>5</b>	<b>28</b>	<b>24</b>	<b>16</b>	<b>16</b>	<b>125</b>

An 'Investigation Outcome Form' is completed by the investigating officer for every complaint, setting out the resolution and lessons learnt. This includes any actions to be taken forward in relation to the specific complaint, which can include learning / feedback for the individual members of staff, team or service.

### Continuous Learning from Complaints

We have a strong commitment to learning from complaints, which is overseen by the Adults Principal Social Worker (PSW). The PSW meets with the Complaints team, including the Council Ombudsman liaison officer, to track the status of any complaints and proactively identify learning opportunities from individual cases and wider organisational themes. This dedication ensures that advice, guidance, and learning and development activities are effectively implemented to address any issues that arise.

In 2024 we established a Quality and Experience Group, chaired by our PSW, which receives and reviews findings from the range of activities providing any feedback and insights into the quality of support and experiences of those accessing Adult Social Care. Learning from complaints is shared at the meeting attended by service leads from across Adult Social Care, Commissioning and Corporate Complaints team colleagues. Summary information is produced at each review to enable learning cascaded through our Extended Management Team. Complaints learning also is shared in team meetings and with individuals where necessary.

We have processes in place to ensure the systematic collation of practice learning and actions taken via a 'Practice Development, Learning and Improvement Framework'. This involves being systematic in our process of identifying organisational wide learning, areas of improvement and sharing best practice across the organisation.

We capture our learning (best practice and areas for development) in a centralised database. We also make use of 'Practice Learning Alerts' which provide timely information, direction and informed judgments about a specific piece of practice. These are shared with staff and are for discussion in team meetings or 1-1 supervisions.

In 2024, our complaint leaflet was updated, identifying its availability in other languages and an easy-to-read leaflet has been developed:

<https://www.coventry.gov.uk/downloads/file/44940/listen-to-me-easy-read-leaflet>

Managers / Officers in Adult Services receive training on the complaints and Ombudsman process to ensure continuation of effective complaint handling. Training events are also held in relation to Adult Social Care and LGSCO Complaints reports via annual briefings and via regular 'Learning from Safeguarding Practice' events.

Please see Appendix 1 for a high-level summary of key remedial actions taken or lessons learnt from the Upheld and Partially Upheld complaints in 2024-25.

## Ombudsman investigations

If, after having completed the statutory complaints process, the complainant remains dissatisfied, they may ask the Local Government and Social Care Ombudsman (the Ombudsman) to review their complaint. The Ombudsman looks at individual complaints about councils, all adult social care providers (including care homes and home care agencies) and some other organisations providing local public services. It investigates matters fairly and impartially and is free to use.

In 2024-25, 10 Adult Social Care complaints were escalated to the Ombudsman, which was the same number as in 2023-24. Of these, 4 were upheld (up 2 from 2023-24) and 2 were still under investigation at period end. Symbolic remedies totalling £1250 (2 x £500; 1 x £250) were made in respect of the Ombudsman's findings, as summarised below:

- Failure to ensure effective co-operation between officers in Children's and Adult's services in line with Section 6 of the Care Act 2014
- Failure to review X's care needs (no consideration of outcomes of review; care plan not changed)
- Failure to complete full safeguarding enquiry
- Failure to keep X safe from harm or risk of harm
- Failure to respond to communications, causing unnecessary distress
- Failure to follow up on respite care needs
- Failure to properly consider what support could be offered when X's behaviour escalated
- Fault over advice given re emergency accommodation

## Remedies provided

	2022-23	2023-24	2024-25
<b>Upheld</b>	10	6	12
<b>Partially upheld</b>	20	23	22
<b>Apology made</b>	n/a	29	33
<b>Service provided</b>	n/a	11	13
<b>Practice changed</b>	n/a	8	15
<b>Financial remedies</b>	n/a	2	8

Of the financial remedies made, these were determined as follows:

	2022-23	2023-24	2024-25
<b>Number</b>		2	8
<b>Council determined</b>		£8986 *	£21022 **
<b>Ombudsman</b>		£750	£1250
<b>TOTAL £</b>		£9736	£22272

\* 2023-24 = £8986 credit from financial reassessment

\*\* 2024-25 – includes £17902 charges recalculation and refund

## Compliments received

We greatly value all feedback, recognising its vital role in fostering a culture of continuous learning and improvement across our organisation. Compliments, in particular, serve as important indicators of where our staff and service areas deliver exceptional customer service, often exceeding expectations. Such positive remarks, whether received from service users, their families, or unpaid carers, not only acknowledge the dedication and quality of our teams but also provide valuable insights to help us further enhance our services and outcomes for everyone we support.

	2022-23	2023-24	2024-25
<b>Compliments</b>	253	173	185
<b>Stage 1 Complaints</b>	66	59	85
<b>Ratio of compliments to complaints</b>	3.8 : 1	2.9 : 1	2.2 : 1

We continue to receive a significant number of compliments, maintaining a positive ratio 2.2 to 1 of compliments to complaints in 2024-2025. This demonstrates ongoing appreciation for our services, as we strive to address concerns and further enhance customer satisfaction.

Examples of some of the compliments received during 2024-25 include:

*Home Improvement Officer: I would like to express my gratitude for your help and support in process of getting my bathroom changed into wet room your support was very much appreciated*

*Staff at Gilbert Richards Centre  
to All Staff I honestly cannot thank you all enough for the warm welcome, help and care you have shown myself and [Name] over the last 6 weeks! The jobs you are doing are incredible and that reflects on how much love you receive from all the service users. I have thoroughly enjoyed the time here and wish you all the best for the future :)  
Many thanks*

*Dear telecare, my wife and I want to thank your care team for giving such a good service on Tuesday, after (Name) had a fall at home. The team arrived 5 – 10 minutes after the alarm was sounded then managed to get (Name) back on her feet very quickly with no harm done. We appreciate the professional skill of the team and the care and reassurance with which they applied it.*

*Compliment to social worker: Firstly, thank you for all your help and please thank your colleague, as well. Patients and families can be quick to complain but lack to give staff recognition and gratitude when they go above and beyond. You both have been brilliant in dealing with my mother who is sometimes not the easiest to deal with*

*“(Name)has said he feels his mother has settled in very well in Eric Williams House. The staff are fantastic. The home itself is very vibrant and very clean. There are large areas for them to move around and so pleased to have got my mother into the home which she really likes and along with her friends that she has made, she enjoys her day trips out and all the other activities that are done in the home. “*

*All the staff in the lounge: We would like to thank you for your care, love and compassion. You're the BEST!*

# Appendix 1: Summary of Lessons learnt and / or remedial actions taken

## Assessments

- Remind staff of the communication standards when completing Care Act assessments and the sensitivity of discussing finances
- Remind staff that eligibility for care and support needs can only be ascertained on completion of a Care Act Assessment, and to be mindful when discussing possible eligibility
- Ensure correct calculations are used (and checked) when assessing contribution towards cost of care, and that financial assessments are completed in a timely manner
- Customers to be kept advised of reasons for any delays in completion of financial assessments
- Service users to be offered a choice of how to receive their assessment, i.e. via email or post etc.
- Social workers to ensure that a copy of assessment / review is sent to the customer in a timely manner
- Ensure people are aware that housing-with-care provisions are subject to providers own waiting lists and criteria for referral

## Communication

- Staff reminded to check communication preferences with individuals
- Staff reminded of the importance of regular communication with individuals / families throughout the process
- Principal Social Worker to develop practice guidance around a “whole family” approach
- Training to be provided to teams regarding referrals to other services as needed, priority decisions, and keeping people informed of reasons for decisions made
- Staff to make people aware of case closures to ensure they are agreeable, and to provide them with contact details following closure
- Ensure Lasting Power of Attorney’s and Advocates kept fully informed of decisions regarding people’s residence and long-term care and support intervention plans

## Timeliness

- Staff to ensure that people’s concerns are addressed promptly
- Staff to respond to reasonable questions and enquiries without delay, or at least acknowledge receipt and inform individuals of when the Council will respond by.

## **Charges**

- Practitioners to evidence that they have explained the ASC charging policy to charge from Day One of a service and / or provided the person with written information
- People to be made aware of charge for 'housing with care' onsite care provision

## **Adaptations**

- Staff to be provided with training around Disabled Facilities Grants (DFG), to ensure that the self-managed scheme option is shared with people
- All DFG applicants to be placed on a waiting list and sent a letter with contact details for the Adaptations team
- Approvals process for external repairs or special equipment orders to be reviewed

## **Safeguarding**

- Staff training to be provided to ensure Making Safeguarding Personal processes are followed and that safeguarding concerns are dealt with in line with timescales
- Key boxes should be used when doors are locked
- Carers should inform individuals and families of the reason if they do not have full uniform on
- Staff in the adult initial contact team to be trained in recognising when parents may need additional support, such as when suffering from physical or mental impairment or illness
- Staff to take proactive steps to consider suitable support at the earliest opportunity in cases where there are reports of domestic violence, to try to prevent situations escalating

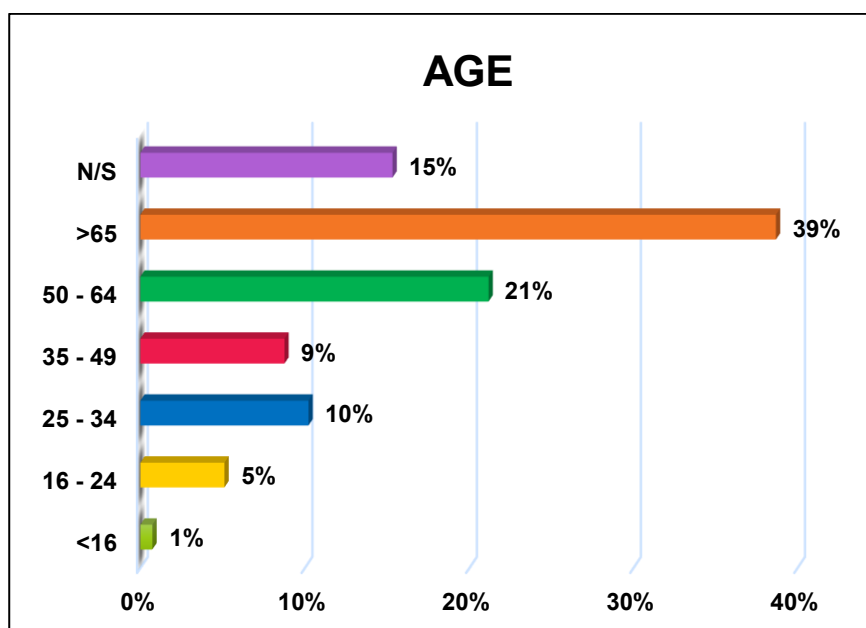
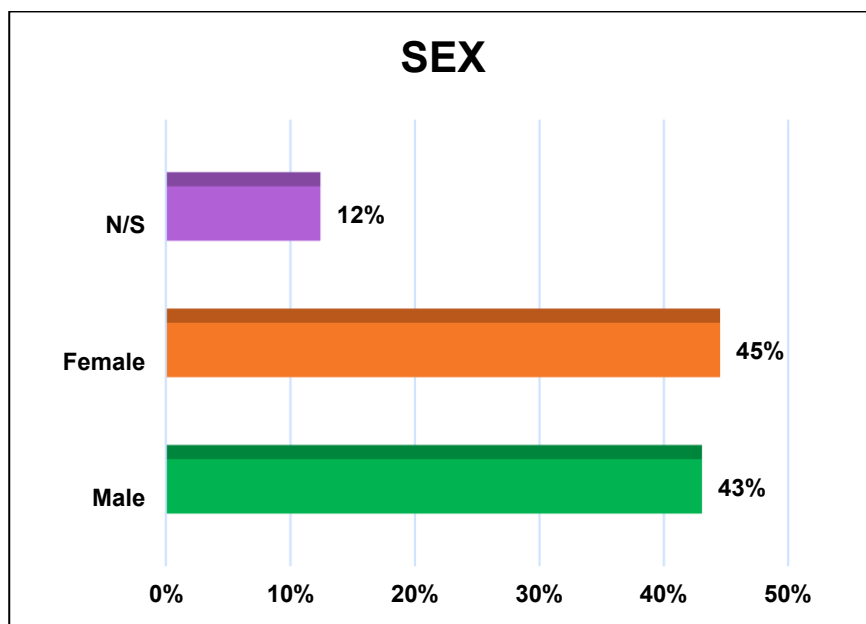
## **Other**

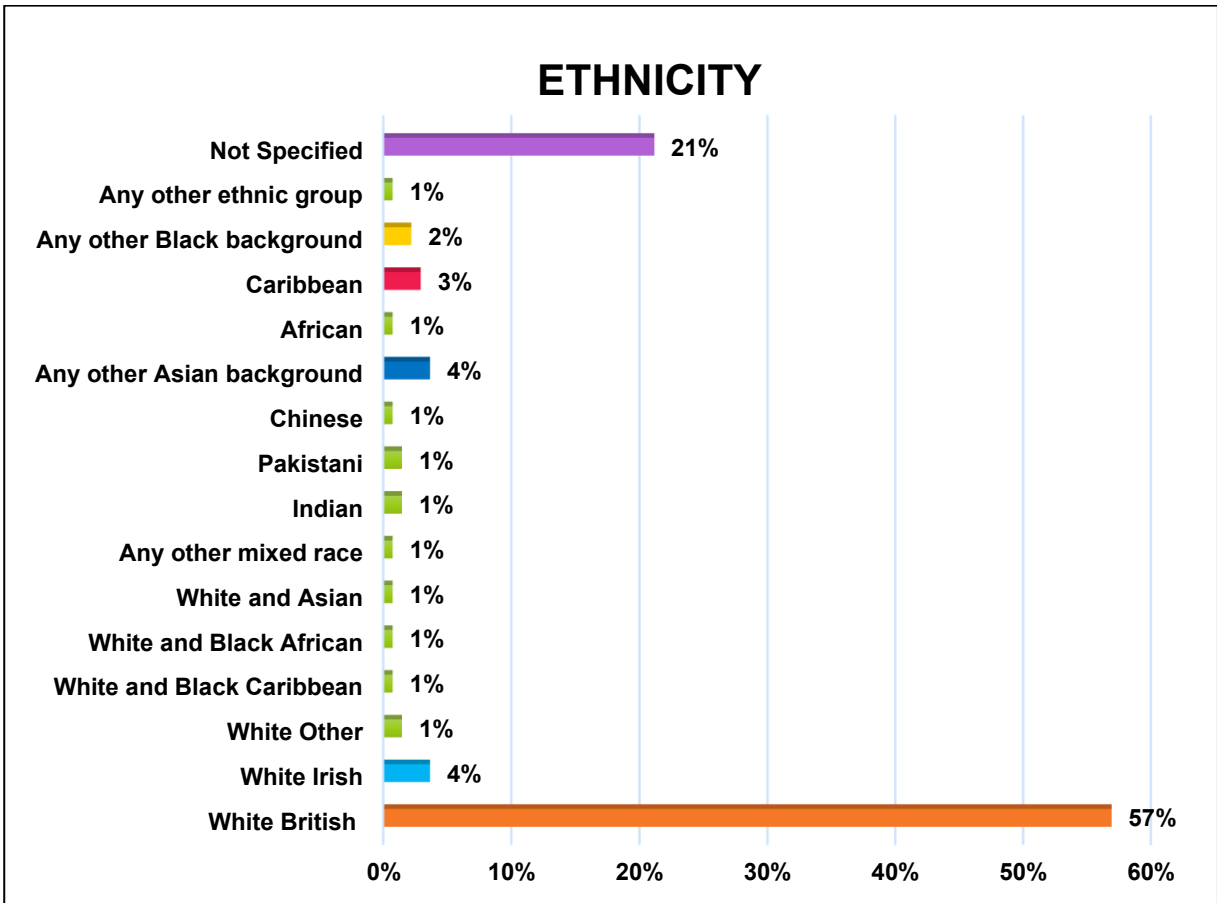
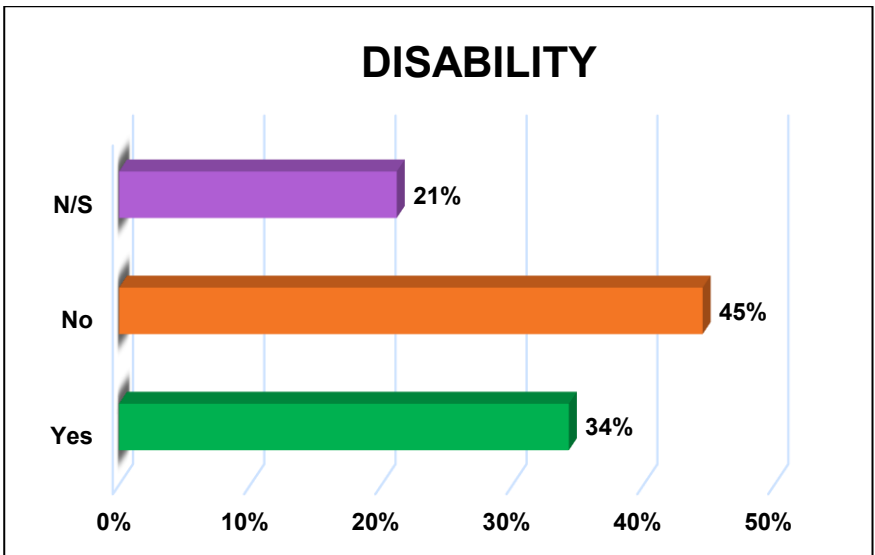
- Proactive signposting of people to relevant long-term support services
- Telecare low-battery reports to be run on a weekly basis

## Appendix 2: Equalities and protected data

Collating information regarding complainants' protected characteristics helps us better understand our customer base and ensure our services are equally accessible to all.

This information is indicative and aggregated for reporting purposes only, being sourced from data already held on the Council's systems (including those for Corporate, informal and statutory Stage 1 complaints) rather than being specifically collected as part of the statutory complaints process. Where an individual's data is not held, these are recorded as Not Specified (N/S).





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# Complaints Handling Guidance

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



**COMMENTS  
& COMPLIMENTS  
& COMPLAINTS**

**ONE  
COVENTRY**

# Table of contents

Introduction .....	3
About this guide.....	3
Making things right .....	3
The complaints policy .....	3
The Local Government and Social Care Ombudsman.....	4
Roles and responsibilities .....	4
Customer services .....	4
Investigating officers .....	4
Complaints co-ordination.....	4
Complaints co-ordination role.....	5
Process flowchart.....	5
Getting help .....	5
The complaints information hub .....	5
Getting help.....	5
Complaint processes, stages and escalation .....	6
Escalation of complaints.....	6
Escalation to the Local Government and Social Care Ombudsman.....	7
Remedies, compensation and financial redress .....	7
Learning from complaints: the complaints investigation log report .....	7
Equality monitoring.....	7
Privacy and information governance .....	7
Social care and corporate complaints process flowchart .....	9
Local Government and Social Care Ombudsman process complaints guidance.....	10
Local Government and Social Care Ombudsman process flowchart .....	11

# 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

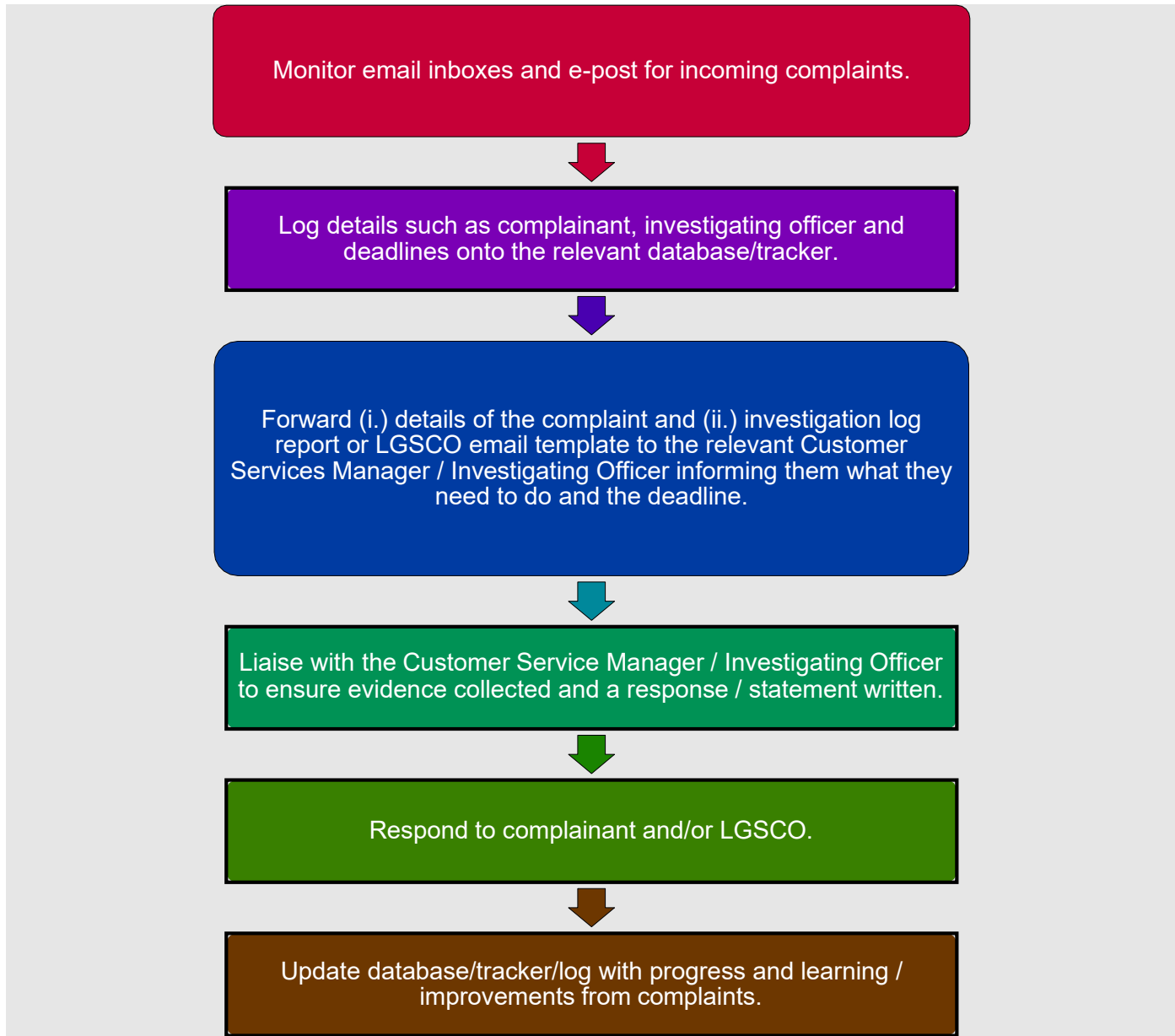
The Complaints Team provides a co-ordination function for social care, corporate and complaints escalated to Ombudsman. The complaints co-ordination function also:

- 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.**

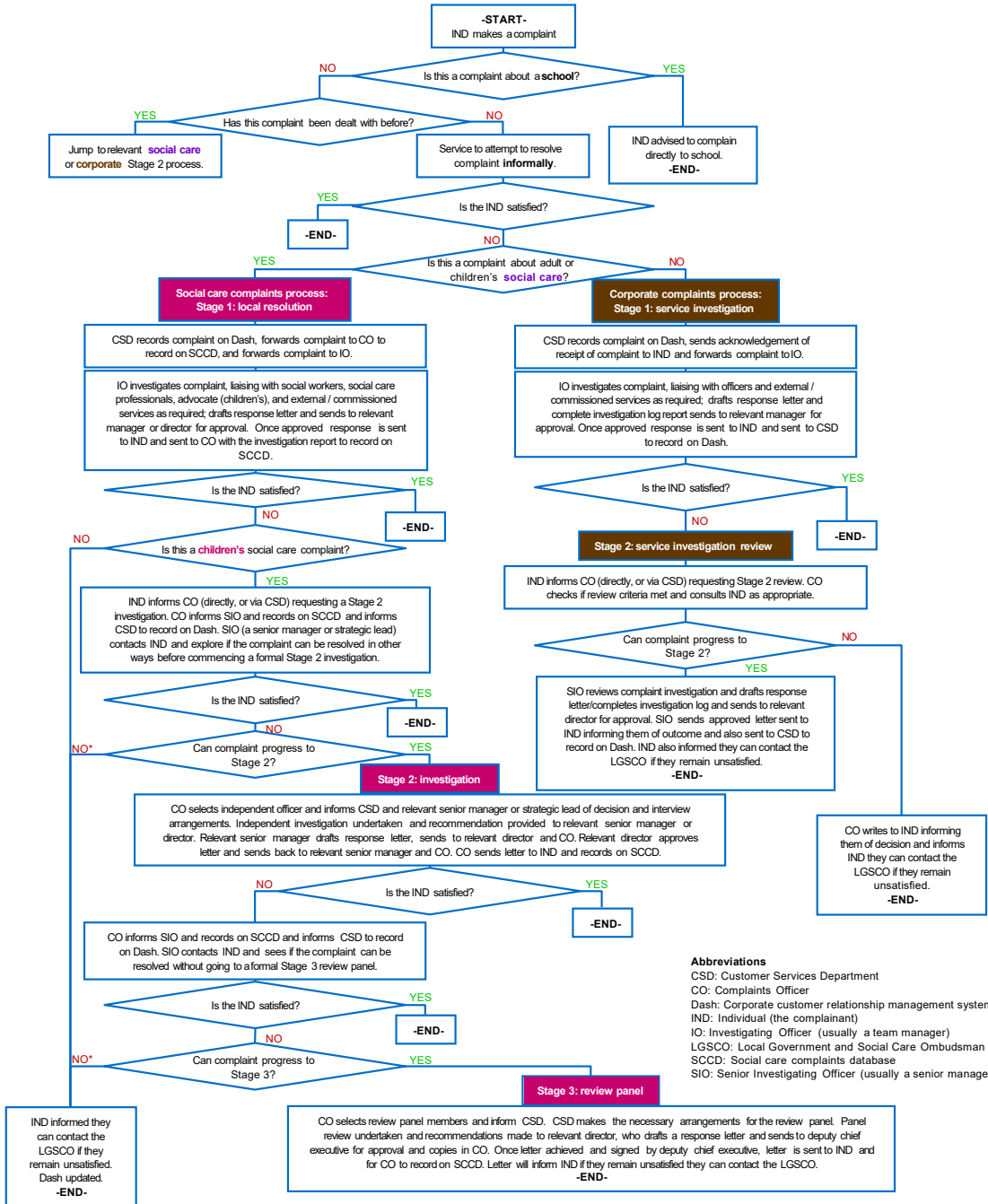
Our summary privacy notice states:

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



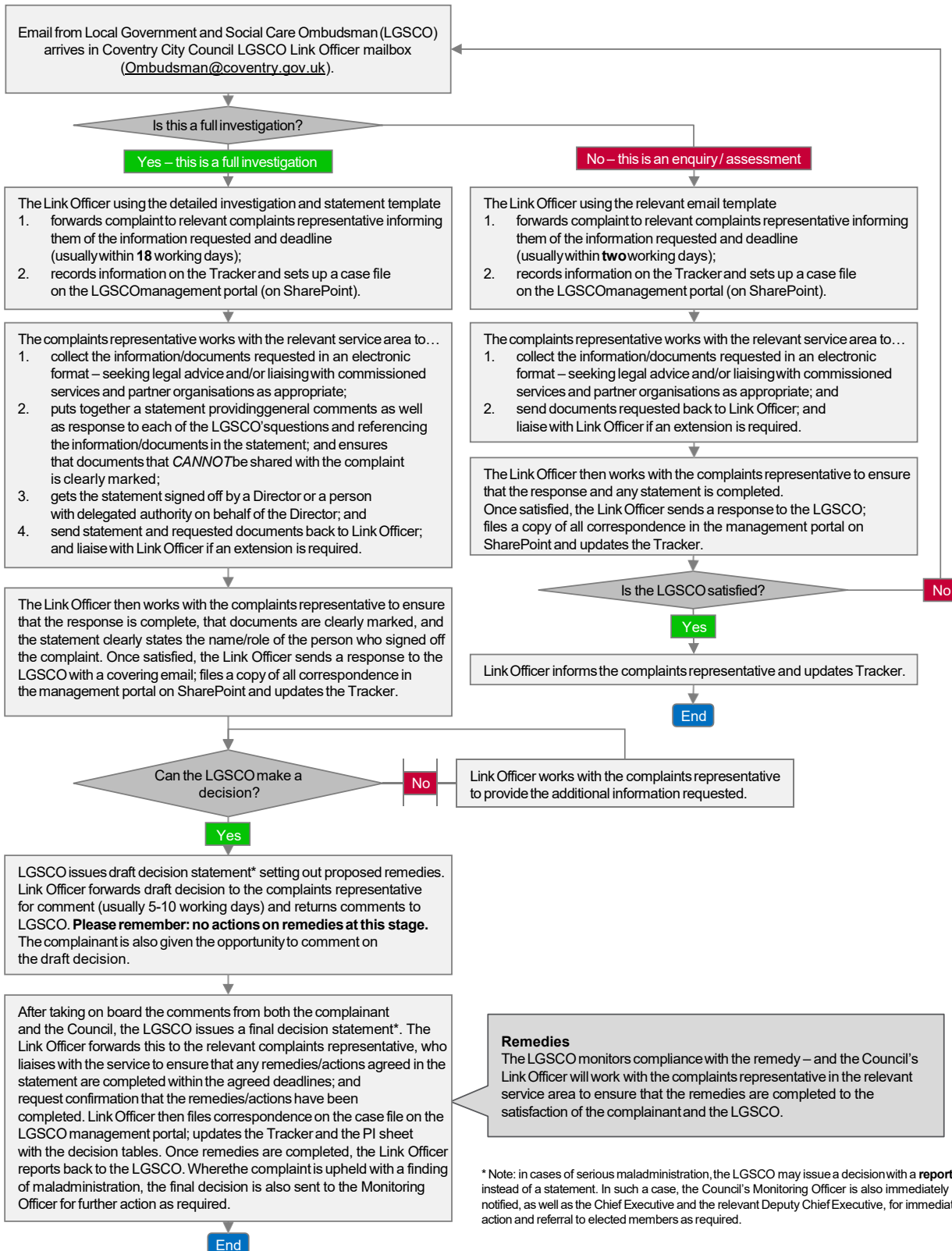
\* on rare occasions a complaint may not progress to the next stage, (e.g. out of timescale)

**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
<b>Enquiry / assessment</b>	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.
<b>Premature</b>	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.
<b>Investigation</b>	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.
<b>Draft decision</b>	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>
<b>Final decision</b>	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.
<b>Remedy</b>	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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## Public Report

Cabinet Member

Cabinet Member for Adult Services:

1 April 2026

**Name of Cabinet Member:**

Cabinet Member for Adult Services – Councillor L Bigham

**Director approving submission of the report:**

Director of Care, Health & Housing

**Ward(s) affected:**

All

**Title:**

Quarter Three Performance 2025/26 – 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 2025/26 and provides an end of quarter three position. Directional arrows are displayed to summarise performance compared to previous quarters 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 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 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 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 2025/26 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 25-26 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 2025/26 – Adult Social Care**

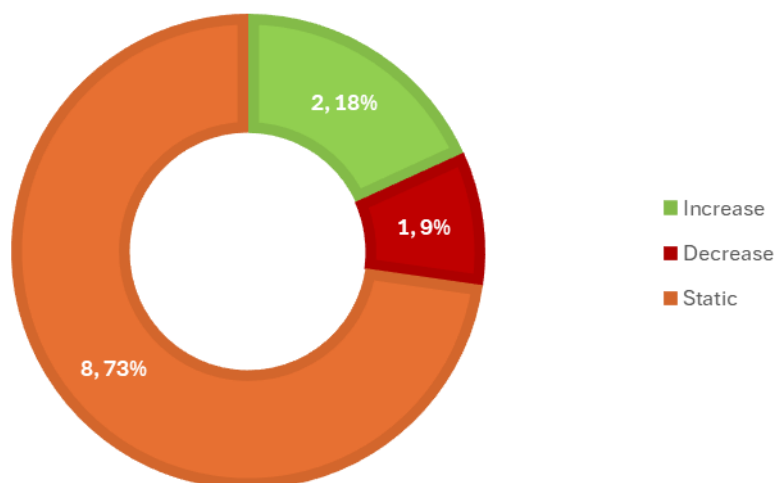
### **1. Context (or background)**

- 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 2025/26. 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 2024/25.
- 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.
- 1.5 The ASCOF indicators for 3D Part 1b and 3D Part 2b are no longer being recorded. ASCOF indicator 2E Part 2 has now been split into two different indicators, one for adults aged 18-64, and the other for adults aged 65 and over. As such, there is no comparator for these in previous quarters and performance monitoring will continue from this quarter forward.
- 1.6 ASCOF Performance is reviewed regularly by the senior management team supported by a performance dashboard.
- 1.7 As of 31<sup>st</sup> December 2025, there were 3,864 people in receipt of long-term support and 475 people in receipt of short-term services.

### **2. Performance**

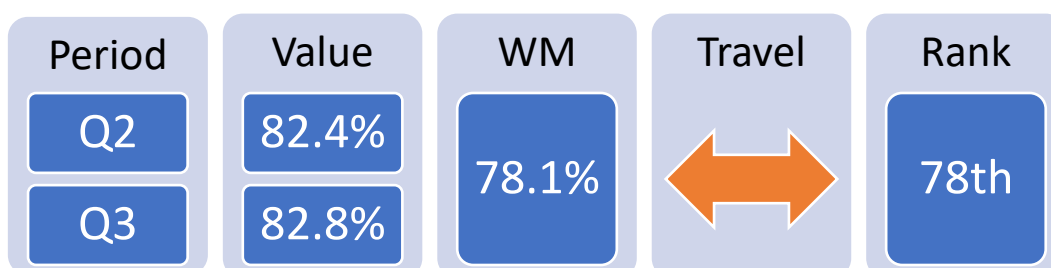
#### **Summary of key changes and improvements – ASCOF Indicators**

### ASCOF INDICATORS



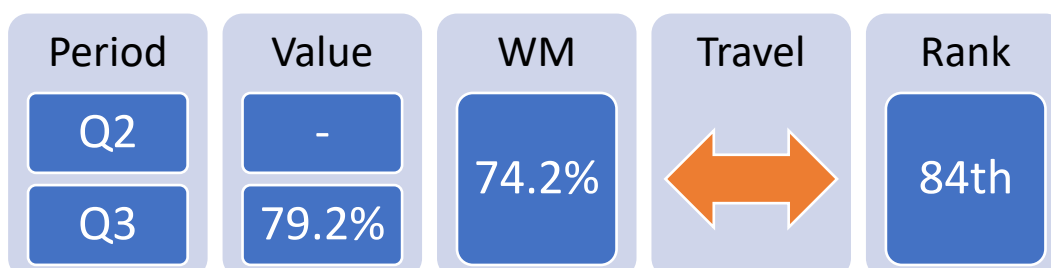
2.1 Domain1 below sets out the section on ‘Enhancing the quality of life for people with care and support needs’

2.1.1 The proportion of people who receive long-term support who live in their home or with family with LD aged 18-64 – 2E Part 1



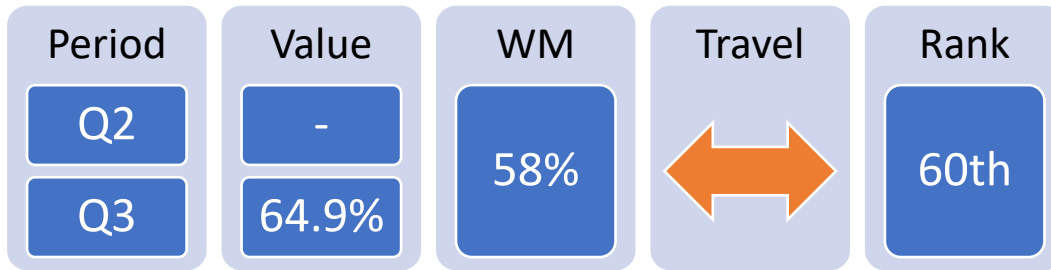
No significant changes seen in this indicator.

2.1.2a Proportion of adults who live in their own home or with their family aged 18 to 64– 2E Part 2a



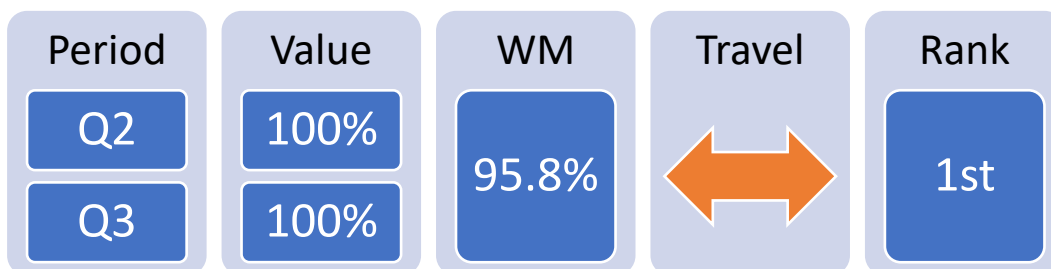
Change in indicator – no previous data capture.

2.1.2b Proportion of adults who live in their own home or with their family aged 65 and above– 2E Part 2b



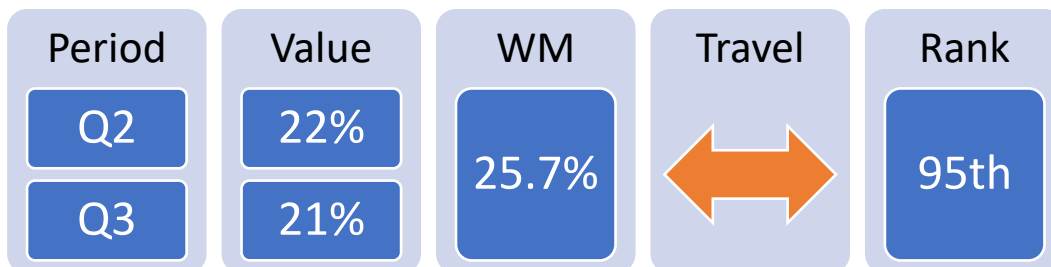
Change in indicator – no previous data capture.

### 2.1.3 Proportion of adults receiving self-directed support – 3D Part 1a



No significant changes seen in this indicator.

### 2.1.5 Proportion of adults receiving direct payments – 3D Part 2a

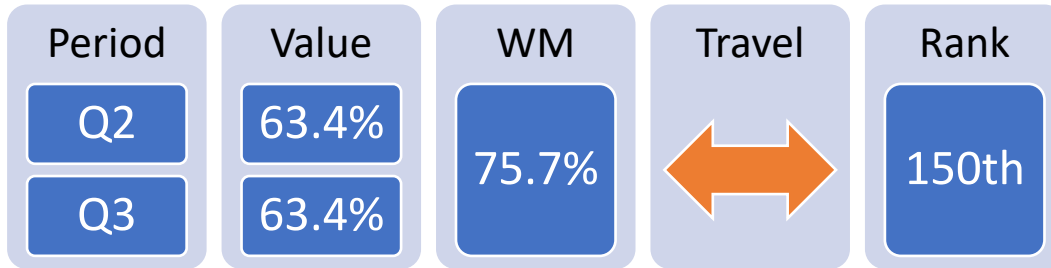


We are confident that individuals in Coventry are consistently offered Direct Payments as a genuine and meaningful support option. Our ongoing commitment is evidenced by the continued review of our Direct Payment approach and the development of new promotional materials, including informative videos featuring those who have benefitted from Direct Payments. To ensure accessibility and inclusivity, we have translated our Direct Payment information leaflets into Punjabi, Urdu, Arabic and Gujarati, reflecting the diverse ethnicities of those receiving support in Coventry.

In 2025, we published the Direct Payment Strategy 2024-2029, which sets out our plans to further enhance and develop our Direct Payment offer. We actively promote the Direct Payment survey to gather valuable feedback and suggestions, helping us to improve our service and ensure Direct Payments remain a real and effective choice for people in Coventry.

### 2.1.7 Percentage of residential adult social care providers rated good or outstanding

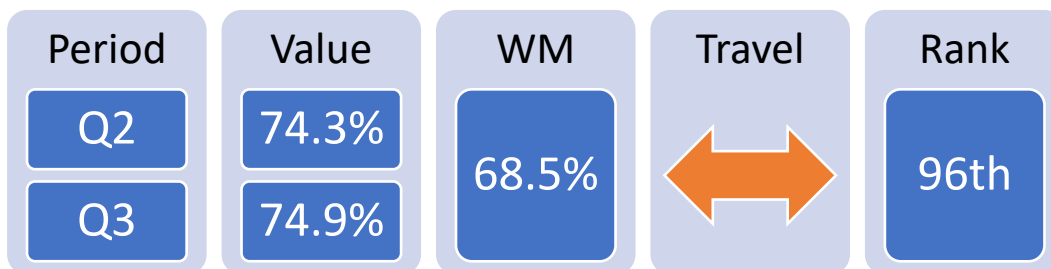
by CQC – 6B



No significant changes seen in this indicator.

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

### 2.2.1 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 – 2A



No significant changes seen in this indicator.

### 2.2.2 Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population – 2B



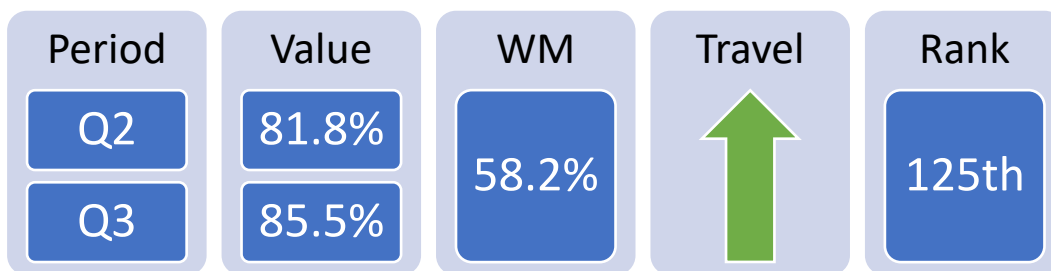
Our model of support is recovery focused with a limited length of stay expected for up to 2 years with the aim for the person then to move into a community setting. During the last two years CCC have commissioned an additional 20 beds of this style of accommodation.

### 2.2.3 Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population - 2C



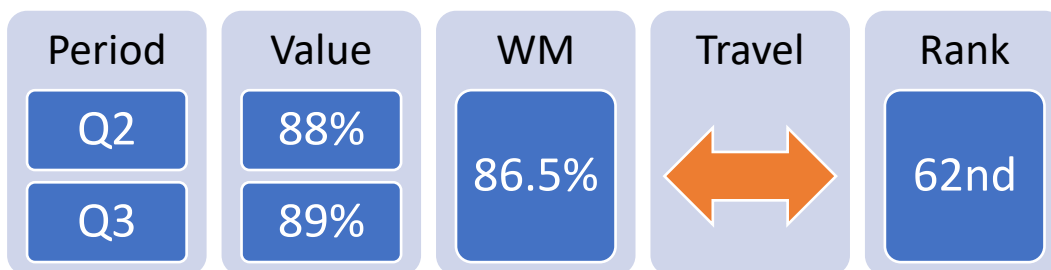
Our ranking in this area remains a challenge, we are actively taking steps to improve outcomes. In 2024/25, a total of 410 residents were admitted, which reflects progress along our current trajectory. While admissions have increased between periods, this is largely influenced by seasonal trends. Our commitment to the Home First approach and the promotion of independence is helping us support people to remain at home for longer. Additionally, we are making full use of technology to enhance people's outcomes and wellbeing.

**2.2.4 Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital – 2D Part 1**



We have seen an increase in the proportion of people still at home over the previous quarter. As part of our work with health colleagues in relation to integrated neighbourhood Teams, we will be doing some targeted work to understand the reasons for this. The introduction of a care co-ordination hub that supports people receive the right care they need at the right time and place should positively impact people's outcomes to avoid hospital admission in the first place.

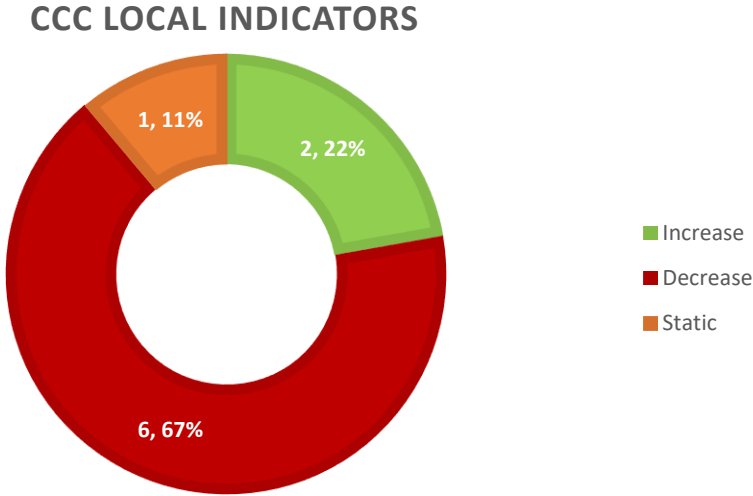
**2.3 Proportion of section 42 safeguarding enquiries where a risk was identified, and the reported outcome was that the risk was either reduced or removed – 4B**



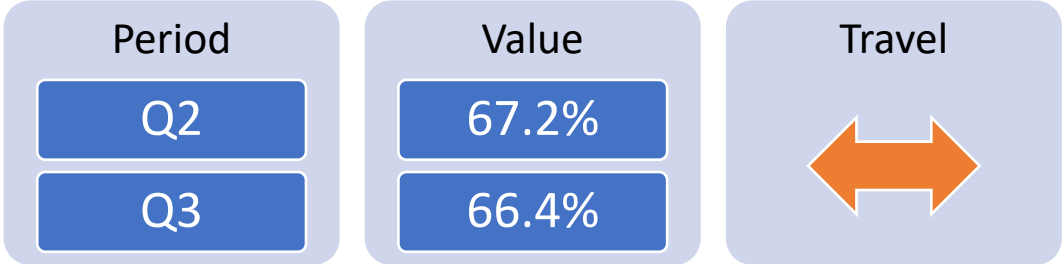
No significant changes seen in this indicator. Where risk remains consideration given to the use of safeguarding plans.

**2.4 Adult Social Care Local indicators**

Our local performance indicators are aligned with the Care Quality Commission Data Pack Information Requests. We are committed to maintaining transparency and accountability through these measures, which provide valuable insights into our ongoing efforts to improve services. As the Care Quality Commission continues to refine and update its assessment criteria, we will proactively review and adapt our local assurance processes to ensure that we remain responsive and can demonstrate positive outcomes for our community.

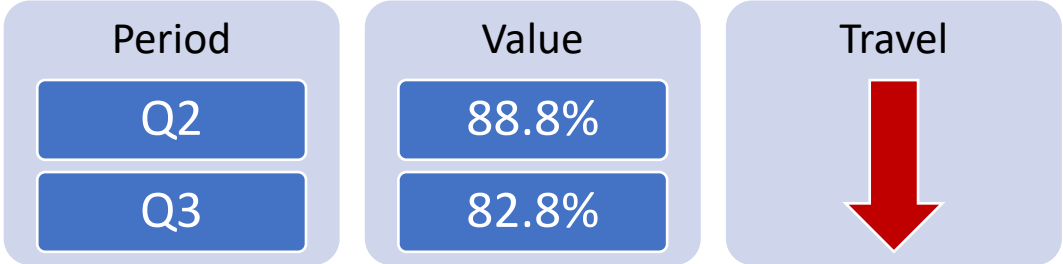


**2.4.1 Reviews for people in long term support for 12+ months – CCC1**



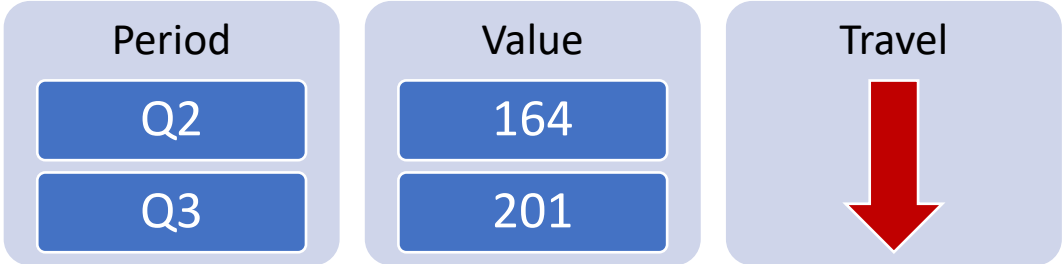
No significant changes have been made in this indicator from the previous quarter.

**2.4.2 People in LTS who were assessed/reviewed within last 18 months – CCC2**



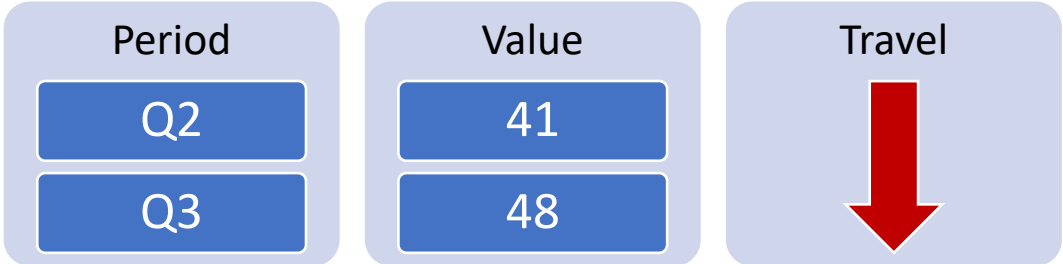
While there has been a modest reduction in the proportion of reviews completed within the last 18 months, this trend is consistent with our achievements highlighted in section 2.4.5, where we have successfully prioritised support for new individuals entering adult social care.

**2.4.2 Median waiting time for an Adult Social Care Annual Review of Care and Support (days) – CCC3**



Median waiting times for a review have decreased since the last quarter. As noted in section 2.4.2, there has been a modest reduction in the proportion of reviews completed within the last 18 months, which aligns with our efforts described in section 2.4.5 to prioritise support for new individuals entering adult social care.

**2.4.4 Waiting times for Care Act Assessment (average days) – CCC4**



Waiting times for Care Act Assessments have increased from 41 to 48 days. Indicator 2.4.5 below highlights a reduction in wait times for new people approaching adult social care for assessment, this suggests that there is a complexity in the cases being supported in the system.

**2.4.5 Waiting list for Care Act Assessment (number of people) – CCC5**



Despite an increase in the median waiting time for Care Act Assessments, there has been a notable reduction in the number of new individuals awaiting adult social care. This reflects a strong commitment to prioritising support for those who are new to the service and ensures that individuals not currently receiving assistance are being addressed promptly.

**2.4.6 Waiting list for Occupational Therapy Assessment (Number of people) – CCC6**



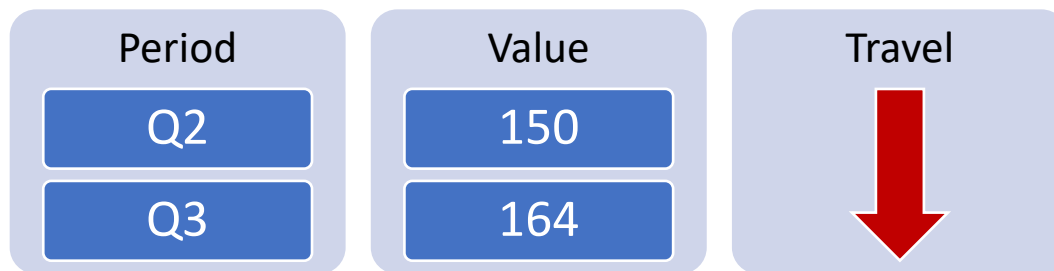
The overall reduction in waiting list numbers is a significant achievement, reflecting effective prioritisation and ongoing improvements in service delivery. While median wait times for OT assessments have increased, this demonstrates that more individuals are being supported and that resources are being directed to those who need them most. The Adult Early Prevention Team (AEPT), responsible for screening referrals, is currently addressing some delays, and a proactive plan is in place to further reduce numbers within the team. These positive developments highlight a commitment to continual progress and enhanced support for those accessing services.

**2.4.7 Waiting for Occupational Therapy Assessment (median days) – CCC7**



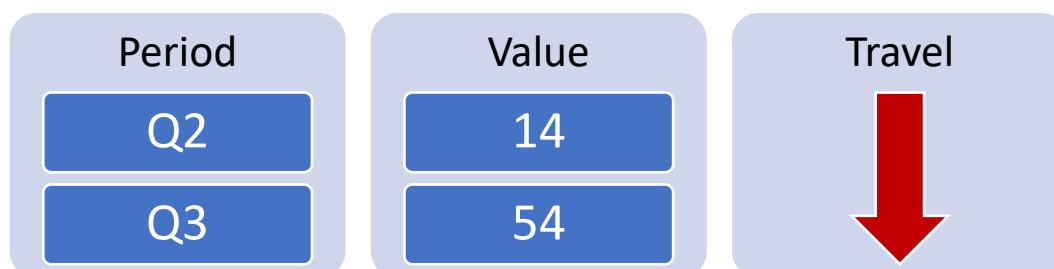
Although median wait times for OT assessments have risen slightly, the number of people waiting has decreased, demonstrating effective prioritisation and ongoing improvements in service delivery. This positive trend reflects our commitment to supporting those who need assistance most and highlights the proactive steps being taken to streamline access to services.

#### 2.4.9 Number of DoLS applications waiting to be allocated to BIA - CCC9



We've seen an increase in the number of applications waiting to be allocated since Q2. This is a consequence of no longer using an external agency for assessments, but we continue to risk assess applications and maintain a position of limiting any wait. 92% of applications are completed in under 3 months.

#### 2.4.10 Median waiting time for DoLS applications to be allocated to BIA – CCC10



Coinciding with the larger increase in the waiting list, the median wait for allocation has also increased by 40 days from 14.

### 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

The Strategic Commissioning Team delivered 3 provider forums during Quarter 3, Older People's, Mental Health, Home Support providers. The forums covered a range of topics, including energy saving, Go CV, smoking cessation, continuity planning and cultural inclusion. A further one-off session was held for pathway 1 providers (home support providers who provide short term support or support on discharge), this session covered a range of topics relating to discharge care planning. The sessions continue to be well attended and important forums for collaboration and peer learning.

During this quarter, field work took place for the Survey of Adult Carers, a survey of people. The survey gained 300 responses which will ultimately provide important insights into carers experience of Adult Social Care. The results from this survey will be available in Quarter 4, with benchmarking data available at the end of the year.

Coventry's vibrant and diverse voluntary, community and social enterprise sector took over Floor 1 of Friargate in December for another successful practitioner awareness event. Over 30 stalls including organisations such as Coventry and Warwickshire MIND, Grapevine, Rethink, Relationships UK, St. Basils, Admiral Nurses and Coventry Vision Hub showcased their services to 70 adult social care and other staff. The events that have become a permanent fixture in the calendar, take place twice a year with the next one planned for the middle of June and provide a great opportunity for social care staff to meet new organisations but for Voluntary, Community and Social Enterprises to network and form new partnerships.



Adult Social Care continues to produce regular bulletins for key audiences, including providers (246 recipients), carers (4,654), ASC subscribers (2,242), and internal staff, sharing essential information, advice, public health updates, and community events.

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

- **My Time Project** – Quarter 3 2025, saw the on-going growth of the My Time Project. Coombe Abbey continued to provide an on-going opportunity for carers to stay at the hotel on a monthly basis. 134 carers have now benefitted from breaks across the city. Carers have told us how meaningful these breaks have been to them, for many the first break they've allowed themselves to have in a long time, carers have told us its allowed them to step back and consider further support.
- **Bridgit Online Support Tool** – The Bridgit app has continued to grow in usership giving us a greater insight into its utilisation. By the end of Quarter 3 2025, 5411 circa people have accessed the site, with 7188 self-help plans created for carers, with most popular search topics, carers allowance, providing care for someone and carers assessments.
- **Supporting Carers in Hospital Settings** – Support continues to be delivered within University Hospital Coventry and Warwickshire, with the hospital liaison workers firmly

established in the hospital setting, building ties with wards, during this quarter the team held presentations with the “Care of the Elderley” service, presenting to health care professionals about the importance of supporting carers. On Carers Rights Day the service supported a Carers Rights Day event focused on raising awareness and educating staff about carer’ rights. The team also took part in the hospital’s inclusion summit, raising the profile of working carers within the organisation.

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

There are no specific options associated with this report.

### **4.0 Results of consultation undertaken**

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**

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 Finance and Resources (Section 151 Officer) and Director of Law, Governance, and Safer Communities**

#### **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?**

7.1.2 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

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.

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.

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

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

8.2 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.

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

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

None

### **8.5 Equalities / EIA**

Equalities information and data is continuously monitored within Adult Social Care. The report outlines several examples of activities that support equalities.

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

None

### **8.7 Implications for partner organisations?**

None

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**Service: Adult Social Care**

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<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	20.02.2026	02.03.2026
Aideen Staunton	Head of Service Partnerships and Social Care Operations	Adult Services and Housing	20.02.2026	01.03.2026
Tracey Denny	Head of Service Localities and Social Care Operations	Adult Services and Housing	20.02.2026	23.03.2026
Andrew Errington	Adults Principal Social Worker	Adult Services and Housing	20.02.2026	23.03.2026
Neil Byrne	Head of Commissioning and Quality	Adult Services and Housing	20.02.2026	23.03.2026
Louise Hay	Head of Business Systems and Continuous Improvement	Adult Services and Housing	20.02.2026	11.03.2026
Chris Whiteley	Finance Manager	Finance	20.02.2026	23.03.2026
Lisa Lawson	Programme Manager	Adult Services and Housing	20.02.2026	23.03.2026
Claire Coulson-Haggins	Team Leader, Legal Services	Law and Governance	20.02.2026	23.03.2026
Tom Robinson	Governance Services Officer	Governance Services	23.03.2026	23.03.2026
<b>Names of approvers for submission: (officers and members)</b>				
Pete Fahy	Director of Adult Services and Housing	Adult Services and Housing	23.03.2026	24.03.2026
Councillor L Bigham	Cabinet Member for Adult Services		23.03.2026	24.03.2026

This report is published on the council's website: [www.coventry.gov.uk/meetings](http://www.coventry.gov.uk/meetings)

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# Appendix A Adult Social Care Outcomes Framework (ASCOF) 2025/2026

INDICATOR	Indicator OLD	Brief Description	2021/22	2022-23	2023-24	2024-25	2025-26			Quarterly trend	Annual Trend	Peer Group	West Mids	England	Rank	Quartile
							2025-26 Q1	2025-6 Q2	2025-6 Q3			2024/25	2024/25	2024/25	2024/25	2024/25
<b>Objective 1: Quality of life</b>																
1A	1A	Quality of life of people who use services	18.9	18.6	19.1	19.6	NA	NA	NA		↑	19.60	19.20	19.10	10	1
1B	1J	Quality of life of people who use services (Adjusted)	0.439	0.423	0.415	0.437	NA	NA	NA		↑	0.44	0.44	0.42	23	1
1C	1D	Quality of life of carers	7.0	7	7.0	7	NA	NA	NA			7.04	7.40	7.30	106	3
1D	3A	Overall satisfaction of people who use services with their care and support	62%	60.5%	64.6%	67.1%	NA	NA	NA		↑	62.8%	66.8%	65.1%	52	2
1E	3B	Overall satisfaction of carers with social services (for them and for the person they care for)	32%	32%	33.2%	33.2	NA	NA	NA			33.3%	38.6%	36.7%	105	3
<b>Objective 2: Independence</b>																
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	65.1%	75.0%	76.7%	77.2%	72.50%	74.30%	74.90%		↔	66.2%	68.5%	77.1%	96	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	27	14	12.4	0.2		↑	19.2	20.4	17	132	4
			Number of admissions		87	56	61	62	8	29	15		↔			
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	654	496	329	476		↓	571.5	639	592.5	96	3
			Number of admissions		409	367	345	333	63	169	73		↑			
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%	79.8%	82.4%	81.8%	85.5%		↑	60.5%	58.2%	60.7%	125	4
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				8.6%	5.7%	4	
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%	82.5%	82.6%	82.4%	82.8%		↔	80.4%	78.1%	81.4%	78	3
2E Part 2a	2E2A	The proportion of adults who live in their own home or with their family aged 18 to 64	NA	NA	NA	NA	NA	NA	79.2%			75.4%	74.2%	77.4%	84	3
2E Part 2b	2E2A	The proportion of adults who live in their own home or with their family aged 65 and above	NA	NA	NA	NA	NA	NA	64.9%			67.5%	58.0%	60.3%	60	2

INDICATOR	Indicator	Brief Description
	OLD	

2021/22	2022-23	2023-24	2024-25	2025-26	2025-6	2025-6
				Q1	Q2	Q3

Quarterly trend

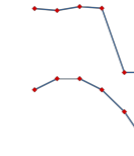
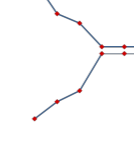
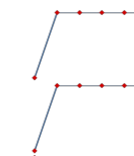
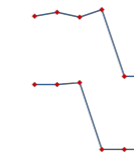
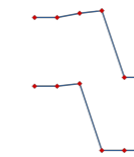
Annual Trend

Peer Group	West Mids	England	Rank	Quartile
2024/25	2024/25	2024/25	2024/25	2024/25

**Objective 3: Empowerment - information and advice**

3A	1B	The proportion of people who use services who report having control over their daily life.
3B	3C	The proportion of carers who report that they have been involved in discussions about the person they care for
<b>3C</b>		
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
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
<b>3D</b>		
3D Part 1a:	1C1A	adults aged 18 or over receiving self-directed support
3D Part 1b:	1C1B	carers receiving self-directed support
3D Part 2a:	1C2A	adults 18 or over in receipt of care and receiving direct payments.
3D Part 2b:	1C2B	carers receiving direct payments for support direct to carer.

73.7%	74%	78.9%	82.20%	NA	NA	NA
66.5%	66.5%	69.2%	NA	NA	NA	NA
66.2%	70.5%	65.3%	73.5%	NA	NA	NA
58.7%	58.7%	60.4%	NA	NA	NA	NA
86.8%	100%	100%	100%	100.0%	100.0%	100.0%
37.1%	100%	100%	100%	100.0%	100.0%	100.0%
23.4%	22.7%	22.5%	22%	22.0%	22.0%	21.0%
37.1%	53.7%	64.2%	100%	100.0%	100.0%	100.0%



73.7%	77.4%	77.3%	15	1
60.4%	66.9%	66.4%	52	2
66.4%	68.0%	67.8%	24	1
55.5%	60.8%	59.1%	65	2
82.9%	95.8%	92.4%	1	1
24.8%	25.7%	24.5%	95	3
67%	72.2%	70.1%	46	2
88.7%	86.5%	91.2%	62	2

**Objective 4: Safety**

4A	4A	The proportion of people who use services who feel safe
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

72%	69.9%	74.3%	72.6%	NA	NA	NA
93%	94%	94%	93.0%	91%	88%	89%

INDICATOR	Indicator	Brief Description
	OLD	

2021/22	2022-23	2023-24	2024-25	2025-26	2025-6	2025-6
				Q1	Q2	Q3

Quarterly trend

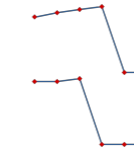
Annual Trend

Peer Group	West Mids	England	Rank	Quartile
2024/25	2024/25	2024/25	2024/25	2024/25

**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
5A part 2 (carers)	112	Proportion of carers who reported that they had as much social contact as they would like

41.7%	45%	47.3%	49.6%	NA	NA	NA
24.6%	24.6%	25.8%	NA	NA	NA	NA

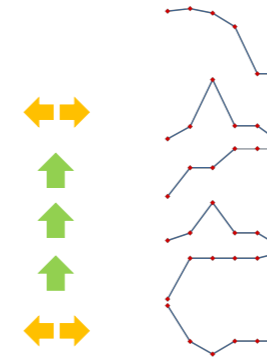


43.10%	46.70%	45.40%	22	2
27.80%	32.20%	30%	118	1

**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
6B	New	The percentage of residential adult social care providers rated good or outstanding by CQC
6B outstanding	New	The percentage of residential adult social care providers rated outstanding by CQC
6B good	New	The percentage of residential adult social care providers rated good by CQC
6B other	New	The percentage of residential adult social care providers rated other by CQC
6B not yet rated	New	The percentage of residential adult social care providers not yet rated by CQC

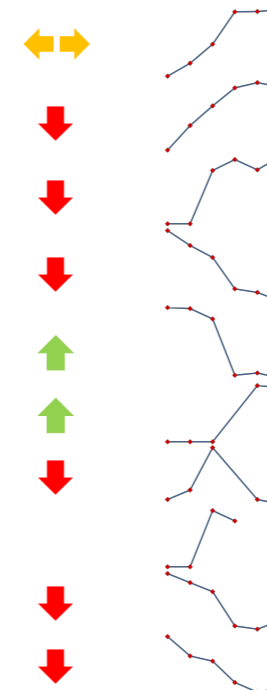
24.6%	25.6%	23.8%	18.5%	NA	NA	NA
63.5%	63.9%	65.3%	63.9%	63.9%	63.4%	63.4%
1.4%	1.4%	1.4%	1.4%	1.4%	1.4%	2.4%
62.2%	62.5%	63.9%	62.5%	62.5%	61.9%	64.1%
29.7%	33.3%	33.3%	33.3%	33.3%	33.8%	30.6%
6.8%	2.8%	1.4%	2.8%	2.8%	2.8%	2.4%



22.9%	23.30%	23.7%	118	1
77.0%	75.70%	80%	150	4

LOCAL (CCC1)	CQC IR5 Reviews for people in long term support for 12+ months
LOCAL (CCC2)	CQC IR5 People in Long term support who were assessed/reviewed within the last 18 months
LOCAL (CCC3)	CQC IR5 Median waiting time for a review
LOCAL (CCC4)	CQC IR5 Waiting times for Care Act Assessment (median days)
LOCAL (CCC5)	CQC IR5 Waiting list for Care Act Assessment (number of people)
LOCAL (CCC6)	CQC IR9 Number of people waiting for an OT assessment
LOCAL (CCC7)	CQC IR9 Median waiting time for an OT assessment
LOCAL (CCC8)	CQC IR9 Median waiting time for equipment (reported separately though ICES data)
LOCAL (CCC9)	CQC IR29 Number of Dols applications waiting to be allocated to BIA
LOCAL (CCC10)	CQC IR29 Median waiting time for Dols application to be allocated to a BIA

44.9%	49.2%	55.6%	66.4%	66.6%	67.2%	66.4%
63.0%	73.0%	81.0%	88.3%	90.5%	88.8%	82.8%
NA	NA	130	157	132	164	201
146	124	106	59.4	54	41.25	48
466	461	403	87	100	71	55
NA	NA	NA		449	434	363
35	37	46		35	34	36
NA	NA	43	35			
337	301	266	130	117	150	164
62	44	39	19	10	14	54



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