



Adult Social Care Annual Representations Report 2024-25



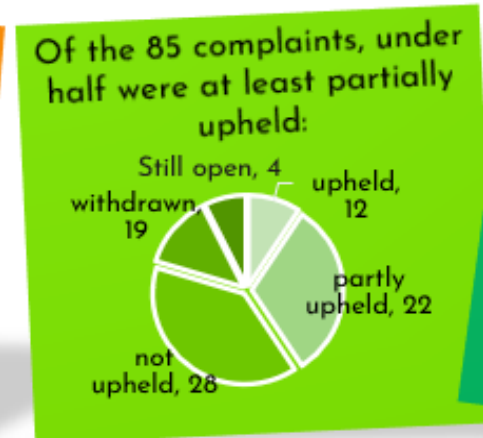
Coventry City Council

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

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/ or by email to 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 .

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 |
|------------------|---------|---------|---------|
| Corporate | 6 | 6 | 11 |
| Informal | 14 | 21 | 42 |
| Statutory | 66 | 59 | 85 |
| Ombudsman | 7 | 10 | 10 |
| Total | 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 |
|-----------------------------|----------|----------|----------|
| Average days open | 21 | 22 | 17 |
| Response <20 days | 41 (62%) | 27 (46%) | 62 (73%) |
| Response >20 days | 25 (38%) | 32 (54%) | 23 (27%) |

Outcomes

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| Withdrawn | 21 (32%) | 18 (31%) | 19 (23%) |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

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

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 |
|---------------------------|---------|---------|---------|
| Upheld | 10 | 6 | 12 |
| Partially upheld | 20 | 23 | 22 |
| Apology made | n/a | 29 | 33 |
| Service provided | n/a | 11 | 13 |
| Practice changed | n/a | 8 | 15 |
| Financial remedies | n/a | 2 | 8 |

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

| | 2022-23 | 2023-24 | 2024-25 |
|---------------------------|---------|---------|-----------|
| Number | | 2 | 8 |
| Council determined | | £8986 * | £21022 ** |
| Ombudsman | | £750 | £1250 |
| TOTAL £ | | £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 |
|---|---------|---------|---------|
| Compliments | 253 | 173 | 185 |
| Stage 1 Complaints | 66 | 59 | 85 |
| Ratio of compliments to complaints | 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).

