

Cabinet Member for Adult Services:

15 July 2026

Name of Cabinet Member:

Cabinet Member for Adult Services – Councillor L Bigham

Director approving submission of the report:

Director of Care, Health and Housing

Ward(s) affected:

All

Title:

Quarter Four and End of Year Performance 2025/26 – Adult Social Care

Is this a key decision?

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

Executive summary:

This report provides an overview of how Adult Social Care performed during the final quarter of 2025/26 and across the full year. This information aids understanding of performance against national measures. 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 and local measures highlight areas of improvement and areas where performance has been more challenging.

Directional arrows are displayed to summarise performance compared to previous years against these indicators. Narrative is provided for each indicator which:

- explains any actions being taken
- updates Members on how Adult Social Care is listening to people who use services, carers, providers and communities
- provides the Cabinet Member an opportunity to comment on progress and steer future work

This is mainly a performance and assurance report. It does not ask Members to approve a new policy or major change.

Within Adult Social Care maximising independence has been the core focus of our work. The report demonstrates some of the way in which are delivering this focus including:

- helping people to remain living at home where possible
- working with people to maintain their independence
- supporting people to build on their strengths
- providing support that avoid unnecessary escalation to more intensive services

Key highlights:

1. Overall, the report shows a mixed but broadly stable picture

Some indicators have improved, some have remained steady, and some reflect growing demand and system pressure. The report explains that Adult Social Care is continuing to prioritise work on a risk basis, so people with the greatest need are seen first.

2. Positive feedback from carers is a real strength. There have been improvements in:

- carer quality of life
- carer satisfaction with services
- carers feeling involved in discussions
- carers having more social contact

3. Reviews and assessments remain a major focus

The report highlights continued work to:

- keep annual reviews up to date
- make sure reviews do not become significantly overdue
- reduce waiting times where possible
- ensure people are seen in a timely way, while still prioritising on the basis of risk

4. Safeguarding performance remains high

Performance on safeguarding risk reduction remains consistently high overall. The report also recognises an important principle in that risks cannot always be completely removed because people have the right to make informed choices and live their lives with choice and control, including where this involves risk.

5. Waiting times and demand pressures are still important issues

Some measures show pressure in the system, including:

- waiting times in some areas
- demand for assessments and reviews
- DoLS pressures following changes to external assessment support, however the recent Supreme Court ruling will impact here.

However, the report makes clear that Adult Social Care continues to manage this through a structured, risk-based approach.

6. Strong engagement and involvement work took place during the year

A major strength in the report is the amount of engagement with:

- people who use services
- unpaid carers
- providers of social care and support
- community organisations
- under-represented groups

Examples include provider forums, carers events, community engagement with diverse groups, support for carers in hospital settings, and wider co-production activity. This is important because it shows Adult Social Care is not relying only on performance data, but also listening to lived experience.

8. Adult Social Care contributes to wider Council priorities

The report links Adult Social Care performance to the One Coventry Plan, including:

- improving outcomes and reducing inequalities
- supporting financial sustainability
- promoting economic prosperity
- strengthening the Council's role as a partner and leader

This is a routine but important performance report that gives assurance on how Adult Social Care is functioning, highlights the pressures being managed, and shows how services are continuing to improve while keeping people's wellbeing, independence and safety at the centre.

Recommendations:

The Cabinet Member for Adult Services is recommended to:

- 1) Note and endorse the action taken in relation to the Adult Social Care quarter four and end-of-year 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 Four and end-of-year ASCOF measures.

Background papers:

None

Other useful documents

None

Has it or will it be considered by Scrutiny?

Annual performance of Adult Social Care is scheduled to be considered by Scrutiny Board 5 in September 2026.

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

No

Will this report go to Council?

No

Report title: Quarter Four and End of Year Performance 2025/26 – Adult Social Care

Context (or background)

- 1.1 Adult Social Care performance is measured in line with the Department of Health and Social Care (DHSC) national Adult Social Care Outcomes Framework (ASCOF) and this performance is reported nationally at year end.
- 1.2 The Adult Social Care Outcomes Framework also measures a series of locally defined indicators, which are reported to the Directorate Management Team on a quarterly basis.
- 1.3 This report outlines performance against these key indicators for quarter four and end of year 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. We currently do not have the data for the age split at a local level as yet.

1.6 As of 31st March 2026, there were 3,864 people in receipt of long-term support and 475 people in receipt of short-term services.

1.7 In section 2 below the information related to Carers is dated 2023/24 as this is drawn from the Adult Social Care Carers Survey which is undertaken bi-annually.

Performance

2.1 Quality of Life

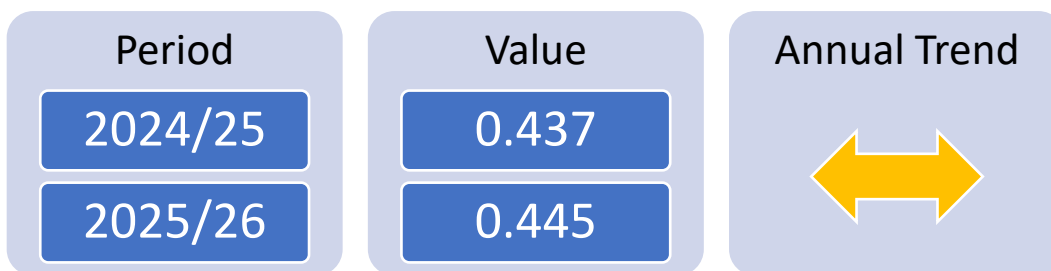
N.B. These indicators are based on the annual user or bi-annual carers' surveys.

2.1.1 Quality of life of people who use services – 1A



Performance has remained stable since the previous period.

2.1.2 Quality of life of people who use services (adjusted) – 1B



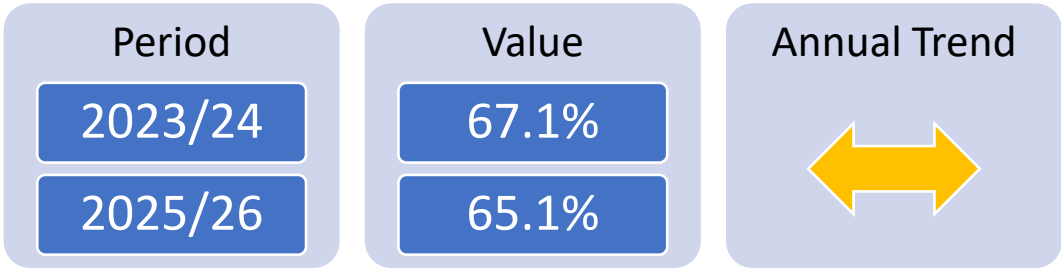
Performance has remained broadly stable since the previous period.

2.1.3 Quality of life of carers – 1C



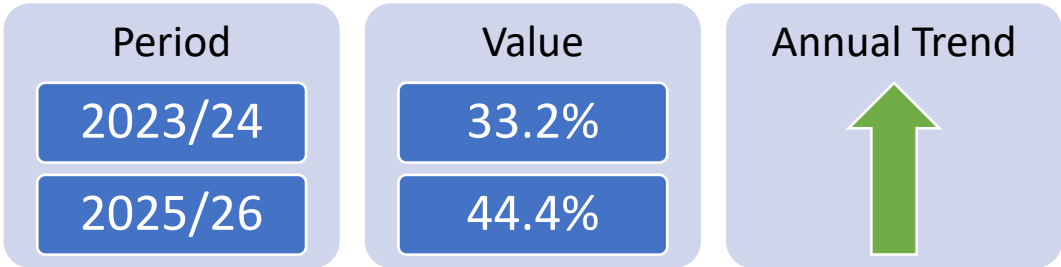
Carer-reported quality of life has improved.

2.1.4 Overall satisfaction of people who use services with their care and support – 1D



Performance has remained broadly stable since the previous period.

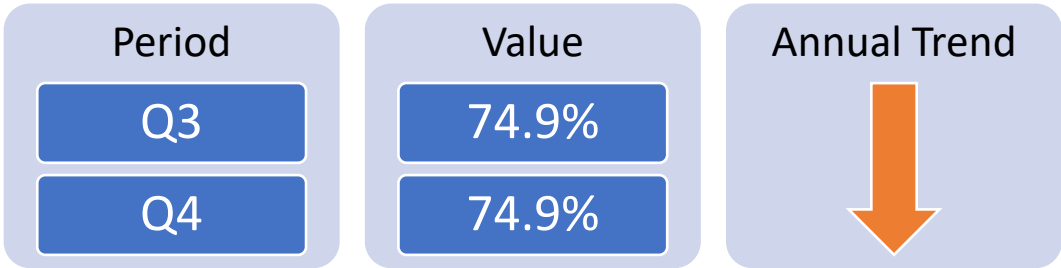
2.1.5 Overall satisfaction of carers with social services (for them and for the person they care for) – 1E



Our continued investment in unpaid carers, including initiatives such as Bridget Cares, is supporting positive outcomes, reflected in an 11.2 percentage point increase since the previous period.

2.2 Independence

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



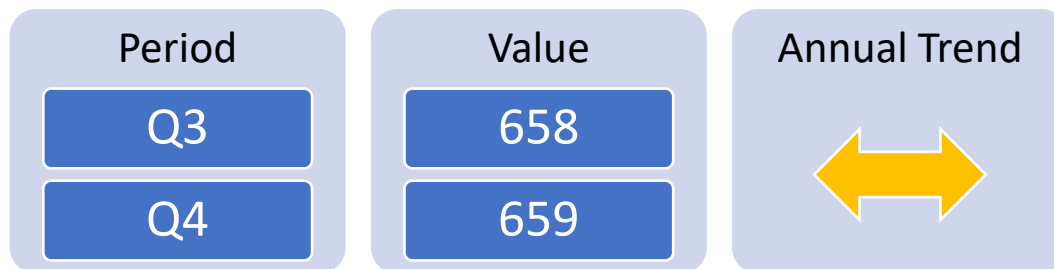
There has been no significant change since the previous period. Although the indicator has decreased from 77.2% at the end of Q4 2024/25, it has remained broadly stable at around 74% throughout 2025/26.

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



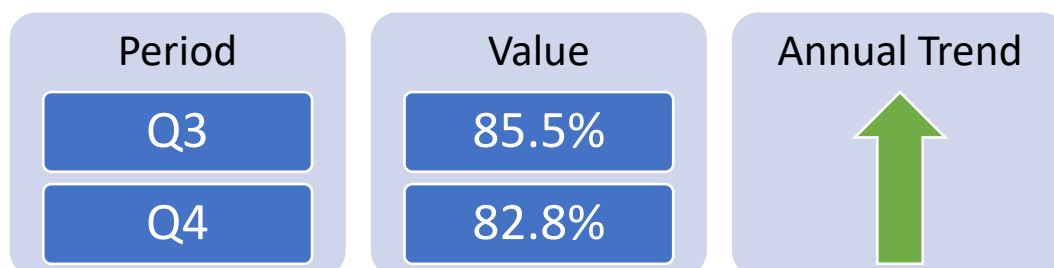
The rate has improved since the last quarter, and the year-end position shows an improvement compared with previous years, when the rate was 27 in both 2023/24 and 2024/25.

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



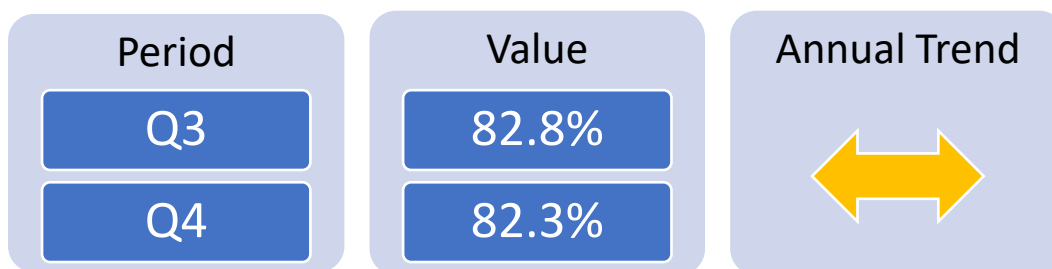
Although we have seen a large jump in the rate of those admitted to nursing and residential homes from quarter one, our annual trend remains steady compared to 2024/25 (654) and 2023/24 (680). Admissions include those with depleted funds who were already within a care home setting plus funding changes from Integrated Care Board (ICB) to local authority.

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



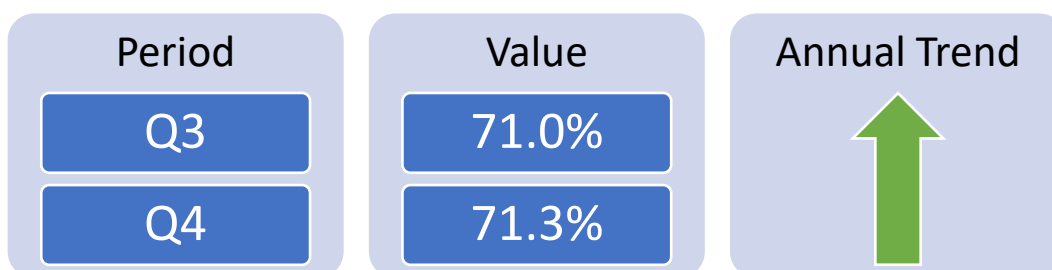
The proportion of older people still at home 91 days after discharge remains higher than the 79.8% reported at the end of Q4 2024/25, despite a 2.7 percentage point reduction since the previous quarter.

2.2.5 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



There have been no significant changes in this indicator over the previous quarter and it remains comparable to years (81.2% in 2023/24 and 82.5% in 2024/25).

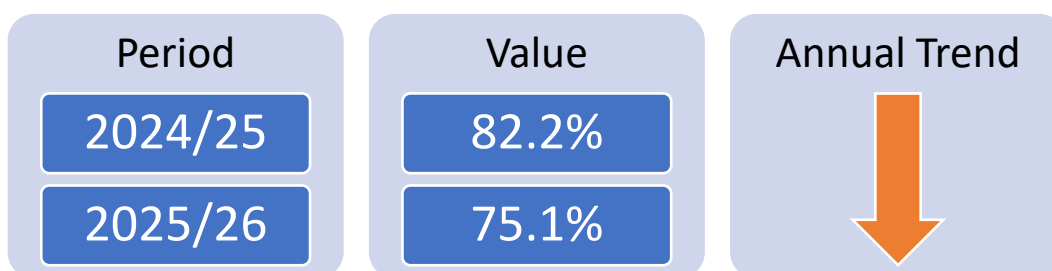
2.2.6 The proportion of people who receive long-term support who live in their home or with family (LD only up to 23-24) – 2E Part 2



This indicator has improved over the year, rising from 67.7% at the end of Q4 2024/25 to 71.3% at the end of Q4 2025/26.

2.3 Empowerment – Information & Advice

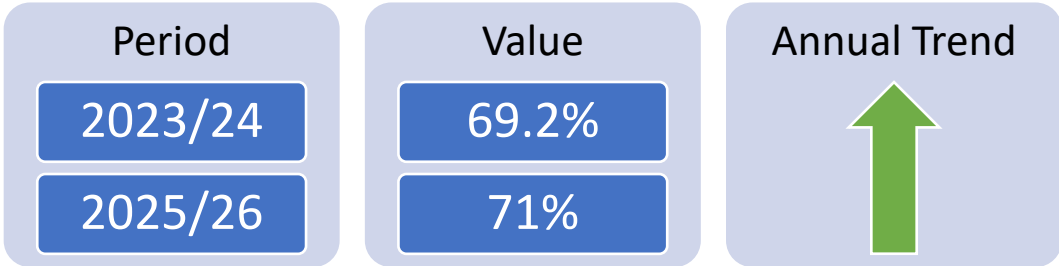
2.3.1 The proportion of people who use services who report having control over their daily life – 3A (user survey)



While the latest result is lower than the previous year and below the 2023/24 position of 78.9%, it is important to understand people's experiences in more depth and identify where we can build on what is working well. We continue to use local in-year rolling experience surveys, including for people accessing Direct Payments and Safeguarding, to hear directly from people and inform ongoing improvement. Feedback from safeguarding remains

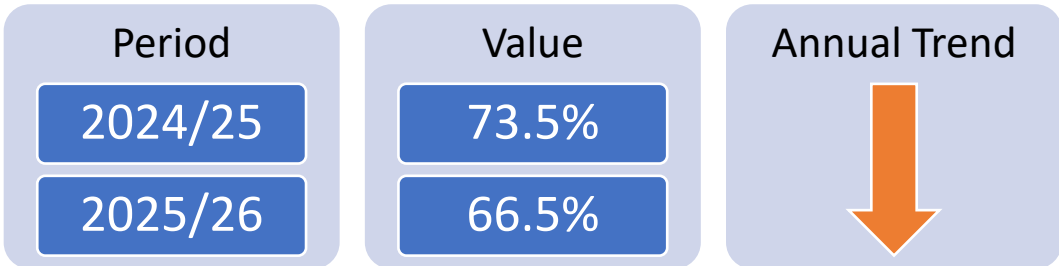
particularly positive, with 98% of people reporting that they felt fully involved, included and listened to in 2025/26.

2.3.2 The proportion of carers who report that they have been involved in discussions about the person they care for – 3B (bi-annual carers’ survey)



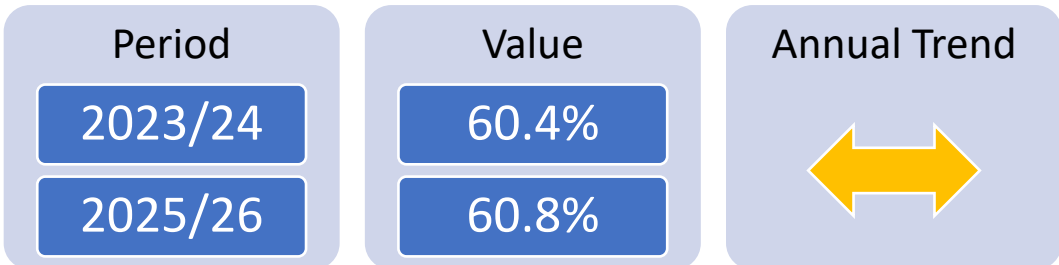
More carers reported feeling involved in discussions about the person they care for compared with the previous year in which the survey was conducted.

2.3.3 The proportion of people who use services who have found it easy to find information about services and/or support – 3C Part 1 (user survey)



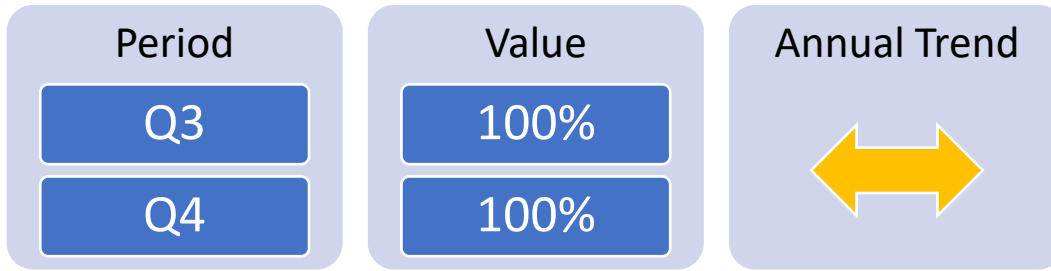
This indicator is lower than the previous year, providing a clear focus for further work to improve how people access information about support, services or benefits.

2.3.4 The proportion of carers who use services who have found it easy to find information about services and/or support – 3C Part 2 (carers’ survey)



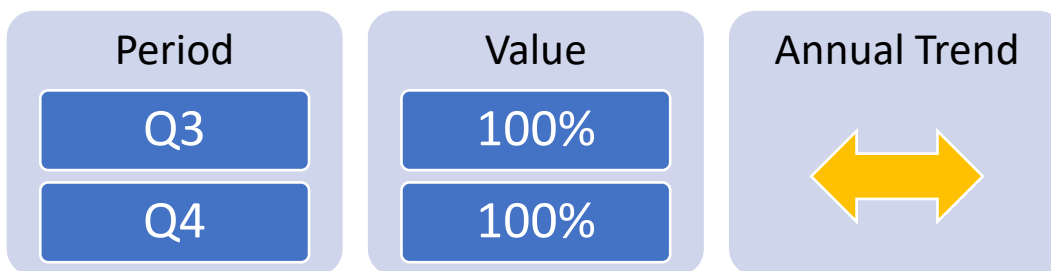
This indicator has remained stable since the previous year in which the survey was conducted, with only a very slight increase.

2.3.5 Adults aged 18 or over receiving self-directed support – 3D Part 1a



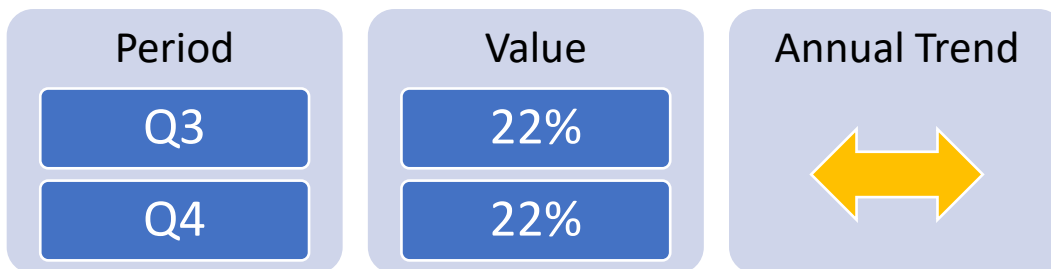
No change seen in this indicator. It has remained at 100% since Q4 2023/24. These are personal budgets, of which all service users are in receipt.

2.3.6 Carers receiving self-directed support – 3D Part 1b



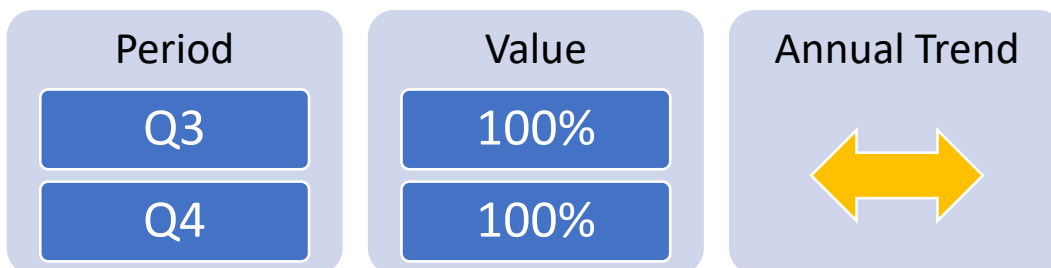
No change seen in this indicator. It has remained at 100% since Q1 2023/24.

2.3.7 Adults 18 or over in receipt of care and receiving direct payments – 3D Part 2a



No change seen in this indicator. It has remained at 22% since Q3 2024/25.

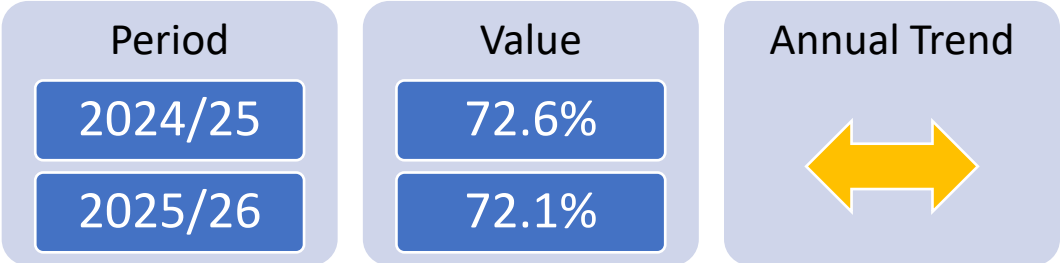
2.3.8 Carers receiving direct payments for support direct to the unpaid carer – 3D Part 2b



No change seen in this indicator. It has remained at 100% since Q4 2024/25.

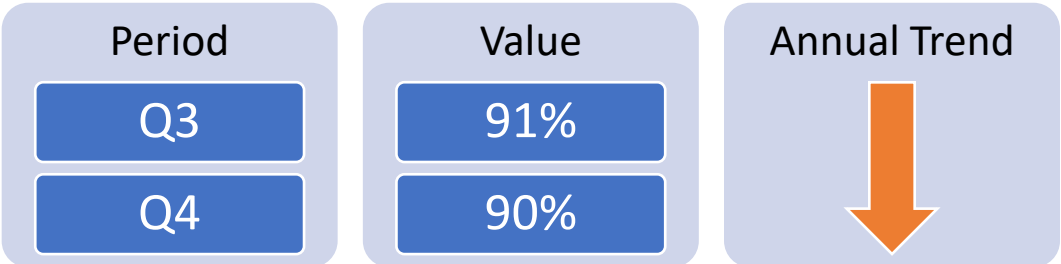
2.4 Safety

2.4.1 The proportion of people who use services who feel safe – 4A (user survey)



No significant changes seen in this indicator from the previous year.

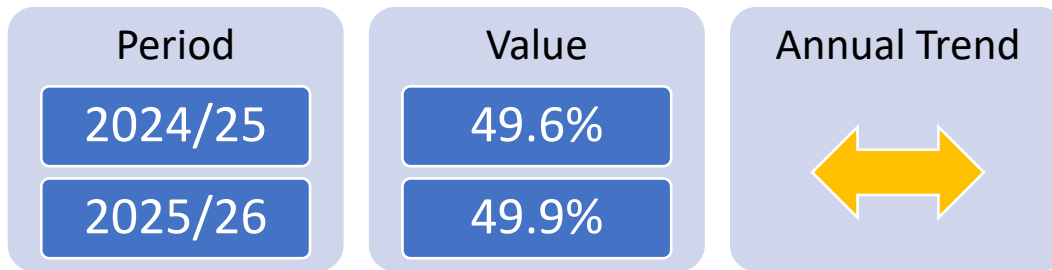
2.4.2 The proportion of section 42 safeguarding enquiries where a risk was identified, and the reported outcome was that this risk was reduced or removed – 4B



Performance against this indicator remains consistently high, fluctuating between 90% and 96%. This reflects sustained practice focus on working with people to reduce or remove identified risks wherever possible. It is recognised, however, that in some cases risk cannot be fully mitigated, as people have the right to make informed choices and exercise control over their lives, including where this involves an element of managed risk. We have seen a gradual decline in the proportion of section 42 safeguarding enquiries where there was a reduction or removal of risk following identification. The indicator had reached 96% in Q1 2024/25.

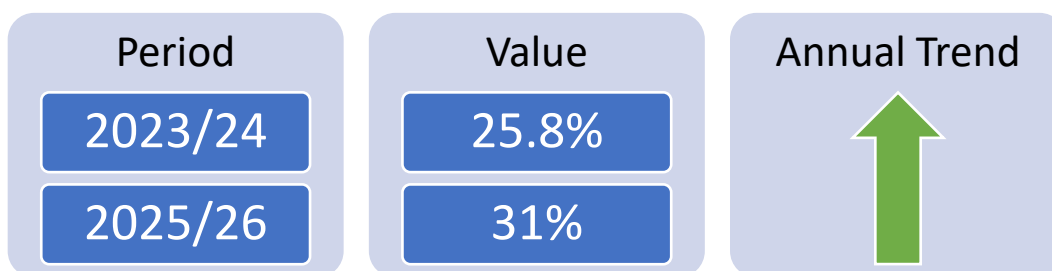
2.5 Social Connections

2.5.1 Proportion of people using services reporting they had as much social contact as they would like – 5A (user survey)



No significant changes seen in this indicator from the previous year.

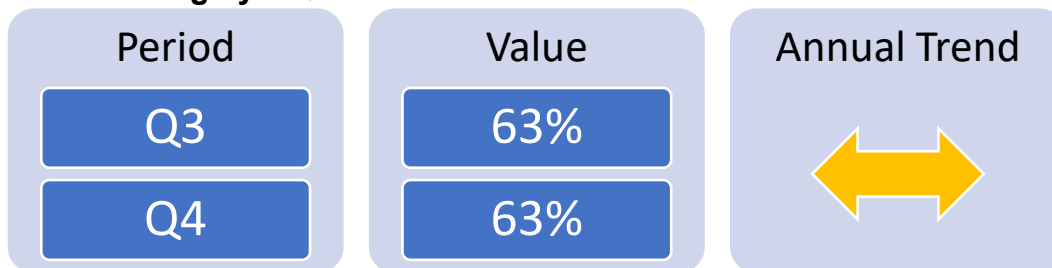
2.5.2 Proportion of carers who reported that they had as much social contact as they would like – 5B (carers’ survey)



This indicator has improved by more than 5 percentage points since the last survey, building on the previous steady position of around 25% since 2021/22.

2.6 Continuity and quality of care

2.6.1 The percentage of residential adult social care providers rated good or outstanding by CQC – 6B

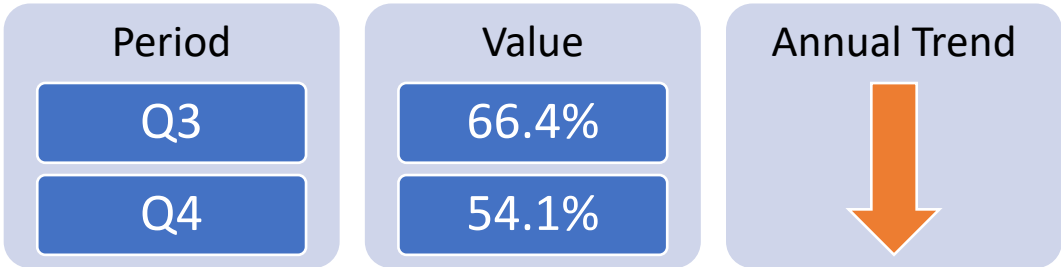


No change seen in this indicator.

2.7 Adult Social Care Local indicators

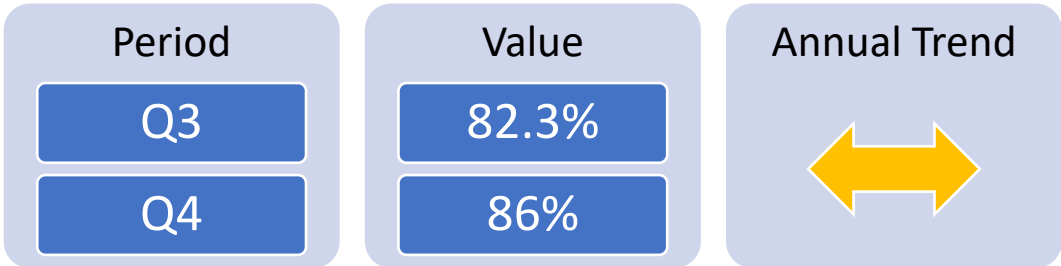
Our local performance indicators are aligned with the Care Quality Commission Data Pack Information Requests. We are committed to maintaining transparency and accountability through these measures, which provide valuable insights into our ongoing efforts to improve services. As the Care Quality Commission 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.

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



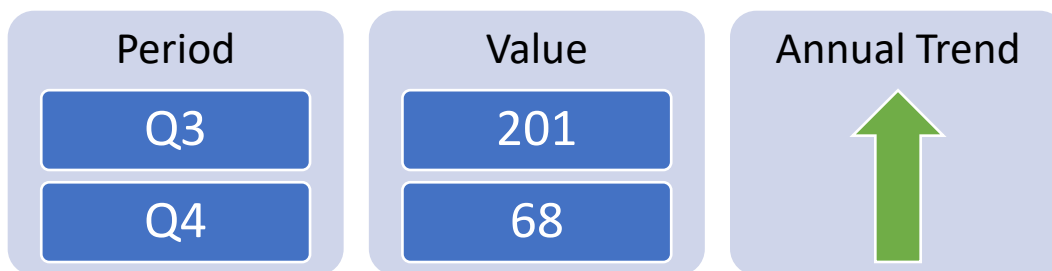
Although performance against this indicator has reduced, this reflects Adult Social Care’s continued prioritisation of resources in response to increased incoming demand and referral activity, alongside the delivery of annual reviews. This work is managed on a risk-based basis, ensuring that people with the greatest level of need or potential risk are prioritised appropriately. The current position therefore reflects a balanced and proportionate approach to managing demand while maintaining focus on people’s safety, wellbeing and outcomes.

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



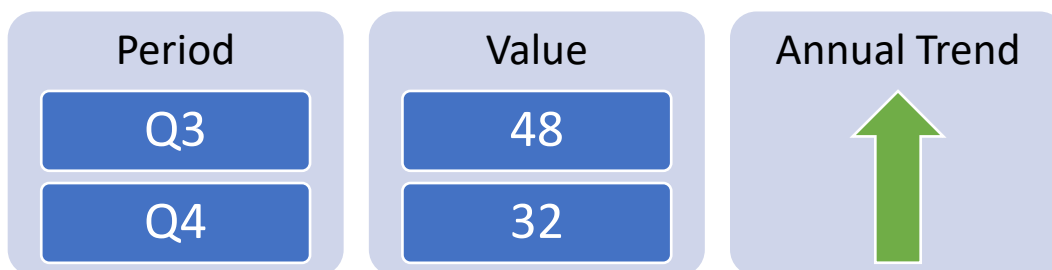
Whilst performance against the 12-month review measure has reduced, this reflects Adult Social Care’s continued commitment to ensuring that annual reviews do not become overdue beyond 18 months. This approach supports a consistent focus on reviewing people’s care and support needs within a proportionate timeframe, while also balancing increasing demand and prioritising activity according to risk. As a result, resources are directed to those people with the greatest level of need or potential risk, ensuring a responsive and person-centred approach to review activity. This is just below the previous reported figure of 88.3% in 2024/25.

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



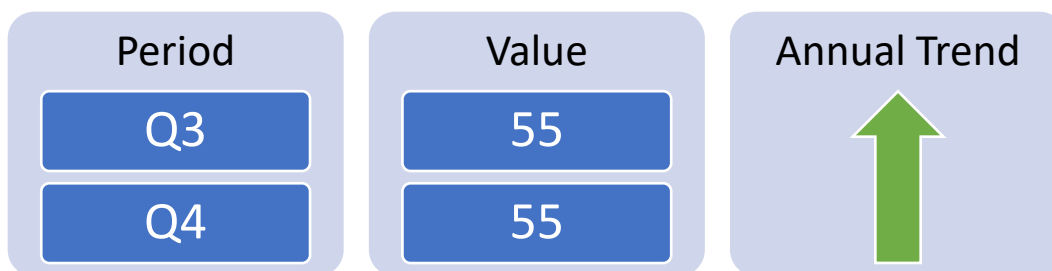
Median waiting times for a review have decreased significantly since the last quarter and since the last quarter of 2024/25.

2.7.4 Waiting times for Care Act Assessment (median) – CCC4



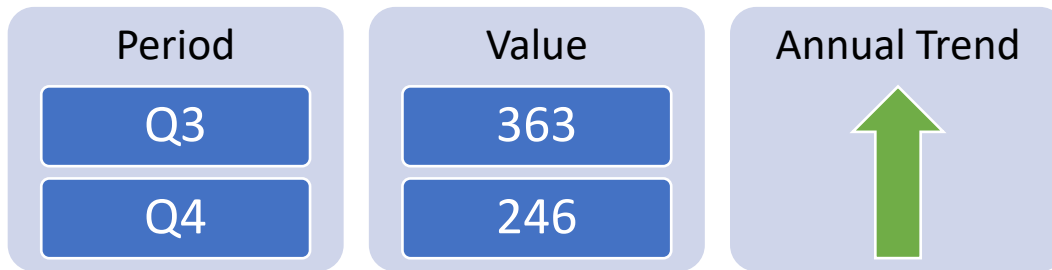
This means people are being seen more quickly for review, supporting a more timely understanding of their current strengths, needs and outcomes. It reflects Adult Social Care’s commitment to maintaining regular contact with people, ensuring reviews do not become significantly overdue, whilst continuing to prioritise activity on the basis of risk. The median wait at the end of Q4 in the previous year being 59.4 days.

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



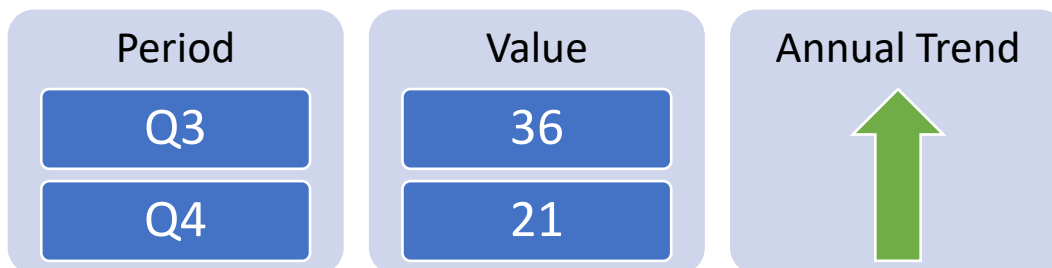
Although the quarterly position has remained the same, this indicator can vary over time. The year-end position shows improvement compared with the previous year, when 87 people were waiting at the end of Q4 2024/25, reflecting continued focus on supporting people to access assessments in a timely and prioritised way.

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



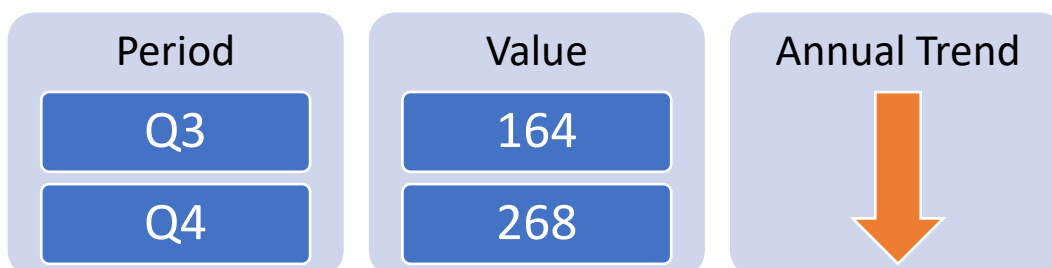
The reduction in waiting list numbers is a positive achievement and reflects effective prioritisation, improved ways of working and a continued focus on supporting people to access the right help. Although median waiting times for Occupational Therapy assessments have increased, this shows that more people are being supported and that resources are being directed to those with the greatest need. The Adult Early Prevention Team is actively addressing delays in screening referrals, with a clear plan in place to reduce numbers further. This demonstrates a strengths-based approach, focused on timely support, independence and better outcomes for people accessing services.

2.7.7 Waiting for Occupational Therapy Assessment (median days) – CCC7



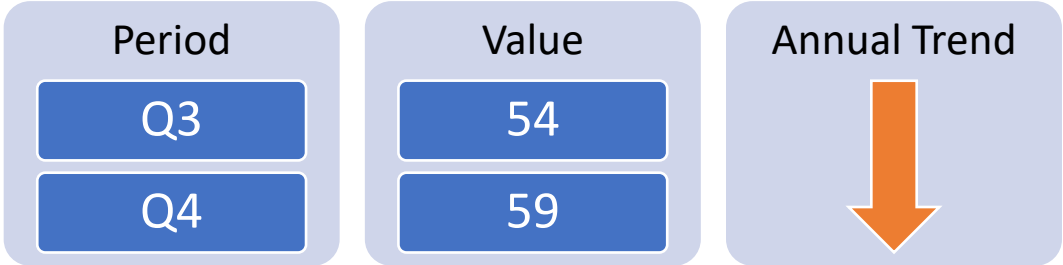
Median wait times have consistently dropped quarter on quarter throughout 2025/26 and as a result see an improved position from Q4 2024/25.

2.7.9 Number of DoLS applications waiting to be allocated to BIA - CCC9



This reflects an increase in applications waiting to be allocated since Q3 following the transition away from external agency support for assessments. Adult Social Care continues to apply a risk-based approach to prioritisation, ensuring that applications are reviewed promptly and those presenting the greatest need are responded to appropriately. It is also positive that 92% of applications continue to be completed within three months. The recent Supreme Court ruling will have a significant bearing on DOLS applications and authorisations.

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



Alongside the increase in the waiting list, the median wait for allocation has risen to 59 days from 19 days at the end of Q3 2024/25. This reflects increased demand within the system, with Adult Social Care continuing to apply a risk-based approach to prioritisation so that people with the greatest level of need are responded to as promptly as possible. As above, the recent Supreme Court ruling will have a significant bearing on DOLS applications and authorisations.

2.8 Adult Social Care Involvement and Engagement Approaches

2.8.1 Engagement and events

During Quarter 4, the Strategic Commissioning Team delivered four provider forums across Older People’s, Mental Health, Learning Disabilities and Home Support services. These forums covered a wide range of topics, including winter pressures, discharge processes, Integrated Neighbourhood Teams, co-production, oral health improvement, non-pharmacological approaches, decarbonising home care, and safeguarding escalation.

The sessions were well attended and provided valuable opportunities for collaboration, shared learning, and peer support. Within this period, the Learning Disabilities Forum supported individuals with lived experience to share their perspectives on co-production and their involvement in shaping service improvements – bringing the forums to life with lived experience.



In February, as part of our work to reduce inequalities and promote equity of access, Adult Social Care, hosted a session for Highlife members—an organisation supporting small and medium-sized businesses from the global majority. The session was attended by a range of home support and care providers and covered Adult Social Care’s role, how to engage with the Council, commissioning processes, and the role of direct payments in supporting diversity.

Feedback was positive, with participants reporting increased understanding and strengthened connections with the commissioning team.

Also in February, Strategic Commissioning co-hosted a joint networking event with Warwickshire County Council at Methodist Central Hall for care workers. The event aimed to facilitate networking across agencies and provide access to information and support, including support for wider family members. Over 30 organisations hosted stalls, with 110 care workers attending, demonstrating strong engagement and demand. Feedback from people who attended expressed that the event was incredibly helpful and supportive in their roles.



Analysis of Adult Social Care’s website translation data identified Traditional Chinese as a frequently used language. In response, Adult Social Care engaged with the British Nationals (Overseas) community, attending a Tea Gathering in March. The session, delivered with translation support, introduced Adult Social Care services and access routes. Feedback was positive, and further engagement sessions are planned, focusing on more specific topics.



In early March, the team attended the Carers Spring Expo at Coventry Cathedral, which saw over 150 carers and 33 stallholders present. The event provided valuable opportunities to connect with carers and partners. Feedback from attendees was overwhelmingly positive, with carers highlighting the event’s value.

Engagement activity for the development of the local Carers Strategy also commenced in March. The “Let’s Talk” platform was launched, including a survey to gather feedback. Initial engagement included visits to the “Loving an Addict” group (run by CGL), providing insight into caring roles involving addiction, and the Milan Group, which supports South Asian carers.

Adult Social Care continues to produce a range of bulletins for different audiences, including providers (240 recipients), carers (4,631 recipients), Adult Social Care subscribers (2,280 recipients), and internal staff. These bulletins share valuable information, advice, public health messages, and details of community events, with contributions from multiple partners.

2025 / 2026 - Year Overview

Throughout 2025/26 a wide range of rich engagement activity took place with people utilising services, carers, providers and voluntary sector.

A range of other engagement activities and events took place during 2025/26, including:

- Engagement event hosted at the Dementia Hub, offering families the opportunity to speak to professionals including social workers, financial assessment teams and technology specialists.
- The first Preparing for Adulthood event was held at Cheylesmore Community Centre, including the Transitions Team, Community Learning Disabilities Team (CWPT), Supported Apprenticeships, Shared Lives, Penderels, and various other day opportunity and respite providers.
- The Strategic Commissioning Team began engaging with groups who use preventative support as part of a project to recommission these services, with two workshops: one for people with learning disabilities and autism, and the other for people who had accessed mental health support. These continued throughout the year.
- The Strategic Commissioning Team also delivered provider forums (Older People and Mental Health) to support peer learning and collaborative problem-solving.
- Housing with Care tenants were also engaged to understand their day-to-day experiences and priorities, culminating in a best-practice event at Leofric Lodge.
- A Family Awareness Day was held at the 2 Tone café to support members of the Black community to develop an understanding of adult social care options and culturally appropriate support.
- Fieldwork to complete the Survey for Adult Carers took place, gaining 300 responses.
- 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.



2.8.3 – Accelerated Reform Fund – Supporting Innovation in ASC

- My Time Project** – Throughout Quarter 4 the My Time Project continued to grow, with a number of new partners, including local restaurants. At the end of March 199 carers have now benefitted from breaks across the city. Carers have told us about a range of benefits seen through having a one-off break, including feeling restored, valuable distraction through a difficult time, connecting with old friends and importantly feeling valued. A number of new businesses signed up in Quarter 4, including the Wave, the Olive Tree restaurant and Coventry Football Club.
- 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 4 2026, 6,591 circa people have accessed the site, with 9,471 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 and department. During this quarter a regular drop-in session has been established within the Outpatient department, which has proved incredibly busy, a regular evening drop-in session is being held on Ward 40, (Medicine Care for the Elderly). The team also supported a Caring for Carers event aimed at supporting staff at UHCW who are also caring for someone.

3. Options considered and recommended proposal

There are no specific options associated with this report.

4. Results of consultation undertaken

Although consultation is not specifically required for this report, the Adult Social Care involvement approach outlined above demonstrates our ongoing engagement with people who draw on support and their unpaid carers

5. 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. Comments from Director of Finance and Resources (Section 151 Officer) and Director of Law and Governance

6.1. Financial Implications

There are no direct financial implications arising from this report.

6.2. Legal Implications

Whilst there are no specific legal implications arising from the contents of this report at this stage, the Local Authority's responsibility is to promote wellbeing and ensure a diverse, sustainable care market that meets local needs. The Adult Social Care Outcomes Framework helps measure how effectively services deliver the outcomes that matter to people and informs national and local priorities

7.0 Other implications

8.0 How will this contribute to the One Coventry Plan?

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

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

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.

Adult Social Care's strengths-based practice makes an important contribution to the continued financial sustainability of the Council, while also supporting the economic prosperity of the city and region. By working alongside people to build on their strengths, maintain independence, and access employment and community opportunities, this approach helps promote wellbeing and reduce reliance on formal services where appropriate. With approximately 9,600 adult social care jobs in Coventry, the workforce also makes a significant contribution to the city and region's wider economic strength.

9.0 How is risk being managed?

9.1 Adult Social Care is taking forward a range of actions to strengthen service delivery and build on existing good practice, with a particular focus on supporting timely assessments and keeping annual reviews up to date for people receiving services.

9.2 The "Responding to Needs Assessment Requests" risk management tool, introduced in 2022, provides a strong framework for supporting practitioners to make informed, proportionate decisions and respond effectively to demand.

9.3 The Adult Social Care Management Team maintains active oversight of risk across services through the Adult Social Care Risk Register and the Corporate Risk Register, supported by the Council's Insurance Manager, helping to ensure a consistent and proactive approach.

9.4 What is the impact on the organisation?

None

9.5 Equalities / EIA

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

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

None

10.0 Implications for partner organisations?

None

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Councillor L Bigham	Cabinet Member for Adult Services		3.7.2026	3.7.2026

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