Telford & Wrekin Co-operative Council

Protect, care and invest to create a better borough

Borough of Telford and Wrekin

Cabinet

Thursday 16 July 2026

10.00 am

Council Chamber, Third Floor, Southwater One, Telford, TF3 4JG

Democratic Services:	**Jayne Clarke / Paige Starkey**	**01952 383205 / 380110**
Media Enquiries:	**Corporate Communications**	**01952 382406**
Lead Officer:	**David Sidaway - Chief Executive**	**01952 380130**

Cabinet Members:

Councillor L D Carter	Leader of the Council
Councillor R A Overton	Deputy Leader and Cabinet Member: Safer Streets and Better Housing
Councillor P Davis	Cabinet Member: Strong Communities, Local Pride & Veterans
Councillor Z Hannington	Cabinet Member: Finance and Resident Services
Councillor C Healy	Cabinet Member: Neighbourhoods, Planning & Sustainability
Councillor A D McClements	Cabinet Member: Culture, Tourism & Leisure
Councillor K Middleton	Cabinet Member: Public Health and Unlocking Opportunities for All
Councillor O Vickers	Cabinet Member: Jobs, Transport & Digital Connectivity

Councillor S A W Reynolds	Cabinet Member: Children, Young People, Education & Skills
Councillor P Watling	Cabinet Member: Adult Care and Independent Living

Invitees

Councillor A J Eade	Conservative
Councillor W L Tomlinson	Liberal Democrat

Agenda

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CABINET

Minutes of a meeting of the Cabinet held on Thursday 11 June 2026 at 10.00 am in the Council Chamber, Third Floor, Southwater One, Telford, TF3 4JG

Present: Councillors L D Carter (Chair), R A Overton (Vice-Chair), P Davis, Z Hannington, C Healy, A D McClements, K Middleton, S A W Reynolds, P Watling and O Vickers.

Also Present: Cllr A J Eade (Conservative Group Leader) and Cllr W L Tomlinson (Liberal Democrats Group Leader)

CAB-1 Declarations of Interest

None.

CAB-2 Minutes of the Previous Meeting

RESOLVED – that the minutes of the meeting held on 14 May 2026 be confirmed as a correct record and signed by the Chair.

CAB-3 Leader's Announcements

The Leader highlighted the current national support for the England football team ahead of the World Cup taking place across the Summer and the role of the Council in bringing communities together through initiatives such as digital signage across the Borough, school-based competitions and events in Southwater Square.

The Leader emphasised the importance of fostering community spirit, both in celebration and commiseration.

CAB-4 2025/26 Financial Outturn Report

The Cabinet Member for Finance and Resident Services presented the financial outturn report for 2025/26.

The report demonstrated that the Council had delivered a balanced budget, with an underspend of £133,000 against a net budget of £167.6m, reflecting strong financial management despite significant national pressures facing local government. The Council had continued to prioritise the protection of frontline services while maintaining a disciplined and resilient financial approach.

It was noted that the Council faced additional costs of approximately £6.8m within Adult Social Care, alongside further pressures within Children's Services equating to £2.8m and Education & Skills equating to £1.6m.

Despite this, over 90% of planned savings had been achieved and investment programmes, including housing delivery through Nuplace had continued to generate income and support local priorities delivering £6.3m in rental income and £2m returned to the Council. At the time of the meeting, no use had been made of strategic reserves to balance the budget.

Cabinet Members highlighted the importance of sustained investment, robust financial discipline and strong leadership in maintaining high-quality services and commended the Council's Finance Officers for their professionalism and commitment.

The Leader of the Liberal Democrat Group welcomed the report but highlighted ongoing national funding pressures, particularly in relation to Adult Social Care, noting that these remained a systemic issue requiring central government reform.

The Leader of the Conservative Group supported the financial management achieved but similarly emphasised that Adult Social Care pressures were driven by national funding arrangements and continued to place strain on local authorities.

In response, the Leader of the Council reiterated that the Council's approach to investment and income generation had enabled it to remain financially stable while continuing to deliver positive outcomes for residents.

RESOLVED – that:

a) **the performance against the 2025/26 Net Revenue budget which resulted in outturn being within budget by £133k be noted;**

b) **the revenue outturn position for 2025/26, which remains subject to audit by the Council's external auditors, and related virements in Appendix C be noted;**

c) **the transfers to reserves, and associated approval to the relevant members of the Senior Management Team after consultation with the relevant Cabinet Member to spend the reserves detailed in Appendix E be noted;**

d) **delegated authority be granted to the Chief Executive, in consultation with the Section 151 Officer in relation to the Income/Budget equalisation reserve to approve its use;**

e) **the capital outturn position and related supplementary estimates, re-phasing and virements shown in Appendix D and as summarised in the report be noted;**

f) **delegated authority be granted to the Director: Finance, People & IDT to make any changes required, in consultation with the**

Cabinet Member for Finance, Governance and Customer Services; and

g) the performance against income targets be noted.

CAB-5 Pride in Our High Street

The Cabinet Member for Jobs, Transport & Digital Connectivity presented an update on the Pride in Our High Streets programme.

The report outlined the Council's long-term investment in supporting town centres and local businesses across the Borough. Since the programme's inception in 2015, it had supported 133 new businesses, delivered 138 shopfront improvements and provided over 100 digital and environmental grants.

Through approximately £725,000 of public investment, the programme had leveraged £2.46m in private sector investment and supported the creation of over 440 jobs. Vacancy rates remained significantly below national levels, with only 24 empty units across 727 retail properties.

The Cabinet Member for Jobs, Transport & Digital Connectivity highlighted the programme's role in adapting high streets to modern challenges, including the shift towards experience-based economies and digital adoption.

Cabinet Members emphasised that continued investment had enabled Telford and Wrekin to outperform national trends, maintaining vibrant and resilient local centres.

The Leader of the Liberal Democrat Group welcomed the report and recognised the importance of supporting local businesses and maintaining vibrant community spaces within town centres.

The Leader of the Conservative Group expressed support for the programme, noting the need for the Council to continue to adapt to wider economic pressures affecting high streets nationally.

RESOLVED – that:

a) the work of the Pride in Our High Streets (PIOHS) programme in supporting resilient local high streets, local businesses and communities of the borough be noted; and

b) the continuation of the PIOHS programme and the development of the Elevate programme including potential new initiatives, such as: 'Spend Booster' be noted.

CAB-6 Telford & Wrekin Domestic Abuse Strategy refresh

The Cabinet Member for Public Health and Unlocking Opportunities for All presented the refreshed Domestic Abuse Strategy for 2026–2028.

The report highlighted the Council's continued commitment to tackling domestic abuse and violence against women and girls (VAWG). Key developments included strengthened partnership governance arrangements, the establishment of a lived experience advisory board, engagement with over 9,000 secondary school pupils to challenge harmful behaviours, the expansion of safe accommodation provision, including additional refuge spaces and training provision for 95% of maternity staff to support early identification.

The report reflected on significant progress during the previous strategy period, including increased safe accommodation provision, expanded partnership working and improved early identification of domestic abuse cases.

The Strategy set out four priority pillars, supported by clear commitments and delivery through annual action plans.

Cabinet Members welcomed the comprehensive and partnership-led approach, noting the significant support provided to victims and survivors.

The Leader of the Conservative Group acknowledged the Council's statutory duty to support victims of domestic abuse and welcomed the overall approach of the Strategy. While supporting the focus on women and girls, he suggested further consideration be given to services for male victims. He commented on recent data trends, noting the lack of a clear downward reduction in incidents. Finally, he asked what additional preparations were in place to respond to any increase in domestic abuse during major events such as the World Cup.

The Leader of the Liberal Democrat Group welcomed the report and highlighted the strength of partnership working in tackling domestic abuse and violence against women and girls. He reflected on the long-standing importance of support services, noting the historical development of refuges and how the need for such provision remained highly relevant. He emphasised that domestic abuse continued to be a significant issue, referenced the high demand placed on policing services and commended the continued collaborative work of the Council and its partners in supporting victims.

In response, the Cabinet Member for Public Health and Unlocking Opportunities for All confirmed that whilst domestic abuse affected all genders, national data indicated that women remained disproportionately impacted. She confirmed that support and accommodation were available for all victims, including men and highlighted that over 300 perpetrators had engaged in behaviour change programmes.

The Cabinet Member emphasised that the Strategy was inclusive of all relationships, including same-sex relationships and aimed to ensure access to support for all individuals affected. In relation to concerns around sporting events she confirmed that targeted awareness campaigns and support information were being promoted, including during the World Cup.

RESOLVED – that:

a) **the impact of the domestic abuse strategy programme over the past three years, in terms of raising awareness of the agenda and offering expanded support to more residents who are affected be noted; and**

b) **the refreshed Telford & Wrekin Domestic Abuse and Violence Against Women and Girls Strategy for 2026 – 2028 be approved.**

CAB-7 Regulation of Investigatory Powers ('RIPA') Update

The Deputy Leader and Cabinet Member for Better Housing and Safer Streets presented the annual report on the Council's use of investigatory powers under the Regulation of Investigatory Powers Act (RIPA).

The report outlined that powers had been used lawfully, proportionately and only where necessary to support enforcement activities such as tackling rogue trading and illegal sales, as well as wider criminal activity affecting local communities.

It was noted that the use of RIPA powers remained limited, with only a small number of applications made during the reporting period and no use of covert human intelligence sources.

Cabinet Members recognised the importance of balancing enforcement with appropriate safeguards, ensuring that all activity was necessary, proportionate and justified, and subject to appropriate oversight and training.

The Leader of the Liberal Democrat Group noted that, whilst governance reports such as this could often be seen as technical in nature, they were nonetheless essential. He emphasised the importance of maintaining an appropriate balance between the use of investigatory powers and safeguarding individual rights, referencing the need to ensure that such powers were exercised lawfully, proportionately and in the correct manner. He added that, when used appropriately, these powers could play an important role in tackling issues such as anti-social behaviour, while avoiding any risk of overreach.

The Leader of the Conservative Group acknowledged the importance of the report and despite some initial reservations regarding the use of test purchasing operations involving young people, he was reassured that appropriate safeguards were in place to ensure there would be no repercussions for those involved. He recognised the need for such measures

in addressing issues such as the illegal sale of vaping products, alcohol and cigarettes to minors and emphasised that this represented a careful and necessary balance between effective enforcement and the protection of individuals.

RESOLVED – that the Council's use of, and compliance with the requirements of, the Regulation of Investigatory Powers Act 2000 for the years 2023, 2024 and 2025 be noted.

CAB-8 Representation on Outside Bodies 2026-27

The Cabinet Member for Finance and Resident Services presented the annual appointments to outside bodies.

A review of the outside bodies appointments had been carried out to assess the needs of the Council in respect of representation on a range of external organisations to support partnership working and the delivery of the Council's priorities. It was noted that a number of appointments were required on a statutory basis and that arrangements were reviewed annually.

The report also sought delegated authority to the Monitoring Officer to consider nominations for outside bodies in consultation with the Cabinet Member for Finance and Resident Services.

The Leader of the Conservative Group raised concerns regarding the balance of representation across political groups.

In response, the Leader of the Council advised that appointments were often determined through governance requirements and invited specific examples to be raised for further consideration outside of the meeting.

RESOLVED – that:

a) **the outside bodies to which the Council historically has nominated to, as set out in Appendix A of the report be noted; and**

b) **delegated authority be granted to the Monitoring Officer in consultation with the Cabinet Member: Finance and Resident Services to decide which bodies to nominate to and which Councillor is nominated.**

The meeting ended at 11.17 am

Signed for the purposes of the Decision Notices

Anthea Lowe
Director: Policy & Governance

Signed: .....
Date: Thursday 16 July 2026

Telford & Wrekin Co-operative Council

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Borough of Telford and Wrekin

Cabinet

Thursday 16 July 2026

Best Start in Life Plan 2026-2028

Cabinet Member:	Cllr Shirley Reynolds, Cabinet Member: Children, Young People, Education, Employment and Skills
Lead Director:	Helen Onions, Director of Public Health Darren Knibbs, Director: Children's Safeguarding & Family Support Rebecca Carey, Interim Director: Education & Skills
Service Area:	Children Services and Public Health
Report Author:	Helen Onions, Director of Public Health
Officer Contact Details:	**Tel:** 01952 381366 **Email:** helen.onions@telford.gov.uk
Wards Affected:	All Wards
Key Decision:	Key Decision
Forward Plan:	Yes - 14.05.2026
Report considered by:	SMT - 16.06.2026 Business Briefing - 25.06.2026 Cabinet - 16.07.26

1.0 Recommendations for decision/noting

It is recommended that Cabinet:

1.1 approve the Telford & Wrekin Best Start in Life Plan 2026-2028, which has the aspiration that every five-year-old in the borough reaches their development potential.

2.0 Purpose of Report

2.1 The purpose of this report is to introduce the Best Start in Life Plan, which all LAs are expected to publish for the first time in 2026. This partnership plan has been

developed across council teams, local NHS organisations and voluntary and community sector (VCSE) partners.

3.0 Background

3.1 The Department for Education published the new strategy Giving every child the best start in life in July 2025, as part of the Government's Opportunity Mission. Local Best Start Delivery Plans are expected to build on existing local Children & Young People's strategies, and should:

- Set a bold vision for improving child development and health outcomes with local delivery across partners, including: children's services, nurseries, childminders, schools, health services, local voluntary and community groups;
- Identify the local needs of babies, children and families, set out plans to address gaps in provision and scale innovative practice.

The DfE expects local plans to describe how delivery actions will be: carried out in partnership, tracked and tailored to local needs to continually drive progress.

3.2 Our Council Plan and Health & Wellbeing Strategy both highlight the importance of all Telford & Wrekin children getting the best start in life, to ensure they have maximium opportunities throughout their lives. Our Children and Young People's Strategy aims to ensure that all our children and young people - *start well, stay well, keep safe, and enjoy and achieve*. Becoming a Child Friendly Borough, a key part of the strategy commitments, is strengthened by this focus on the best start in life.

3.3 Healthy pregnancy, support for families in the early years and early years education are all fundamental building blocks to ensuring our children experience the best physical, cognitive and emotional development possible. Certain parents and children face disadvantage for different reasons, including; experience of care, poverty, having global majority ethnic backgrounds, and being affected by drugs and alcohol and domestic abuse. Children with special educational needs and disabilities (SEND) often require focussed attention to ensure they reach their full potential.

3.4 Good Level of Development (GLD) is a measure used to determine whether children are working at the expected level for their age by the end of the Early Years Foundation Stage (Reception year). Children's development at the end of Reception Year, is measured in school through 12 Early Learning Goals in the following 5 areas:

- **Communication and Language**: Listening, Attention and Understanding, Speaking;
- **Physical Development**: Gross Motor Skills and Fine Motor Skills;
- **Personal, Social and Emotional Development**: Self-Regulation, Managing Self, Building Relationships;
- **Literacy**: Comprehension, Word Reading, Writing;
- **Mathematics**: Numbers, Numerical Patterns.

3.5 The Government's ambition is that 75% of 5-year-olds in England will have a good level of development by 2028. Improving Good Level of Development is also a key regional Department of Health and Social Care priority, and is included in the Midlands Director of Public Health *Critical Six for 2026*. In August 2025 all local

authorities were allocated individual targets by the Department for Education (DfE) to improve good level of development outcomes in 5-year-olds by 2028.

3.6 The National Centre for Family Hubs, hosted and delivered by the Local Government Association, has offered support to local authorities to develop their best start plans in collaboration with Nesta, the UK innovation agency for social good.

4.0 Summary of main proposals

4.1 The Good Level of Development outcome in 5-year-olds is part of the Council's performance monitoring process and is also incorporated in the Health & Wellbeing Board and Children & Young People's Strategy outcomes frameworks. The GLD measure is included in the newly published Local Outcomes Framework.

4.2 In 2024/25 67.3% of 5-year-olds in Telford & Wrekin achieved a good level of development, and the DfE have assigned an overall local target of 78% for 2027/28. This local target increase expected for Telford & Wrekin is 11% over the next three years. This stretch target is higher than the average across all local authorities, which is 7% increase. Our target translates into an additional 235 5-year-olds expected to achieve a good level of development in 2027/28.

4.3 Data profiling work on Telford & Wrekin 5 year olds achieving a good level of development in 2024/25, indicates our target groups of children who are less likely to achieve a good level of development are: boys, children born in the summer and those from disadvantaged backgrounds, for example children receiving free school meal.

4.4 The DfE has also set local authorities inequalities target for pupils receiving Free School Meal (FSMs). In 2024/25 50.6% of Telford & Wrekin 5-year-olds receiving FSMs achieved a good level of development, and our target for 2027/28 is 64.6%. This translates into an additional 62 5-year-olds receiving Free School Meals achieving a good level of development in 2027/28.

4.5 The Telford & Wrekin CYP Strategy, approved by Cabinet in February 2025, provides the local strategic context for our best start in life plan. Given the broad scope and context of achieving a good level of development, the partnership and ownership for the agenda spreads across the council and beyond. Work on the best start in life agenda with the NHS, through; health visiting, school nursing, dental health, speech and language therapy and SEND, strongly aligns with the neighbourhood health shift, which is part of the delivery of the NHS 10-year plan.

4.6 The national SEND reforms, set out in the Thrive and Achieve White Paper, will be progressively implemented in Telford & Wrekin ensuring the sharing of commitments for both agendas. Within the Best Start in Life Plan, the alignment with SEND reform will be delivered through shared actions across education and health and care partners. This should ensure an integrated early years approach is embedded, which prioritises early identification, provides a consistent graduated response and timely access to specialist support for children who need it.

4.7 Healthy Babies and Best Start Family Hubs services are funded by the Government as part of the best start in life priority. Telford & Wrekin Safeguarding Children & Family Support Team deliver Family Hubs (FHs) services in the borough. All Family Hubs are expected to include the following core "strands" as part of the service offer, which is tightly defined by the DfE:

- Perinatal Mental Health and Parent–Infant Relationships
- Infant Feeding Support – from Health Visiting and community peer supporters
- Parenting Support - antenatal education and targeted support
- Home Learning Environment – support for pre-schoolers
- Healthy Babies Offer publication for families covering first 1,001 days families
- Parent & Carer Panels – to ensure family voices shape service design
- Wider Services –VCSE, reducing parental conflict, domestic abuse etc.
- Children with additional needs (a new strand from 2026)

4.8 The parenting support, home learning environment and new children with additional needs Family Hubs strands are the elements of the overall offer which most closely support children to achieve good level of development. The DfE specifies which evidence-based interventions can be funded through the local authority Family Hubs grant for these strands. The DfE expects local authorities to submit costed delivery plans across the stands.

4.9 The Council's Early Years and Childcare Team delivers the Family Hubs home learning environment strand as part of their role, which includes: managing childcare sufficiency, delivery of Wrap Around and Healthy Active Holidays programmes, and support, advice and guidance to Early Years Foundation Stage settings.

4.10 The interventions currently delivered in Telford & Wrekin across Family Hubs and Early Years settings, which are specified DfE Evidence-Based Interventions are for:

- Parenting: Triple P Group Work, Stepping Stones. Triple P for Baby Online
- Home Learning Environment: Early Talk Boost, Making it REAL, Triple P – Stepping Stones.

4.11 The Telford & Wrekin best start in life working group, established in September 2025 has been meeting regularly to develop the delivery plan using DfE and Nesta guidance and support resources. The working group includes colleagues from public health, education, family hubs and Health Visiting and Speech and Language leads from Shropshire Community Health NHS Trust.

4.12 Our Best Start in Life Plan framework is shown below, and the plan includes a series of detailed actions owned across the partnership.

4.13 Given the wide partnership collaboration and ownership required on this agenda, the governance and reporting of this Best Start in Life plan will include: SMT and Cabinet, Safeguarding Children Board, Health & Wellbeing Board and Telford & Wrekin Integrated Place Partnership and the Education Strategic Partnership.

4.14 The first iteration of the best start in life plan was published on 31 March 2026, which was a DfE requirement. The plan has now been updated and refreshed and many actions are now being delivered, key examples of progress across the plan's framework headings include:

- **Maximising the 2-2.5 year checks by Health Visitors**: text message reminders for parents for 2–2.5 year developmental appointments and the expansion of Health Visitor baby weigh-in drop-in clinics across the borough.
- **Develop and raise awareness of our universal offer:** the Best Start and Family Hubs youth and community offer is now fully operational, supporting families across the borough with: parenting guidance, parent-infant relationship support, financial advice, and school readiness, evidenced by strong engagement including 35,000 website visits.
- **Expand targeted support:** new roles have been agreed such as Best Start Inclusion Practitioners, which will support families where children have emerging developmental needs or SEND, providing early, practical interventions, to help parents navigate local support pathways, and coordinate with nurseries and health visitors to ensure equal access to services.
- **Become data and intelligence-led:** development of the best start in life needs assessment, including tracking of good level of development achievement in individual children from early years settings into reception.
- **Improve engagement and participation:** Dandelion Parents have supported the production of the video and communications to parents, and insight and support from PODS is shaping the Family Hubs offer and SEND reform plans.
- **Speech, Language and Communication pathways:** Early years practitioners are implementing Talk Boost and Making it Real interventions, evidencing clear impact in settings and supporting families to extend their children's learning at

home. The DfE Early Years Foundation Stage Programme sessions started to be delivered to early years foundation stage leads in Telford & Wrekin in May. Notifications from NHS staff, like Health Visitors are being used more effectively to identify SEND needs earlier, and support timely transition into reception.

5.0 Alternative Options

5.1 None, the DfE expects all local authorities to work in partnership to develop best start in life delivery plans in order to deliver the local targets which have been nationally set.

6.0 Key Risks

6.1 Improving childhood development has lifetime health and social economic benefits. Family Hubs and Health Visiting are funded through local authority grants from Government and the best start in life offer being developed would be at risk without these vital funding streams.

7.0 Council Priorities

7.1 Every child, young person and adult lives well in their community.

8.0 Financial Implications

8.1 The Best Start in Life Plan will be delivered primarily through a combination of existing base budget and external funding streams, including Government grant funding for Family Hubs and the Healthy Child Programme (HCP).

8.2 The Healthy Child Programme has an ongoing budget allocation of £3.3m per annum, funded through the Public Health Grant.

8.3 Family Hubs grant funding from the Department for Education commenced in 2022/23, with Telford & Wrekin receiving £4.2m up to and including the 2025/26 financial year. Further funding through the Best Start Family Hubs and Healthy Babies programme has been confirmed for the period 2026/27 to 2028/29, with a maximum allocation of £5.33m over the three years. This is supplemented by an annual Council contribution of £0.7m to support delivery.

8.4 The Council remains reliant on these external funding streams to sustain delivery of the programme. Should the grant funding referenced in sections 8.2 and 8.3 reduce or cease, the Council would need to review the scope and affordability of the Best Start in Life offer, as the current delivery model would not be sustainable without this funding.

9.0 Legal and HR Implications

9.1 Following the policy paper ‘Giving Every Child the Best Start in Life’ the Best Start in Life Plan follows the requirement for Children and Young People’s strategies under the Children Act 1989 (as amended) and the Children and Young Persons Act 2008. SEND provision is addressed in the SEND Code of Practice (January 2015) and Children and Families Act 2014 with health responsibilities under the NHS Act 2006 and joint commissioning under the Health and Care Act 2022. Education duties are addressed under the Education Act 1996 and with additional regard to the EYFS Statutory Framework. Overarching consideration should be given to the Best Start Family Hubs and Health Baby Guidance (2025-26) on implementation.

10.0 Ward Implications

10.1 Borough-wide impact, but particularly wards with highest levels socio-economic deprivation.

11.0 Health, Social and Economic Implications

11.1 Children's early years are crucial to their development, health and life chances. Starting Well is a Health & Wellbeing Strategy priority and taking a life course approach is also critical for tackling inequalities. Improving good level of development at the end of reception is a key local and national goal, for health but also for social and economic reasons given its relationship to educational attainment, employment and economic opportunity. The national and local GLD targets are part of Government's Opportunity Mission.

12.0 Equality and Diversity Implications

12.1 National research shows there are obvious variations in the Good Level of Development in children at 2-2.5 years in children across protected characteristics, such as gender and ethnicity, and these inequalities are know to persist at age 5 and beyond for future educational attainment.

13.0 Climate Change, Biodiversity and Environmental Implications

13.1 None

14.0 Background Papers

None

15.0 Appendices

Appendix A Telford & Wrekin Best Start in Life Plan 2026 -2028 (June 2026)

16.0 Report Sign Off

Signed off by	Date sent	Date signed off	Initials
Director	09/06/2026	03/06/2026	HO
Legal	09/06/2026	16/06/2026	ON
Finance	09/06/2026	18/06/2026	PT

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BEST START IN LIFE

Telford & Wrekin Co-operative Council

Protect, care and invest to create a better borough

Telford and Wrekin

Best Start in Life Plan

2026-2028

Ofsted Outstanding Provider

Child Friendly Telford and Wrekin

Telford and Wrekin FAMILY HUBS

5BY5

Foreword

Our Children & Young People's Strategy, published in February 2025, brought together public health, education and safeguarding agendas under one umbrella, setting clear aims that our children and young people will: **start well, stay well, keep safe and enjoy and achieve.** The vision of the strategy is that **our Borough is home to healthy, safe children who achieve their potential,** and we are on a journey to becoming a Child Friendly Borough. Our commitments include celebrating diversity and being inclusive, taking a whole-child approach to maximise life chances and outcomes for all children, alongside a focus on narrowing the gap for those who are disadvantaged, for whatever reason.

The key areas of focus during 2025/26 were: the implementation of the Families First Partnership and expansion of Family Hubs aligned to the Neighbourhood Health agenda, the development of this best start in life plan and preparation for the SEND reforms. Strong partnership working between the local authority, NHS, education, the community and voluntary sector and police are underpinning these priority programmes. Engagement, participation and co-production with children, young people, parents, carers, families and communities is evolving and is increasingly informing everything we do.

Good Level of Development (GLD) measures were key outcomes set out in our CYP Strategy, and the national Giving every child the best in life strategy published in July 2025, provided the springboard for local planning, partnership working and service transformation. The targets set by the Department of Education for Telford & Wrekin children are challenging and higher than those set for most local authorities. We know that reasons for children that are not reaching their early learning and development goals are varied and include; having special educational needs and disabilities, living in low income families, English being an additional language and being born in the Summer. In 2024/25 67% of our children overall achieved GLD at the end of reception, and the target expected for 2027/28 is 78%, an increase of 11%. This plan sets out clear intelligence-led, partnership action to ensure **all** children get the best start in life, the change needs to be transformational and delivered at pace. Beyond the targets we want to set the aspiration that **"every 5 year old child reaches their development potential"** and we are exploring ways to demonstrate that every child gets the best start giving them every opportunity in their future lives.

'A strong start in life isn't just about learning early – it's about feeling ready, supported and confident. As an apprentice, I see how much easier it is for young people to grow, achieve and believe in themselves when that foundation is there from the beginning'

Liam Bradley
Young People's Voice Apprentice

Jo Britton
Executive Director, Children's Services and Public Health

Councillor Shirley Reynolds
Children, Young People, Education, Employment and Skills

Beyond the targets, we want to set the aspiration that every 5 year old child reaches their development potential.

Partnership Vision – our borough is home to healthy, safe children who achieve their potential

Children live in families, families make communities and communities build our borough

Child Friendly Telford and Wrekin

CULTURE

Listening to children and young people through co-production and engagement.

Empowering and supporting using asset-based community approach.

Celebrating diversity and being inclusive.

FOCUS

Improving experience and outcomes for all.

Maximising opportunities, aspirations and life chances.

Whole child approach – physical, emotional, social and academic wellbeing.

Narrowing the gap – for children who are marginalised, living in poverty, with disabilities, SEND, care experience and trauma.

Our partners

These people and services work together as part of our Family Hubs networks across Telford and Wrekin. The Family Hub networks bring together the organisations and services that support families, creating a joined up, 'one stop' approach to accessing help. They provide support from pregnancy, through a child's early years, later childhood, and into young adulthood.

- Parents, carers and family members
- Early Years and Childcare providers
- School and nursery settings
- Early Years and Childcare team
- Live Well Telford
- Family Hubs services
- The Breastfeeding Network
- Shropshire Community Health NHS Trust including Health Visiting, School Nursing and Family Nurse Partnership, Children's Therapies and the Child Development Centre
- Maternity – Shropshire and Telford Hospitals Trust
- Healthy Smile team at Shropshire Community Health Trust
- Telford Mind
- Families in Telford
- Talking – Early years and Childcare
- SEND Local Offer
- Home Start
- PODS – Parents Opening Doors
- Telford and Wrekin Libraries
- Triple P for baby
- Triple P Setting Stones
- Dandelions Group
- Integrated care system - ICB
- 5 by 5
- Healthy Telford
- Cranstoun domestic abuse
- Business Intelligence Teams
- Eatwell
- Citizens Advice

Developing our best start in life plan

From September 2025 a working group-led by the Director of Public Health, in collaboration with the Director of Children's Safeguarding and Director of Education and Skills has shaped the development of this best start in life plan. Leads from the following Council Teams are core members of the working group: Family Hubs, Early Years and Childcare, Insight, public health commissioning, alongside the NHS Public Health Nursing Service Manager and Clinical Services Manager Children's Therapies and Child Development Centres. Other partners have supported the process, including Home Start Telford & Wrekin and Families in Telford, and Dandelion Parents.

The development of our Family Hubs offer is progressing well, linking tightly to the Family First Partnership. **We are aligning the Families First Partnership with the Family Hubs model to provide coordinated, early support for families, strengthening pathways that help children achieve a good level of development.** Family Hubs transformation is also a key part of the evolution of Neighbourhood Health, which is being steered by Telford & Wrekin Integrated Place Partnership (TWIPP). Improving GLD has been incorporated into the local Integrated Care Board Population Health Improvement Plan.

Part of our already strong universal offer, the highly successful local 5 by 5 programme, established in May 2025, is creating the foundations to help all children be happy, healthy and ready to start school by trying a list of adventures by their 5th birthday. Being part of the Sport England Place Partnership programme means that Family Hubs, community organisations and education settings are coming together with a clear system leadership focus to increase physical activity.

Maximising the impact of the 2-2.5 year checks offered by our Health Visiting Service is a regional workstream being led by the Midlands Director of Public of Health. The regional thematic improvement plan structure is being used to define the proposed action in this plan.

Borough-wide engagement and participation activities with children and families, being drawn together and expanded as part of becoming a Child Friendly borough, this includes co-production with our Dandelion Parents, Lived Experience Apprentices and parents and carers using Family Hubs.

SEND Reforms, driven through the Thrive and Achieve White Paper, will evolve in alignment with this plan over time, with clear shared actions for children to reach their potential on early learning goals.

> *"The national SEND reforms, as set out in the Thrive and Achieve White Paper, will be progressively implemented in Telford and Wrekin ensuring alignment of commitments for both agendas. Within the Best Start in Life Plan, this alignment will be delivered through shared actions across education and health and care partners, embedding an integrated early years approach that prioritises early identification, consistent graduated response and timely access to specialist support for children who need it."*
>
> **Abi Martin**
> **Strategic Lead SEND/AP Reform**

Children and Young People's Strategy 2025-2028 Start Well Objectives

1. Enabling children to get the best start in life through universal prenatal, antenatal, postnatal and health visiting services and community based early help services.
2. Empowering parents and carers to care for and nurture their children, with early/family help to avoid issues escalating.
3. Supporting all children to be ready for school, achieving a good level of development on their language and communication, problem solving and personal-social skills, at home and in early years and community settings.

What does 'Good Level of Development' (GLD) mean?

A **Good Level of Development (GLD)** means that a child is working at the **expected level for their age** by the end of the Early Years Foundation Stage (Reception year).

When a child achieves GLD, it shows they have a **secure understanding and skills** in the areas that are most important for early learning and for starting Year 1. This includes being able to:

- **communicate and listen** confidently, following instructions and expressing their ideas
- **manage their feelings and behaviour,** work independently, and build positive relationships
- **use language, early reading and writing skills,** such as recognising sounds, forming letters, and using simple sentences
- **use numbers and simple maths,** including counting, recognising numbers, and solving basic problems

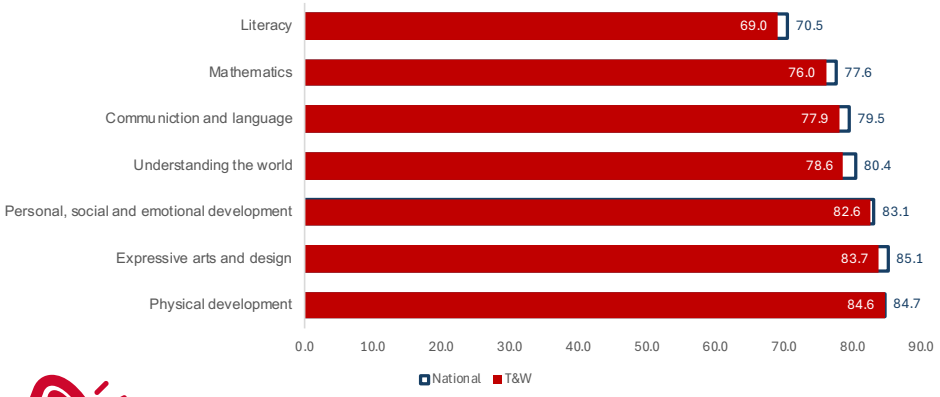
Reaching GLD means your child is developing well and has a **strong foundation for future learning,** though every child continues to grow and learn in their own time.

GLD targets and outcome indicators

Telford & Wrekin Targets for 5 year olds (end of academic year 2027/28)

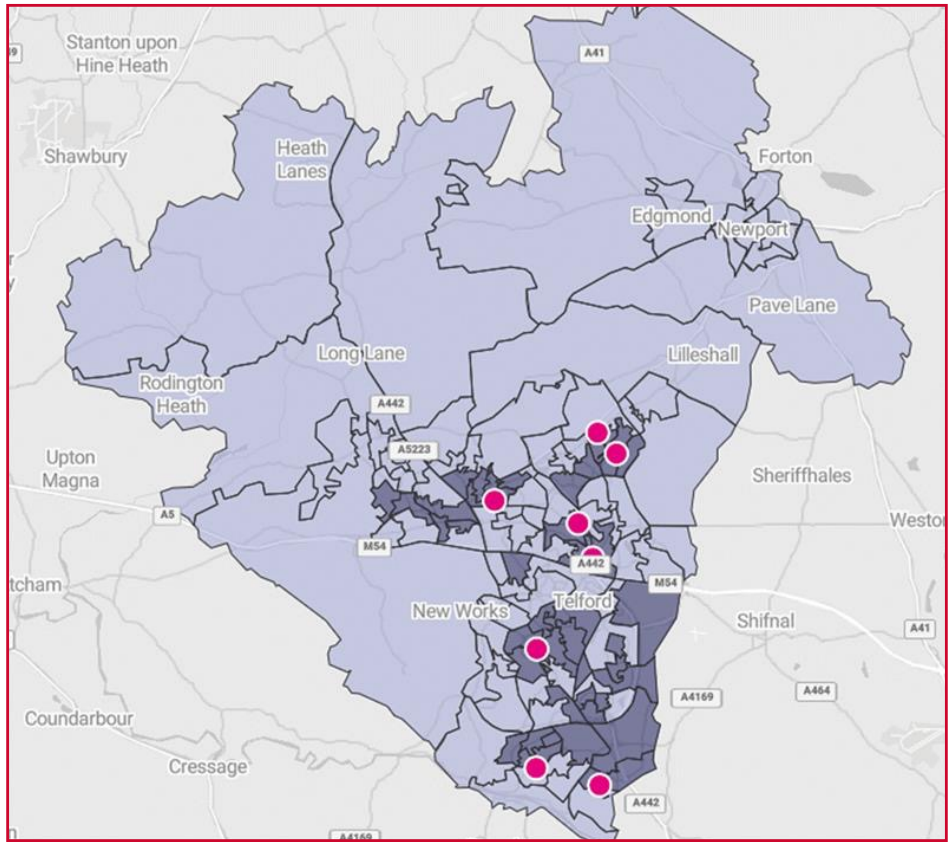
- % of children achieving a Good Level of Development is at least 78%
- % of children eligible for Free School Meals and achieving a Good Level of Development is at least 64.6%

% of children achieving GLD across each area of learning, 2024-25



Beyond the targets, we want to set the aspiration that every 5 year old child reaches their development potential.

Our best start Family Hubs



The dark shading is showing communities that are in the 30% most deprived nationally (using the 2025 Index of Deprivation) and the red dots show the current locations of the Family Hubs.

Our Family Hub locations

Oak Family Hub Theatre Square, Oakengates

Silver Birch Family Hub 103 Southgate, Sutton Hill

Walnut Family Hub Park lane, Woodside

Cherry Blossom Family Hub Hawksworth Rd, Telford

Hazel Family Hub Waterloo Road, Hadley

Evergreen Family Hub 35 High Street, Dawley

Damson Family Hub Lawndale, Wellington Road, Donnington

Damson Family Hub St Matthews Road, Donnington

Wellington (opening Autumn 2026)

www.telfordfamilyhubs.co.uk

Our local picture – GLD focus

Five year old profile, 2024/25

There are on average 2,200 children in Reception class each year, of which approximately:

- 390 have English as an additional language
- 100 have an Education Health & Care Plan
- 270 have Special Educational Needs support
- 440 are eligible for Free School Meals
- 25% are from Black and Minority Ethnic Groups

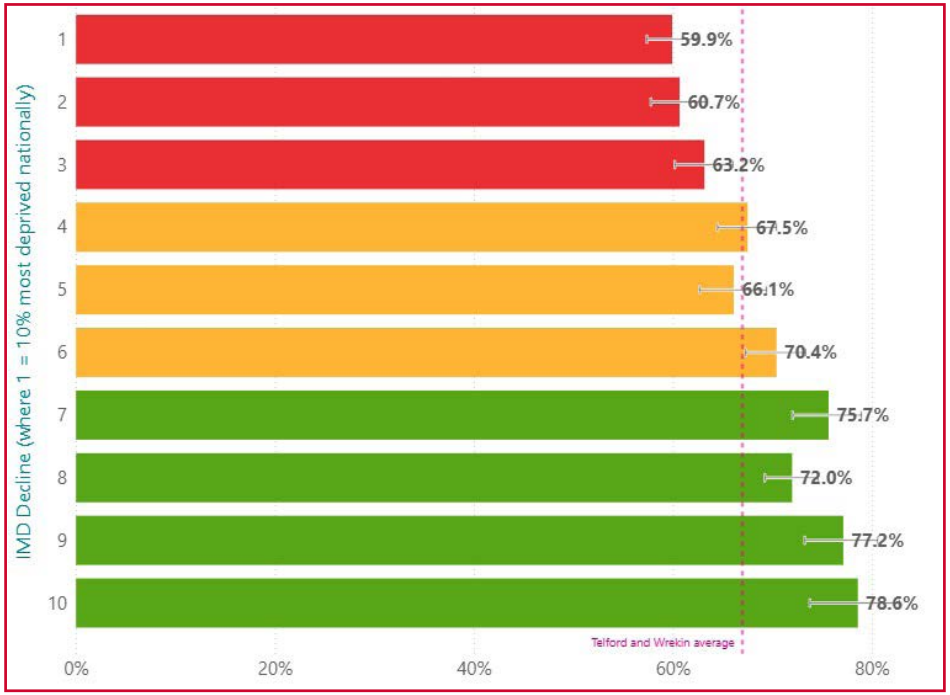
Achieving a Good Level of Development at age 5:

- 1,480 children achieved a good level of development in 2025 (67.3% of children)
- Around 235 additional children need to achieve a good level of development to reach our target of 78%

Our target groups:

- Children Receiving Free School Meals (FSM) – 50.6% of children eligible for FSM in 2024/25 achieve a good level of development. Around 60 additional children eligible for FSM would need to achieve GLD to meet our target of 64.6% in 2027/28
- Children living in more deprived areas of the Borough – there is an 18.7 percentage point gap between GLD achievement in the 10% most deprived communities, compared to the 10% least deprived (see chart opposite)
- Boys – around 60.6% of boys achieve a good level of development, compare to 74.4% of girls in 2024/25
- Summer Born Children – there is a 20.2 percentage point gap between GLD achievement for boys born in September (70.1%), compared to those born in August (49.9%), 2023-25

Achievement of GLD across deprivation groups (Source: GLD performance 2023-2025, by Index of Multiple Deprivation decile of child's home address)



Our local picture – Best Start in Life

13,200 children aged 0-5 in the borough, 2024.

27.1% of children living in relative low income (under 16s) (England 22.1%), in 2023/24.

45.1% of women have early access to maternity care (in 10 weeks) (England 63.5%), in 2023/24.

Birth rate for under 18s of 5.6, higher than England 3.0, 2023.

82.5% children receiving 12 month health visitor review (England 88.4%), in 2024/25.

86.2% of 2-2.5 year olds receiving health visitor review (England 93.9%), in 2024/25.

25.3% Overweight and obesity at the end of reception (England 23.5%), in 2024/25.

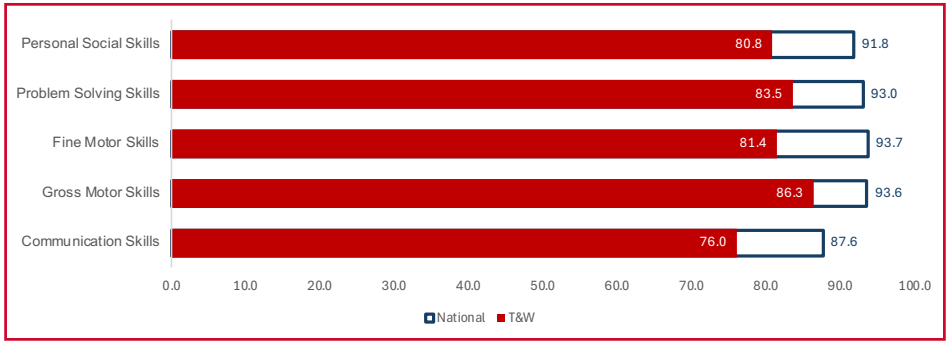
Oral health – 27.0% of five year olds experience visually obvious dental decay at age 5 years. 155 children aged 0-5 were admitted to hospital for dental caries in 3 years (21/22-23/24).

2,785 children aged 0-4 had Emergency hospital admissions (in 2024/25).

87.9% Vaccination coverage MMR 2 dose (England 83.7%), in 2024/25.

94.5% vaccination coverage at age 2 for Dtap IPV Hib HepB (England 92.5%), in 2024/25.

Child Development: % of children achieving the expected level at age 2 to 2 and a half, 2024-25



Overview of our Best Start in Life Plan

Partnership, engagement and co-production
Children, parents, carers, partners and settings

Maximise the impact of 2-2.5 year checks

Develop and raise awareness of our universal offer

Expand targeted support

Speech language and communication

Become data and intelligence led

Priorities for 2026/27

1. Develop pathways of support for children who are not meeting their milestones.
2. Establish an innovative multi-disciplinary team to provide tailored support for those who need it most.
3. Communicate our universal and target offers clearly to parents and partners to ensure maximum uptake.

Partnership, engagement and co-production

Priority action	Measures of impact	Lead organisation/group	June 2026
Engagement and co-production with parents			
Strengthen parental engagement and embed co-production across Family Hubs and the Families First Partnership to support children's early development and improve the proportion achieving a Good Level of Development (GLD).	Demonstrable improvements in parents' confidence and ability to support early learning at home, measured through pre- and post-engagement questionnaires, feedback tools, and Family Hub evaluation data.	LA – Family Hubs	The BSFH delivery grant continues to fund the Parent Carer Co-production post in the Voice and Influence Team and supports the budget to enable co-produced work to take place. These targets have been incorporated into their work plan, and they will be able to demonstrate both activity and impact.
Co-producing school-readiness pathways, home-learning resources, and targeted interventions that address local developmental needs.	Increased numbers of parents taking part in co-produced school-readiness activities, workshops, and planning groups, with attendance data and engagement rates monitored quarterly.	LA – Family Hubs	The BSFH delivery grant continues to fund the Parent Carer Co-production post in the Voice and Influence Team and supports the budget to enable co-produced work to take place. These targets have been incorporated into their work plan, and they will be able to demonstrate both activity and impact.
Making it Real Home learning intervention training for all settings, schools and parent events.	Attendance at training. Parents voice captured via pre and post questionnaire and engagement events.	LA – Early Years	Awaiting revised roll out for the Autumn term
Training for partners			
Deliver DfE EYFSP support package to all EYFS teachers 1 per term starting summer 2026: Professional conversations. Formative assessment, Summative assessment.	Increased attendance of schools at training leading to more accurate assessment when submitting GLD.	LA - Early Years and Childcare Team Leader	EYFSP support session delivered Professional Dialouges: 19 schools and 32 EYFS teachers attended
Early Years talk boost training and resources are available termly to support children's speech and language communication.	Number of staff trained. Number of setting delivering targeted intervention. Impact of intervention.	LA - Early Years and Childcare Team Leader	107 individuals trained/302 groups run Impact on slides provided

Partnership, engagement and co-production *continued*

Priority action	Measures of impact	Lead organisation/group	June 2026
Develop and rollout Early Years and Schools Professionals Training/ Webinar Series. to upskill early years and schools professionals on eatwell guide, active learning, talking to young people about weight.	Number of professionals attended training.	Senior Health Improvement Practitioner (Healthy Weight)	Schools webinar series launched September 2025. 30 minute online learning sessions put on for school staff and partners to attend. Eight topics have so far been delivered including Eatwell Plate, Sugar Awareness, Active Breaks, Talking about Weight. 75 attendees have taken part in the webinar series so far. A similar early years programme is in development in partnership with family hubs and early years practitioners hoping to launch late 2026.
Coproduction with SEND parent carer forums and groups is developed through Working together for Parent Participation.	Number of Parent carer groups and reps meeting to work on development of SEND Local Offer and development of communication.	SEND	Participation at monthly SEND Parent carer forum. Including parent carer involvement from EYs Sensory Inclusion Groups,PODs, Dandilions, Challenging perceptions group. SEND coproduction embedded into the SEND Reform planning for role out in September 2026.
SEND Working Together Charter (Coproduction) used with partners and settings through the PINS programme and SEND Experts at Hand offer.	Settings and schools signed up to the working together charter, Settings accessing the PODs support through the PINS model and EAH.	SEND/PCF	Coproduction charter has been implemented in 6 primary schools as part of the PINS programme. With parent carers and schools working with PODS on the Coproduction charter 4 key principles. The WTC is a key part of the SEND reform plan and the principles will underpin the work with settings, partners and families.

Maximise the impact of 2-2.5 year checks

Priority action	Measures of impact	Lead organisation/group	June 2026
Analyse and identify gaps in take up of the 2-2.5 year development review to inform targeting	Increase uptake by supporting families attendance and reduce the number of missed appointments.	LA – PH Commissioner SCHT – PH Nursing Service Manager	Template improvement plan document being used to analyse and identify gaps in take up of the 2-2.5 year development review.
Communication and engagement: Implement text messsaging reminder service for families for the 12 month and 2-2.5 year development reviews.	Increase in attendance at 2-2.5 year development review. Increase percentage of 2-2.5 year development reviews taken place within timeframe.	LA – PH Commissioner SCHT – PH Nursing Service Manager	Text messaging reminder service implemented for both development reviews (2-2.5 year review – 13 Feb 26, 9-12 month review – 6 March).
Communication and engagement: Proactive engagement with families regarding well baby clinics	Increase in attendance at 2-2.5 year development review. Increase percentage of 2-2.5 year development reviews taken place within timeframe.	LA – PH Commissioner SCHT – PH Nursing Service Manager	Since Feb '26 there are now four well baby clinics (open clinics) being delivered in Dawley, Donningon, Woodside and Sutton Hill.
Communication and engagement: Proactive engagement with families regarding development clinics	Increase in attendance at 2-2.5 year development review. Increase percentage of 2-2.5 year development reviews taken place within timeframe.	LA – PH Commissioner SCHT – PH Nursing Service Manager	Synertec to send out appointment letters for development reviews.
Communication and engagement: Scope out a self booking facility for parents to book the 2-2.5 year development review.	Increase in attendance at 2-2.5 year development review. Increase percentage of 2-2.5 year development reviews taken place within timeframe	LA – PH Commissioner SCHT – PH Nursing Service Manager	To liaise with other services to look at and review self booking facility options.
Improve the quality of the 2-2.5 year development review: Development of Nursery Nurse guidance for completing the 2-2.5 year development review, including guidance for completing Rio for reporting.	Ensure consistent offer to families and families receiving the right support at the right time. Accurate reporting.	LA – PH Commissioner SCHT – PH Nursing Service Manager	Nursery Nurses deliver universal 2-2.5 year development reviews. Health Visitors deliver targeted and specialist 2-2.5 year development reviews. Nursery Nurse engagament has taken place and guidance is being developed for Nursery Nurses.
Improve the quality of the 2-2.5 year development review: Training needs analysis for Nursery Nurses.	Training to meet the needs of staff and ensure a high standard, consistent offer to families.	LA – PH Commissioner SCHT – PH Nursing Service Manager	Training needs analysis to be undertaken.
Improve the quality of the 2-2.5 year development review: Health Visitor guidance for completing the 2-2.5 year development review, including guidance for Rio reporting	Ensure consistent offer to families and families receiving the right support at the right time. Accurate reporting.	LA – PH Commissioner SCHT – PH Nursing Service Manager	Health Visitors deliver targeted and specalist 2-2.5 year development reviews. Health Visitor engagament to take place and guidance developed for Health Visitors.

Maximise the impact of 2-2.5 year checks *continued*

Priority action	Measures of impact	Lead organisation/group	June 2026
Improve the quality of the 2-2.5 year development review: Training needs analysis for Health Visitors.	Training to meet the needs of staff and ensure a high standard, consistent offer to families.	LA – PH Commissioner SCHT – PH Nursing Service Manager	Training needs analysis to be undertaken.
Support and empower families – distribute or signpost to the ERIC potty training leaflet at development reviews, and promote at the well baby clinics.	Myth busting with parents on potty training and consistent advice to all families.	LA – PH Commissioner SCHT - PH Nursing Service Manager	The ERIC potty training leaflet is to be introduced at the 12 month development review, and covered again at the 2-2.5 year development review with families.
Support and empower families – explore opportunities to further share public health messages as part of development reviews.	Accurate and consistent advice to all families.	LA – PH Commissioner SCHT - PH Nursing Service Manager	To explore with partners (for example, Education and Family Hubs) opportunities to share public health messages possible platforms or Padlett's to share information with families.
Support and empower families – distribution of Brushing for Life packs (toothbrush, toothpaste and health promotion leaflet) during 2-2.5 year development check.	Accurate and consistent advice to all families. Number of packs distributed.	LA – PH Commissioner SCHT - PH Nursing Service Manager	Ensuring practitioners give the packs out to families.
Develop clear system pathway of support for children and families following the 2-2.5 year review outcome.	Provide key development messages to families and systematically offer earlier intervention and signposting to approved interventions.	LA – PH Commissioner SCHT - PH Nursing Service Manager	Reviewing pathways across all three LA's, but need to create a pathway working with local partners, based on exisitng child development pathways and local services.

Develop and raise awareness of our universal offer – GLD focus

Priority action	Measures of impact	Lead organisation/group	June 2026
Continuation of the Family Hub Parenting Together which focuses on attachment, communication and reciprocity to support development of early language .	Number of families completing Parenting together.	LA – Family Hubs Group Manager	Over the 12-month period, 276 referrals were received, evidencing strong and consistent demand for services that support children and families to achieve the best start in life. The highest proportion of referrals was within the 6-11 age group (42%), followed closely by 0-5 years (38%), with 12-18 year olds (20%) making up a smaller but important cohort. This reflects a clear focus on early intervention and support during critical developmental stages, particularly across early years and primary age children. Session time preferences were well distributed: • Afternoons (34%) • Mornings (32%) • Evenings (27%) • No preference (7%) This demonstrates the importance of a flexible and accessible offer, ensuring families can engage at times that suit their routines. The strong demand across mornings and afternoons supports delivery aimed at younger children and families, while evening provision enables access for working parents, ensuring no barriers to early help. Summer Term 2025/26 (to date) shows a notable increase in both morning (37) and afternoon (36) attendance, alongside continued high evening engagement (32). This suggests improved reach, increased confidence in services, and strengthening relationships with families.

Develop and raise awareness of our universal offer – GLD focus *continued*

Priority action	Measures of impact	Lead organisation/group	June 2026
Development of Wellington Family Hub and outreach post at Newport to provide a local partnership building for delivery of GLD activities including talking to your baby and the new BSIL DfE activities.	Expansion of offer to more parents. Increase in family Hub users from those with English as an additional Language.	LA – Family Hubs Group Manager	Wellington Best Start Family Hub has progresed and capital programme development has now started – antiicipated opening late Sept 2026.
Family Hubs campaign in Telford Town Centre and Social Media promoting the services available for parents.	Increase in Reach and awareness of Family Hubs.	LA – Family Hubs Group Manager	Quotes are being sought for sponsored social media and Electronic screens in Town Centre. The communications Plan has been scheduled into Graphic Design and three Public Health themes selected – Oral Health, Screen Time and Immunisations alongside the Community Based Early Help Offer.
Expansion of Health Visitor Drop-in clinics across Telford and Wrekin, and at Family Hub Events.	Increase the reach of universal Health Visitor contact. Increase in ASQ completion.	SCHT – PH Nursing Service Manager	There are Health Visitor baby weigh drop- in clinics across Telford & Wrekin and appointed clinics for families to access.
Deliver Making it Real home learning intervention training for all settings and schools.	Attendance at training parents voice captured via pre and post questionnaire.	LA – Early Years and Childcare Team Leader	Adapting session to become more accessible for settings in line with NCB guidance, Autumn term new approach will be delivered.
GLD universal offer will ensure children and families receive the right support at the right time. This includes the involvement of SEND Best Start Inclusion Practitioners, who will provide timely, responsive support and adapt interventions quickly as needs change.	Recruitment of SEND Family Hub Practitioners. Number of children and families seen by Family Hubs especially those with emerging SEND needs	FH	Best Start Family Hubs Delivery Grant has been passed by Director for Public Health and is being signed off by Jo Britton on 5th June for timely submission. Any new projects including BSIPs are waiting for approval by DfE and the Start for Life Govenement unit. 4.5 posts have been written in, 1.4 per loclaity or 20 hours per hub.

Develop and raise awareness of our universal offer – wider prevention

Priority action	Measures of impact	Lead organisation/group	June 2026
Building on the success of the TWIPP Healthy Conversations campaign and branding launch, continue to raise awareness for 0-5s and older children (who may have younger siblings too young to have been vaccinated), continue to support EYS and schools both proactively and reactively on infectious disease control.	Increase overall coverage childhood routine and seasonal immunisations in vaccination schedule, particularly MMR.	LA - Health Protection Hub	Regular vaccine educator attendance at Family Hubs and similar community groups to discuss MMRV and other vaccine/health issues. Provison of accesible MMR clinics in the community at convenient times/places including education settings. Clinics preceded by information materials and offers of discussion and support for parents/carers. Promotion of vaccinations through social media and information to parents/carers via schools and EYS. Working with South East Telford Primary Care Network to help them with their project to increase vaccine uptake in 0-5 year olds. Support for EYS with outbreaks and cases of infectious disease to minimise the impact, severity of illness, further disruptions to education and help protect vulnerable children. Proactive provision of information and resources to help settings and parents/carers prevent infectious disease. Production of a bespoke H&S guide for EYS to help them manage H&S effectively and reduce accidents and ill-health. Training session for EYS on H&S. H&S inspections of EYS.
Expand the Brilliant Brushers (Supervised toothbrushing) scheme.	Increase in the number of early years settings participating in the scheme. Increase in the number of children participating in the Brilliant Brushers supervised toothbrushing scheme.	Clare Williams (Public Health Commissioner) Healthy Smile Team, Shropshire Community Health Trust	Currently 33 early years settings participating in the Brilliant Brushers supervised toothbrushing scheme and 2000 children toothbrushing daily.

Develop and raise awareness of our universal offer – wider prevention *continued*

Priority action	Measures of impact	Lead organisation/group	June 2026
Promote the Early Years and Schools Health and Wellbeing Toolkit to provide signposting to information and resources that encourage physical activity and healthy eating.	Toolkit Early Years and Schools Health and Wellbeing usage e.g. number of clicks, % engagement. Case Studies provided.	Senior Health Improvement Practitioner (Healthy Weight)	Early years resources have been added to the Schools Health and Wellbeing Toolkit – an online platform packed with information and resources that professionals working with children and young people can use: Health and Wellbeing Toolkit The most downloaded resource currently is the School Food Standard Early Years Checklist
5 by 5 – Continue to promote and embed the 5 by 5 programme across Family Hubs, libraries, parks and early years settings	Website usage (unique visits, page views) and Adventure Card downloads. Survey responses and social engagement. Attendance at 5 by 5-badged sessions. % parents reporting their child has tried adventures.	Telford & Wrekin Council (Education and Family Hubs) with partners: Libraries, Parks, Early Years providers, Health Visiting, Community & Voluntary sector	Programme live, providing families with simple, low/no-cost activities to support school readiness. Focus on five themes (development, communication, friendships, curiosity, and connections). Strong partnership delivery with early years settings, schools, family hubs and community organisations. Next Steps Increase parent/carer engagement and uptake. Embed delivery across all early years providers and partners. Strengthen links to the 10by10 programme. Monitor impact and refine offer.
Telford and Wrekin to collaborate in a 12-month pilot to co-develop a nurse led pre-conception education programme, training the workforce to enhance reproductive health and reduce disparities across Shropshire, Telford and Wrekin.	Increased levels of participation within the local community.	ICB Women's Commissioner	A Burdett-funded preconception pilot is training nurses as professional educators to raise the importance of preconception, further recruitment of nurses will take place in Telford and Wrekin

Develop and raise awareness of our universal offer – wider prevention *continued*

Priority action	Measures of impact	Lead organisation/group	June 2026
Bounce and Rhyme – We are increasing the number of sessions taking place across the borough particularly in the south. This will be a mix of staff and volunteer led sessions. National Year of Reading – We are focussing on using this year to increase membership and usage of libraries particularly across target groups of under 1s, boys and disadvantaged families. This includes a Summer Reading Challenge.	Increased levels of participation within the local community.	Library Services – Amy Jones	Postcodes for sessions to be added in. Number of sessions. New session in march 26 in Stirchley, possibility of external sessions from autumn onwards (FH funding). predom south Telford. Southwater and Wellington x2 and Stirchley current sessions. Newport. National year of reading – summer event. Linking the website content to other areas (FH)
Continuation of the school nursing service, supporting children and young people with physical and emotional well-being, and delivering the National Child Measurement Programme (NCMP), school drop-in services, and transition support into educational settings.	Continuation of the universal school nurse contract.	LA – PH Commissioner SCHT – PH Nursing Service Manager	The universal offer by the school nursing service is ongoing.

Expand Targeted Support

Priority action	Measures of impact	Lead organisation/group	June 2026
Triple P Stepping Stones to be offered at Cherry Blosom Family Hub.	Number of parents who complete Triple P Stepping Stones training.	LA – Family Hubs Group Manager	Parenting for SEND: Stronger together (Triple P Stepping Stones/Making it Real) in partnership with PODS. This is currently running with good attendance and feedback from Parents. We are working with Nesta (Research and Innovation Foundation) to strengthen Parental engagement and adherehence to maximise impact.
Identification and Support of SEND children not accessing childcare places.	Reduction in children who arrive at school without having attended nursery.	LA – Early Years and Childcare Team Leader and SEND Project Lead	Children entering school September 2026 have been identified and support has been put in place. Team are now working with 40 children due to start school in September 2027 to find a childcare place and/or support needs of child and family.
Develop clear pathways of referral support for different groups not reaching their milestones.	Increase the number of children receiving tailored support.	Family Hubs/Integrated Neighbourhood team	Pathways work will be developed by the new integrated neighbourhood team.
Continue the vaccination inequalities programme to target the work of the Vaccine Educator in education settings to improve health literacy and run accessible vaccination clinics in community, school and Early Years settings.	Increase number of children and parents receiving vaccine education session. Increase the number of accessible pop up and catch up clinics in community, EY and education sessions in low uptake areas.	Health Protection Hub, Community Pharmacists	Work to increase health literacy around HPV and MMR vaccinations has been ongoing with both children (HPV) and parents/carers (MMR), focussed on areas with low uptake and multiple deprivation. Contractual arrangements have been put in place to allow the Council to employ pharmcists to run clinics in the community. Accessible MMR clinics have been held in schools and nurseries to offer a convenient route for parents to get children vaccinated.
Establish innovative multi-disciplinary team (MDT).	Number of children supported by the MDT.	LA – Family Hubs Group Manager	School Readiness MDT/Neighbourhood Health has been written into the SEND strand of the Best Start Family Hub Delivery Plan and work has been progresse with Helath and SEND colleagues to ensure alignment and fidelity to best practice and Experts at Hand model.
Health Notifications, utilised effectively to identify where children are not accessing EY provision. Target to enable early intervention and to get the right support at the right time for reception.	Data capture number of children and outcome of interventions.	LA – Early Years and Childcare Team Leader	Health notifcations have been updated and now provide better information to target needs. This links to row three.

Expand Targeted Support *continued*

Priority action	Measures of impact	Lead organisation/group	June 2026
EYFSP data used effectively to identify schools and linked settings where children have low GLD. Identify Early Learning Goals to target schools/settings to offer support and focused CPD	Increased numbers of children achieving GLD in specific areas. Numbers of schools/settings accessing GLD.	LA – Early Years and Childcare Team and Insight Team	EYFSP data to be returned by schools and data assessed and compared to 2025 data to support intervention.
Early Years and Schools Health and Wellbeing Programme implementation (settings will receive support to complete a self-assessment audit, staff workshop, and action plan).	Number of targeted early years and school settings signed up to the programme. Reduction in overweight and obesity prevalence of Reception aged pupils.	Senior Health Improvement Practitioner (Healthy Weight)	Seven schools and one specialist education college have signed up to the targeted programme. Six have completed a self-assessment audit, four have taken part in a staff workshop. This is to be rolled out to early years settings late 2026. Three early years settings will be identified and targeted using GLD, obesity and deprivation data.
Healthy Families Programme. Provide targeted support to children, and their families, whose BMI centile is above a healthy weight through a 12-week behaviour change programme to embed healthy habits.	Reduction in overweight and obesity prevalence of Reception aged pupils, Number of children and families signed up to the programme. Number of families achieved goals set.	Senior Health Improvement Practitioner (Healthy Weight)	73 families accessed the 12 week Healthy Families programme in 2025/26. The Healthy Families team have supported the Schools Health and Wellbeing Programme and delivered a pilot peer support programme in a targeted school – equipping selected peer champions with knowledge and skills to improve healthy eating and physical activity among their peers.
Take up of Free Education and Childcare for 2 year olds if you get Extra Support. (Talking 2s in Telford).	DfE measure is met 74% expectation or exceeded. Report cards issued.	LA – Early Years and Childcare Team Leader	Awaiting latest score card from DfE lastscore 71%.
HAHH (HAF) to develop programme across each school holiday period and to bring together Wrap Around and HAF DfE programmes together to develop extended childcare offer for all children.	Number of children attending HHAH provision. Number of settings offering extended childcare across the LA.	LA – Early Years and Childcare Team Leader	Summer programme is about to be launched across the year we have 70 HHAH providers operating. We will start to offer October and February provision alongside Summer, Christmas and Easter Delivery. WA, HHAH, Breakfast Club and Youth provision are now working alongside each other to support Extended childcare of a high quality and where children and young people are safeguarded effectively.
Bookstart Age under 2 and 3s.		Lisa Seymour	Packs delivered to registery office for new borns. Toddler and pre-school packs are distributed to setting sbased upon area of disadvantage.
Increase the uptake of the Healthy Start scheme.	Increasing the uptake of the Healthy Start scheme amongst eligible families.	LA – PH Commissioner SCHT – PH Nursing Service Manager	Review of current Healthy Start scheme offer and pathways.

Speech Language and Communication (SLCN)

Priority action	Measures of impact	Lead organisation/group	June 2026
Early Years talk boost training and resources are available each year to support children's speech and language communication.	Number of staff trained. Number of setting delivering targeted intervention. Impact of intervention.	LA – Early Years and Childcare Team Leader	107 individuals trained/302 groups run Impact on slides provided.
Work up the proposal for 2-year continuation of ELSEC model including support for Early Years Settings to deliver Universal, Targeted and Targeted + interventions including Communication Audits, TalkBoost, Concept Cat, BEST and Early Narrative.	Number of staff trained. Number of setting delivering targeted intervention. % rates of referrals to SLT reduce for this age group/by population. Impact of intervention.	LA – SEND Support Service. ICB. ELSEC Team within the LA/SCHT	10 SLCN Practitioners within Telford and Shropshire, delivering to 14 settings in Wave w and 13 settings in Wave 2. Data collated between LA/Health. SEND Reform plan for TW includes continuation of ELSEC through a locality model of work. Will be rolled out from Sept 26.
Making SLT more accessible: improving referral form, providing advice line and reducing waiting times.	Number of children in EY referred to SLT. Number of children's referrals to SLT rejected as not appropriate. Waiting times and trends for childrens SLT. Number of children referred to SLT Advice line. Feedback about the quality of Advice	Children's SLT and Early Years settings	Kirsty English (Sally Newton). A similified more accessible referral form has been developed with feedback from referrers and triaging and SLTs providing assessment. An MS Teams version of the referral form is being considered alongside systems which will speak directly to the child's electronic patient record (EPR). A decision about those options is expected summer 26. Go live with amended referral form following feedback for Sept 26 and move to full digital referal system which speaks to EPR from Jan 27 following approval and procurement. Numbers of referrals to children's SLT all ages 2025/26: 2000 (STW data) Numbers of referrals rejected by children's SLT all ages 2025/26: 180 (STW data) Number of referrals to Children's SLT Advice Line all ages 2025/26: 592 (STW data) Numbers of EY (0-48 mths) children referred to children's SLT 2025/26: 1056 (STW data) Waiting times: Longest wait June 26: 48 weeks (Telford)

Speech Language and Communication (SLCN) *continued*

Priority action	Measures of impact	Lead organisation/group	June 2026
Integrating 'how to…' advice given across the system to parents and early years settings re SLCN goal setting and early intervention for children with complex or additional needs.	Completion of an extended early years 'Blue Book' of advice and 'how to…' guidance. Early Year setting satisfaction and confidence in using this tool.	SLCN system workstream	The links are Sally Newton, SLT Advanced Practitioner and Lisa Seymour Telford LA Early Years. Aiming for staggard launch and roll out. Schedule TBC following a series of meetings to moderate the evidence base of the content, use of Neuro affirming language and accessibilityof the resources currently identifed (>400) summer 26. Piloting with stakeholders of first moderated resources, including parents and early years settings from Sept 26. Amendements to resources that have not met agreed crieteria from Jan 27. Gap analysis of areas of development and function where there are insufficent resources for parents and settings and a plan to develop these March 27.
Align Best Start Family Hubs messaging about SLCN across all service commissioners and providers.	Number of public health campaigns , Feedback about the campaign impact.	Family Hubs	SLCN Messaging, including screentime has been included in the year long Best Start Family Hub campaign. Quotes are being sought for sponsored social media and Electronic screens in Town Centre. The communications Plan has been scheduled into Graphic Design and three Public Health themes are currently selected – Oral Health, Screen Time and Immunisations alongside the Community Based Early Help Offer.

Becoming Data and Intelligence-led

Priority action	Measures of impact	Lead organisation/group	June 2026
Create a headline GLD report to describe out local picture.	Ensure starting position is clearly understood and all plans refer to the same data.	LA – Insight Team	Completed and headlines included in Best Start in Life plan.
Undertake detailed multi-variate analysis of GLD data – birth month, ethnicity, school, deprivation, gender, SEND needs.	Targeted interventions can be evidence based, ensuring children get the best support based on their needs.	LA – Insight Team	Completed for 2025 academic year data and findings shared with BSIL Board. Analysis will be undertaken again following the collection of 2026 GLD assessments during the summer.
Bring together wider data and intelligence to inform a Best Start in Life JSNA product.	A clear understanding of all data and intelligence.	LA – Insight Team	Best Start in Life already a chapter of our JSNA products – this will be expanded to cover the wider requriements and aligned to the BSIL Plan measures.
Explore options to have a detailed analysis of 2-2.5 year checks or linkage of child-level data.	Better understanding of circumstances affecting a child's outcomes enables evidence based interventions.	LA – Insight Team and PH Commissioner	Working group in place to explore the options for legally sharing child-level data to enable detailed analysis. Further options to undertake separate analysis of different cohorts of children also being explored if child-level linkage is not possible.
Continue to use data to target wider prevention/ public health interventions – vaccination coverage and NCMP.	Target vaccine educator and pop up vaccine clinics in low uptake areas. Target health families team interventions to settings with highest prevalence of excess weight.	Senior Health Improvement Practitioner (Healthy Weight) LA – Health Protection Hub	HPH – data is continually used to inform education and clinic provision around vaccinations, for example for winter vaccinations fortnightly updates were provided by ICB analysts which guided where we focussed our work. NCMP – 221 families of reception aged children who are above healthy weight contacted via phone/ email/ text and offered Healthy Families programme. Only 8 families engaged with the programme. 541 families of year six aged children who are above healthy weight contact commenced February 2026. 13 families so far engaged with the programme.

Monitoring and tracking progress

We will monitor the successful delivery of this plan primarily using the indicators below. This performance framework will form part of our wider monitoring of outcomes for all children and young people in the borough, including monitoring of the Health & Wellbeing Board strategy, the Children & Young People's Strategy, detailed outcome monitoring to a number of partnership boards, as well as through the Local Outcomes Framework and delivery of the Council's Priorities.

Indicator	Year	Latest value	National average
% achieving GLD at age 5 – First Language is not English	2024/25	60.3%	
Achievement across EYFSP area of learning – physical development	2024/25	84.6%	84.7%
Achievement across EYFSP area of learning – expressive arts and design	2024/25	83.7%	85.1%
Achievement across EYFSP area of learning – personal, social and emotional development	2024/25	82.6%	83.1%
Achievement across EYFSP area of learning – understanding the world	2024/25	78.6%	80.4%
Achievement across EYFSP area of learning – communication and language	2024/25	77.9%	79.5%
Achievement across EYFSP area of learning – mathematics	2024/25	76.0%	77.6%
Achievement across EYFSP area of learning – literacy	2024/25	69.0%	70.5%
ASQ-3 at the 2-2.5-year health review: % achieving expected level of development – communication	2024/25	76.0	87.6
ASQ-3 at the 2-2.5-year health review: % achieving expected level of development – gross motor	2024/25	86.3	93.6
ASQ-3 at the 2-2.5-year health review: % achieving expected level of development – fine motor	2024/25	81.4	93.7
ASQ-3 at the 2-2.5-year health review: % achieving expected level of development – problem solving	2024/25	83.5	93.0
ASQ-3 at the 2-2.5-year health review: % achieving expected level of development – personal-social	2024/25	80.8	91.8
Percentage of children with a good level of development at 5 years old (LOF)	2024/25	67.3%	68.3%
Percentage point difference between the proportion of children eligible or not eligible for free school meals achieving a good level of development (LOF)	2024/25	21.1	21.3
Percentage of children achieving good level of development at 2-2.5 year review (LOF)	2024/25	64.3	81.4
Take up rate of 2-year-old disadvantage childcare offer (LOF)	2024/25	69.8	66.6
Take up rate of the 3-4 year-old 15 hour childcare offer (LOF)	2024/25	95.5	92.9

Monitoring and tracking progress *continued*

Indicator	Year	Latest value	National average
% achieving GLD at age 5 – gender	2024/25	Girls 74.4% Boys 60.6%	
% achieving GLD at age 5 – FSM	2024/25	50.6%	51.3%
% achieving GLD at age 5 – SEN without Statement/EHCP	2024/25	29.1%	26.4%
% achieving GLD at age 5 – Ethnicity	2024/25	White 68.9% Mixed 68.6% Asian 56.5% Black 64.4% Chinese 87.5% Other Ethnic 66.7%	White 69.7% Mixed 69.9% Asian 67.7% Black 62.9% Chinese 78.8% Other Ethnic 60.0%
% achieving GLD at age 5 – term of birth	2024/25	Autumn 75.5% Spring 71.0% Summer 58.5%	

Views from our Best Start In Life Partners

From a social work perspective, supporting children to achieve a Good Level of Development means understanding the whole child within their family, culture and community. A best start in life recognises that children thrive when early support is inclusive, culturally responsive and built on strong, respectful relationships with children and their families. This includes ensuring access to early, coordinated support that recognises individual needs and is responsive in creating the best opportunities for children to grow, develop and reach their potential.

Louise Spragg
Principal Social Worker,
Head of Service for Practice

Maternity and Neonatal Voices Partnership (MNVP) are important for good level of development because they ensure families receive safe, responsive, and culturally sensitive care from the very start of life. When women, birthing people, partners, and neonatal families are listened to their lived experiences shape service improvement, local systems are better able to meet needs early, reduce inequalities and strengthen the foundations that support healthy child development. MNVP's are the 'boots on the ground' feedback loops that ensure this foundation is solid.

Maria Howe
Maternity and Neonatal Voices Partnership (MNVP) Strategic Lead

Childminders are important for Good Level of Development (GLD)because they provide consistent, nurturing early learning experiences that support children's social, emotional, language, and cognitive development, helping to build the strong foundations needed for school readiness; their smaller group sizes also allow more individual attention, which can be particularly beneficial for children with SEND, enabling more tailored support and responsive care.

Cindy Hayden
CallumBear Childminding

At our school, we focus on developing great communicators, with a strong GLD outcome in Reception, we are building the foundations for lifelong success.

Mrs E Solomon
Head teacher
Wombridge Primary School

Good oral health contributes to a child being able to reach a Good Level of Development at the end of Reception. Dental Pain and untreated tooth decay can affect a child's ability to eat, sleep, concentrate, speak and socialise with confidence, all of which are essential for learning and engagement in Nursery and Reception. Children who are free from dental pain are able to participate fully in activities, communicate effectively, develop social skills and establish routines. By providing professionals and families with evidence-based, up-to-date advice and support from infancy, we help prevent pain and reduce health inequalities, ensuring every child is ready to grow, learn, and thrive as part of a strong, shared Best Start in Life.

Jill
Oral Health Improvement Service Lead,
Healthy Smile Team
Tom
Clinical Director, Community Dental Service

Nurseries support children to transition to school by developing happy, kind, confident, all-rounded children who are eager to learn.

Theresa Ewin
Playdays Childcare Newport

Views from our Best Start In Life Partners *continued*

At Home-Start Telford & Wrekin, we see every day how early support within the home environment, and through our groups, can transform a child's start in life. By strengthening family wellbeing, and encouraging positive and nurturing routines, we support the development of secure foundations children need to achieve GLD and flourish within their Early Years.

Amy Moss
Scheme Co-Manager

The Health Visiting, School Nursing and Family Nurse Partnership service play a vital role in supporting a good level of development by delivering the universal Healthy Child Programme, focusing on early intervention to prevent, identify, and address developmental or health concerns.

Sam Garratt
Public Health Nursing Service Manager
Telford & Wrekin

In our school, GLD represents the point at which children have developed strong foundations that prepare them confidently for the next stage of their education. GLD provides essential data because it reflects children's communication, social, emotional and physical readiness, alongside their early knowledge acquisition, which forms the basis for assessing progress from Year 1 onwards. Without these wider elements, children would not be fully prepared to access the national curriculum.

Carol McQuiggin
Headteacher
Lawley Primary School

Dental pain and untreated tooth decay can affect a child's ability to eat, sleep, concentrate, speak and socialise with confidence, all of which are essential for learning and engagement in Nursery and Reception. Children who are free from dental pain are able to participate fully in activities, communicate effectively, develop social skills and establish routines. By providing professionals and families with evidence-based, up-to-date advice and support from infancy, we help prevent pain and reduce health inequalities, ensuring every child is ready to grow, learn, and thrive as part of a strong, shared Best Start in Life.

Jill
Oral Health Improvement Service Lead
Healthy Smile Team
Tom
Clinical Director
Community Dental Service

PODS (Parents Opening Doors) are important for GLD because Special Educational Needs and Disabilities make it harder for a child to learn or access education compared to their peers of the same age. The GLD for children with SEND is based on a "graduated approach" tailored to specific needs with our support, mainstream schools and other professional involved in a multidisciplinary health team.

Kelly Lord
Perinatal & Infant Support
Co-Ordinator PODS
(Parents Opening Doors)

Views from our Best Start In Life Partners *continued*

As a Systemic Practice Team our work supports by strengthening relationships, improving emotional wellbeing, and supporting secure attachments within families. By helping families understand patterns of interaction, repair relationships, and create safer, more nurturing environments, we contribute to the foundations children need to develop emotionally, socially, and physically, supporting their readiness to learn and thrive as they grow.

Daniel Machin
Clinical Lead and Systemic Team Manager

Having GLD in SLCN means children have a solid start in life. Being able to communicate is one of the fundamental principles that underpin early child development, with children's back-and –forth interactions from an early age forming the foundations for language and cognitive development. This begins in the home as a baby and continues throughout life as we grow and develop into adulthood. Achieving GLD in Communication and Language, one of the prime areas of learning, unlocks the potential to learn successfully alongside peers, supports the development of friendships and relationships and improves life outcomes. For example, research tells us that children with poor vocabularies at 5 years of age had worse outcomes than typically developing peers at 34 across a range of life measures including education, employment and mental health.

Joanne Preston
ELSEC: Advanced Practitioner for Education

Tracking GLD for Reception children in school is important as it ensures that staff are able to articulate those children who have mastered the essential foundational skills for future learning, and quickly identify those who require additional support to fully thrive in school. Working in this way nurtures the habits, skills, and mindsets that enable all learners to thrive as lifelong learners.

Jo Duncombe
Headteacher
Woodlands Primary School

Telford & Wrekin Co-operative Council

Protect, care and invest to create a better borough

Borough of Telford and Wrekin

Cabinet

Thursday 16 July 2026

Better Buses in Telford & Wrekin - Update

Cabinet Member:	Cllr Ollie Vickers - Cabinet Member: Jobs, Transport & Digital Connectivity
Lead Director:	Dean Sargeant – Director: Neighbourhood & Enforcement Services
Service Area:	Neighbourhood Enforcement
Report Author:	Matt Powell – Head of Service: Strategic Transport & Highway Network Management
Officer Contact Details:	**Tel:** 01952 384000 **Email:** matt.powell@telford.gov.uk
Wards Affected:	All Wards
Key Decision:	Not Key Decision
Forward Plan:	18 June 2026
Report considered by:	SMT – 16 June 2026 Business Briefing – 25 June 2026 Cabinet – 16 July 2026

1.0 Recommendations for decision/noting:

It is recommended that Cabinet:

1.1 Note the continued improvements in bus travel and connectivity across Telford and Wrekin over the last two years that comprises:

- The provision of six new bus routes, that have now completed 1million passenger trips
- £2 fare cap across the borough (£1 for under 19's) as part of the Council's wider commitment to provide cost of living support to our residents
- Infrastructure improvements including new bus shelters

- Improved journey experience through development of the ‘Citymapper’ app
- Introduction and expansion of the Travel Telford ‘On Demand’ bus network
- Delivery of two electric buses

1.2 Note the continued investment in our bus network made possible by recent government funding, Council investment and user of developer funding to bring forward improvements.

1.3 Delegate authority to the Director Neighbourhood & Enforcement Services, in consultation with the Cabinet Member for Jobs, Transport & Digital Connectivity to take necessary steps to continue to evolve the bus network in Telford and Wrekin. In doing so, ensure the evolution continues to be founded on resident and user feedback to ensure affordable, reliable and well connected bus services are bought forward.

1.4 Delegate authority to Director: Policy & Governance to execute any legal documentation required to facilitate and implement the recommendations within this report.

2.0 Purpose of Report

2.1 The purpose of the report is to provide an update on the council’s continued focus on improving bus travel and connectivity across Telford and Wrekin while seeking approval to procure and develop new bus services (where required) to ensure the bus network remains fit for the future.

3.0 Background

3.1 Telford & Wrekin Council is committed to providing a better-connected and affordable bus network, linking residential, leisure and employment sites in line with the Councils Vision for 2032. Well-connected transport links borough towns with key education, employment and shopping destinations while helping to ease congestion and reduce carbon emissions.

3.2 In 2021, The National Bus Strategy for England was published and sought to transform the quality of bus services across the country. In 2024 government committed to providing greater powers locally for bus services; as transport authority, the council has a pivotal role in bringing forward positive change to the bus network. This change is underpinned through the council's commitment to partnership working.

3.3 Cabinet at their October 2021 meeting approved the creation of an Enhanced Partnership; at the same meeting, Cabinet received an update on the development of a Bus Service Improvement Plan (BSIP) as required by the National Bus Strategy. Telford and Wrekin entered into an Enhanced Partnership on 1st April 2022 that seeks to bring together the council, bus operators and user groups with a focus on increasing patronage, improving services and delivering transformation.

3.4 The Bus Service Improvement Plan sets the vision for the bus network in the borough, it is updated in line with the Department for Transport (DfT) guidelines and timescales and published on the council's website.

3.5 Within the Bus Service Improvement Plan, the council has prioritised developing an affordable, reliable and well-connected bus network. To deliver on these priorities, the following commitments have been made:

- Introduction of £2 fare scheme – complete
- Introduction of improved journey time planning services via Citymapper – complete
- Continued evolution of Travel Telford Bus Services – ongoing
- Delivery of Bus Shelter improvements/infrastructure – over 90 installed to date with more planned
- UK's first off-grid bus station (recognised with a DfT Excellence Award)
- Real time travel information - screens installed with more planned
- Implementation of EV fleet - ongoing

3.6 Bus services in the borough are currently operated in two ways, firstly on a commercial basis by private bus operator(s) and secondly under contract to the Council as a supported bus service(s). With the commercial network, the Council works with private operators to drive continuous performance and improvement but has no direct control over the services. However, with the supported network the council has increased control through contractual management processes.

3.7 In delivering on the vision and commitments outlined within the Bus Service Improvement Plan, in 2022 the council undertook detailed engagement with residents to understand the challenges and barriers regarding bus travel. At the time, the survey informed the design of new bus routes which largely focused on improving connections from residential areas to employment, health and education, providing connections in rural areas and delivering affordable reliable services.

3.8 On analysis of the survey information, the council bought forward six new bus routes with the first launching in December 2022. Starting with the 100 (known locally as the work express) this efficient route connects residential areas including Sutton Hill, Woodside and Brookside with employment sites at Hortonwood, Halesfield and Stafford Park. Operating from 5am to 11pm seven days a week, this service currently averages 13,800 passenger trips a month and continues to grow. The other five services improve connectivity in rural areas linking Newport and Wellington as well as urban services linking Lawley/Lightmoor with the Town Centre and Wellington.

3.9 If the council had not taken action in 2022 and delivered new routes as outlined, large areas of the borough would have seen a loss or reduction of bus routes. This would have resulted in much of the urban area outside of the main borough towns and areas of south Telford along with the entire rural area to the north of the borough would have had no bus services. As a result of route development and investment by the council, the council replaced older failing routes with new routes

designed with communities and passengers in mind to improve connectivity and reliability of bus services across the borough.

3.10 Since launch, these six services have now completed over 1,000,000 passenger trips.

3.11 Cabinet will recall at their January 2025 meeting, approval was given to secure the provision of new services from July 2025 onwards. Following a bus network review, in July 2025 the six services were re-tendered. These reconfigured services were codeveloped with using feedback from residents and knowledge of the effectiveness of the services to date.

3.12 Since July 2025, the new services have completed over 350,000 passenger trips compared to 290,000 trips during the corresponding period a year before. This represents a 21% increase in patronage and is a clear demonstration of the continued growth in bus travel and the councils commitment to improving connectivity and service reliability for residents.

3.13 From the start in 2022, the Travel Telford bus routes were developed with a fare structure of £2 for adult and £1 for child per journey. In May 2026, this fare cap was extended to all bus routes that start and end in the borough. This fare structure now places bus travel in Telford and Wrekin among the most affordable in the country as part of the Council's wider commitment to provide cost of living support to our residents.

3.14 The Council continues to consider future schemes to support our residents, and are currently considering options around a potential future scheme to support travel for care leavers.

3.15 Resident feedback confirms that reliable and up to date information on bus services is very important. This has directly informed the investment into on-street real-time information screens at key locations along with the roll out of the Citymapper app. The Citymapper app allows users to obtain specific real-time information on the journeys wherever they are and has so far seen 2045 users sign up. The council continues to promote the use of the app with plans being developed to provide more information on how to access it at bus stops.

3.16 The council continues to work with bus operators and partners to improve safety on buses as well as routes to bus stops. To date, this has comprised mandatory fitting of CCTV on all vehicles, regular police patrols on routes and street lighting improvements on walking routes. This focus supports the council's commitment to tackling violence against women and girls (VAWG).

3.17 To add to the existing bus network, the council launched the On Demand bus service in The Gorge Parish area in early 2025. Initially operating as a pilot, this travel offer provides transport links across the Gorge into Madeley and the Town Centre. The On Demand service continues to expand and now operates in Horsehay and Lightmoor, and most recently Telford College. Further expansion is planned along with increasing awareness of this affordable and flexible service.

3.18 This year, the park and ride service for Ironbridge Gorge has been expanded to provide links to other destinations in the borough from July through to September. Starting in July the new summer bus service trial will operate to make it easier for residents and visitors to travel between Ironbridge Gorge, Wellington and The Wrekin. The new service will operate during weekends and Bank Holiday Monday providing affordable links between visitor destinations as well as providing free parking at the Ironbridge Gorge park and ride.

3.19 Going forward, the council will continue to evolve the bus network across the borough to improve connectivity and confidence in bus travel. The council will continue to explore options for evening and night time services.

4.0 Summary of main proposals

4.1 The council has developed and delivered six new bus routes across the borough. These new routes have completed over 1,000,000 passenger trips since launch in December 2022 with fares capped at £2 for an adult and £1 for under 19s which is now among the lowest cost in the country.

4.2 Provision of the new services have been underpinned by resident survey's that were undertaken in 2021, 2022 and November 2024.

4.3 The Council continues to enhance and evolve the bus network across Telford and Wrekin that will be founded on resident feedback and data.

5.0 Alternative Options

5.1 The council is committed to delivering affordable reliable public transport for residents and businesses.

5.2 The Bus Services Act 2017 formerly prohibited the council from establishing its own bus company.

5.3 The council could choose not to continue new bus services, but this would result in the market only providing routes that are commercially viable. Not only would this reduce connectivity and productivity it would be preclude the provision of much needed services that do not provide a commercial return and leave a significant portion of the Borough without bus services.

6.0 Key Risks

6.1 There is a risk that current government funding structures could change. Should this occur, the council will explore options to maximise service provision within available budgets while seeking opportunity to secure external funding where possible e.g. through planning/developer contributions.

7.0 Council Priorities

7.1 Maintaining and procuring of new bus services supports the following priorities:

- Every child, young person, and adult lives well in their community.
- All neighbourhoods are a great place to live; and

- Our natural environment is protected – we take a leading role in addressing the climate emergency.

8.0 Financial Implications

8.1 The bus services detailed in this report continue to be funded though a combination of Government grant, developer contributions (Section 106) and existing budgets.

8.2 A multi-year allocation of Local Authoirty Bus Grant was announced in December 2025. A total of £5,047,995 of revenue funding has been allocated for the period 2026 to 2029, which will support the continuation of the bus services set out in this report.

8.3 In addition, £6,784,510 of capital funding has been allocated for the period 2026 to 2030. This funding will support investment in infrastructure improvements as outlined within the Bus Service Improvement Plan, including enhancements to bus stops, passenger information systems, and low-emission vehicles.

8.4 Whilst the confirmation of multi-year funding provides greater short- to medium-term certainty, there remains no confirmed revenue funding beyond 2029. As such, the longer-term sustainability of these services will require further consideration. The costs of maintaining and, where appropriate, extending bus services beyond 2029/2030 will need to be assessed alongside future funding opportunities, with any ongoing financial implications considered as part of the Council's Medium Term Financial Strategy.

9.0 Legal and HR Implications

9.1 The Bus Services Act 2017 formerly prohibited local authorities from establishing their own bus companies. This position has now changed with the passing of the Bus Services Act 2025 in October 2025 and specifically s.22.

9.2 If required, the council will procure new bus services in accordance with the contract procedure rules and applicable procurement legislation.

9.3 There are no HR implications arising from this report or the recommendations.

10.0 Ward Implications

10.1 This report impacts on all wards of the borough.

11.0 Health, Social and Economic Implications

11.1 Effective and efficient transport network provides the ability for independent travel. Bus travel reduces social isolation and connects communities from rural and urban residential areas with key education and employment destinations, as well as links to the Princess Royal Hospital.

11.2 Since 2022 the council operated bus routes have supported over 1,000,000 passenger trips; procurement of new routes will continue to support connectivity across the borough.

12.0 Equality and Diversity Implications

12.1 Buses improve connectivity and access for all, and maintaining good coverage across the borough supports this. Infrastructure such as bus stops and service information also support accessibility.

12.2 The £2 fare cap scheme further encourages accessibility to more people, combined with the continued operation of the English National Concessionary Fare Scheme for eligible users.

13.0 Climate Change, Biodiversity and Environmental Implications

13.1 Transport biggest carbon contributor in the borough. Per individual passenger, the average car emits 54% more tonnes of carbon dioxide when compared to the average bus. An effective and efficient bus network will support the councils plan to become carbon neutral by 2030.

13.2 To support the development of the new routes over the last two years, the council has installed 100 new bus shelters across the borough. These bus shelters are made from recycled plastic and in most cases use solar or wind to power lights and customer information screens. Use of this equipment saw Wellington bus station as the UK's first off grid bus station installed during 2022 which has received recognition nationally. The council will continue to install recycled shelters as part of the continued investment into improving bus travel across the borough.

13.3 The council has procured two electric buses that will go into service in the coming months once commissioned. The council will continue to explore the use of EV buses where appropriate and affordable. In the meantime, the council will continue to specify the latest emission standard vehicles to minimise the environmental impact and carbon emissions of their operations.

14.0 Background Papers

Bus Service Improvement Plan – Bus Service Improvement Plan (BSIP) - Telford & Wrekin Council

Better Buses in Telford and Wrekin – 6 January 2025 Cabinet Report

15.0 Appendices

None

16.0 Report Sign Off

Signed off by	Date sent	Date signed off	Initials
Legal	11/06/26	16/06/2026	ON
Finance	11/06/26	19/06/2026	PT
Director	05/06/26	19/06/2026	DRS

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Telford & Wrekin Co-operative Council

Protect, care and invest to create a better borough

Borough of Telford and Wrekin

Cabinet

16 July 2026

Customer Feedback Reports for 2025-26

Cabinet Member:	Cllr Zona Hannington – Cabinet Member: Finance & Resident Services
Lead Director:	Katherine Kynaston – Director: Housing, Commercial and Customer Services
Service Area:	Customer Relationships and Welfare Services
Report Author:	Lee Higgins - Service Delivery Manager: Customer Relationships and Welfare Services
Officer Contact:	Rebecca Zacharek - Customer Relationship Manager
Details:	**Tel:** 01952 383890 **Email:** rebecca.zacharek@telford.gov.uk
Wards Affected:	All Wards
Key Decision:	Not Key Decision
Forward Plan:	Not Applicable
Report considered by:	SMT - 16 June 2026 Business Briefing - 25 June 2026 Cabinet - 16 July 2026

1.0 Recommendations for decision/noting:

It is recommended that Cabinet:

1.1 Review the Customer Feedback Reports for 2025-26 in respect of Adult Statutory Complaints, Children's Statutory Complaints and Corporate Customer Feedback, and the Local Government and Social Care Ombudsman Review Letter 2026.

1.2 Note the positive performance highlighted in this report, including the continued increase in positive feedback, reduction in the average time to respond to complaints, growth in mystery customer volunteers and being the first council in

the UK to receive ServiceMark accreditation from the Institute of Customer Services for customer service excellence.

1.3 Restates its commitment for all directorates of the Council to provide an excellent customer experience in line with the vision and aims set out in the Customer Strategy 2025-2030.

1.4 Welcome the findings of this report and recognise the importance of robust open and transparent complaint handling and feedback processes that we have introduced for our residents.

2.0 Purpose of Report

2.1 The Council through its existing Customer Strategy is committed to work collaboratively with our customers to develop quality services that are accessible to all. In April 2025, Telford & Wrekin became the first Council to be awarded the Institute of Customer Service (ICS) ServiceMark reflecting our performance and continued ambition to listen to our customers and to drive further improvement. The assessor confirmed that *'Telford & Wrekin Council's commitment to service excellence is evident in its strategic direction, the engagement and motivation of its workforce and the effectiveness of its day-to-day service delivery'*. This accreditation fulfils the ambition set out in our 2021 Customer Strategy titled 'Our journey to excellence by 2025' and provides a platform for continual improvement and has shaped our new Customer Strategy. The Customer Relationship team has also been shortlisted for LGC Small Team of the Year award, which has focused on the team's role in developing and achieving positive outcomes for our customers.

2.2 Our last ICS benchmarking demonstrated that we were performing extremely well when compared with both other public and private sector organisations in relation to overall satisfaction and customer experience, net promotor scoring, demonstrating that an increasing number of our customers are likely to promote our organisation to others and customer effort score, the effort our customers must make to access our services.

2.3 The purpose of this report is to update Cabinet on the Council's customer feedback received between 1 April 2025 and 31 March 2026, to provide assurance that the Council is actively listening and responding to the views of our customers, and that services are learning from complaints and wider customer feedback to continuously improve.

2.4 The last year has seen a continued increase in the number of compliments received from customers, with complaints representing a very small proportion – of the many thousands of interactions with customers each year. As an early adopter and pilot authority for the Local Government and Social Care Ombudsman's new complaint handling code our speed of response has surpassed the forthcoming targets. We continue to offer multi-channel access, which is recognised by our customers.

3.0 Background

3.1 The Council has a well-established process for customers to tell us when things have gone well, and they have received an excellent service or when they need to raise concerns regarding the service they have received.

3.2 Our customers can also raise issues directly with the Council's Leader, Cabinet and Ward Members via our Cabinet and Member Enquiry processes, and via their local MP.

3.3 Our new Customer Strategy, which was launched in September 2025, reaffirms our commitment to putting residents at the heart of everything we do, while embracing new technologies. The strategy also expands our customer focus including the importance of feedback from children and young people, particularly when shaping the borough's future. We have also started to seek views beyond our residents including local businesses, tourists, and users of commercial services, recognising their vital role in the Borough's vibrancy and resilience.

3.4 As part of our established Customer Insight Programme, we have recruited Mystery Customers who help us to review our services from the customers' perspective, providing valuable feedback that allows our services to continually improve.

3.5 Compliments and positive feedback are shared across the Council and within teams, to inspire, motivate and build confidence and ensure that examples of best practice are used to help develop services.

3.6 To demonstrate a robust approach to responding to customer feedback and complaint handling, the Council produces an annual report on complaint handling for Children's Statutory Complaints, Adult's Statutory Complaints and Corporate Feedback. These reports can be found at Appendices A, B and C.

3.7 Our residents are continuing to experience the impact of ongoing cost of living pressures including increasing food and fuel prices. This is impacting upon almost every aspect of our residents' lives, including their health and wellbeing, their housing options and family life. In addition, the boroughs population is growing and aging which his resulting in the Council continuing to see significant demand, rising expectations and increased pressure on all its services.

3.8 In 2024/25 the Local Government and Social Care Ombudsman published their new complaint handling code. While not due to be formally monitored until 2026/27 Telford and Wrekin Council became early adopters of the code in May 2024 and have been working with the Ombudsman as part of a pilot of a small group of unitary authorities to assist in the development of guidance for Council's when using the code.

4.0 Summary of main proposals

4.1 Corporate Feedback Report (Appendix A)

4.1.1 The Highlights for 2025/26 are as follows;

4.1.2 The Corporate Feedback Report shows that there has been a sustained increase in compliments. The Council has seen a 182% increase in compliments in the last 7 years – 24% increase in the last year.

4.1.3 The Customer Insight Programme now has 256 volunteers registered as Mystery Customers and undertaking assignments to help us shape and improve our services. We have seen a 9% increase in volunteers during 2025/26.

4.1.4 During 2025/26 the Customer Insight Programme completed a number of reviews of different elements of the customer experience focussing particularly on the Live Well Telford Customer Experience and reviews of the Council's webpage. This has led to improvement in Live Well Telford's homepage navigation and an audit of dormant pages. During the year 36 Customer Insight Assignments were completed with an overall 82% satisfaction with the experience across the assignments completed.

4.1.5 Feedback from customers in relation to our Corporate Contact Centre indicates that performance is excellent. Customer satisfaction on our contact centre telephone calls was 96%, an increase on 95% in 2024/25.

4.1.6 There continues to be a range of ways that our customers can provide feedback e.g. QR Code Surveys, automated telephone surveys at the end of calls, Mystery Customer programme and other mechanisms such as the Making It Real Board. Any improvements made are included on our 'You said, We did' webpage, which can be found here You said, We did and You Said, We Did - SEND - Local offer

4.1.7 In 2025/26 a total of 919 complaints were received across the Council, including statutory complaints, from 857 complainants. This is an incredibly small proportion, less than 1%, of the many thousands of transactions and interactions that take place across the organisation every year.

4.1.8 839 of the complaints were corporate complaints, an increase on the 710 that were received in 2024/25. The remaining complaints were children's and adult's statutory complaints (see Section 4.2 and 4.3). The increase in complaints mirrors the picture nationally where complaints are continuing to increase across both the public and private sector. The Local Government and Social Care Ombudsman are also reporting an increase in cases. Telford and Wrekin Council is also committed to ensuring that its complaints procedures are easily accessible and the number of complaints received may also be indicative of a well-published and accessible complaints procedure. Local Authorities are now working to a single complaint handling code which over time will allow for additional benchmarking across councils. The increase in both compliments and complaints suggest that customers are effectively accessing our feedback processes. We welcome this additional feedback as a key mechanism to improve our services, and so we are encouraged that more people feel able to give their views.

4.1.9 During the year, at the first stage of the complaints process, 24 complaints were not accepted because they were more appropriately addressed via an appeal or tribunal or via court proceedings or included insurance or employment matters. All cases were provided with the details of the Local Government and Social Care Ombudsman. 91 complaints were received which were for other organisations. These were appropriately signposted.

4.1.10 In 2025/26, 69% of corporate complaints were received via a digital access channel. While a small reduction on 2024/25 this is still the preferred way for customers to make complaints. The number of customers raising a complaint via telephone has increased this year to 30% of corporate complaints received, indicating the importance of continuing to provide an omnichannel service.

4.1.11 Despite the increase in the number of complaints received the percentage of upheld complaints has remained in line with the previous year with 57% not upheld and 3% were either withdrawn or resolved by the service before the complaint was processed. We encourage our officers to look at complaints holistically and if there is any element of the complaint where we could have done better, the complaint is upheld, even if this is a relatively minor aspect of the complaint. We encourage our teams to be open to acknowledging where things could be improved, and therefore our key focus with the percentage of complaints upheld is monitoring trends overtime. It is positive to see a relatively stable position with no sudden swings up or down. Our other key principle is to ensure that we have embraced the learning from all complaints received to ensure that long term sustainable improvements to services are implemented.

4.1.12 All complaints upheld have been reviewed and shared to ensure wider learning to avoid such issues occurring in the future and to ensure that there is continuous

improvement and adoption of change. Our focus for 26/27 will be to communicate across the organisation the importance of delivering clear, customer-centred messaging, strengthening expectation management, effective handovers, strong case ownership, timely responses, and proactive escalation and improving consistency across all interactions. The report details actions that will be taken in 2026/27 to improve these reoccurring themes.

4.1.13 During 2025/26 the Council has improved further on response timescales with corporate complaints responded to in an average of 7 days well within the timescale of 10 working days set by the Local Government Ombudsman Complaint Handling Code.

4.1.14 In 2025/26 90% of corporate complaints were responded to within 10 working days, this is a significant improvement on the 84% achieved in 2024/25. Only 2 complaints were responded to outside of the 20-working day maximum timescale, however they were unusually complex cases and were both sent within 22 working days.

4.1.15 16% of the corporate complaints received escalated to stage two of the procedure. In terms of numbers this equates to 131 stage two complaints and is a 44% increase on the 91 that progressed in 2024/25. Of the 125 completed in year, 22% were upheld, 7 cases remained outstanding on 31 March 2026, these are still within timescale for a response.

4.1.16 Examples of positive improvements resulting from learning following complaints can be seen at page 30 of the Corporate Feedback Report (Appendix A).

4.1.17 As well as compliments and complaints, the Customer Relationship Team manages the Leader and Cabinet enquiry process, Member enquiry process and MP enquiries. During 2025/26 a total of 754 Leader and Cabinet enquiries were received. A proportion of these enquiries were responded to as urgent enquiries with tight timescale of 2 working days. However, 90% of responses were provided within the target timescales and this is in line with performance targets.

4.1.18 During 2025/26 528 MP enquiries were received, a 109% increase on the previous year. We aim to respond within 10 working days; the average response time was 8 working days. 85% were responded to in timescale which is very close to the 90% target despite the significant increase.

4.1.19 Under Telford and Wrekin Council's Registered Housing Provider status we own/manage 226 properties. 9 complaints were received from tenants in these properties during 2025/26. All complaints were responded to in accordance with the statutory code and timescales outlined by the Housing Ombudsman Service and one case is currently being reviewed by the Housing Ombudsman Service.

4.1.20 From May 2024 the Policy and procedure for reporting complaints involving Child Sexual Exploitation was combined into one corporate complaint procedure. We have produced a reference document on 'How we respond to complaints involving Child Sexual Exploitation (CSE)' which can be found here Complaints procedures - Telford & Wrekin Council. During 2025/26 no complaints were

received which involved Child Sexual Exploitation (CSE). A separate report "The Annual CSE Report" outlining the work that has been done around CSE and the Councils ongoing commitment to tackling the issue, will be going to Full Council on 16 July 2026.

4.2 Adult Statutory Complaint and Feedback Report (Appendix B)

4.2.1 We received 53 Adult Statutory complaints in 2025/26, a decrease on the 57 received in 2024/25. A further 12 complaints were resolved under the 24-hour resolution process and were therefore not registered under the statutory procedure, in accordance with legislation. Overall, the number of dissatisfactions raised has reduced to 65 compared to the 81 in 2024/25.

4.2.2 To provide some context, Adult Social Services have received 7,921 contacts from new people in the year, and 2,139 people are receiving long term services.

4.2.3 In 2025/26, 79% of Adult Statutory Complaints were received via a digital access channel in line with 2024/25. We continue to ensure that customers can raise concerns via traditional access channels as well as digital.

4.2.4 Of the complaints responded to in the year, 43% (24) were upheld – a slight reduction in the 44% upheld in 2024/25.

4.2.5 The Local Authority Social Services and National Health Service Complaints (England) regulations 2009 set a benchmark for all Adult Statutory Complaints to be investigated within six months. When an Adult statutory complaint is received, we negotiate a timescale with the complainants. Depending on the complexity of the case this is typically 35 working days. We aim to respond to all Adult Statutory Complaints within a maximum of 65 working days. In 2025/26 the average number of days to respond was 25 working days a slight increase on the 24 working days achieved in 2024/25. No cases exceeded 65 working days during the year.

4.2.6 Examples of positive improvements resulting from learning following complaints can be seen from page 11 of the Adult Statutory Complaint Report (Appendix B).

4.2.7 Our Adult Social Care service is committed to achieving improved outcomes through continuous learning and improvement. A key area of quality assurance is using feedback from people who use our services and their carers and families' to understand experiences and shape improvements, demonstrating a commitment to learning from all feedback, regardless of source, format or process. This feedback informs a number of developments, examples of these developments can be found from page 14 of the Adult Statutory Complaint Report (Appendix B).

4.2.8 During 2024, The Care Quality Commission (CQC) assessed Telford & Wrekin Council's ability to meet its statutory duties under the Care Act Part 1. Telford & Wrekin Council's Adult Social Care Services as 'Good', recognising that the services are performing well and meeting their expectations. Their assessment highlighted that: "*Innovative approaches to coproduction, engagement, and*

inclusion, were embedded in local authority processes. These were supported by the strategic board structures and staff culture." and that there is "*Strong leadership and a culture of transparency and learning*."

4.2.9 Quality assurance reports are prepared, shared and discussed at the ASC Quality Assurance Delivery Group and subsequently at the ASC Assurance Board. These include a quarterly report on 'Feedback from people who use our services, their carers and families' that includes issues, areas for reflection and improvement and learning outcomes.

4.3 Children's Statutory Complaint and Feedback Report (Appendix C)

4.3.1 We received 22 Children's statutory complaints in 2025/26, a decrease on the 23 received in 2024/25. Four cases progressed to an independent Stage 2 investigation during the year. No Stage 3 panels were completed in 2025/26.

4.3.2 To provide some context, Children's Safeguarding and Family Support received a total of 6,670 contacts during the year, this includes telephone calls and emails and had 900 referrals into the service completed during the year.

4.3.3 Of the 22 complaints received 6 were received directly from children and young people.

4.3.4 In 2025/26, 82% of Children's Statutory Complaints were received via a digital access channel, including via our online complaint web form and by email directly to the Customer Relationship team.

4.3.5 Of the complaints completed in the year, 54% (13) of the complaints were upheld.

4.3.6 The average number of days to respond to Children's Statutory Complaints during the year was 13 working days, an improvement on the 14 working days achieved in 2024/25.

4.3.7 At stage 2, two complaints were upheld, and one not upheld, with one which was still subject to investigation on 31 March 2026.

4.3.8 Examples of positive improvements resulting from learning following complaints can be seen from page 10 of the Children's Statutory Complaint Report (Appendix C).

4.3.9 Our Children's Safeguarding and Family Support Service is committed to continuous learning and improvement using feedback from customers who use our services, such as parents, carers, professionals, colleagues, children and young people and their families.

4.3.10 The service has also introduced a Voice of the Child Team, which includes four young people with lived experience who are completing apprenticeships with the Council. Their goal is to drive positive change by making sure young people's voices are truly heard. They have launched youth forums and delivered participation events, which are all designed to support a range of initiatives to

extend engagement with children and young people which are all designed to connect, uplift and empower. The report expands the feedback from customers through this work, highlighting some feedback provided and the actions taken as a result, this can be found at page 13 of the Children's Statutory Complaint Report (Appendix C).

4.3.11 During 2024 children's services were inspected by Ofsted. The HMI Inspectors judged the overall effectiveness of Telford & Wrekin's Children's Services as 'Outstanding'. The Lead Inspector commented that '*Children and families in Telford and Wrekin continue to experience exceptional social work practice when they are in care and as care leavers.*' They went on to say *'Participation is a real strength and children's and families' involvement is threaded throughout service developments.'*

4.3.12 Feedback from customers about their experiences of children's social care provisions is monitored in accordance with our Quality Assurance Framework. A monthly Quality Assurance meeting is held to discuss issues identified, areas for reflection and improvement and learning outcomes from feedback. All of this ensures that we continue to 'close the loop' to ensure that learning from Quality Assurance is used in a meaningful way. Actions informed by this feedback can be found at page 13 of Appendix C.

4.4 Local Government and Social Care Ombudsman Annual Review Letter 2026 (Appendix D)

4.4.1 During 2025/26 a total of 58 new enquiries were escalated to the Local Government and Social Care Ombudsman, one remained outstanding from the year before and a decision was received in the year. The Ombudsman has not yet determined on 31 cases escalated to them up to 31 March 2026. The authority has only been made aware of the detail relating to 12 of the outstanding complaints of which 9 are corporate and three are Adult Statutory complaints.

4.4.2 During the year, the Local Government and Social Care Ombudsman made the decision that they were not going to investigate 29 of the enquiries. However, they did complete four detailed investigations. The Ombudsman upheld four detailed investigations, however in one of these cases they confirmed that the Council had already remedied the case before it reached them. The Ombudsman has confirmed the Council has complied with 100% of the recommendations made during the year.

4.4.3 In all cases where complaints were upheld the Council has apologised to customers and has taken learning forward to improve practices.

5.0 Alternative Options

5.1 Failure to robustly manage and monitor customer feedback and complaints would not accord with duties placed on Local Authorities and would undermine the Council's ability to deliver continuous improvement in services that meet resident's needs.

6.0 Key Risks

6.1 Ineffective handling of complaints and management of the complaints procedures may result in reputational damage and financial costs to the Council.

7.0 Council Priorities

7.1 A community- focussed, innovative Council providing efficient, effective and quality services.

Key outcome: Our customer experience is the best possible and facilities are accessible to all.

8.0 Financial Implications

8.1 The cost of dealing with complaints is mainly in the form of officer time and is therefore met from existing Council budgets within Customer Services. If a complaint is upheld, additional costs may be incurred for those that are requested by the Ombudsman and include a financial remedy. These costs would also be met by existing council budgets within this respective service area.

9.0 Legal and HR Implications

9.1 There are no direct legal implications arising from this report. It should be noted, however, that under the Children Act 1989 Representations Procedure (England) Regulations 2006, there are some complaints involving Children's Services and Family Safeguarding which must follow the procedure contained within the Regulations. Where a complaint is made which is of a type that should be dealt with under the Regulations, the Council is required to ensure that this occurs.

9.2 Complaints about Adult Social Care Services are governed by The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 and guidance: Listening, responding, improving: a guide to better customer care.

9.3 The policies to which the Council works in respect of customer feedback and complaints is in line with the latest guidance issued by the Local Government and Social Care Ombudsman and Housing Ombudsman Service.

9.4 The proposals contained in this report can be delivered using existing resources.

10.0 Ward Implications

10.1 Not applicable

11.0 Health, Social and Economic Implications

11.1 Some complaints relate to Social Care; there are strong links into the local health and care system.

12.0 Equality and Diversity Implications

12.1 All our complaints policies provide an opportunity for residents to raise any concerns around inequality. Our policies take account of our customers communication accessibility needs.

12.2 The policies specifically meet the aims of the public sector equality duty; eliminate unlawful discrimination, advancing equality of opportunity, and fostering good relations, for people who share protected characteristics. To ensure that we continue to meet this enduring duty we collect data on a regular basis on complainants and report on the protected characteristics of complainants and nature of any discrimination or inequality.

13.0 Climate Change and Environmental Implications

13.1 Not applicable

14.0 Background Papers

14.1 You said, We did webpage.

'How we respond to complaints involving Child Sexual Exploitation (CSE)'- Complaints procedures - Telford & Wrekin Council

The Tenant Satisfaction and Complaints Report 2025-26
Complaints and compliments annual reports - Telford & Wrekin Council

15.0 Appendices

A Corporate Feedback Report 2025-26
B Adult Statutory Complaint and Feedback Report 2025-26
C Children's Statutory Complaint and Feedback Report 2025-26
D Local Government and Social Care Ombudsman Review Letter 2026 link to Telford & Wrekin Council - Local Government and Social Care Ombudsman

16.0 Report Sign Off

Signed off by	Date sent	Date signed off	Initials
Legal	25/06/2026	02/07/2026	SH
Finance	25/06/2026	02/07/2026	TD

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Telford & Wrekin
Co-operative Council

Protect, care and invest
to create a better borough

Corporate Feedback Report

Improving our Customer Experience

Annual Report 2025/26

Contents

Report summary

Our residents are continuing to experience the impact of ongoing cost of living pressures including increasing food and fuel prices. This is impacting upon almost every aspect of our residents' lives, including their health and wellbeing, their housing options and family life. In addition, the boroughs population is growing and aging which is resulting in the Council continuing to see significant demand, rising expectations and increased pressure on all its services.

Alongside social care and education services the Council emptied 11.1 million bins during 2025/26, issued approximately 172,000 council tax bills, handled 152,122 calls to our Corporate Contact Centre, laid 50,000 sq metres of carriageway resurfacing, cleaned 14,000 gullies, applied 77,000 square meters of surface dressing, 75,000 metres of road markings completed. The Borough also welcomed some 3.9 million visitors.

It is therefore positive that this annual feedback report shows that there has been a sustained increase in the number of residents and customers who have taken the opportunity to give a compliment on the service they have received. Overall, the Council has seen a 182% increase in compliments in the last 7 years from 290 in 2019/20 to 818 in 2025/26 and a 24% increase since 2024/25.

In September 2025, we launched our new Customer Strategy called 'Developing our Customer Experience- Putting people first: Delivering the basics brilliantly and building for tomorrow'. The new strategy builds on the success of the previous strategy, which led to Telford & Wrekin Council becoming the first UK local authority to achieve the Institute of Customer Services' ServiceMark accreditation in April 2025.

The new strategy reaffirms our commitment to putting residents at the heart of everything we do, while embracing new technologies. Our vision is to deliver excellent, accessible, and responsive customer services across all channels- digital, telephony, and face-to-face, ensuring no resident is excluded from being able to access Council services.

The strategy also expands our customer focus beyond our residents to include local businesses, tourists, and users of commercial services, recognising their vital role in the Borough's vibrancy and resilience. The strategy also outlines the importance of feedback from Children and Young people, particularly when shaping the borough now and in the future.

This clear and inclusive vision for the next five years, will ensure that Telford & Wrekin Council continues to deliver excellent customer service for all, while embracing innovation and maintaining the human touch where it matters most.

While we have seen an increase in the complaints received across the Council in 2025/26 with corporate complaints increasing from 710 in 2024/25, to 839 in the last year. When compared to the total number of transactions and interactions undertaken by the Council during the year, this represents under 1% of all transactions and is well within customer service industry standards. The increase in complaints mirrors the picture nationally where complaints are continuing to increase across both the public and private sector. The Local Government and Social Care Ombudsman are also reporting an increase in cases. Telford and Wrekin Council is also committed to ensuring that its complaints procedures are easily accessible and the number of complaints received may also be indicative of a well-published and accessible complaints procedure.

The report highlights that the Council continues to manage complaints well, with an average response timescale of 7 working days and 90% of responses made within the 10-working day timescale outlined within the new Local Government and Social Care Ombudsman Code, a significant increase on the 84% achieved in 2024/25. The Council has committed to the revised timescales as an early adopter with the Ombudsman starting to officially monitor compliance by Local Authorities for the 26/27 year.

The improvements detailed in this report evidence the Council's commitment to respond to complaints positively and seek to put things right where things go wrong. There are areas of opportunity for ongoing improvement, and the Customer Relationship team will continue to work with senior leadership teams to robustly utilise complaints intelligence and customer feedback to support positive improvements in service delivery.

Highlights 2025/26

Over **256 volunteers** registered to be Mystery Customers	36 completed **Mystery Customer** assignments	**100%** LGSCO* recommendations completed
Average of **7 days** to respond to corporate complaints	**90%** of corporate complaints responded to in 10 working days	**24%** increase in Compliments when compared to 2024/25
818 Compliments received in 2025/26	Institute of Customer Services **ServiceMark** Accreditation achieved April 2025	Launched new **Customer Strategy** 2025-2030

Purpose of the Report

- To provide an overview of Telford and Wrekin Council's corporate customer feedback, including complaints and compliments, from 1 April 2025 to 31 March 2026. This includes highlighting areas of positive performance and those for development.
- To outline the key developments and planned improvements to customer feedback processes operated by the Council.
- To consider how learning from customer feedback can be used to gain a better understanding of the experience customers are having accessing council services, drive continual improvement and development of services, prioritise quick wins and ensure that longer-term actions feed into the Customer Strategy.

Background

The Customer Relationship team co-ordinates complaints relating to three separate complaints processes. These are:

1. The Adult Social Care Statutory Process, reported separately in the Adult Statutory Complaints Annual Report 2025/26
2. The Children's Social Care Statutory Process, reported separately in the Children's Statutory Complaints Annual Report 2024/25
3. The Corporate Complaints Process. These are complaints relating to other services provided by the Council where there is no statutory complaints procedure, our corporate process includes complaints from our Council Tenants and also complaints involving Child Sexual Exploitation (CSE)

In addition, the team deals with a wide range of interactions with customers including general enquiries, MP Enquiries, Leader and Cabinet Member Enquiries, comments and suggestions, as well as any matters that are exempt from consideration under our complaints policies.

We recognise that our customers have a range of experiences when contacting us, working with us and using our services. Some of these experiences are positive, and we want to recognise and celebrate where good practice is evident, while others fall short of our standards, where it is essential that we learn from them. As an organisation, we provide customers with a mechanism to feedback to

us both positive and negative experiences, and encourage a culture of learning, where the focus is on resolution and continual improvement. Whenever possible, we take immediate action to put things right at the first point of contact, and if this cannot be done, we operate a robust complaints procedure.

Above all, the way we deal with customer feedback is based on our co-operative values, as published on the Council website Telford & Wrekin Council | Our vision, priorities and values and the following key principles:

- Customer focus – listening to what people tell us and seeing things from the customer's perspective
- Responsiveness – acting on what people say to us
- Promptness – making sure people get answers in good time
- Transparency – dealing openly and honestly with problems
- Proportionality – making sure that the resolution fits the complaint
- Learning – making sure complaints result in changes and improvement

Our policies are also published on the website www.telford.gov.uk/complaints . A complaint is defined within the Council's Corporate Complaints Procedure as:

'An expression of dissatisfaction, however made, about the standards of service, action or lack of action or decisions taken by the Council, its own staff, or those acting on its behalf, affecting an individual or a group of individuals'.

Telford and Wrekin Council operates a two-stage process for all corporate complaints.

For more information regarding corporate complaints in 2025/26, please go to page 21 of this report.

Accessibility of Council Services

Across the Council we take steps to support access to our services taking into consideration the diverse range of needs of our customers.

- Written materials are simplified, and efforts are made to remove jargon and technical language,
- We make sure that the documents, flyers and written materials we release include information on how to contact us so that we can answer any questions you may have.
- We use clear signage in our buildings to help people get about.
- Staff are trained to greet you appropriately and take account of your needs when supporting you.
- All of our buildings welcome assistance animals and accommodate their needs where appropriate.
- Our safety and evacuation procedures for all buildings take account of the needs of visitors to make sure that they are safe at all times.
- Notes regarding additional needs can be added to some of our systems at your request. If you consider that this will assist your communication with us, please let us know when you make initial contact with our services and they will try to accommodate your request.

These are some of the things that we do to make sure that you can access our services easily, fairly and safely. For more information about how we support access to our services please visit our website at Telford & Wrekin Council | Supporting access to services.

MP/ Leader/Cabinet and Member Enquiries

During 2025/26 the number of enquiries received from democratically elected members was as follows.

MP Enquiries- A total of 528 MP enquiries were received, a 109% increase on the 253 received in 2024/25. We aim to respond within 10 working days, and our average response time was 8 working days.

Leader Enquiries- A total of 319 enquiries were received from residents via the Leader of the Council. The average number of days to respond to these enquiries was 5 days with 93% responded to in timescale.

Cabinet Member Enquiries- Enquiries from Cabinet Members amounted to 435. The average number of days to respond to these enquiries was 3 days. 90% were responded to in timescale.

Member Enquiries- 426 enquiries were received from Ward Members during 2025/26 a 41% increase on the 302 received in 2024/25. These were responded to in an average of 6 days, 97% within our response timescales.

Compliments

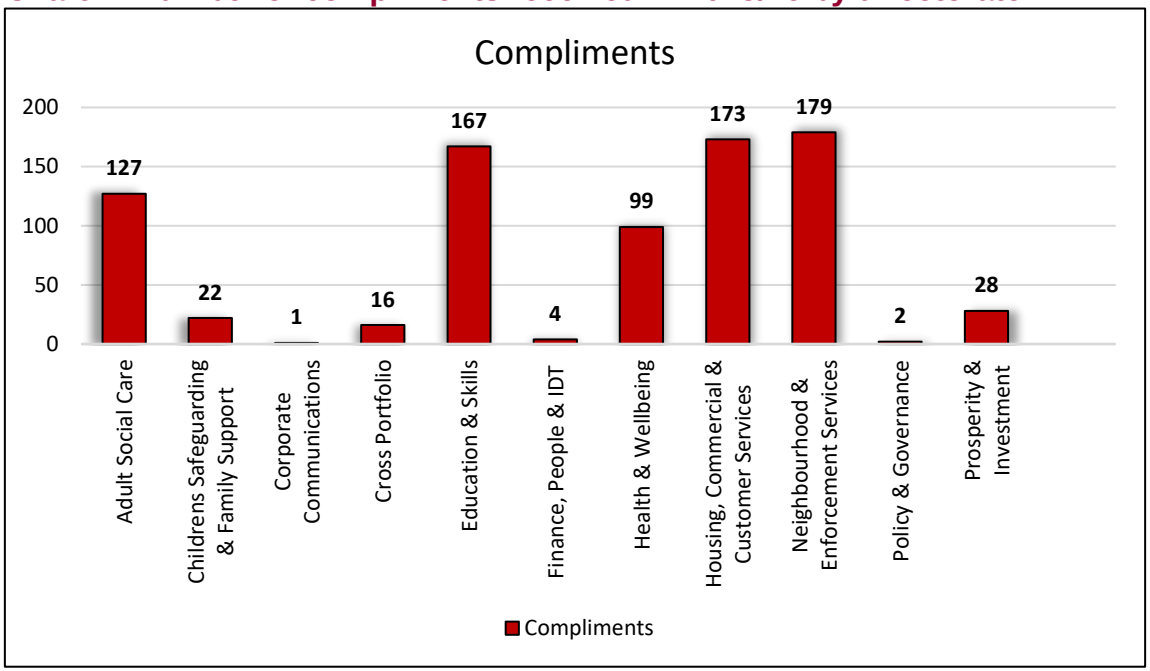
In 2025/26, there was a 24% increase in the number of compliments received when compared with the previous year. A total of 818 compliments compared to 660 in 2024/25. The Council has seen a 182% increase in compliments from 290 in 2019/20 to 818 in 2025/26. Compliments are logged and shared with Directors and Line Managers. This is recognised at service level through team briefs/ meetings and individual 'one-to-ones'.

Where a member of staff has gone above and beyond, they may be awarded a Chief Executive Commendation to celebrate their achievement. An Excellent Customer Service Award is also made at our annual Employee Awards. Some examples of where employees have gone above and beyond can be seen below.

Chief Executive Commendation	Customer Care Award Winner 2025
In recognition of an officer's actions at an event providing lifesaving treatment using a defibrillation machine. The member of staff stayed calm under pressure and ensured essential treatment was provided until Emergency Services arrived on scene.	The award was given to a Rink Assistant at Telford Ice Rink for going above and beyond with the Ice Rink's Facebook page. The officer demonstrated a proactive approach from managing the inbox, to timely and clear communication, crafting empathetic, helpful responses to customers. The assistant's attention the customer perspective and commitment to removing communication barriers earned recognition from senior colleagues. Demonstrating genuine care for the customer experience ensuring that the customer is at the heart of everything they do. This was improved customer satisfaction and helped other team members to focus on operations.
Information Digital Technology (IDT) Assistant IDT Services	Rink Assistant Leisure Services

The chart below highlights the compliments received for each directorate during 2025/26.

Chart 1: Number of compliments received in 2025/26 by directorate



This year, Neighbourhood & Enforcement Services (179) and Housing, Commercial and Customer Services (173) received the most compliments, with the latter seeing an increase from the 131 received the previous year a 32% increase, with 67 received by the Customer Contact Centre and 51 by the Housing team.

Education & Skills (167) received a significant increase in compliments during the year, seeing a 476% increase on the 29 received in 2024/25 with 63 received by Arthog and Arthog Outreach, 21 by Future Focus (Careers) and 18 by Special Educational Needs.

"All of my email correspondence was dealt with by Emma and she's been so incredibly helpful. She's been able to answer all my questions and just generally made it a really smooth process. We've been very stressed about finding a school close to home and with the wraparound care we require along with the stress that comes with buying a house! Emma always responded to my emails very quickly, giving regular updates and we've now got the brilliant outcome of getting into the school we wanted. So, I just wanted to write to say how much I have appreciated Emma's help, patience and prompt replies to my many emails!"

Special Educational Needs Team

"I never expected that after smoking for 15 years of my life, I'd ever be able to stop - but here I am. Just over three months ago, I was a heavy smoker, and now I'm completely smoke-free. Having the Council's Healthy Lifestyles team as an anchor point made a huge difference. Knowing there was someone I could turn to for support and guidance helped massively. Thank you."

Healthy Lifestyles Team

Here are some examples of compliments received during the year:

"…by guiding them through to Bikeability Level 3, you have given them the skills and confidence to navigate challenging environments safely. I also want to specifically commend your staff. They were exceptionally kind, informative, and structured in their guidance. It was clear that the students felt supported throughout the process, and they all thoroughly enjoyed themselves—especially the chance to take home their own bikes, helmets and locks."

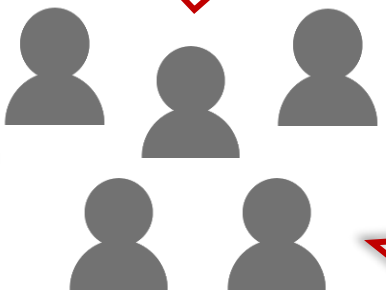
Active Travel & Road Safety Education Team

"We always feel safe with any instructor that takes us caving. We have and will continue to use Arthog outreach to provide Outdoor and Adventurous Activity for the children at our school. The children love it and get so much from every excursion with Arthog Outreach."

Arthog Outreach

"From the start. Paula provided the care both my mother and I desperately needed…In her final days and in the depths of Dementia, my Mum had a moment of clarity and thanked Paula for everything! I will never forget Paula's kindness and professionalism. Out of everybody and everything that I have dealt with in the past 7 years…Paula is a shining star and of the very best."

Adult Social Care



"I wish to compliment the customer relationship team for their hard work, I have contacted this department many times for comments, requests and suggestions. The team are always very polite and reassuring, the team are also very understanding and recognise any concerns or views people have… Having a good customer relationship team to contact in regards of my interests in the environment and streetlighting for this makes me feel that my interests and views have been valued and I am truly grateful for that. I would like to thank everyone in the department for their work."

Customer Relationship Team

"Never thought I would need your service, but I feel like I have inherited a family member, feel like you are a "sister" to me. You have lifted weight off my shoulders. Given me validation. The process has been good. You have helped me heal. Thank you"

Family Hubs Wrekin

"Thank you so much for your help and support, I really am overwhelmed by the help and support from you and your team, thank you all so much I am forever grateful. I have unfortunately moved around quite a bit through my life and Telford council and their wonderful staff throughout are the only council that have ever really helped and I felt helped not judged I felt understood and the speed off your staff in sorting things out is unprecedented so once again from a very grateful woman and children, thank you all ."

Housing Team

Customer Insight Programme

Our Customer Insight Programme was launched in October 2019 with the aim of helping us review our services from customers' perspective. The programme is designed to deliver organisational intelligence to drive transformation and continuous development by identifying trends and improvements that could be made to enhance customers' experience of our services. Some key customer and Mystery Customer satisfaction results from across our services in 2025/26 include:

96%* Of customers were satisfied with **call handling** *Corporate Contact Centre Satisfaction	**95%*** Of customers were satisfied with the help given on our website by '**Ask Tom**' *Corporate Contact Centre Satisfaction	**100%*** Of customers were satisfied with **webchat** *Corporate Contact Centre Satisfaction	**82%*** of Mystery Customers were satisfied with their experiences, when completing assignments *Mystery Customer Assignment
90%* Of customers were satisfied with their experience whilst visiting **Front of House** locations *Mystery Customer Assignment	Customers scored an average of **4.75*** Satisfaction with the **Bulk Collections** Service *Waste Services- (out of score of 5)	**96%** Of customers were satisfied with their overall experience of **Sky Reach & Outdoor Education**	**84%*** Of customers were satisfied when accessing the **Waste Webpages** *Mystery Customer Assignment

Feedback from Tourists, Visitors and Businesses:

As part of our customer strategy, we have committed to expanding the customer insight programme from 2026/27 to include feedback from businesses, tourists and visitors. We will provide a snapshot of feedback from tourists, visitors and businesses in this annual report going forward.

Feedback from children and young people:

Within our new customer strategy, we made a commitment to exploring opportunities for young people to share their views and feedback on the Council services that matter to them. Engaging children and young people in our services is critical as they represent the future of our community, and their active participation is vital for long-term success.

We gather feedback from various sources to improve the service we provide to children and young people for example;

• Childs Voice postcard • Childs Voice Group • During family time • Review forms • Dandelion Group • Kinship Care Group	• Childs voice apprentices – Voice of the Child Team • Leavers Come First Forum • Separate Migrant Care Leavers Forum • Kinship Forum • Children in Care Council	• Young Futures Forum Corporate Parenting and Young People Panel • Youth People's Forum • Voices in Unity network • Youth Summit

The Telford and Wrekin Council Youth Strategy 2026-2029 is a comprehensive plan, co-produced with local young people focused on creating a child friendly borough where young people feel safe, heard and supported. Amongst the issues It prioritises are supporting better mental health, provision of safe spaces, equal access to activities and tackling poverty. For more information about the Youth Strategy please follow this link Youth Strategy 2026-2029.

Key feedback from children and young people:

As an example of a specific way we have engaged, in February 3,500 local young people got involved in the Youth Parliament Make Your Mark Ballot in February 2026. The ballot for 11–18-year-olds and is held across the UK. The top three issues voted for by youth people in the Borough were;

- Teach life skills in schools
- Information on positive ways to manage stress
- Safe, accessible, reliable public transport

We are taking this feedback forward working with the Young People's Forum. Actions already taken include involving the Forum in the design and promotion of a new reporting mechanism for incidents on buses. The feedback around life skills in schools will be raised with headteachers, and we are working towards launching a new webpage which will provide practical information around managing stress.

You said, we did- Children's Services:

The Youth Strategy makes a commitment to a 'you said, we did' approach. The table below provides a snapshot of how this is being implemented and its impact

You said	We did
Young People Said… They want more say in meetings & decisions affecting them	Children's Services now routinely ask and plan for Young Peoples attendance in meetings. Exploring timing adjustments and school collaboration to facilitate involvement. Voice of the Child Apprentices routinely contribute to recruitment of key posts within the Council and participate in key meetings e.g. Corporate Parenting Board and leading survey work such as the Bright Spots survey
Young People Said… They want safer communities and support	Voice Apprentices' newsletters now promote community events, safe activities, and youth opportunities. Partnership work has been strengthened in: ➢ Police interactions (Corporate Parenting Board sessions)

understanding local opportunities including youth groups, volunteering opportunities etc	➢ Community safety projects (Make a Change, surveys, youth led improvements) ➢ "Crucial Crew" transition programme reaching 2,500 children annually The services engagement with Toucan Child and Adolescent Mental Health Services (CAMHS) shaped future emotional wellbeing support

More examples of You said we did from children interacting with Children's Services can be found in the Children's Statutory Complaints and Feedback Report.

You said we did: Special Educational Needs

"An Easy Read version of the "Listening to young people with SEND in Telford" page would be beneficial, as the amount of text may make it challenging for young people to engage with."	An Easy Read guide has been co-produced with a local parent carer and young person support group. It uses simplified language, reduced text, and Widgit images.

For further examples of 'You said, We did' please visit You Said, We Did - SEND - Local offer.

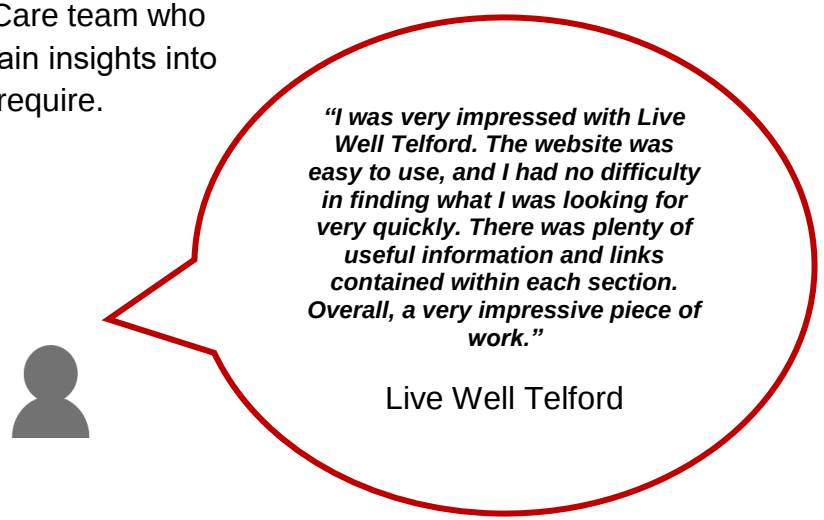
Mystery Customer Activities:

The Customer Insight Programme now has 256 volunteers who have registered with us as Mystery Customers to undertake assignments. We have seen a 9% increase in volunteers during 2025/26, and the team will continue to promote the recruitment of the programme in the coming year, including a social media campaign.

36 assignments have been completed across the Customer Insight programme since April 2025 with an **82%** satisfaction score overall across the assignments completed. Some examples of how the programme has added value and intelligence to services is set out below: -

Live Well Telford Customer Experience Survey

Live Well Telford is the borough's online, all-age community directory. It provides information and signposting to a wide range of services, activities and organisations in the area, helping people to find the support they need to live healthy independent lives. In May, Mystery Customers completed an assignment for our Adult Social Care team who wanted to understand what it's like for individuals who use Live Well Telford, to gain insights into what residents expect, and to help understand the level of service that residents require.



83% of customers advised the Live Well website was accessble.
83% of customers were satisfied with the Live Well website
84% of customers would recommend the access channels to friend or family member.

Some improvements made as a result of the feedback include;

• improved homepage navigation- streamlining the homepage by reducing the number of categories, making it easier for users to navigate and find relevant information;

• audit of dormant pages- inactive pages were highlighted, which informed a wider audit to remove dormant accounts and ensure content remains current and relevant;

Customer Strategy Refresh

Our new Customer Strategy was launched in September 2025. To inform this we asked our mystery customers to complete various assignments testing our access channels including Ask Tom online, Ask Tom telephony, MyTelford, Telephone, Website, Front of House/Face to Face.

89% of customers were satisfied with the access channels.

2026 Waste Website Review & Treasure Hunt

In February 2026, we asked our Mystery Customers to commence testing on the search functionality on our website specifically regarding bulk collections, A-Z of recycling, and what goes in your bins, bags and containers.

17 Mystery Customers took part with varying degree of technical proficiency.

92% of customers advised the webpages were clear in their presentation and style.
91% of customers advised the webpages were easy to navigate.
80% of customers had a positive first impression of the webpages

A number of positive responses were received -

- "I am so impressed at the recent developments on the Council's website. It's now very user friendly. Information on waste was easy to find, extremely informative and educational. I found myself looking at things I hadn't gone there to look for!"

- "I really enjoyed using the website. I found it very informative, easy to navigate, and simple to use. It's also interesting to see all the different technologies and access channels available. This is my first time writing a review, so I'm not sure what suggestions to offer, but overall, I had a great experience."

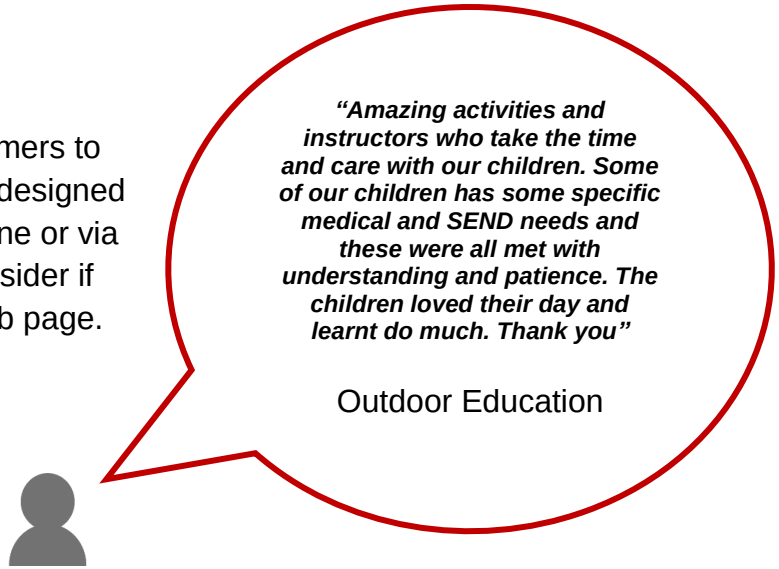
Some recommendations for improvement are now being considered by the service:

- I think you need to add in more tags to the search for basic everyday terminology such as 'tip', 'dispose'.
- The font on the Council's home page on the small tiles need to be changed to something a little clearer.
- There are so many bullet point lists.

Real time Customer Feedback:

Since April 2021, posters have been in all front facing buildings asking our customers to comment on the service and experience that they receive. These short surveys, designed to take 30 seconds to complete, can be accessed via a QR code on a smart phone or via a website link. Any comments received are shared with services so they can consider if improvements can be made with feedback detailed on our 'You said, We did' web page.

95% of customers were satisfied with the service provided at these locations during 2025/26



You said, We did

Our vision is to work with our customers to develop quality services that are accessible to all and to make every contact count. Feedback is received via complaints, enquiries, through our Customer Insight Programme and from instant, real-time QR code feedback surveys, introduced into many of our buildings - including libraries and leisure centres. We are committed to acting on this and reporting back 'you said, we did'. Below is a snapshot of feedback from 2025/26 and the actions that we have taken as a result.

You said	We did
Customers asked when the drinks machine at Newport Swimming Pool was going to be repaired.	The drinks machine has been repaired and on the back of further feedback, Telford & Wrekin Council Leisure is completing a vending procurement exercise which aims to improve the provision
A customer had problems accessing their MyTelford account to report a missed collection.	There is now a pop-up message to make it clear that you can use the application without logging into MyTelford

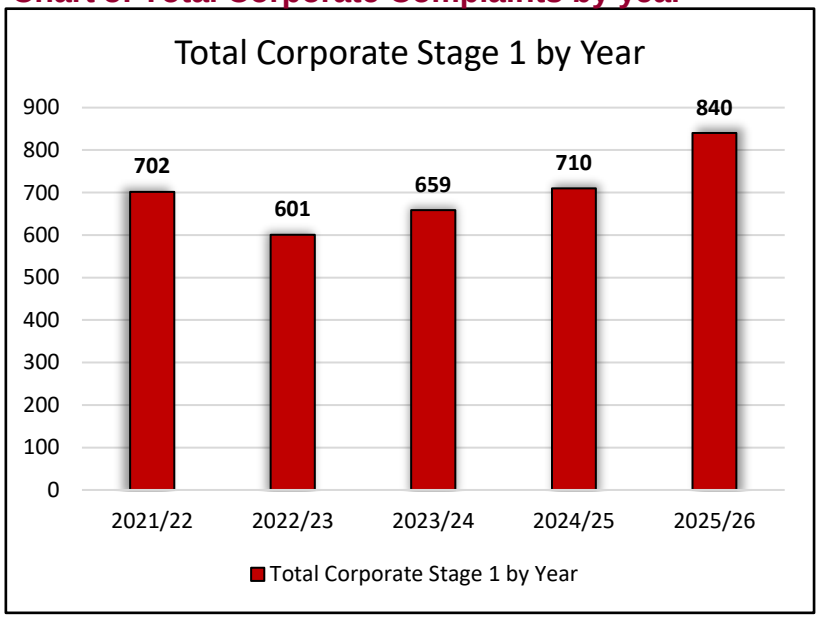
Customers informed us there were a number of subjects not included on MyTelford whilst searching.	Subsequent updates include adding Japanese Knotweed guidance and guidance on how to manage / dispose of, E-Cigarette / Vapes and Plastic bags / film
Customers told us that there wasn't vital pedestrian access during works by a utilities company.	Our inspector promptly visited the site and ensured that a pedestrian walkway was in place to ensure residents always had access to the bus stop
The Silkin Way path behind the multi storey car park by Dalford Court is covered with leaves making the cycle and pedestrian path very narrow. Some of the shrubs and trees also need cutting back	The Council and the community payback team reformed the paths and cutback the shrubs to open up the path and expose the streetlighting
Educational settings requested more advice regarding the Personal Education Plan (PEP) statutory process and training re new attendance portal.	Additional, termly training has been provided to education settings regarding PEPs and 1:1 sessions are now offered regarding the attendance portal to settings
Feedback received from customers that they can't fully understand the impact on their benefits if moving into employment.	The Council has acquired access to the 'Better off in Work' calculator that can assist customers with better understanding of the impact of moving to employment.

For further examples of 'You said, We did' please visit www.telford.gov.uk/yousaidwedid, and You Said, We Did - SEND - Local offer. Additional examples of improvements that have been made following complaints can be found from page 30 of this report.

Corporate Stage One Complaints 2025/26

In the year 2025/26, there were 839 corporate Stage One complaints (those dealt with by more than one service simultaneously are counted as a single complaint) from 778 complainants. This is a 18% increase on 2024/25. The increase in complaints mirrors the picture nationally where complaints are continuing to increase across both the public and private sector. The Local Government and Social Care Ombudsman are also reporting an increase in cases. Local Authorities are now working to a single complaint handling code, which over time will allow for additional benchmarking across councils.

Chart 5: Total Corporate Complaints by year



Of these 839 complaints, 131 were escalated to Stage Two of our procedure and 30 were the subject of Local Government & Social Care Ombudsman (LGSCO) enquiries. 16 cases were not investigated by the LGSCO and one case was withdrawn. Three corporate complaints were subject to a detailed investigation, 9 further cases were awaiting a response from the LGSCO on 31 March 2026 with one case similarly outstanding with the Housing Ombudsman Service (HOS).

Stage	Number of complaints
One	839
Two	131
LGSCO	11
HOS	1

For further information regarding Stage Two complaints, please see page 29.
For further information regarding Local Government & Social Care Ombudsman enquiries, please see page 32.

During the year, 24 Stage 1 complaints were refused (were not accepted as complaints). This was for a range of reasons including that issues were already subject to court proceedings or a Tribunal process. All cases were provided with the details of the Local Government and Social Care Ombudsman should the complainant wish to escalate the issue.

Reason Refused	Number Refused
S1 Refusal- Complaint already considered	1
S1 Refusal- Right of appeal or review available	4
S1 Refusal- Employment Matters	1
S1 Refusal- Out of Jurisdiction	1
S1 Refusal- Outside of 12 months	3
S1 Refusal- Legal action against Council started	4
S1 Refusal- Insurance matters	2
S1 Refusal- Subject to court Proceedings/ Criminal action	7
S1 Refusal- Not a person who can complain*	1
Total	**24**

*Where the complainant does not have consent and does not provide it when requested or has not been personally impacted by the matters complained about.

91 further complaints were appropriately redirected because they were for other organisations.

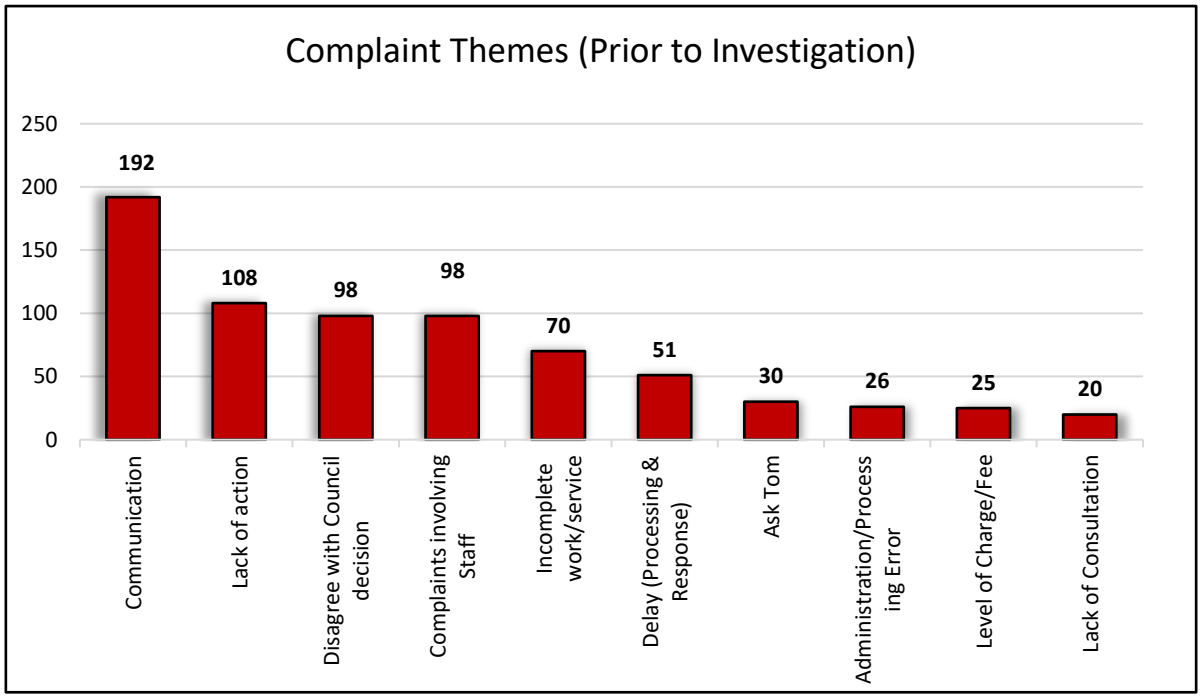
Customer Access Channels and Digital Contact (Stage One Corporate Complaints):

Complaint channel	Number of complaints
Email	303
Web form	272
Telephone	251
Letter	11
In Person	2
Total	**839**

In 2025/26, 69% of corporate complaints were received via a digital access channel. While a small reduction on 2024/25 (70%) this is still the preferred way for customers to make complaints. The number of customers raising a complaint via telephone has increased this year to 30% indicating the importance of continuing to provide an omnichannel service.

Complaint Themes:

Chart 6: Corporate complaint themes 2025/26



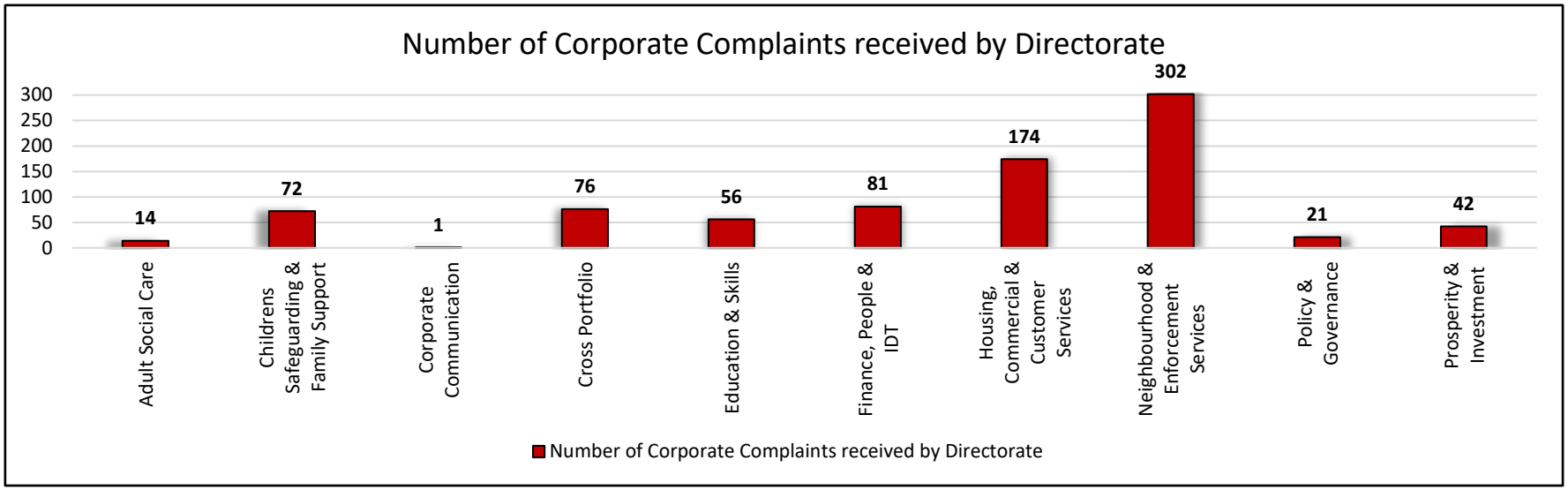
This chart shows the top 10 complaint themes for 2025/26 recognising that some complaints have multiple themes. Communication continues to be a recurring theme, and we will be taking targeted action to address this with an organisation-wide communications plan. This will reinforce the importance of clear, timely and courteous communication at every customer touchpoint. The campaign will remind colleagues of expected standards, including responding promptly to calls and emails, providing clear and concise explanations and managing expectations effectively.

From May 2024 the Policy and procedure for complaints involving Child Sexual Exploitation has been combined into the corporate complaint procedure. No complaints were received relating to Child Sexual Exploitation (CSE) during 2025/26. For more information, please see our reference guide on 'How we respond to complaints involving Child Sexual Exploitation (CSE)' which can be found here Complaints procedures - Telford & Wrekin Council.

23 Complaints were received that related to discrimination (6 Race, 17 Disability); these complaints were investigated and not upheld. 6 complaints were raised regarding accessibility during the year, four of which were upheld, and the Council has completed the identified improvements.

Further analysis of upheld themes can be found later in this report at page 26.

Chart 7: Number of Corporate Complaints received by directorate



Complaints have increased across all services with the exception of Prosperity and Investment and Health and Wellbeing. As Health and Wellbeing did not receive any complaints during the year they are not detailed in the chart above. The number received by Neighbourhood and Enforcement Services (302) has seen the largest increase, but it should be noted that when the huge number of customer interactions that take place through Waste, Highways, Grounds Maintenance, Public Protection, Community Safety and Enforcement, are taken into account, this figure is proportionally very low. The second highest number of complaints were received by Housing, Commercial and Customer Services who also deal with a very large number of customer interactions. Overall complaints continue to represent less than 1% of the interactions that the Council has with customers over the year.

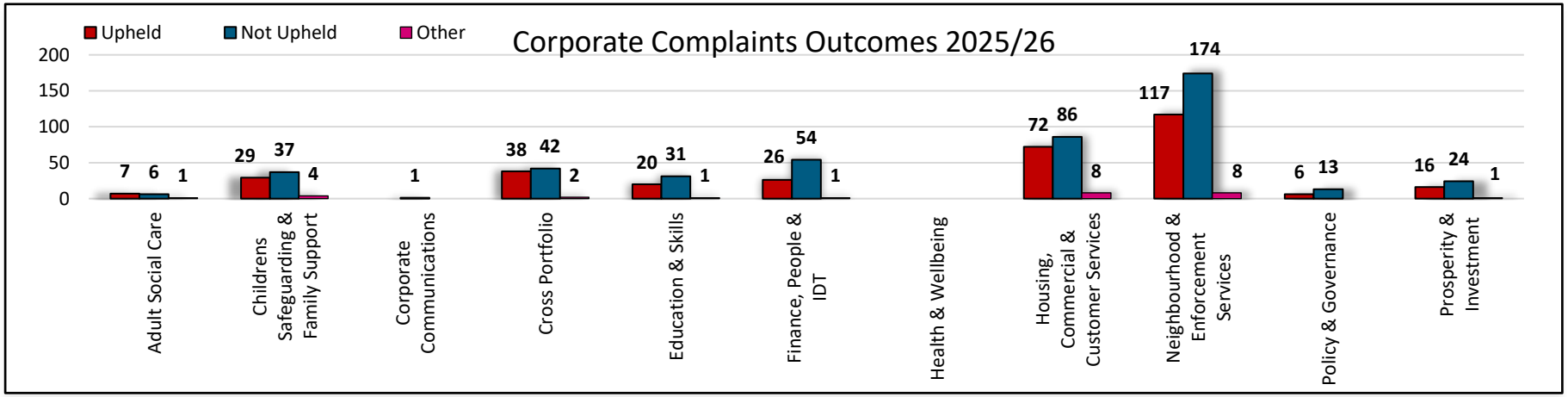
Stage One Complaint outcomes

Of the (825) Stage One complaints responded to in the year, 40% were upheld, this is where services acknowledged that they could have done better. Despite the increase in number of complaints received the percentage of upheld complaints has remained in line with the previous year. 57% were not upheld, 3% of complaints were either withdrawn or resolved by the service before the complaint was processed.

The highest number of upheld complaints were in Neighbourhood & Enforcement Services (117) and Housing, Commercial and Customer Services (72). This is not unexpected given that these directorates responded to the highest number of complaints. The highest percentage of upheld complaints by directorate were in Adult Social Care (47%) with 7 upheld out of the 15 complaints received.

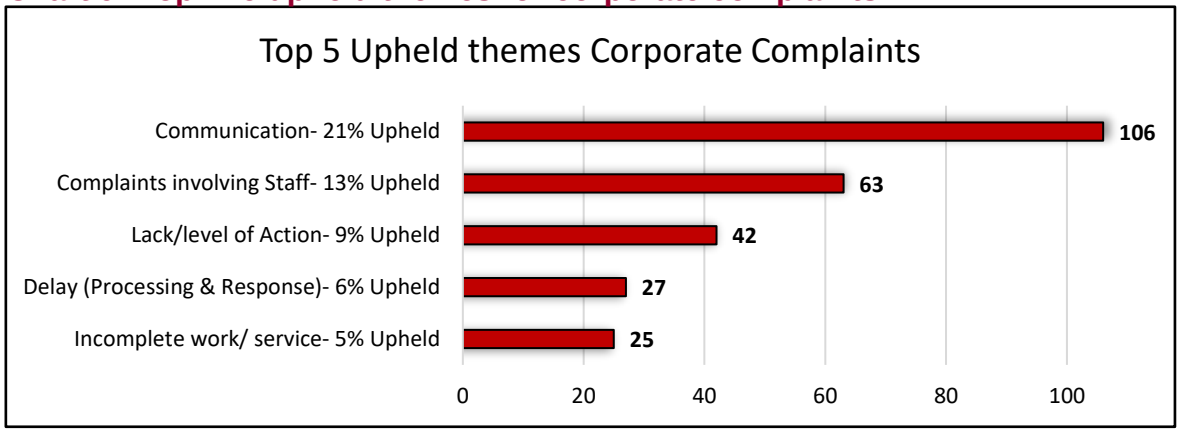
The outcomes by directorate can be seen in the following chart. This has been broken down into upheld, not upheld and other. 'Other' can include service resolved, dealt with through courts, out of jurisdiction or withdrawn.

Chart 8: Corporate complaint outcomes 2025/26



The top five upheld themes identified corporately at Stage One were:

Chart 9: Top five upheld themes for corporate complaints



331 complaints were upheld, some complaints had multiple issues. Across the upheld complaints there were 479 upheld issues.

Please note: For the purpose of this report the percentage upheld is displayed as a percentage of the upheld issues 479. The top five upheld themes include:

Communication was the most prevalent theme across services. Our focus for 26/27 will be on clear messaging, expectation setting, effective handovers and customer centred communication practices. Reminders have been issued to officers to ensure that they keep customers updated and services have made changes to procedures. There will be ongoing monitoring of telephone calls to ensure a high standard of customer service.

Complaints involving Staff have decreased compared to 2024/25 representing 13% of upheld complaints. Concerns included perceived rudeness or discourtesy, lack of empathy or inconsistency in applying standards and rules. In the majority of cases investigations found no deliberate wrongdoing but were nevertheless upheld due to the impact on the customer. It is recognised that customers are highly sensitive to tone, body language, and how messages are delivered particularly in challenging situations. We will continue to extend customer service and equality training, encourage reflective practice and supervision and promoting consistent, compassionate approach across all customer facing roles.

Lack/level of Action was cited in 9% of the complaints upheld, a small reduction on 2024/25. The issues included actions agreed but not taken forward, repeated contact without resolution unclear ownership plus system failures. There will be an ongoing focus on case ownership, escalation and assurance that agreed actions are completed.

Delay (Processing & Response) was a theme within 6% of the complaints upheld. This issue includes responses outside expected or agreed timescales, delays not explained or acknowledged early and administrative failures contributing to delay such as cases being mis-directed. In more complex cases delays were linked to reliance on external organisations.

Going forward there will be a focus on strengthening monitoring of response times, embedding consistent use of holding responses, ensuring delays are identified and escalated early and reinforcing timeliness, expectation management and responsiveness as critical components of effective customer service.

Incomplete work/service was a theme within 6% of the complaints upheld this is a decrease on the 11% in 2024/25. Cases included agreed work started but not fully completed, incorrect assumption that work was complete. Key learning is that completion and quality matter, service must ensure that work is delivered fully, accurately recorded and followed up where necessary. Where work cannot be completed, customers must be clearly informed of the reason and next steps. There will be a continued focus on right-first time delivery, accurate recording and closure of work and proactive follow-up where services are incomplete.

Our focus for 2026/27 will be to communicate across the organisation the importance of delivering clear, customer-centred messaging, strengthening expectation management, effective handovers, strong case ownership, timely responses, and proactive escalation and improving consistency across all interactions.

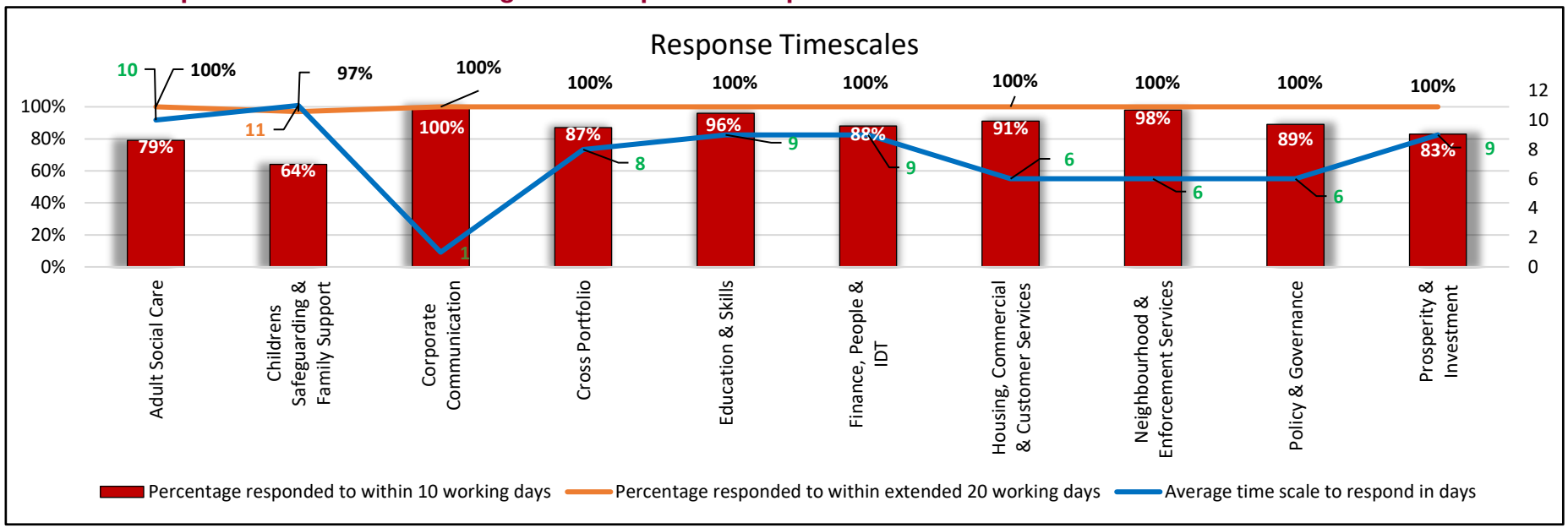
Timescales for responses at Stage One

With effect from 16 May 2024 the Council became an early adopter of the Ombudsman's new Complaint handling code effectively reducing the response target for stage one corporate complaints from 15 to 10 days. This may be extended to a maximum of 20 working days.

During 2025/26 the Council has responded to corporate complaints in an average of 7-working days, which is well within the 10-working day timescale and a further improvement on the 8 days achieved in 2024/25. During the year 90% of responses have been issued within 10-working days, which is also an improvement on the 84% achieved in 2024/25.

The chart below shows the % of stage one complaints responded to by each Directorate, percentage sent in the 10-working day timescale and extended target, and the average number of days taken.

Chart 10: Response timescales for Stage One corporate complaints



The data indicates that directorates are performing strongly in meeting the corporate timescale particularly given the increase in complaints and scale of customer interaction with the Council. For example against our target to respond to 90% of corporate complaints within 10-working days Neighbourhood and Enforcement Services, with the largest number of customer interactions responded to 98% of complaints within 10-working days, Housing, Commercial & Customer Services (91%), and Education and Skills (96%).

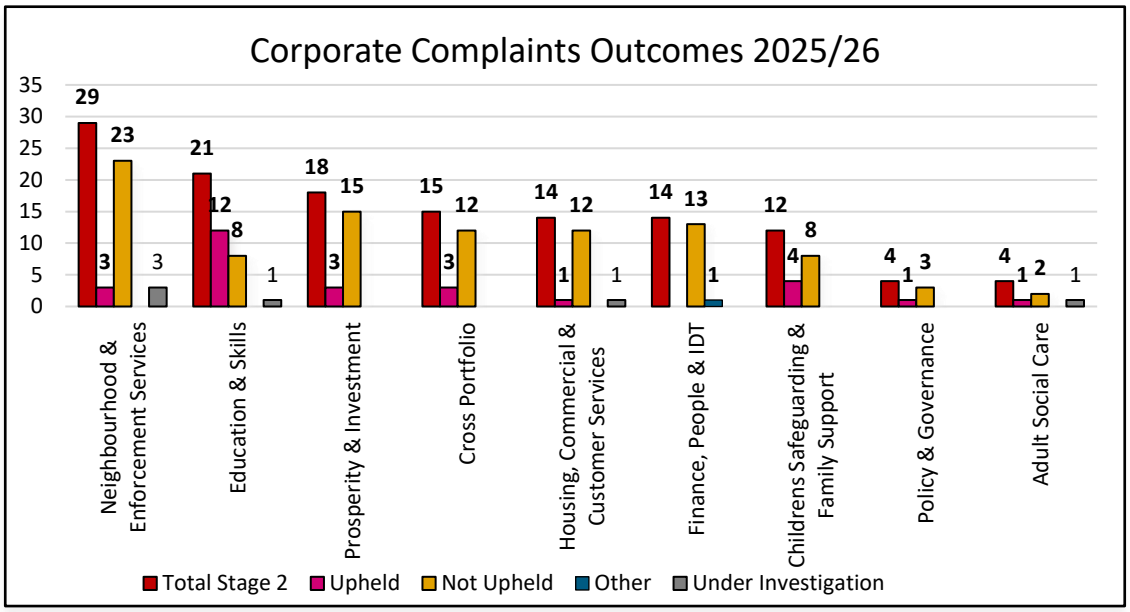
During the year, 2 complaints were responded to outside of the 20-working day maximum timescale, these cases were unusually complex cases and were sent within 22 days.

No complaints handled under the Housing Ombudsman Schemes code exceeded the 20-working timescale, for more information on these complaints please see page 33.

Corporate Stage Two complaints

During 2025/26, 131 Corporate Stage One complaints progressed to Stage Two of the process. This represents a 44% increase on the 91 that progressed in 2024/25. 125 Stage two investigations have been completed; there are 6 stage two corporate complaints that were still under investigation on 31 March 2026.

Chart 11: Stage Two complaints received and outcomes by directorate



The highest number of Stage Two complaints was seen in Neighbourhood & Enforcement Services.

Education & Skills has also seen an increase on stage 2 complaints compared to 2024/25.

Health & Wellbeing and Adult Social Care did not see any cases escalate to Stage Two in 2024/25.

In line with the Local Government and Social Care Ombudsman's complaint handling code stage 2 complaints are responded to in 20 working day, which can be extend to a maximum of 40 working days in complex cases.

No stage 2 complaints were refused with all 131 receiving a full investigation and response. 22% were upheld with an average of 20 working days taken to complete a full investigation. This is a significant decrease on the 31 days taken in 2024/25. One particularly complex and exceptional case exceeded the 40 working day target.

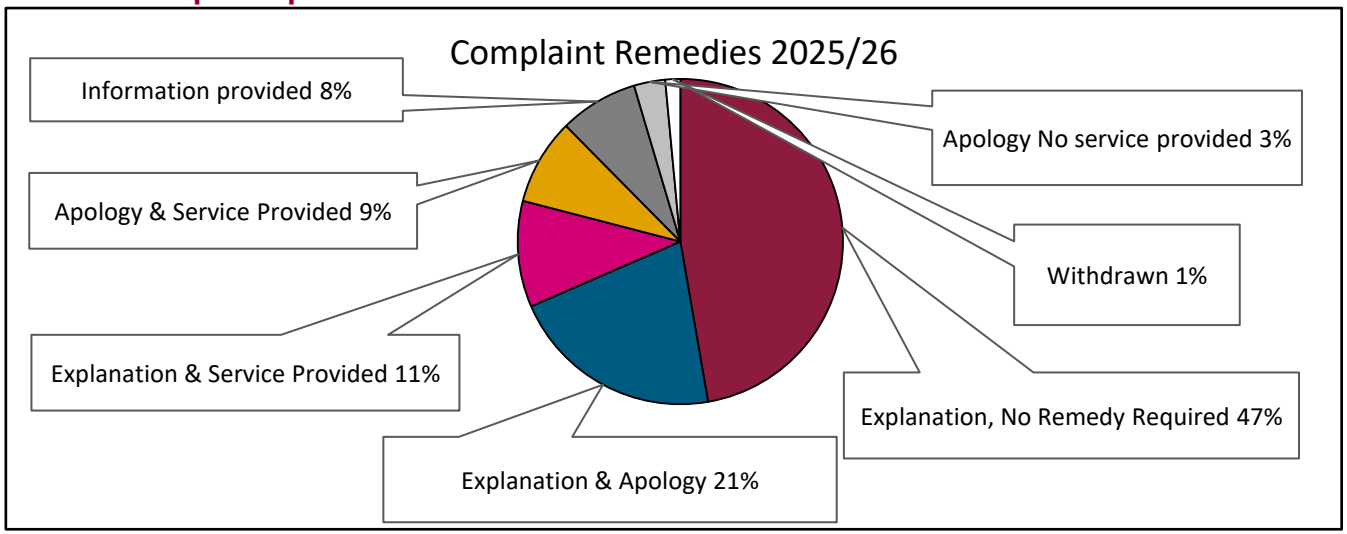
Learning and outcomes from Corporate Complaints

Complaints are a valuable source of information that can help to identify recurring or underlying problems and potential improvements. This includes both those upheld and in some instances where no fault was found but services identify that improvements to services could be made.

The Customer Relationship Team continually review actions taken by services to respond to complaints, any remedy themes and identify and share wider learning.

The Chart below illustrates the key themes linked with complaints where fault was found in 2025/26

Chart 12: Top complaint remedies 2025/26



Remedial action can include an apology, explanation or carrying out overdue work. On some occasions, the fault has already been remedied - so the complaints process is used to ensure that the appropriate action has been taken.

Positive Improvements

Below are some examples of positive changes that have resulted from learning from complaints:

- The Disabled Facilities grant process has been reviewed to ensure that there is a nominated individual who will confirm when funding is agreed with all parties.

- Information on the leisure website has been updated to ensure opening time information during bank holidays is clearly available for customers.

- Steps into the swimming pool at Newport will be in place for all relevant sessions.

- Revenues officers have been reminded that they need to ensure that changes are made in a reasonable timeframe and to only request additional verification for liability where necessary.

- Two memberships can now be linked to an aspirations account, so that a support worker can join a fitness class.

- Automatic replies on the Customer Contact Centre email inbox have been amended to include contact numbers and opening times, rather than the previous website link to make the information more easily accessible for customers.

- Admittance times for the health suite at Oakengates Leisure Centre have been reviewed to ensure a consistent approach.

- The Occupational Therapy triage process has been reviewed to ensure the appropriate services are involved at the right stage of the assessment and provision, especially where seating and sleep needs overlap.

- Contact Centre Advisors will ensure that they explain that they are transferring the customer to an external company who manages the appeals process for Penalty Charge Notices for the Council.

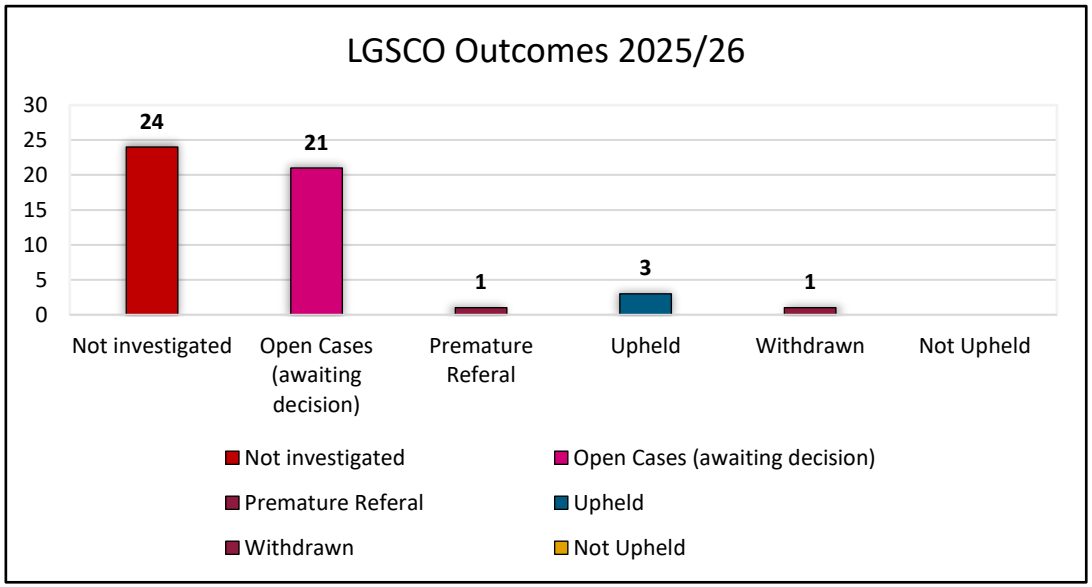
- Internal processes have been updated to ensure consistency in recording portal messages for the Environmental Enforcement Team; staff have also received training.

➢ The SEND team will review and enhance communication procedures throughout any consultation and tribunal processes. Transition planning will be carefully adapted to meet accessibility needs, with face-to-face meetings offered whenever required.

Local Government & Social Care Ombudsman enquiries

The Local Government & Social Care Ombudsman (LGSCO) has the authority to investigate complaints when it appears that our own process has not resolved them. Complainants can refer their complaint to the LGSCO at any time, although the Ombudsman will refer them back to us if they have not been through our process first. In exceptional circumstances, the Ombudsman will look at things earlier; this usually being dependant on the vulnerability of the person concerned. During the last year 64 new enquiries were forwarded to the LGSCO. 10 new enquiries related to Adult statutory complaints, which are detailed in the Adult Statutory Complaint Reports, no new enquiries related to Children's Statutory Complaints.

Chart 13: Local Government & Social Care Ombudsman Outcomes



The LGSCO determined it would not investigate 29 of the corporate matters referred to them.

The LGSCO has completed three detailed investigations during the year all of which were upheld. One case was withdrawn by the complainant. 21 corporate complaints remained outstanding with the LGSCO at 31 March 2026, 9 of which the Council has not yet received the details from the Ombudsman.

All the recommendations made by the LGSCO have been implemented. More information regarding the Council's performance and LGSCO decisions can be found at: www.lgo.org.uk/information-centre.

Complaints from Council Tenants

All complaints from our tenants are handled in accordance with the Housing Ombudsman statutory complaint handling code for tenants. During 2025/26 we received 9 complaints from our tenants across the 226 properties covered by our management policies. Three of these escalated to stage 2.

Complaint Themes:

There was no common theme to complaints which related to aspects of property maintenance, communication regarding localised refurbishment works and notice of visits.

Of the 9 complaints 6 were upheld. Four progressed to stage 2 but none were upheld. In all cases issues flagged through the complaint process have been addressed.

The upheld issues related too, communication, lack/ level of action, and delay.

Timescales for responses:

The Council's Complaints policy outlines that a stage 1 housing complaint will be responded to within 10 working days, extended to 20 working days in exceptional circumstances. 2 cases exceeded 10 working days, due to their complexity, but remained within the extended timescale outlined in the policy.

All housing complaints were addressed within policy timescales with average response time at stage 1 of 11 working days and 15 working days at Stage 2.

One case was escalated to the Housing Ombudsman Service (HOS) during the year, and this remains outstanding with the HOS. There were no findings of non-compliance with the HOS Complaint Handling Code in 2025/26.

The Tenant Satisfaction and Complaint Report 2025-26, which includes the HOS Self-Assessment 2026 and the Housing Management Board response can be found published on our website at Complaints and compliments annual reports - Telford & Wrekin Council.

Customer Relationship Team priorities for 2026/27

During 2026/27, the Customer Relationship team will focus on a number of key priorities:

- Our focus for 26/27 will be to communicate across the organisation the importance of delivering clear, customer-centred messaging, strengthening expectation management, effective handovers, strong case ownership, timely responses, and proactive escalation and improving consistency across all interactions.
- Supporting all services to meet response timescales in line with the Ombudsman Service's complaint handling codes
- Continue to drive an improvement in the percentage of complaints responded to within timescales, above 90%
- Complete all necessary self-assessments and providing dashboards of performance data to senior management to drive continuous performance improvement
- Continue to support service improvement through the Customer Insight Programme and utilising our Mystery Customer Volunteers
- Work to maintain low levels of maladministration findings by the Local Government & Social Care Ombudsman & Housing Ombudsman Service
- To complete a review of customer service training

The Customer Relationship team continues to support service areas to both manage and learn from complaints. The key services they offer are:

1. To manage and support the Council's approach to customer intelligence, ensuring we robustly manage and learn from our interactions with customers
2. Perform in-depth and snapshot reviews of our services, our key physical front doors and digital front door
3. Provide services with complaints advice and support, including support with persistent and unreasonable complainants
4. Provide reports on the quality of complaint responses and make recommendations for improvement
5. Act as a critical friend to challenge service practice
6. Provide advice on drafting comprehensive responses to complaint investigations
7. Continue to escalate overdue complaints to Directors
8. Provide regular dashboards/ complaints samples to Directors, and performance is reported monthly to the Senior Management Team

Telford & Wrekin Co-operative Council

Protect, care and invest to create a better borough

Adult Statutory Complaints and Feedback Report

Improving our Customer Experience

Annual Report 2025/26

Contents

Purpose of the Report

- To report statistical information to Members and Officers detailing Telford and Wrekin Council's Adult Social Care complaints and compliments from 1 April 2025 to 31 March 2026.
- To provide an overview of Telford and Wrekin Council's latest customer feedback about Adult Social Care, from the national Adult Social Care Survey (ASCS) and Survey of Adult Carers in England (SACE) for 2025/26.
- To provide an open resource to anyone who wishes to understand feedback about local services.
- To outline the key developments and planned improvements to the complaints processes operated by the Council.
- To consider how the learning from complaints can be used to improve the overall customer experience.

Introduction

This is the Complaints Manager's Annual Report for Adult Social Care. It is a statutory requirement to prepare an Annual Report each year concerning the complaints activity within Adult Social Care that can be made available to anyone on request. This must:

1. Specify the number of complaints received.
2. Specify the number of complaints upheld.
3. Specify the number of complaints that we have been informed have been referred to the Local Government & Social Care Ombudsman
4. Summarise:
    a. The subject matter of the complaints received.
    b. Any matters of general importance arising out of these complaints, or the way in which these complaints were handled.
    c. Any matter where action has been, or is to be, taken to improve services as a consequence of these complaints.

This report provides information about complaints made between 1 April 2025 and 31 March 2026 under the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.

Highlights 2025/26

CQC Rated **GOOD**	**25** **average days to respond to a Statutory Complaint**	**127** **compliments received in 2025/26, an increase of 13% from 2024/25**
Improved scores in 2025/26 national surveys (ASCS and SACE)	**Customers' experiences continue to inform improvements to services**	**All complaints responded to within statutory timescales**

Across Adult Social Care we welcome people's views and ideas to improve experiences and outcomes for people with care and support needs in Telford and Wrekin. Feedback received via complaints and other sources continues to provide important insight into how services are experienced and its use continues to help to inform ongoing improvement within Adult Social Care.

Over recent years, Adult Social Care has continued to strengthen how feedback is used, moving from responding to individual issues, to embedding learning within processes and systems, and increasingly focusing on how services are experienced and understood by people, families, and carers. This forms part of the Adult Social Care Quality Assurance Framework.

Adult Social Care continues to build on its established strengths, including co-production, engagement, and a focus on promoting people's independence. Alongside this, work is progressing to further evolve services through transformation activity, including the Making Prevention Real programme, which aims to prevent, reduce and delay the need for care with the overarching ambition to maximise independence for residents.

During 2024, The Care Quality Commission (CQC) assessed Telford & Wrekin Council's ability to meet its statutory duties under the Care Act Part 1. Confirming Telford & Wrekin Council's Adult Social Care Services as 'Good,' recognising that the services are performing well and meeting their expectations. Their assessment highlighted that: "*Innovative approaches to coproduction, engagement, and inclusion, were embedded in local authority processes. These were supported by the strategic board structures and staff culture*."

The service continues to operate in a context of increasing demand, cost pressures, and wider national policy developments. Within this context, it is positive to see a 13% increase in compliments compared to 2024/25 and improved scores in both the national surveys

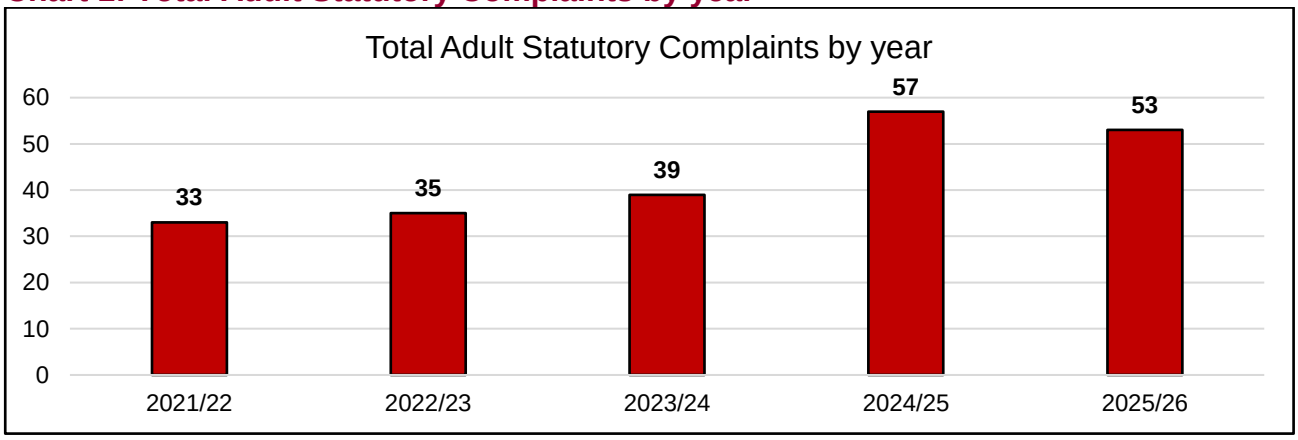
(ASCS/SACE), although applying learning from feedback remains important and a key focus.

Performance during 2025/26 has remained stable across key measures, including the timeliness of responses and the proportion of complaints upheld. Feedback continues to contribute to improvements in communication, financial processes and practice, and helps build a clearer understanding of how people experience Adult Social Care processes and decision-making.

Adult Statutory Complaints 2025/26

We received 53 Adult Statutory Complaints between 1 April 2025 and 31 March 2026. The chart below compares the number of statutory complaints we have received over the past five years. To provide some context, Adult Social Services have received 7,921 contacts from new people in the year, and 2,139 people are receiving long term services. Some cases can be complex, and this is recognised in the complaint handling timescales outlined in the regulations.

Chart 1: Total Adult Statutory Complaints by year



There has been a decrease in the number of complaints that were formally logged under the statutory complaints process in in 2025/26. In 2025/26 53 complaints were received in writing, and a further 12 concerns were resolved under the 24hr resolution process for oral complaints representing 65 concerns/ complaints in total. This demonstrates an overall reduction in the number of concerns raised during 2025/26 from the 81 raised during 2024/25 to 65 that were raised during the year.

In 2025/26 fewer customers raised complaints orally which resulted in more complaints being formally logged rather than resolved under the 24-hour resolution process. The cases resolved within 24-hours are also reviewed, and learning identified, and this feedback is used to inform service improvements.

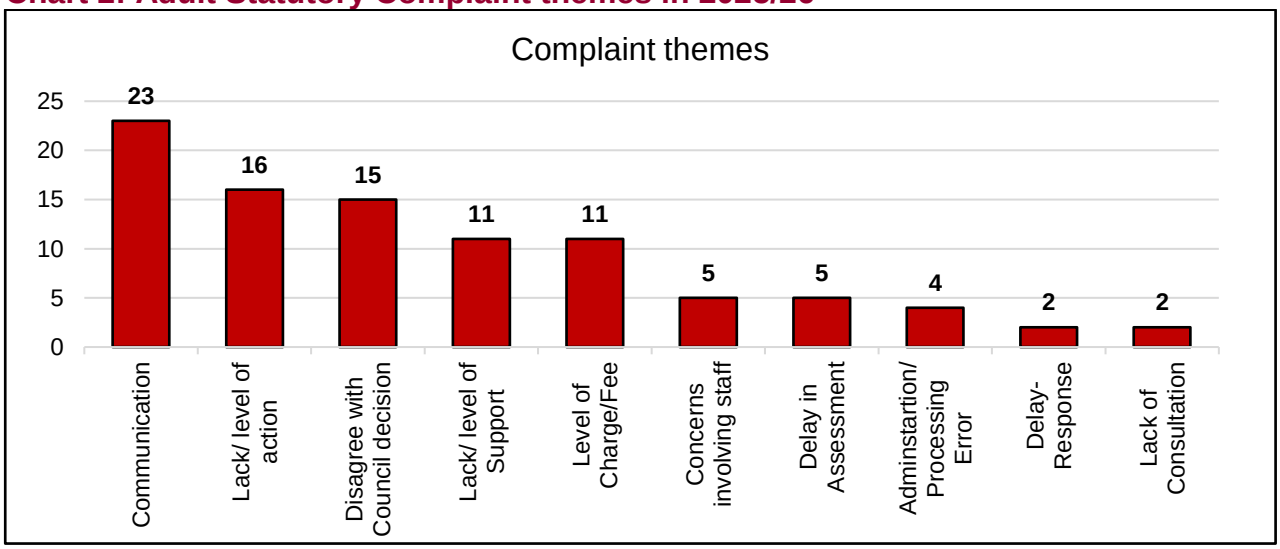
Customer Access Channels and Digital Contact

Complainant channel	Number of complaints
Email	33
Web form	9
Telephone	7
In person	1
Letter	3
Total	**53**

In 2025/26, 79% of Adult Statutory Complaints were received via a digital access channel, including via our online complaint web form and by email directly to the Customer Relationship team. This has remained in line with 2024/25 (79% via digital access channels). Whilst we have seen an increase in customers making contact via digital channels, we continue to ensure that customers can raise concerns via traditional access channels.

Complaint Themes

Chart 2: Adult Statutory Complaint themes in 2025/26



Themes are self-explanatory and give a clear indication of types of concerns raised.

Complaints received

Whilst 53 complaints were received during the year, 56 responses were issued as some complaints remained outstanding on 31 March 2025 and were completed during 2025/26.

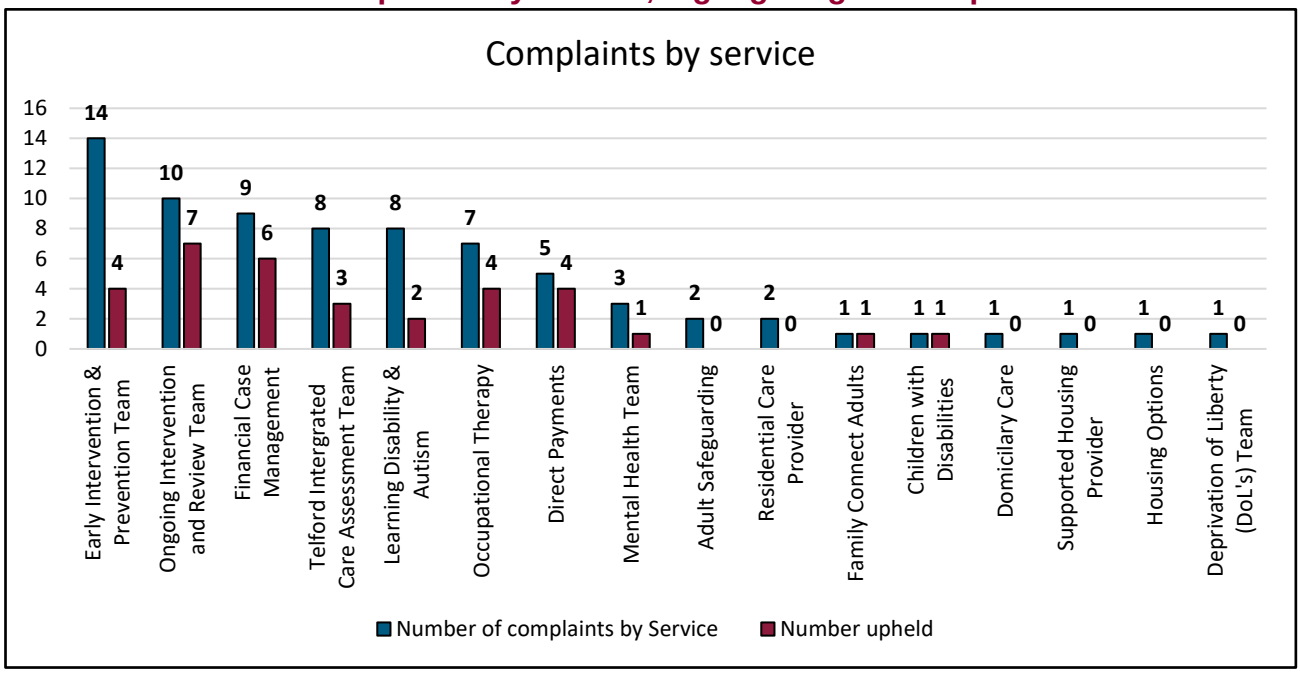
Of the 56 complaints completed,

- 43% (24) were upheld,
- 52% (29) were not upheld,

- 5% (3) were dealt with via another method such as resolved at service.

The chart below includes the number of complaints received by each service. Please note that the number of complaints detailed below is higher than the overall total because some complaints had multiple issues raised with different teams. This chart seeks to show all the services against which issues were raised, meaning that an individual complaint may be counted multiple times within it.

Chart 3: Number of complaints by service, highlighting those upheld



There were 14 complaints for the Early Intervention & Prevention Team, of these 4 were upheld (29%). Themes included concerns about communication from the team, lack/ level of action and level of charge/fee.

There were 10 complaints received that had an element related to the Ongoing Intervention and Review Team, 7 of which were upheld (70%). Themes include communication concerns about social workers or the team, lack/ level of action, a perceived lack of consultation and the level of charge/fee.

There were 9 complaints received that had an element related to the Financial Case Management Team, 6 of which were upheld (67%). Themes included lack of communication, concerns involving staff, level of support, lack/level of action, and administration/ processing error.

There were 8 complaints received that had an element related to Telford Integrated Care Assessment Team, three of which were upheld (38%). Themes included lack of communication with workers or the team.

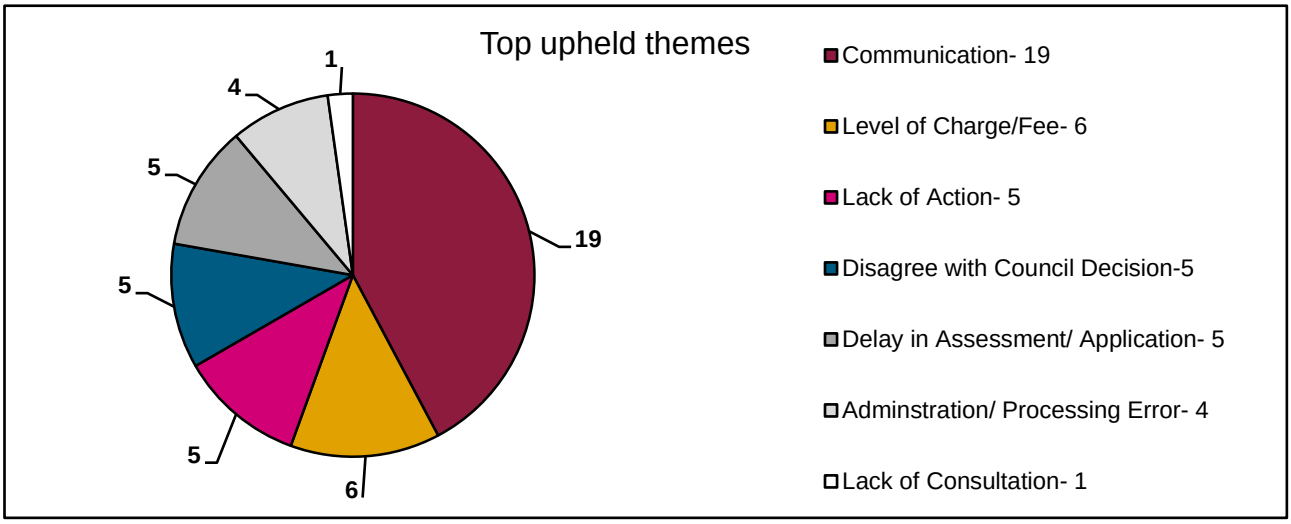
There were two complaints that involved residential care providers, one involved supported accommodation care providers and one complaint was for a domiciliary care provider, all of which were not upheld. Both complaints related to lack/level of support.

Two complaints involved a joint response from the Shrewsbury and Telford NHS Hospital Trust and Midlands Partnership NHS Foundations Trust, which involved lack of support, and information sharing, needs not met and conflict of interest. The issues were related to clarification of safeguarding processes and actions. In both cases the complaint was found to not be upheld for Telford & Wrekin Council.

Themes of upheld complaints

Of the 24 upheld complaints, the top themes raised were as detailed in the chart below.

Chart 4: Upheld themes



The above categories are self-explanatory and give a clear indication of the overall areas of our service or aspects of our work that had the most upheld complaints. Please note that some themes may be counted twice in the chart above as a complaint may have involved multiple teams and multiple themes.

The chart indicates that communication was a key theme in most complaints, accounting for 19 instances across 13 of the upheld complaints (54%). This covers a variety of concerns including a lack of or inadequate communication from a worker, lack of response to emails, failure to respond to requests made or keep the person or their family/ carers updated on progress.

Level of charge/fee was a theme in complaints accounting for 6 instances across 6 upheld complaints (25%) which includes incorrect invoices being sent, delays in confirming that there would be a financial assessment and that a contribution to funding care would be required and contributions calculation incorrect.

Lack/ level of action was a theme in complaints accounting for 5 incidents across 4 upheld complaints (3%).

Timescales for responses

The 2009 regulations set a benchmark for all Adult Statutory Complaints to be investigated within six months. When an Adult Statutory Complaint is received, we negotiate a timescale with the complainants, depending on the complexity of the case, this is typically 35 working days. We aim to respond to all Adult Statutory Complaints within a maximum of 65 working days.

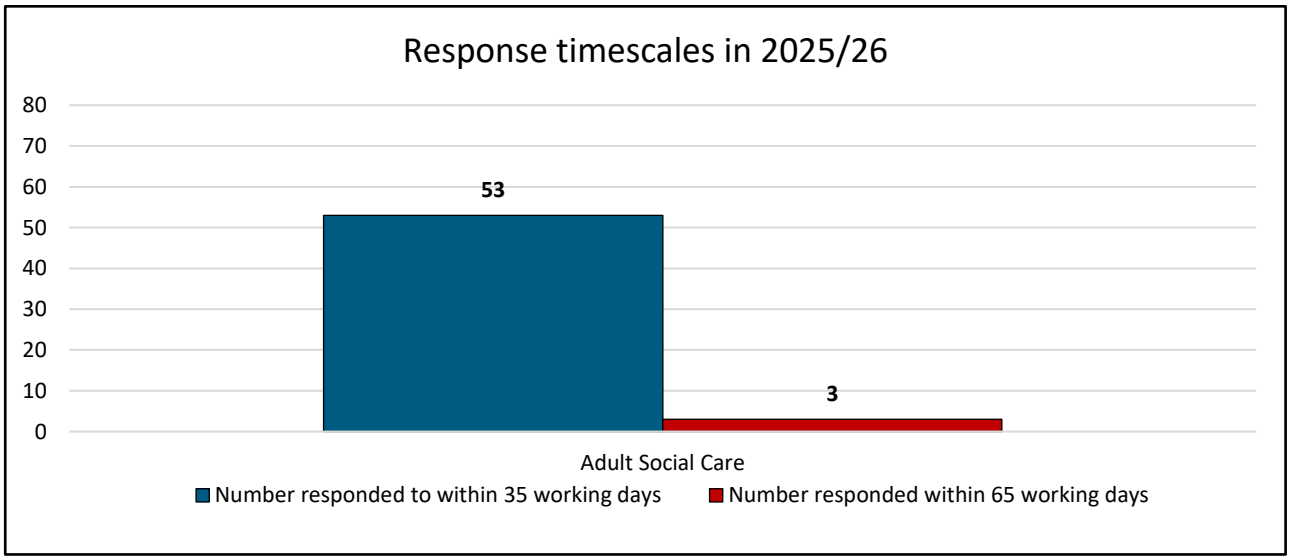
In 2025/26, the average number of working days to respond to an Adult Statutory Complaint was 25 working days. This is a marginal increase on the 24 working days achieved in 2024/25 but significantly lower than the typical 35 working days negotiated for a response.

Three cases did exceed the typical 35 working days; however, all cases were responded to within the maximum 65 working days that Telford and Wrekin Council aim to respond by. No cases exceeded the six months outlined in the regulations during the year.

Adult Social Care continues to focus on maintaining strong response times. Performance remains significantly improved compared to previous years, largely due to the changes introduced to the complaints procedure in 2021. These include agreeing a negotiated timescale with customers, which helps to manage expectations more effectively and has led to fewer complaints exceeding agreed deadlines. Additional measures have also been implemented at a service level to further support timely responses.

A key function within Adult Social Care is the Assurance and Transformation Team, within which the Quality and Complaints Officer supports the complaints management and monitoring processes, alongside the Customer Relationship Team. Complaints are rated based on timescales and allocated to Service Delivery Managers. Performance against timescales continues to be discussed at Leadership Team Meetings. For a breakdown, see the chart below.

Chart 5: Response timescales at Stage One



56 complaints have been responded to in year, 53 responses were sent within 35 working days (95%), and 3 further responses were sent within 65 working days. No cases exceeded 65 working days or exceeded six months.

Learning and outcomes from Adult Statutory Complaints

Complaints provide a valuable source of insight, enabling the identification of recurring or systemic issues as well as opportunities for service improvement. However, quantitative data alone does not fully capture local attitudes towards complaints or the effectiveness of responses. It is therefore essential to focus on the lived experience of individuals, understanding the impact complaints have had and ensuring that lessons learned inform service improvements for others.

While learning is most commonly drawn from complaints that are upheld, the Council recognises that there are also occasions where, despite no fault being found, there remain opportunities to strengthen services and enhance people's experience.

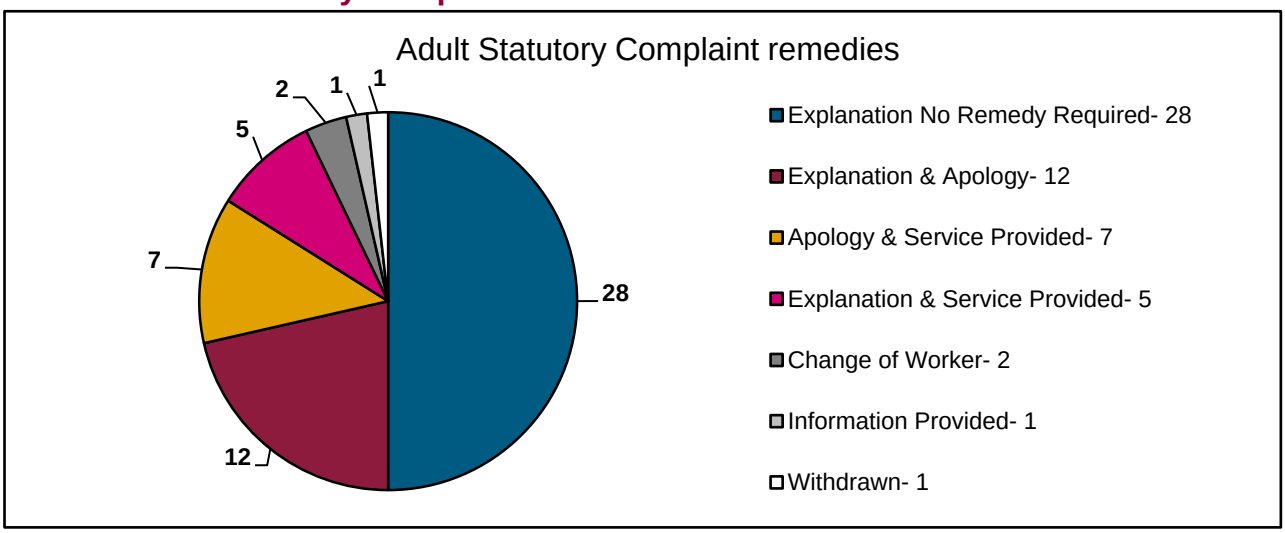
In some cases, investigations highlight additional issues that extend beyond the scope of the original complaint and require further action. In response, the Customer Relationship team, working closely with Adult Social Care's Quality and Complaints Officer, continues to provide ongoing advice and support to managers. This includes guidance on effective complaint handling, resolution, and responding to representations, helping to ensure a consistent and constructive approach across the service.

Adult Social Care is committed to continuous learning and improvement, with a strong focus on achieving better outcomes for people by placing their experiences at the centre of service delivery. Feedback from people who use services, alongside input from carers and families, is a key component of quality assurance and is used to understand experiences and inform service improvement. We are committed to learning from all feedback, regardless of source or format.

Quality assurance is embedded within everyday practice, supported by an intelligence-led approach of reviewing, reflecting, improving, and sharing learning. This approach is underpinned by the Adult Social Care Quality Framework, within which statutory complaints form an important element.

As part of the governance framework, quarterly quality assurance reports are produced and considered by the ASC Quality Assurance Delivery Group and the ASC Assurance Board. These reports incorporate feedback from people with care and support, carers, and families, including learning from complaints, concerns resolved at service level, compliments, and other feedback. This intelligence is used to inform ongoing service development and to improve outcomes for people with care and support needs in Telford and Wrekin.

Chart 6: Adult Statutory Complaint remedies in 2025/26



Of the remedies recorded against Adult Statutory Complaints in 2025/26:

- 46% were to provide an explanation where no remedy was provided.
- 20% were to provide an explanation and apology.
- 13% were to provide an apology and provide a new or change in service.
- 9% were to provide an explanation and provide a new or change in service.

Positive Improvements

Throughout the year, we record the learning identified from each complaint to build up a picture of common themes or trends. Learning from corporate complaints and other feedback about people's experiences is considered alongside that from statutory complaints as part of Adult Social Care quality assurance activities.

Below are examples of service improvements and actions taken as a result from learning from complaints during 2025–26. In addition, a range of individual remedies were also completed to address people's specific concerns.

Communication with people with care and support needs, family members, and unpaid carers

- Learning has been embedded across teams to reinforce the importance of timely and proactive communication with people and families, particularly during allocation delays, reviews, or changes of worker. This includes when work is continuing in the background, and ensuring appropriate handovers are completed.
- Internal communication processes have been improved, including resolving technical issues affecting telephone diverting and message handling.
- There has been continued emphasis on respecting people's communication preferences and explaining decisions clearly.

- Reflective practice at both team and individual levels has supported improved communication and professional presentation.
- Feedback has been shared with Customer Services and Financial Case Management teams to improve the clarity of explanations provided to the public about processes, access arrangements, and next steps.

Assessment and support planning

- Management oversight and case management arrangements were strengthened to support timely and coordinated assessments and reviews.
- Clarity and consistency were improved around Disability Related Expenditure (DRE), including refreshed guidance, FAQs, and training to support clearer conversations with people and families.
- Process improvements have been implemented to support timelier assessments and funding requests in capital-drop related cases.
- Triage arrangements were reviewed to help ensure the right teams are involved at the right stage, particularly where needs are complex or involve more than one service.
- Team practice has been strengthened through additional training and management support, further helping to ensure that decisions about care, capacity, and safety are made lawfully and in people's best interests.
- Practice improvement has focused on ensuring the person's voice is clearly considered and reflected in assessments and decision-making.
- Ongoing collaboration with the Making It Real Board is supporting efforts to make assessment processes clearer and more understandable.
- A new system has been introduced to monitor the duration of short-term placements.

Charging for care

- Financial Case Management processes have been reviewed and strengthened to ensure information provided by families is considered promptly, agreed actions are followed through, and families are kept informed.
- Enhanced monitoring arrangements have been introduced for financial assessments, including regular case review and quality assurance checks.
- Continued work has focused on improving how financial assessments, contributions, and charges are explained to people and families.
- Learning was shared across Financial Case Management Team and social work teams to reduce errors and improve communication when charges are queried or amended.
- Ongoing work with experts by experience continues to help inform improvements to the format and accessibility of financial communications. This work is also being used to shape borough wide communication campaigns, for example the use of direct debit to pay for support.

Provision and Experience of Care and Support

- Learning from complaints has been used to support providers to reflect on feedback from people and families and adapt approaches to engagement, communication, and individualised support.
- Practical arrangements were reviewed and strengthened to reduce disruption and improve coordination. This included clearer communication about equipment delivery and other practical requirements, improved planning to avoid missed or delayed sessions, and follow-up where issues arose.
- The payroll provider has been supported to strengthen their understanding on support plan limits and escalation arrangements where discrepancies arise.
- Provider quality assurance and follow-up arrangements have been used where complaints highlighted concerns about the delivery of care, communication, or responsiveness.
- Escalation and follow-up arrangements have been strengthened with external providers and contractors to reduce delays and improve communication with people and families, including where delays were outside the Council's direct control.
- Learning has been reinforced with providers and staff about the importance of timely updates when appointments are delayed or services need to change.
- There has been a continued emphasis on understanding the impact of services on people's day-to-day experiences, alongside ensuring procedural requirements are met.

Other areas of learning

- Ongoing work with health partners through the Care Transfer Hub has supported improvements to joint working and coordination during hospital discharge.
- Learning has been shared with Approved Mental Health Professional (AMHP) services and partner organisations to improve how processes are explained, particularly in relation to hospital admission and mental health pathways.
- Additional learning and development needs were identified through complementary case file audit activity, informing ongoing workforce development.

Feedback from national surveys

Another important source of customer feedback on Adult Social Care services comes from two surveys conducted across England:

- The Adult Social Care Survey (ASCS) – conducted annually.
- The Survey of Adult Carers in England (SACE) – conducted every 2 years.

Both surveys were carried out in 2025/26, and the preliminary results are summarised in the tables below, showing a positive direction of travel compared to the previous published results for the majority of measures.

ASCS results

Measure	2025/26 result	2024/25 result	Trend
Social care quality of life (composite measure of responses to 8 questions in ASCS)	19.1	18.8	
Adjusted social care quality of life (composite measure of responses to 8 questions in the ASCS adjusted to show the impact of ASC)	0.449	0.429	
Overall satisfaction with people that use care and support	63.2%	61.4%	
The proportion of people who feel they have control over their daily life	77.6%	75.7%	
The proportion of people who use services that find it easy to find information about services	69.6%	57.6%	
The proportion of people who use services who feel safe	71.6%	75.2%	
The proportion of people who use services who reported that they had as much social contact as they would like	48.9%	41.0%	

SACE results

Measure	2025/26 result	2023/24 result	Trend
Adjusted quality of life for carers (composite measure of responses to 6 questions in the SACE)	7.4	6.9	
Overall satisfaction of carers with social services	39.9%	38.8%	
The proportion of carers who report they have been included or consulted in discussion about the person they care for	74.1%	58.8%	
The proportion of carers who use services who find it easy to find information about services	64.8%	63.3%	

Other feedback and the actions taken to improve our services

We gather feedback from various sources to improve the service we provide to people who use our services, their carers, and families. For example;

- Adult Social Care feedback forms – using QR codes, electronic and paper forms to gather feedback from people. Feedback from 409 respondents reflects a service where people feel supported, listened to, and understood, with workers showing empathy and reassurance, while continuing to learn from feedback to strengthen consistency, communication, and ongoing support**.** Responders confirmed an overall satisfaction of 74%.
- Feedback from Experts by Experience and the Making it Real Board and several other partnership boards. Over the last 6-12 months we have worked with 52 experts with lived experience/parent carers. Their involvement ranges from attending meetings, providing feedback, and taking part in consultation, engagement and co-production activity with people participating flexibly around their areas of interest.
- The Co-production Conference 2025, which brought together 55 participants, including experts with lived experience of Adult Social Care, alongside colleagues from social care, health services, partner organisations, and the wider community saw attendees coming together to share learning, strengthen relationships, and champion collaborative working.
- Individual feedback through frontline workers.
- Staff forum.
- Complaints, compliments, and comments.
- Experiences of people / carers / families highlighted through employee awards and other mechanisms.
- Other surveys and consultations.
- Mystery Customer exercises, which this year included a review of the Live Well Website.
- Feedback from community and voluntary organisations/groups, staff, and partners.
- Feedback from partners.
- External reviews, including Care Quality Commission assessment framework for local authority assurance.

This feedback has informed several developments during the year. Examples include the:

- Continued development of the “Knowing Where to Go” guidance to help people, carers and families better understand how to access Adult Social Care and related support. The main Adult Social Care guide has been shared with residents, with additional guides for Occupational Therapy and Mental Health in development

and being co-produced with Experts by Experience. During 2024, The Care Quality Commission (CQC) assessed Telford & Wrekin Council's ability to meet its statutory duties under the Care Act Part 1. Telford & Wrekin Council's Adult Social Care Services as 'Good,' recognising that the services are performing well and meeting their expectations. Their assessment highlighted that: "*Innovative approaches to coproduction, engagement, and inclusion, were embedded in local authority processes. These were supported by the strategic board structures and staff culture.*" and that there is "*Strong leadership and a culture of transparency and learning.*"

- Development of clearer public guidance on escalation routes, supporting people to understand who to contact if concerns are not resolved and how issues can be raised appropriately.

- Review and refresh of standard letters and public-facing information, including appointment, outcome, and closure letters, with a focus on accessibility, tone, and clarity. Initial review work has been progressed within Occupational Therapy and Financial Case Management, with further areas planned for 26/27.

- Continued development of public-facing information about pre-assessment and pre-review stages, to help set clearer expectations about processes and timescales.

- Implementation of structural changes to strengthen co-production and improve focus, alongside ongoing co-production activity through the Making It Happen programme. This included work on a range of priorities, including the carer's assessment overview, Disabled Facilities Grant information, Adult Social Care transport policy, financial processes, and targeted "Knowing Where to Go" guidance.

- Continued recruitment and promotion of opportunities for Experts by Experience to be involved in service development and staff recruitment, supported by clearer pathways for involvement and communication.

- Ongoing development and promotion of the Telford and Wrekin online all-age community directory, Live Well Telford. Working with Public Health on the continued development of Live Well Hubs ensuring they also meet the information, advice, and guidance needs of residents.

- Continued delivery and review of prevention-focused activity, including work aligned with the Making Prevention Real programme.

- Annual Review of the Carers Wellbeing Guide, ensuring it remains up to date, relevant and accessible.

- Learning from wider engagement with parent carers and community groups has been used to inform improvements in communication and awareness of services, including clearer messaging about eligibility, availability, and inclusive access.

- Continued co-production and review of Disability Related Expenditure (DRE) public guidance to support clearer understanding of financial processes and decision-making.

- Review and redesign of the Financial Declaration form, informed by lived experience, to improve clarity and usability ahead of formal sign-off.

- Ongoing review of financial communications, including letters and public information, to improve accessibility and understanding.

- Development of a Local Offer document to further enhance transparency and accessibility of information about what Adult Social Care is and the available services and support.

All feedback from both complaints and other sources is used to continually improve our services. We will continue to develop our services based on this feedback and also develop new and innovative ways to gather feedback from people, their families, and carers to ensure that we continue to provide the best possible service to them.

Complaints made to the Local Government & Social Care Ombudsman

The Local Government & Social Care Ombudsman (LGSCO) has the authority to investigate complaints when our own process has not resolved them. Complainants can refer their complaint to the LGSCO at any time, although the Ombudsman will generally refer them back to us if they have not been through our process first. In exceptional circumstances, the Ombudsman will look at things earlier; this usually being dependant on the vulnerability of the person concerned.

13 cases were escalated to the LGSCO in 2025/26. Three cases have been determined in the year. One case was upheld and the Ombudsman was satisfied that the fault and injustice had already been remedied by the Council before it had been escalated. One was determined to be a premature referral and one that the Ombudsman decided not to investigate. There are 10 cases that remain ongoing on 31 March 2026, the Council has not yet received the details of seven of the cases that are ongoing at the Ombudsman.

Concluding Comments

This report demonstrates that Adult Social Care continues to manage complaints effectively, with overall complaint volumes remaining low and showing a reduction in 2025/26. The total number of complaints handled across both statutory and 24-hour

resolution processes reduced from 81 in 2024/25 to 65, reflecting both fewer statutory complaints and a continued decrease in oral complaints resolved at an early stage.

The service maintains a strong focus on early resolution, accessibility of the complaints process, and learning from feedback. The sustained level of complaints indicates that people understand how to raise concerns, while the Council continues to respond constructively and use feedback to drive service improvement.

Performance in complaint handling remains strong, with the proportion of complaints upheld broadly consistent at 43%, indicating a balanced and proportionate approach to investigation. Response timeliness also remains within expected parameters, with an average of 25 working days, well within locally agreed timescales and significantly below the statutory maximum. Only a small number of cases exceeded 35 working days, and all were concluded within the Council's maximum timeframe.

Learning from complaints continues to form a key part of quality assurance arrangements, directly informing service improvements across a range of areas during the year. This reinforces the service's commitment to reflecting on practice, addressing issues where they arise, and improving outcomes for people who use services.

Overall, the findings of this report provide assurance that Adult Social Care has effective systems in place for managing complaints, supporting timely resolution, and embedding learning to improve service quality and user experience. The changes to local procedures and our complaints policy continue to ensure that target timescales are being met.

Oversight and support provided

The Customer Relationship team continues to support service areas to both manage and learn from complaints. The key services they offer are:

1. Complaints advice and support
2. Quality assurance of statutory complaint responses
3. Act as a critical friend to challenge service practice.
4. Support with persistent and unreasonable complainants.
5. Assistance in drafting comprehensive responses to complaint investigations.
6. Continue to escalate overdue complaints to Directors.
7. Provide regular dashboards/ complaints samples to Directors, and performance is reported monthly to the Senior Management Team

The Quality and Complaints Officer (who sits within the Adult Social Care Assurance and Transformation Team) supports the complaints management and monitoring processes within Adult Social Care and works with the service to use feedback from complaints to improve services as part of the Adult Social Care' Quality Assurance Framework.

Priorities for 2026/27

During 2025/26, the Customer Relationship team and Adult Social Care will focus on the following key priorities to further strengthen complaints management and learning:

- Further improving the timeliness and consistency of complaint responses in line with corporate standards.
- Continue providing regular complaint performance data to senior management as part of corporate monitoring and oversight arrangements.
- Strengthening arrangements to ensure that recommendations are implemented and that learning is embedded across services.
- Further developing the digital complaints system to improve efficiency, data quality, and performance monitoring.
- Working in partnership with Adult Social Care staff and experts by experience, to review complaint processes and ensure they remain clear, proportionate and fit for purpose.
- Reviewing local response procedures, resources, guidance, and documentation to support best practice, good quality responses, a personalised approach, and maximising opportunities for learning.
- Continue ensuring compliance with Adult Social Care Accessibility Information Standards, so that complaint processes and responses meet individuals' communication and accessibility needs.

Appendix

Legislation

Section 5 of the Regulations (2009) requires local authorities to consider complaints made by anyone who:

- Is receiving, or has received, services from the Council.
- Is affected, or is likely to be affected, by the action, omission, or decision of the Council.

A person is eligible to make a complaint where the local authority has a power or duty to provide, or to secure the provision of, a service for someone.

The 2009 regulations set a benchmark for all complaints to be investigated within six months. If the investigation is going to exceed this timescale, the local authority should write to the complainant to advise them of this and explain the reasons why.

The Corporate complaints process is used for anyone else who makes a complaint.

What is a complaint?

A complaint is generally defined as an expression of dissatisfaction or disquiet about actions, decisions or apparent failings of a local authority's Adult Social Care provision that requires a response. We will always try to resolve problems or concerns before they

escalate into complaints. If it is possible to resolve a matter immediately (or within 24 hours), there may be no need to engage in the formal complaints process.

The purpose of a complaints process is to resolve concerns raised by service users and their representatives, to deliver outcomes that are appropriate and proportionate to the seriousness of the issues, and to ensure that changes are made in response to any failings that are identified.

To achieve this, the approach to handling complaints must incorporate the following elements:

- Engagement with the complainant or representative throughout the process
- Agreement with them about how the complaint will be handled.
- A planned, risk-based, and transparent approach
- Commitment to prompt and focussed action to achieve the desired outcome.
- Commitment to improvement and the incorporation of learning from all complaints

A complaint must be made no later than 12 months after:

- The date on which the matter that is the subject of the complaint occurred, or
- If later, the date on which the matter that is the subject of the complaint came to the notice of the complainant.

The time limit will not apply if the Complaints Manager is satisfied that:

- The complainant had good reasons for not making the complaint within the time limit, and
- Notwithstanding the delay, it is possible to investigate the complaint effectively and fairly.

Who can make a complaint?

A complaint may be made by a relative, carer or someone who is acting on behalf of a person who has died, or is unable to make the complaint themselves because of:

- Physical incapacity, or
- Lack of capacity within the meaning of the Mental Capacity Act 2005, or
- Has requested that the representative act on their behalf.

Complaints may be received through a variety of media (phone, letter, email, feedback form, personal visit, etc.) and at various points within the Council (to staff members, via respective web addresses, direct to the Customer Relationship team, etc.).

The Adult Statutory Complaints Procedure of Telford & Wrekin Council

When a complaint is first received, the Customer Relationship team will conduct an initial assessment of it to determine its issues, severity, and potential impact, and to identify any other organisations that may be involved.

When someone contacts the Customer Relationship team to make a complaint, they will acknowledge it within three working days. They will also offer a meeting to the complainant to discuss the matter and establish their desired outcome. Agreement is sought on the following points:

- The detailed account of the complaint
- The complainant's view of the impact it has had on them.
- Specific reference to any aspect that requires immediate action within the adult safeguarding/protection procedures.
- Details of the outcome(s) that will resolve the matter from the complainant 's perspective.
- Whether the subject of the complaint could relate, entirely or partly, to another body (e.g. an NHS body or an independent care provider) and therefore a joint approach may be needed.
- How the complaint will be investigated and by whom
- How long it should reasonably take to investigate the matter and provide the complainant with the Council's formal response.
- How often, and by what means, the complainant will be updated on the progress of the investigation.
- Whether an advocacy, translation or other support service is required.
- Whether the involvement of an impartial mediator might contribute to a satisfactory resolution of the complaint

When an Adult statutory complaint is received, we negotiate a timescale with complainants, depending on the complexity of the case. We aim to respond to all Adult Statutory Complaints within a maximum of 65 working days.

The Quality and Complaints Officer supports the complaints management and monitoring processes. When the investigation is complete, the appropriate manager will write a letter explaining what they have found and what they will do to put things right.

If the complainant is not happy with the final decision or how we have dealt with their complaint, they can refer the matter to the Local Government & Social Care Ombudsman (LGSCO).

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Telford & Wrekin Co-operative Council

Protect, care and invest to create a better borough

Children's Statutory Complaints and Feedback Report

Improving our Customer Experience

Annual Report 2025/26

Contents

Purpose of the Report

- To report statistical information to Members and Officers detailing Telford and Wrekin Council's Children's Social Care complaints from 1 April 2025 to 31 March 2026.
- To provide an open resource to anyone who wishes to understand feedback about local services.
- To outline the key developments and planned improvements to the complaints processes operated by the Council.
- To consider how the learning from complaints can be used to improve the overall customer experience.

Introduction

This Annual Report covers all complaints made about Children's Social Care that were received by the Customer Relationship team and dealt with under the statutory complaint procedure during the period 1 April 2025 to 31 March 2026.

The 2006 Social Care complaints guidance 'Getting the Best from Complaints' (Department for Educations and Skills (DFES), 2006) requires that an Annual Report be arranged by a local authority's Complaints Manager to provide a mechanism by which it can be kept informed about the operation of its complaint procedure. The report should be presented to staff, the relevant local authority committee, and be made available to both the regulator and public. It should provide details about:

1. Representations made to the Council
2. The number of complaints at each stage
3. The types of complaints made
4. The outcome of the complaints
5. Compliance with timescales, and detail complaints resolved within extended, agreed timescales
6. Complaints that were considered by the Local Government & Social Care Ombudsman
7. A review of the effectiveness of the complaint procedure
8. Learning and service improvements, including changes to services that have been implemented and details of any that have not

Please see the Appendix for details of the legislation and procedure.

Highlights 2025/26

Ofsted rating
Outstanding

92%
Responses sent in 20 working days

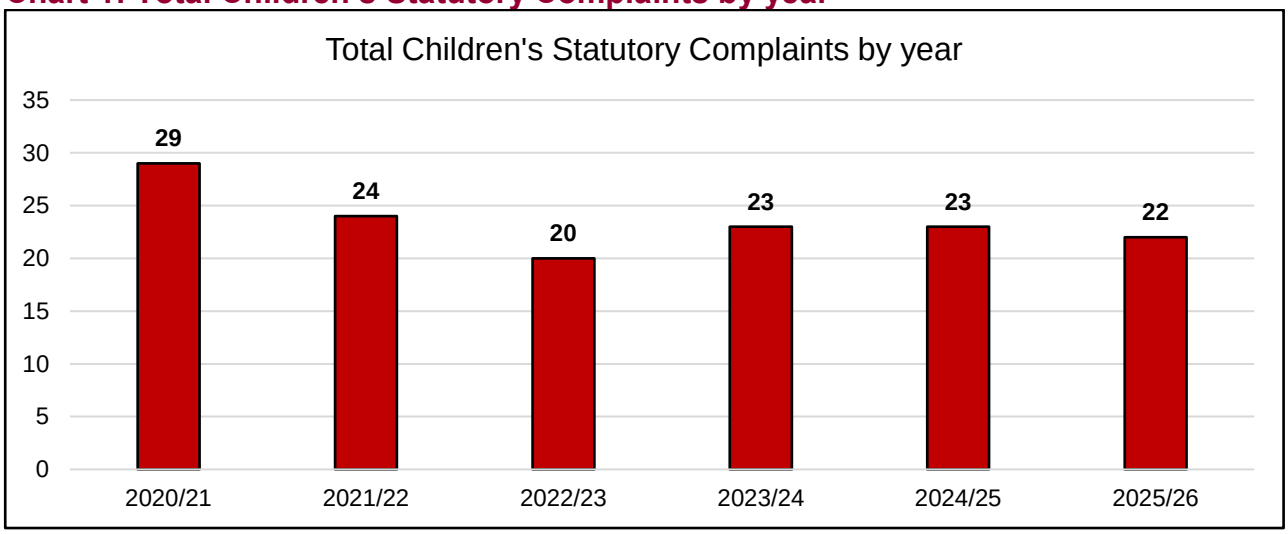
Average of
13 days
to respond to a Statutory Complaint

Children's Statutory Complaints 2025/26

We received 22 Children's Statutory Complaints between 1 April 2025 and 31 March 2026. The number of complaints received is slightly less than the 23 received in 2024/25. To provide some context, Children's Safeguarding and Family Support received a total of 6,670 contacts during the year, this includes telephone calls and emails and had 900 referrals into the service completed during the year.

The chart below shows a comparison of the number of statutory complaints over the past seven years.

Chart 1: Total Children's Statutory Complaints by year



The 22 complaints were all dealt with at Stage One, with four progressing to an independent Stage Two investigation.

Stage	Number of complaints
One	22
Two	4
Three	0

Of the 22 Stage One complaints received, all were completed prior to 31 March 2026. Four Stage Two complaints were received and independently investigated. No Stage Three Panels completed in 2025/26.

Contact Types

Children's Statutory Complaints were received from the following in 2025/26:

Complainant	Number of complaints
Parent	12
Advocate/representative	1
Child/young person	6
Foster Carer	1
Relative	2
Total	**22**

Six complaints were received directly from children and young people in 2025/26.

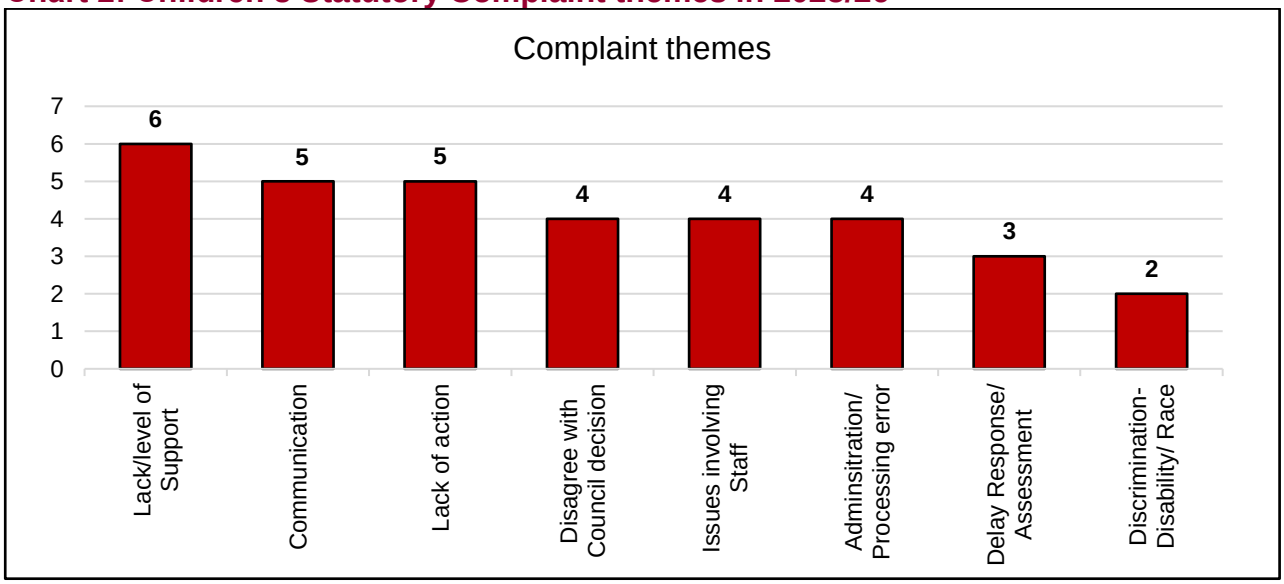
Customer Access Channels and Digital Contact

Complainant channel	Number of complaints
Email	14
Web form	4
Telephone	3
Letter	1
Total	**22**

In 2025/26, 82% of Children's Statutory Complaints were received via a digital access channel, including via our online complaint web form and by email directly to the Customer Relationship team.

Complaint Themes

Chart 2: Children's Statutory Complaint themes in 2025/26



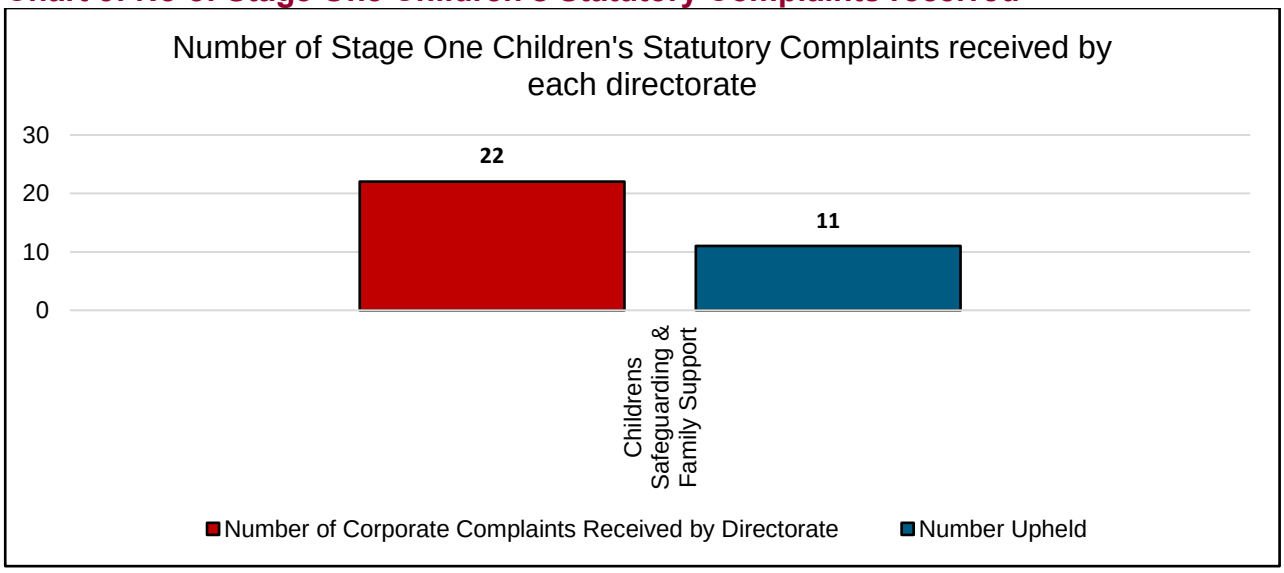
Most of the themes are self-explanatory and give a clear idea about the types of concerns raised in relation to our involvement. Some complaints may have had more than one theme and this is reflected in the numbers above.

No complaints handled under this process involved Child Sexual Exploitation during 2025/26.

Complaints received by directorate

The chart below details the statutory complaints received by each directorate against the number subsequently upheld.

Chart 3: No of Stage One Children's Statutory Complaints received

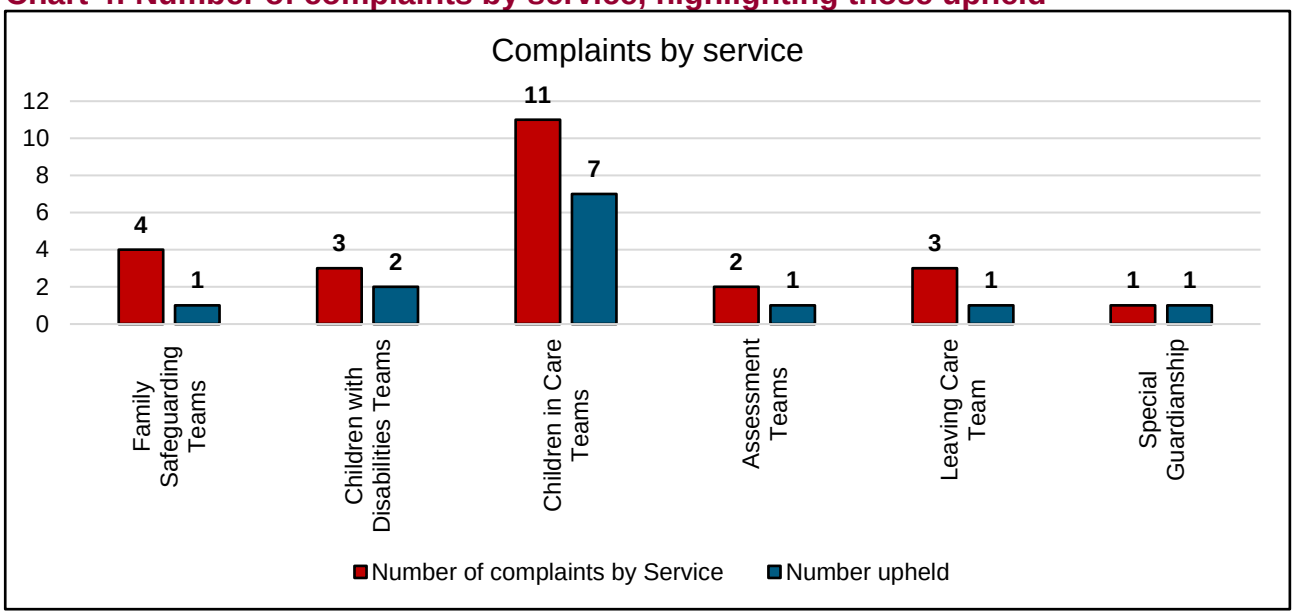


The number of upheld complaints against number received during the year for Children's Safeguarding & Family Support was 50%.

Of the 24 complaints responded to in the year, 54% (13) were upheld, 38% (9) were not upheld and 8% (2) were withdrawn.

The chart below includes the number of complaints received by each service. Please note that the number of complaints detailed below is higher than the overall total because certain complaints had multiple issues raised with different teams. This chart seeks to show all the services against which issues were raised, meaning that an individual complaint may be counted multiple times within it.

Chart 4: Number of complaints by service, highlighting those upheld

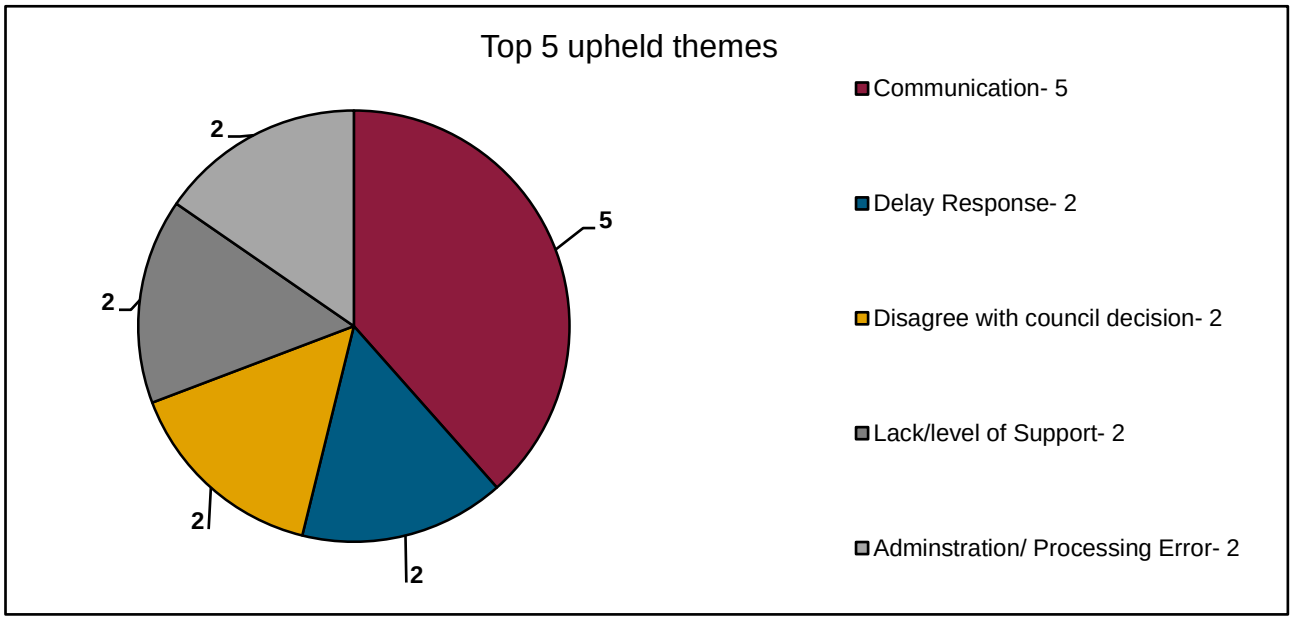


The most upheld complaints were in the Children in Care Teams (7) with 64% upheld and Children with Disabilities Teams (2) where 67% upheld. The Family Safeguarding Teams received four complaints, and one was upheld.

Themes of upheld complaints

Of the upheld statutory complaints, the top themes raised were as detailed in the chart below.

Chart 5: Upheld themes



The above categories are self-explanatory and give a clear indication of the overall areas of our service or aspects of our work that had the most upheld complaints.

This indicates that 38% of upheld complaints had an element of the complaint that related to communication. This covers a variety of concerns including lack of communication around rights to advocacy, delays in providing information and minutes from meetings, information provided was not clear, consistent or timely, inappropriate communication, Lack of response to calls due to incorrect details held on file.

Other concerns include complaints involving lack of support from a worker, a delay in assessment and processing recommendations following an assessment.

Individual management reports are shared with service managers on a regular basis, which allows for greater analysis and interpretation of the data.

Communication continues to be a recurring theme within the top five upheld complaint categories each year. In response, we will take targeted action to address this issue through a coordinated organisation-wide communications plan. This will seek to reinforce the importance of clear, timely and courteous communication at every customer touchpoint. The campaign will remind colleagues of expected standards, including responding promptly to calls and emails, providing clear and concise explanations, managing expectations effectively, and demonstrating common courtesy in all interactions.

Timescales for responses

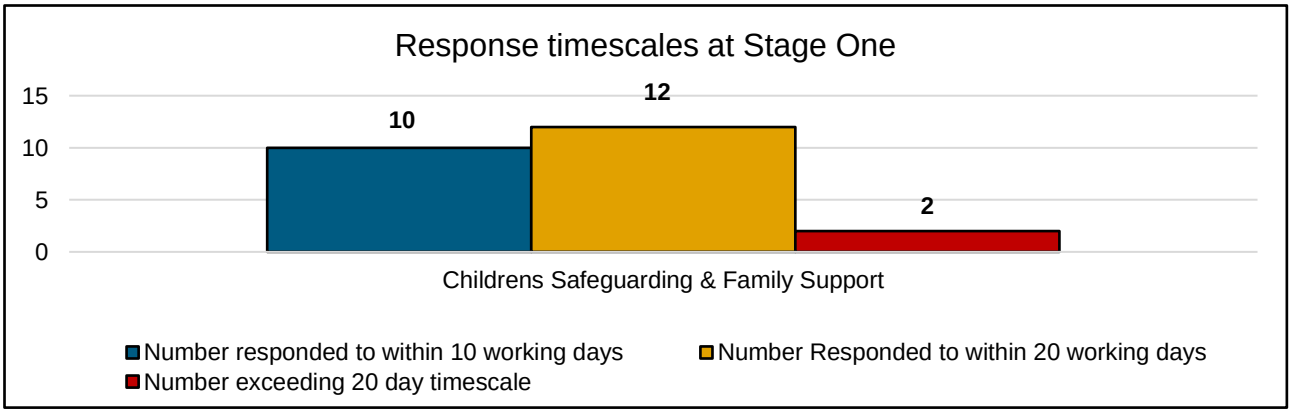
Our Children's Statutory Complaints Policy has been written in line with The Children Act 1989 Representations Procedure (England) Regulations 2006, which outline how Children's Statutory Complaints should be handled and the three stages involved.

Stage One should be an opportunity to resolve the complaint at service level and should be completed within 10 working days. This may be extended to 20 working days in exceptional circumstances and with the prior agreement of the complainant.

Stage Two is an independent investigation that should be completed within 25 working days. This may be extended to 65 working days in more complex cases.

Stage Three is a Panel where the investigations at Stage One and Stage Two are reviewed.

Chart 6: Response timescales at Stage One



Of the 24 complaints that were responded to in the year, 10 were responded to within the 10-working day timescale and 12 were completed within the 20-day extended timescale.

Two complaints exceeded the extended 20 working day timescale; these were particularly complex cases.

The average number of days to respond in Children's Statutory Complaint was 13 working days, which is an improvement on the 14 days achieved in 2024/25.

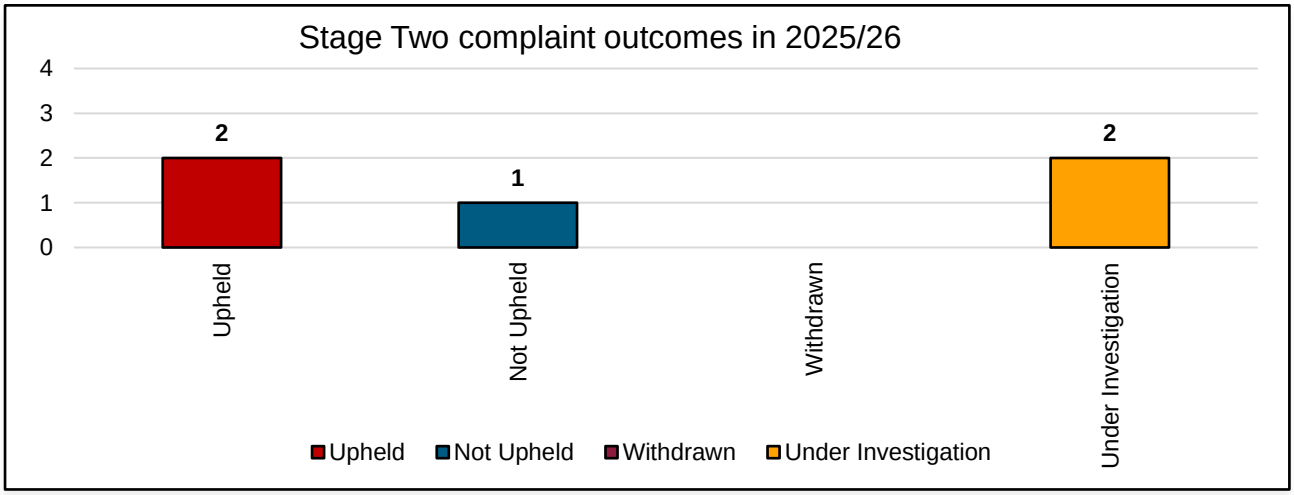
Since November 2020 new procedures have been put in place to improve timescales for responses. Outstanding complaints are highlighted to the Director, Executive Director and Service Delivery Managers on a weekly basis. Six-weekly meetings take place with Directors to review all outstanding cases and learning. More work has been done in 2025/26 to improve timescales further including the continued upskilling of Team Managers and Team Leaders in complaint handling, which has further impacted timescales in some teams.

Generally, timescales have improved in the year. However, a few complex cases have impacted the average number of days to respond.

Statutory Stage Two & Stage Three complaints

During 2025/26, four (17%) Statutory Stage One complaints progressed to Stage Two of the process. One case remained outstanding at 31 March 2026.

Chart 7: Stage Two complaint outcomes in 2025/26



The number of statutory Stage Two investigations in 2025/26 slightly reduced on the 5 received in the previous year, where 5 investigations took place. Most complaints were resolved locally at Stage One of the procedure.

Two stage two investigations were upheld.

It was identified that investigators should meet directly with all children and young people who submit a complaint through the statutory complaint's procedure. This is essential to ensure that their concerns are fully understood and that an appropriate and meaningful outcome is achieved.

The organisation should use learning from complaints to enhance children's experiences by ensuring relevant and thorough questions are asked at the outset of a foster placement.

This will support better matching and informed choice of foster carers, promote placement stability, and help ensure that children feel safe, content, and confident in their placement.

Additionally, it is important that children are reassured that they can trust their social worker and feel able to raise serious concerns if needed. Professionals must remain open and transparent in their decision-making processes, and case notes should clearly and accurately record these decisions to avoid ambiguity or misunderstanding.

The average number of days to complete a Stage Two investigation was 48 days, an improvement on the 71 days in 2024/25 and within the extended timescale of 65 working days.

All complaints were resolved at Stage Two of the procedure however; No case proceeded to a Stage 3 Panel.

Learning and outcomes from Children's Statutory Complaints

Complaints provide valuable insight into how our services are experienced and help us to identify recurring issues, root causes and opportunities for improvement. While complaint volumes and outcomes are important indicators, they do not on their own capture the full impact that a complaint can have on an individual or reflect how concerns are addressed at a local level. Understanding the lived experience of residents and the effect that service failures or misunderstandings can have on them is essential to improving the experience of others in the future.

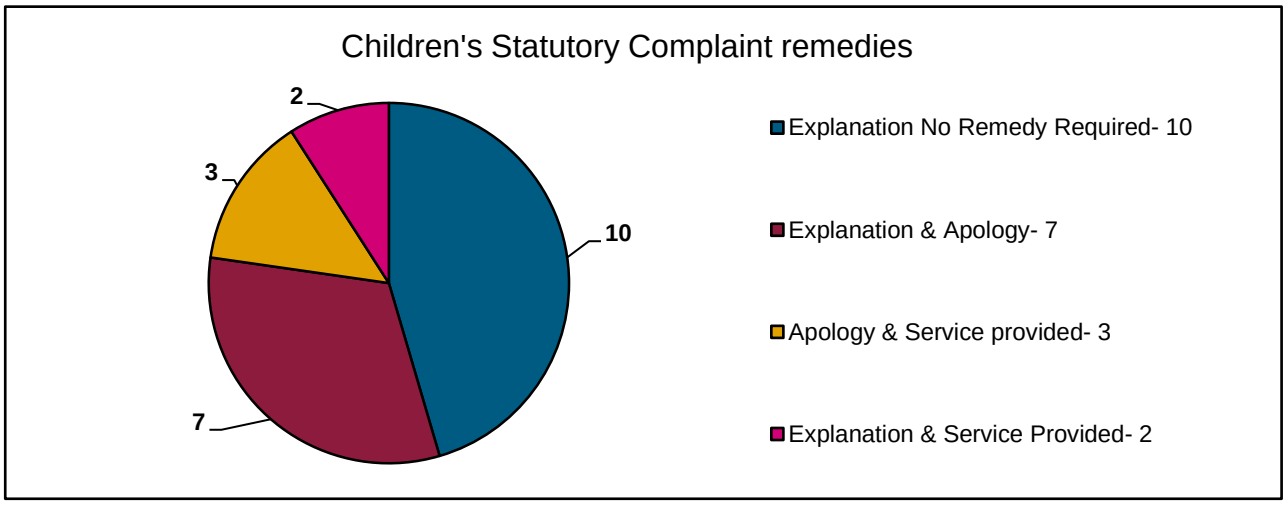
Learning is most often drawn from upheld complaints; however, the Council also recognises that valuable lessons can be identified in cases where no fault is found. In these circumstances, there may still be opportunities to strengthen communication, improve processes, or enhance customer experience.

During investigations, additional service issues are sometimes identified that extend beyond the scope of the original complaint. When this occurs, the Customer Relationship Team works collaboratively with services to ensure that the wider context is considered and that learning is applied effectively, supporting the delivery of the best possible outcomes for residents.

The Customer Relationship Team continues to provide day-to-day advice and support to managers on complaints handling, resolution and responses to representations, helping to promote consistency, fairness and a customer-focused approach.

Complaint outcomes and learning are reviewed in detail through monthly Quality Assurance meetings. The Quality and Complaints Officer for Children's Services attend these meetings on a quarterly basis, providing additional oversight and supporting Service Delivery Managers to identify themes, agree actions and determine how learning can be shared with practitioners to drive ongoing service improvement.

Chart 8: Children's Statutory Complaint remedies in 2025/26



The top remedies recorded against Children's Statutory Complaints in 2025/26 were:

- 42% were to provide an explanation and no remedy was required
- 29% were to provide an explanation and apology
- 13% apology and remedy provided
- 8% Explanation and remedy provided

Positive Improvements

Throughout the year, we record the learning identified from each complaint to build up a picture of common themes or trends. Learning from corporate complaints is considered alongside that from statutory complaints as part of our quality assurance activities.

Below are examples of positive changes that have resulted from learning from complaints:

- Individual remedies have been completed concerning support plans and working agreements, assessments, referrals, meetings, and documentation

- There has been a review of processes where foster carers are deregistered to ensure that this is clearer and the process is communicated

- Discussions will take place with young people prior to their 18th birthday to explain the accommodation process and outline the locations of available accommodation providers. Young people will be informed that, depending on the housing options offered, a move to a different area may be required. These conversations may be undertaken by the Personal Advisor, Social Worker, Independent Reviewing Officer, or the accommodation adviser within the Leaving Care team during face-to-face visits, care planning meetings, and Child Looked After reviews

- Where a social worker goes off sick and leaves tasks unfinished, procedures will ensure that there is better communication to ensure that tasks do not drift

- Young people should be provided with access to the Local Offer (website and leaflets available) as this provides information about their leaving care entitlements. Payment forms should be completed as soon as possible for any reimbursements. Social workers have been asked to contact carers directly when arranging statutory visits to children and communicate any constraints around times with Foster Carers

- A review of Child in Need planning processes has concluded that if visits were not unannounced there should have been a mixture of both visits undertaken as part of the Child in Need planning

- Team learning sessions have taken place between Adults and Children's services to ensure that preparing for adulthood and transition referral is seamless and customers are updated throughout the process

- Family Hubs have reviewed communication for separated parents and have updated standard operating procedures in co-production with parents with lived experience of working with Family Hubs. Standard operating procedures have been updated to include that parents with PR not in the family home, are contacted where it is safe to do so to update on the work being completed. The offer for separated families has been expanded under family Hubs, and new practitioners have been trained in Triple P transitions. Family Transitions Triple P assists parents who need extra support to adjust and manage the transition from a two-parent family to a single-parent family. It focuses on skills to resolve conflicts with former partners and how to cope positively with stress

- Reminder has been sent to teams to remind them that minutes from meetings should be shared in a timely manner

- Family time schedules will be sent out to parents/ carers in advance and with enough notice

- Staff across the service have been made aware of processes and timeframes linked to kinship, in order to support potential kinship carers in making decisions and also within the assessment process

- Social workers will be required to record consent on the case file, so it is accessible to all relevant officers if needed

- Reconfirmed the necessity and importance of social workers being aware of the cultural and religious needs of the families they are working with, ensuring practice is attuned to this

- The Disabled Facilities Grant process has been reviewed to ensure that there is a nominated individual who will confirm when funding has been agreed with all parties and clarity is provided to customers to avoid confusion in the future

- Learning from complaints regarding staff conduct have been shared with Practitioners to improve and support awareness of practice

Other feedback and the actions taken to improve our services

We gather feedback from various sources to improve the service we provide to children and young people, parents, carers and foster carers. For example;

- Childs Voice postcard
- Childs Voice Group
- During family time
- Review forms
- Dandelion Group
- Kinship Care Group
- Fostering Forum
- Corporate Parenting and Young People Panel
- Practice Evaluations
- Childs voice apprentices – Voice of the Child Team
- Leavers Come First Forum
- Separate Migrant Care Leavers Forum
- Kinship Forum
- Children in Care Council
- Young Futures Forum

Please find below examples of feedback received from Children and Young People and the positive actions that have been taken as a result;

Young People Said… They want participation to feel simple, relational, and authentic

- Conversational approaches work better than forms; prefer yes/no or short questions
- Don't want complicated or overly formal processes when sharing their voice
- Want to feel practitioners speak "like we are friends," not formally
- Value simple opportunities to connect, have fun, and build relationships (games, crafts, experiences)

WE DID

- Shifted practice to conversation-based voice gathering in Child Abused Through Exploitation (CATE) Team and Family Hubs
- Redesigned participation events around low-pressure connection (e.g., pumpkin carving, crafts, games, Lego, baking)
- Practitioners focused on relational, strengths-based approaches, increasing positive feedback (e.g., "she listens", "he helps me feel calm")

Young People Said… They want clear understanding of roles, decisions, and why services are involved

- Many children do not understand why they have a practitioner, with only a few able to clearly articulate the purpose (e.g., "to keep us safe")
- Young people want information in accessible formats

WE DID

- Voice Apprentices produced child friendly leaflets explaining roles (e.g. Social Worker, Independent Reviewing Officer (IRO), Personal Assistants) and reasons for involvement
- enhanced direct work tools to support practitioners in explaining involvement
- began digital redevelopment of consultation tools to enable clearer, more focused dialogue

Young People Said… They want more say in meetings & decisions affecting them

- Young people want to attend more of their meetings
- School timetables and timings are barriers

WE DID

- Services now routinely ask and plan for Young Peoples attendance
- Exploring timing adjustments and school collaboration to facilitate involvement
- Voice Apprentices routinely contribute to recruitment of key posts, IRO service development, Corporate Parenting Board, Bright Spots survey interpretation

Young People Said… They want fun, meaningful, inclusive participation opportunities

- Want more visits, more activities, and more creativity (e.g. pamper activities, crafts, gaming, sports, prizes)
- Want opportunities to meet peers, feel belonging, and have positive experiences
- Request more accessible community-based options

WE DID

- Expanded the offer across services:
  - 4 CATE events annually, redesigned based on youth feedback
  - Family Hubs sessions with crafts, baking, games, emotional regulation tools
  - Virtual School arts, sports, theatre, and music participation including Care to Dance, band performances, trips and workshops
  - Care Leavers events: wellbeing sessions, cookery, budgeting, Xmas lunch, podcasting, driving initiative
  - Forums: Kinship (11–17), Children in Care Council (8–14), Youth Forum (11–16), Young Futures (4–11), Beauty & Gaming Special Interest Groups
- Enhanced community safety and positive activity offer (Urban Games, Kicks, youth led projects)

Young People Said… They want practitioners who are kind, consistent, on time, and follow through

- Want practitioners who listen, understand, show humour, and build trust
- Noted punctuality and clear endings of work as improvement areas ("be on time", "better exit plans")

WE DID

- Reinforced expectations with teams via operational groups
- Embedded relational practice training and reflective opportunities
- Ensured planned endings, preparation time, and expectation setting are emphasised in service guidance

Young People Said… They want safer communities and support understanding local opportunities

- Do not always know what community activities exist
- Some feel unsafe in areas of the community
- Want more support navigating online safety, local spaces, school transitions, and police interactions

WE DID

- Voice Apprentices' newsletters now promote community events, safe activities, and youth opportunities
- partnership work strengthened in:
  - Police interactions (Corporate Parenting Board sessions)
  - Community safety projects (Make a Change, surveys, youth led improvements)
  - "Crucial Crew" transition programme reaching 2,500 children annually
- Toucan CAMHS engagement shaped future emotional wellbeing support

Young People Said… They want their personal journeys recognised and amplified

- Want creative ways to express experiences (poetry, music, art)
- Want their stories to drive service design

WE DID

- Funded individual creative opportunities (e.g. studio session for song writing)
- expanded arts-based participation through Virtual School (dance, graffiti, performing arts)
- Embedded youth voice in:
  - Therapeutic research
  - Mental health programme design
  - Anxiety workshop development for schools.

Overall Impact:

- Participation is now embedded, multi layered, and maturing, with clear evidence of influence on service design and delivery
- Youth Voice now actively shapes strategic priorities: Corporate Parenting Board, Youth Partnership Board, Bright Spots, SEND Local Offer
- Creative and relational practice is consistently strengthening engagement, belonging, and trust across service areas

All feedback from both complaints and other sources is used to continually improve our services. We will continue to develop our services based on this feedback and also develop new and innovative ways to gather feedback from children and young people to ensure that we continue to provide the best possible service to them.

Complaints made to the Local Government & Social Care Ombudsman

The Local Government & Social Care Ombudsman (LGSCO) has the authority to investigate complaints when our own process has not resolved them. Complainants can refer their complaint to the LGSCO at any time, although the Ombudsman will generally refer them back to us if they have not been through our process first. In exceptional circumstances, the Ombudsman will look at things earlier; this usually being dependant on the vulnerability of the person concerned.

On 31 March 2025 one case was still being investigated by the Ombudsman, this case has been concluded and was closed after initial enquiries by the ombudsman.

No statutory cases were escalated to the LGSCO in 2025/26.

The Council is committed to continuing to ensure that it complies with any recommendations made by the LGSCO, and that learning is taken forward to improve practices.

Concluding Comments

This Annual Report shows that the number of Children's Statutory Complaints received in 2025/26 remained marginally in line with the previous year. Our services continue to receive a low number of complaints at a time when there have been major reductions in government funding for local authority service provision. Despite this financial backdrop, the Council continues to manage complaints well and is committed to putting right anything that has gone wrong.

Response times have improved during the year with the average number of days to respond to a statutory complaint improving from the 14 working days in 2024/25 to 13 working days in 2025/26. Overall, in 2025/26, 92% of complaints were responded to within the statutory timescale of 20 working days an improvement on the 87% in 2024/25 and 43% were responded to within ten working days, a slight reduction on the 43% in 2024/25.

The Customer Relationship team continued to update complainants concerning any delays or extended response timescales. They also continued to work with services to further improve on the timescales achieved.

Priorities for 2026/27

During 2026/27, the Customer Relationship team and the Children's Safeguarding and Family Support Quality and Complaints Officer will focus on a number of key priorities:

- Helping to improve the Council's record of timely complaint responses
- Helping to improve the quality of responses and ensure that they comply with the statutory guidance
- Continuing to improve and add to the resources available to managers when responding to complaints and other correspondence, while encouraging self-help
- Providing complaint data to senior management monthly, as part of corporate monitoring
- Working to maintain low levels of maladministration findings by the Local Government & Social Care Ombudsman
- Continuing to provide a quarterly and monthly reporting dashboard of performance data to senior management so that improvement can be driven forward continuously during the year

The Customer Relationship team continues to support service areas to both manage and learn from complaints. The key services they offer are:

1. Complaints advice and support
2. Quality assurance of statutory complaint responses
3. Act as a critical friend to challenge service practice
4. Support with persistent and unreasonable complainants
5. Assistance in drafting comprehensive responses to complaint investigations
6. Continue to escalate overdue complaints to Directors

Appendix

Legislation

The Children Act 1989 Representations Procedure (England) Regulations 2006 underpin all representations received from children and young people, their parents, foster carers or other qualifying adults about social care services provided or commissioned by Children's Social Care. The act and regulations set down procedures that councils with social care responsibility must follow when a complaint is made.

The Children's Statutory Complaints Procedure is a three-stage process. Stage One is where complaints are investigated at service level, Stage Two is where an independent investigation takes place and Stage Three is where a Panel of Independent Persons will review the investigations undertaken at Stage One and Stage Two.

The Corporate complaints process is used for anyone else who makes a complaint.

What is a complaint?

We define a complaint as:

> 'A statement, written or verbal, which expresses dissatisfaction about any aspect of the social services provided by or on behalf of the Service Delivery Units responsible for services to children.'

The purpose of a complaints process is to resolve concerns raised by service users and their representatives, to deliver outcomes that are appropriate and proportionate to the seriousness of the issues, and to ensure that changes are made in response to any failings that are identified.

To achieve this, the approach to handling complaints must incorporate the following elements:

- Engagement with the complainant or representative throughout the process
- Agreement with them about how the complaint will be handled
- A planned, risk-based and transparent approach
- Commitment to prompt and focussed action to achieve the desired outcome
- Commitment to improvement and the incorporation of learning from all complaints

A complaint must be made within 12 months of the event complained about, or when the customer became aware of the matter/ event. Nevertheless, the Council has the discretion to waive this time limit if:

- It would not be reasonable to expect the complainant to have made the complaint sooner, and
- It is still possible to deal with the complaint effectively and fairly

Who can make a complaint?

A complaint may be made by:

- Children or young people who are receiving, or have received, services provided by the Council, or are entitled to receive such a service because the Borough after looks them, or because they are deemed to be 'in need', as defined by the Children Act 1989
- People who have parental responsibility for these children and young people
- Advocates and representatives of any of the above children and young people (providing that it has been established, as far as possible, that the advocate or representative is reflecting the child's or young person's own wishes)
- Foster carers who want to comment or complain about the service being provided to a child or young person for whom they are caring
- Any other person, providing that they are deemed to have sufficient interest in the child's or young person's welfare to justify the Council considering the complaint

Complaints may be received through a variety of media (phone, letter, email, feedback form, personal visit, etc.) and at various points within the Council (to staff members, via respective web addresses, direct to the Customer Relationship team, etc.).

Complaint Procedure

When a complaint is first received, the Customer Relationship team will conduct an initial assessment of it to determine its issues, severity and potential impact, and to identify any other organisations that maybe involved.

Whenever a complaint is received from a child or young person, the Customer Relationship team will notify Children's Social Services of the need to offer the complainant an advocacy service within the remit of the 2004 Advocacy (Services & Representations) Regulations. A child or young person whose complaint is being considered within this procedure is entitled to advocacy services throughout the process. Subject to the approval of the child or young person, all correspondence regarding the complaint will be copied to the advocate, who will be entitled to accompany the complainant at any meeting or interview about the complaint they attend.

When someone contacts the Customer Relationship team to make a complaint, they will acknowledge their complaint within two working days. The Customer Relationship team will then pass details of the complaint to the appropriate Service Delivery Manager.

We aim to respond to all Stage One Children's Statutory Complaints within ten working days. However, due to the nature and complexity of some issues, it may take longer, and - in agreement with complainants - the timescale may be longer (subject to a maximum of 20 working days).

When the investigation is complete, the manager concerned will write a letter explaining what they have found and will do to put things right.

If the complainant is not happy with the response or how we have dealt with their complaint, they can request that it is considered at Stage Two of the procedure, where it will be investigated by an independent investigator.

Following this investigation, the findings will be sent to the complainant, at which point they may request that the investigations undertaken at Stage One and Stage Two are reviewed at Stage Three by a Panel.

Following the Panel meeting, if the customer is not happy with the final decision or how we have dealt with their complaint, they can refer the matter to the Local Government & Social Care Ombudsman (LGSCO).

Local Government & Social Care OMBUDSMAN

20 May 2026

By email

Mr Sidaway
Chief Executive
Telford & Wrekin Council

Dear Mr Sidaway

Annual Review letter 2025-26

I write to you with your annual summary of complaint statistics from the Local Government and Social Care Ombudsman for the year ending 31 March 2026.

We recognise that local authorities continue to face significant pressures in delivering services to their communities. We hope the data and insight we share with you each year remains a useful tool for reflection and continuous improvement. Please consider it as part of your corporate governance processes.

Your annual statistics are available here.

In addition, you can find the detail of the decisions we have made about your Council, read reports we have issued, and view the service improvements your Council has agreed to make as a result of our investigations, as well as previous annual review letters.

We will write to organisations in July where there is exceptional practice or where we have concerns about complaint handling. Not all organisations will get a letter. If you do receive a letter it will be sent in advance of its publication on our website on 15 July 2026.

Supporting complaint and service improvement

We remain committed to supporting the sector to embed effective systems of redress. Where authorities are navigating reorganisation and devolution, we are ready to help ensure that robust complaint handling is built into new arrangements from the outset. Please do get in touch if your organisation would benefit from our advice and guidance.

Our Complaint Handling Code, in force since April 2025, is now applied in our casework and offers structure and support to your local complaint system. Our training programme provides a flexible, expert-led route to building complaints capability across your teams, with courses open for individual delegates to book. Contact training@lgo.org.uk for more information.

Our Annual Review of Local Government Complaints will be published in July 2026, setting out the national picture of complaints, trends across service areas, and emerging systemic issues. We encourage you to read it alongside your own organisation's data.

Yours sincerely,

A. K. Clarke

Amerdeep Clarke
Local Government and Social Care Ombudsman
Chair, Commission for Local Administration in England

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