



Annual Governance Statement 2024-25

Contents

1	Introduction	2
2	The Governance Framework.....	2
3	Review of Effectiveness	3
3.1	Assurance from Members and Boards.....	3
3.2	Assurance from the Section 151 Officer and the Monitoring Officer	4
3.3	The Role of the Section 151 Officer	4
3.4	Assurance from Management	4
3.5	Other Internal assurance	4
3.6	Assurance from Customers.....	11
3.7	Assurance from External Inspections	12
3.8	Group Activities	15
4	Updates on Governance Concerns Identified in Previous Year's AGS (2023/2024).....	16
5	Significant Governance Issues Identified During 2024/25	18
6	Conclusion and Evaluation	19
	Appendix A - Review of compliance.....	20

Annual Governance Statement

2024/25

1 Introduction

Solihull Metropolitan Borough Council (SMBC) is dedicated to creating a borough “where everyone has an equal chance to be healthier, happier, safer, and more prosperous through growth that creates opportunities for all.” This vision is underpinned by the [Council Plan](#), which outlines key priorities and provides a framework for addressing challenges and opportunities.

The Council is responsible for conducting its business lawfully and in accordance with proper standards. It ensures public money is safeguarded, properly accounted for, and spent economically, efficiently, and effectively. The Council's Code of Corporate Governance articulates its commitment to maintaining strong governance arrangements and adhering to high standards of conduct. To evaluate the effectiveness of these arrangements, the Council publishes an Annual Governance Statement (AGS) each year. The AGS offers a detailed assessment of the Council's governance practices, including an annual review to ensure their continued effectiveness. It provides assurance for the year ending 31 March 2025 and up to the approval of the Statement of Accounts, highlighting actions taken or required to address any areas of concern.

2 The Governance Framework

The Council has embedded good governance within its constitution, policies, and procedures and has adopted a Code of Corporate Governance. The AGS demonstrates compliance with this Code while meeting the requirements of the Accounts and Audit (England) Regulations 2015.

The AGS is subject to rigorous scrutiny and approval processes, beginning with endorsement by the Audit Committee and culminating in final approval by the Governance Committee. Once signed by the Council's Leader and Chief Executive, it is published on the Council's website for transparency.

The governance framework aligns with the CIPFA/SOLACE Framework 'Delivering Good Governance in Local Government (2016)' and has been consistently applied, particularly during the year ending 31 March 2025. This framework ensures the Council's operations reflect established principles of good governance listed below-

Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law.

Ensuring openness and comprehensive stakeholder engagement.

Defining outcomes in terms of sustainable economic, social, and environmental benefits.

Determining interventions necessary to optimize the achievement of intended outcomes.

Developing the entity's capacity, including the capacity of its leadership and individuals within it.

Managing risks and performance through robust internal control and strong public financial management.

Implementing good practices in transparency, reporting, and audit to deliver effective accountability.

3 Review of Effectiveness

The Council reviews the effectiveness of its governance framework regularly to ensure the arrangements are effective now and remain fit for purpose for the future. This is driven by the Directorate Leadership Teams (DLT), the Corporate Leadership Team (CLT), Internal Audit, External Auditors, and other external review agencies. Proportionate oversight and governance arrangements have been put in place for arm's length bodies.

The Council also undertakes annually a review of the effectiveness of its governance framework, including the system of internal control. The Council has developed a methodology for reviewing its governance framework and producing this AGS. This methodology accords with proper practice and is coordinated by the Governance and Risk Management Advisor. The outcomes of the review are considered by the Chief Executive with support from the relevant Statutory Officers, Audit Committee and Governance Committee (who approve the final Statement). Once approved, the AGS is published alongside the Statement of Accounts.

As well as providing overall assurance about the Council's governance arrangements, the methodology identifies any processes or areas where governance needs to be strengthened, and this is translated into action plans for each directorate.

The section below details some of the assurances received during the 2024/2025 year.

3.1 Assurance from Members and Boards

Information on the agenda, minutes and decisions taken by the Full Council and the Committees detailed below are published on the [Council website](#).

- 3.1.1 Full Council: The Council consisted of 51 Councillors who are elected by the local community. Full Council approved all key policies and set the strategic direction for the Council.
- 3.1.2 Cabinet Members: The Cabinet is an executive group responsible for the overall business of the Council. The Cabinet met collectively in public on a monthly basis, to make decisions in line with the Council's overall policies and approved budget.
- 3.1.3 Scrutiny Boards: The decisions of the Cabinet were subject to scrutiny by a different group of Councillors. Scrutiny Boards met regularly to monitor the work of Cabinet, to provide policy development support and to monitor the Council's performance against its stated objectives.
- 3.1.4 Audit Committee: The Audit Committee provided independent, effective assurance about the adequacy of the Council's governance environment. The Audit Committee met regularly and received reports on the adequacy of the risk management framework and the internal control environment. They also had oversight of the financial reporting, treasury management and annual governance processes.
- 3.1.5 Governance Committee: The Governance Committee is responsible for promoting and maintaining high standards of conduct by Councillors, Co-opted Members, Parish and Town Councillors. Compliance with the Code of Conduct for Councillors is monitored by the number of complaints received by the Monitoring Officer. There have been three cases of complaints about Members of Solihull Metropolitan Borough Council during 2024/25. Two of these were dealt with by the Monitoring Officer without referral for formal investigation on the basis that no evidence of a breach of the Code of Conduct was presented and one was referred for investigation. A report is currently being finalised in relation to this referral.

3.2 Assurance from the Section 151 Officer and the Monitoring Officer

The statutory functions undertaken by these two officers ensures legality, financial prudence and transparency, providing a key source of assurance that the systems and procedures of internal control are effective, efficient and are complied with. Both officers were involved in the production of this AGS and provided individual assurances that it accurately describes the Council's governance environment. Along with the Deputy S151 and Head of Internal Audit, they also meet Monthly as a Statutory Officers group and the S151 officer briefs the Chief Executive as Head of Paid Service on any relevant issues as is needed. The Section 151 officer also provided a clear Section 25 statement to support the budget and Medium Term Financial Strategy approval by Full Council.

3.3 The Role of the Section 151 Officer

The Section 151 Officer is responsible for the development and maintenance of the Council's governance, risk and control framework, ensuring lawfulness and financial prudence of decision-making and the proper administration of financial affairs, in accordance with Section 151 of the Local Government Act 1972.

These responsibilities have been considered within the context of this statement and the Section 151 Officer can confirm that for 2024/25, the Council's arrangements satisfied his responsibilities under Section 151 of the Local Government Act 1972 and that the Council continues to comply with the Chartered Institute Public Finance and Accountancy (CIPFA) Statement on the Role of the Section 151 Officer in Local Government (2016).

3.4 Assurance from Management

Individual Directors, Heads of Service and Managers have provided appropriate assurance that the Council has effective governance arrangements in place but have identified that some operational actions are needed to improve the Council's overall internal control environment. As a result, an action plan has been developed and progress to implement the required improvements will be monitored.

3.5 Other Internal assurance

3.5.1 Opinion of the Head of Internal Audit: The Council's Internal Audit arrangements are reviewed annually and considered to be effective for the period being reported, conforming to the requirements of the Global Internal Audit Standards, which includes CIPFA's Statement on the role of the Head of Internal Audit.

The Head of Internal Audit works closely with the Audit Committee and the CLT to provide regular updates on work performed, including the Council's counter-fraud initiatives. An annual report of all work undertaken by the Council's Audit Services is presented to the Audit Committee each year.

In conclusion, and considering all available evidence, Internal Audit has independently rated the standard of internal control in operation across the Council as offering between moderate and limited assurance. This judgement is based on the control framework being generally adequate but reflects significant concerns identified in several audit reviews across the Council.

The 2025/26 Internal Audit Plan will focus on following up outstanding recommendations to improve internal controls and strengthening counter-fraud arrangements.

- 3.5.2 **Risk Management:** The Council's approach to risk management is outlined in its [Risk Management Policy](#). Regular risk management reports are presented to all DLTs, the CLT and Audit Committee. High-level risks and the actions being taken to mitigate them are published on the Council's website to ensure transparency.

Risks are regularly reviewed based on their risk profile and there is an escalation process for the most significant risks, which ensures that senior management and members are aware of those risks that pose the most serious threat to the Council's objectives and how they are being managed. In addition, the Audit Committee request additional information if required to assure themselves that risks are being managed well, for example there has been a specific update from the Director of Resources at each Audit Committee on the prevailing financial risks and work to mitigate this given the sustained level of high risk identified.

There is a visible alignment between key risks to performance objectives in the Council Plan priorities and the Assistant Directors group receives regular updates on these risks. All key decisions made by Members are informed of key risks and the Council's risk appetite.

In the year under review, risk management arrangements have been further strengthened by operationalising risk appetite information to help prioritise action to mitigate those risks that are out of the council's appetite.

Effective risk management in social housing is crucial for ensuring tenant safety, maintaining property standards, and achieving regulatory compliance. The Council has delegated management of its housing stock to Solihull Community Housing (SCH) through an arm's length management model (ALMO). However, the Council remains the landlord of the properties and is ultimately the accountable body for the delivery of housing services to tenants and leaseholders. During the year in review, a joint risk register was put in place with SCH for oversight of strategic housing risks and governance arrangements agreed to collaboratively manage housing risks.

- 3.5.3 **Performance Management:** Performance is managed at all levels of the organisation and the Council's approach to performance management continues to evolve in response to the changing context nationally and locally.

In response to a recommendation in the External Auditor's Annual Report for 2021/22 and 2022/23 that performance reporting should be standardised, a proposal to introduce a '[Top 40' key performance indicators](#) was approved by Cabinet on 17 October 2024. Measures selected for the Top 40 are those where Council activity should be able to impact on performance. The Top 40 will be a dynamic document, with the ability to add or remove metrics as appropriate. Progress is shared with Cabinet Portfolio Holders on a quarterly basis and will be scrutinised annually by the Resources and Delivering Value Scrutiny Board.

The Council's priorities are set out within the [Council Plan](#), which is reviewed annually. Each of the Council Plan priorities has a Senior Responsible Owner and agreed governance to monitor progress in achieving milestones and agree corrective action where required. Overall, progress against milestones is then reviewed and assessed on a quarterly basis by the Assistant Directors Group and Wider CLT.

The remit and work plan of each of the Scrutiny Boards is aligned to the priorities in the Council Plan. This places the Council Plan at the heart of scrutiny, enabling the Boards to scrutinise delivery in detail and to inform strategy over the whole year.

Overall progress in delivering the Council Plan is then scrutinised by the Resources and Delivering Value Scrutiny Board annually, and reported in the Council's [Annual Report](#), available on the Council's website.

A quarterly Wider CLT meeting is held to look at a range of performance information. This includes progress in delivering the Council Plan, the Top 40 and the key business scorecard that provides assurance across a whole range of key business process measures plus financial, risk management and audit recommendation monitoring.

Directorate and Senior Leadership Teams monitor service performance monthly, including aspects of compliance and quality. Heads of Service and Team Managers monitor and review team performance metrics. Both Council Plan milestones and key performance metrics are reflected in individual targets and monitored through individual performance and development reviews.

At each level of the performance hierarchy, there is an expectation that appropriate action is identified and taken to improve performance where required. There is also provision to escalate to the next level of the hierarchy, for example, where performance is out of agreed tolerance or there is potential for performance issues to have a wider corporate impact.

Directorate oversight documents are reviewed by the CLT monthly allowing for corporate oversight of key service pressures and forthcoming issues. In January 2025, Wider CLT decided that the Top 40 gives CLT sufficient sight of key performance indicators. Guidance has been issued to Directors and DLTs that, where they judge that there is a performance issue that needs corporate visibility, this should be flagged in the next monthly Directorate Oversight report with a view to it being escalated to the Top 40, if it is not already included.

- 3.5.4 Information Governance: The Council's approach to Information Governance is underpinned by policy, guidance and training. This includes a full suite of policies based on the information security standard BS ISO/IEC 27002:2013 and mandatory GDPR and Protecting Information training courses which are mandatory for all employees to complete. There are clear management and accountability structures in place, which are outlined in the Council's Information Governance Framework. Employees across the Council have a good understanding of information governance matters in the workplace and where support and training can be obtained from when needed.

The Information Governance Manager, Head of Human Resources and the relevant Assistant Director have responsibility for scrutinising the causes and handling the response to information security incidents. Each investigation will examine the containment of the incident, the risks posed, who needs to be notified about the incident and an overall evaluation and response to risks or systemic problems identified. A summarised list of any information security incidents is reported weekly to CLT.

- 3.5.5 Financial Management: The Medium-Term Financial Strategy (MTFS) approved in February 2024 noted the seriousness of the financial challenge facing the Council and outlined the Council's approach to meeting the forecast budget gap in 2025/26 and beyond. In March 2024 the Chief Executive convened a Financial Sustainability Board (FSB) of senior officers to oversee a programme of work to develop savings proposals to meet the funding gap. This work programme identified substantial savings for 2025/26 and beyond, but at the same time cost and funding pressures continued to increase.

Grant Thornton's external audit of the Council's financial statements for 2023/24 concluded that the Council has effective governance arrangements in place, with a robust risk management process, and it works effectively in partnership with a range of regional organisations. The auditors' report did however identify a significant weakness in financial sustainability arrangements and recommended that "the Council continues and accelerates its current package of activities to address the significant structural budget deficit and reach a sustainable financial position in the medium term."

In autumn 2024, the Council commissioned CIPFA to undertake an independent review of the Council's financial position and governance arrangements. The review concluded that:

- No deficiencies were identified in financial or risk management arrangements.
- No governance issues were identified and relations between members and officers are good.
- The Council is generally low cost but with higher-than-expected cost outliers in children's services and highways.
- The Council's arrangements for funding its capital programme are sound.
- The Council is compliant with the CIPFA Prudential Code and the treasury management code.

The CIPFA review did however also identify a significant risk in respect of the Council's financial sustainability, observing that the Council must "place greater emphasis on the need for quantifying and delivering its financial sustainability plan." The review recommended that the Council apply for Exceptional Financial Support (EFS) from the government to manage the forecast overspend for 2024/25 and balance the budget for 2025/26, noting that without EFS the Council was at risk of moving to a financially unsustainable position.

The government's EFS scheme allows local authorities to apply for capitalisation directions (approval to capitalise revenue expenditure) and/or the ability to increase council tax above referendum limits in order to manage short term financial challenges. In December 2024, the Council formally applied for EFS totalling £48.273 million over 2024/25 and 2025/26, and this application was agreed in principle in February 2025. The Council's application was focused on the additional investment made in children's services and on the in-year pressures on business rates income, which together have affected the Council's sustainability and depleted reserve balances in recent years.

EFS does not provide a permanent solution to the financial position, but it is a mechanism to provide the Council with more time to deliver a transformation programme that will generate sustainable mitigations to our financial pressures. With

that in mind, the Council's EFS application has enabled the Council to balance the forecast position for 2024/25 and 2025/26, stabilise reserves as per external audit recommendations, whilst also creating a £10 million fund to initiate the level of transformation required to begin to restore financial sustainability over the medium term.

The Council's latest MTFS for the period 2025/26 – 2027/28 was approved in February 2025 and was based on the successful application for EFS as outlined above. The budget still shows "Savings to be Identified" in both 2026/27 and 2027/28, although 2025/26 was balanced.

The FSB was superseded by a Corporate Delivery Board from February 2025, to oversee the programme of transformation in how the Council delivers services in order to deliver committed savings, with the objectives of addressing our financial challenges, helping to manage demand and respond to the changing characteristics of the borough. This Board will manage seven workstreams which together contribute to the Council Transformation Plan. The latest MTFS also includes commentary on how Solihull Council compares in the CIPFA index of financial resilience for English councils, which assesses each authority against a number of indicators, including levels of reserves, external debt and auditors' judgements, in order to illustrate each council's financial position relative to that of comparator authorities. The latest version of the index (based on 2023/24 data), which only includes statistical nearest neighbours as a comparator group, shows the following for the measures considered most relevant by CIPFA:

- Reserves: Solihull Council falls in the average risk category compared to our nearest neighbours in respect of the overall level of reserves, but higher risk in terms of the change in reserves, particularly in respect of unallocated reserves. This reflects the significant use of reserves in recent years and supports the view that existing reserve levels should be protected as far as possible from further reductions.
- Social care ratio: the index suggests that spend on adult social care as a proportion of net revenue expenditure remains lower than average compared to our nearest neighbours, while spend on children's social care is the second highest in the group (a slight improvement from 2022/23 when Solihull's spend placed it highest in its group). The latter reflects the significant increase in funding allocated to support the improvement journey in children's services, but it should be noted that these measures are fairly crude and much more detailed benchmarking is utilised in the Council to assess relative performance in both adults' and children's services.
- Debt and interest payable: the index suggests that levels of gross external debt remain average for the comparator group but that interest payable as a proportion of net revenue expenditure is above average, albeit lower than in 2022/23, at 5.4%.

The medium-term funding outlook for local government and consequently this authority remains unclear. The government intends to reform local government funding from April 2026, including revising how relative needs and relative resources are assessed and a business rates reset which together with the outcome of the 2025 spending review will inform the funding outlook for 2026/27 and beyond.

Against the backdrop of severe resource constraints, which we expect to remain for the foreseeable future, funding pressures continue to rise across our services and the

scale of the financial challenge over the medium term is such that we must look at doing things differently moving forward. In the short term, we have had to balance the 2025/26 budget with exceptional financial support (EFS) from the government. This will buy us further time to review our operating model so that we can drive out further significant savings to balance our budgets in 2026/27 and 2027/28.

As a consequence of all of the above narrative but particularly the fact that the Council has savings to be identified for 2026/27 and 2027/28, the S151 Officer has kept the risk level for the corporate risk in relation to MTFS delivery to a net red 20 to reflect the fact that whilst the Council has a balanced budget for 2025/26, gaps still need to be addressed for 2026/27 and 2027/28.

3.5.6 Equalities Framework: The Council monitors and assesses its effectiveness of systems and strategies in place to advance equality and comply with its duties under the Equality Act 2010. As such:

- Equality, Diversity and Inclusion (EDI) is a key part of the Council's core business for improving the quality of life and life chances for everyone. This commitment is set out in our [Council Plan](#) where 'Growth creates opportunities for all'.
- The Council has in place an EDI Strategy 2024-2027, which drives the EDI work in the Council. There are also several published EDI documents that can viewed by this link: [Equality, diversity and inclusion \(EDI\)](#).
- The Council's senior leaders champion EDI.
- There have been no prosecutions or enforcement notices issued against the Council for breach of the Equality Act 2010.
- In line with the statutory deadline of the 30 March of each year, annual equality information which is proportionate and relevant, is published on the Council's internet pages.
- This information includes Gender Pay Gap reporting; examples of how the Council and its' services have met the obligations of the Equality Act and information on the diversity of the Council's workforce.
- The Council works in accordance with the Council's published Equal Opportunities Policy Statement.
- There is regular reporting to Senior Leadership Teams (SLT) in the Council on the progress of equality work across the organisation.
- It is the responsibility for each directorate to ensure that EDI is covered regularly at DLT Meetings.
- A process to assess against 'due regard' under the Act is in place by way of 'Fair Treatment Assessments' (FTAs). For 2025/2026, the Council will be working to increase the use and governance of Fair Treatment Assessments (FTAs) to build on what is currently in progress.
- Equality implications form part of the template for reports to Members on decisions.
- All new employees undertake mandatory equality and diversity training as part of their induction.
- All staff are required to complete mandatory equality and diversity training which must be refreshed every 3 years.
- Briefing session(s) on equality and diversity are included in the training and development offer for new and existing Councillors.

- Equality screening is included as part of the procurement tendering process for organisations providing services to us or on our behalf.

3.5.7 Health and Safety: As part of the Council's Health and Safety Management System, regular performance reporting is made to the Corporate Health and Safety Board, CLT, DLTs and the Cabinet Portfolio Holder for Resources. The reporting provides an overview of key performance, including the number of reported work-related accidents/incidents, commentary on key aspects of health and safety including legislative updates and policy development.

The information presented confirms that occupational health and safety arrangements are generally in place and working effectively within Solihull Council, but with some areas of improvement identified with clear action being taken and the impact monitored where required.

The introduction of the Building Safety legislation, following the government review of building regulations and fire safety has raised standards relating to tenant safety within the Council's residential social housing stock. A robust action plan is in place which is monitored by the Council's Building Safety Assurance Board.

The Council has appropriate governance arrangements in place to manage and monitor work-related health and safety matters through its Corporate Health and Safety Board. The Council has nominated a director to be its Corporate Health and Safety Champion.

A corporate level health and safety action plan is in place to help make improvements to the management of health and safety in the organisation, with directorate-level plans under-pinning these at a local level.

3.5.8 Business Continuity and Resilience: The CSW Resilience Team is a combination of Local Authority Emergency Planning Officers working on behalf of Coventry City Council (CCC), Solihull Metropolitan Borough Council (SMBC), and Warwickshire County Council (WCC). The team operates a 24/7 Duty Officer system to ensure an effective response to any incident occurring across the sub-region.

The Civil Contingencies Act 2004 places a statutory duty on local authorities to put in place business continuity management arrangements. This duty is satisfied via internal services owning and maintaining their own response plans and procedures to consider and plan for service disruption. Arrangements are in place for services to escalate to the activation of the Council's emergency management plan should an issue be too significant to resolve.

The CLT receives regular updates on business continuity and resilience planning to prepare and deliver a robust response to key risks.

Support to critical services is maintained via targeted support to key individuals and services, and as part of wider critical service interaction.

- 3.5.9 **Partnerships:** The Council has a range of statutory duties that require it to work in partnership. The Council plays a lead role as one of three statutory partners responsible for safeguarding children and adults, ensuring community safety, and convening a Health and Wellbeing Board. More generally, partnership working is essential in working towards the Council's vision, supporting the delivery of sustainable services, and maximising local assets. The Council plays a key role in convening and promoting partnership working across public, private, voluntary and community sectors in Solihull.

A [partnership induction pack](#) is in place to provide members of Solihull multi-agency boards and partnerships with the key information they need including: a description of the common purpose across all our partnerships, the responsibilities of each of the main multi-agency partnerships and an overview of the relationships between them. This pack is updated and circulated to the boards at least twice a year.

Relevant responsibilities for partnership working are included in the job descriptions of Directors, Assistant Directors and other senior Council Officers. Each of the main Partnership Boards has an identified officer whose role is to manage the work of that board and to co-ordinate with other board support officers. An annual item to review partnership arrangements to ensure that they remain fit for purpose is part of the CLT and Assistant Director Group Governance Maps.

A Partnership Co-ordination Plan is in place with the aim of achieving greater co-ordination, communication, and a joined-up strategic approach across the multi-agency boards. This is overseen through a Board Chairs and Support Officers meeting. Actions in 2024/25 included implementation of a co-ordinated approach to communications messages for professionals and the public, ongoing work to ensure appropriate oversight of risk across partnerships and the maintenance of 'plan on a page' summaries for each of the main partnership boards with the aim of clarifying who is doing what and reducing duplication and any gaps.

All members of the main partnership boards are invited to an annual boards / partnerships event. The 2024/25 event concentrated on working together to improve health and well-being, reduce inequalities and prioritise prevention as well as reviewing partnership approaches to communication and engagement.

3.6 Assurance from Customers

Overall, 742 complaints were received in 2024/2025 which is an increase of 114 complaints compared to the previous year, 2023/2024, when 628 were received. There were also an additional 311 complaints that were cancelled with the agreement of the customer and raised as service requests.

Customer comments and feedback are also shared with service areas for improvement and policy and process design. During 2024/2025, 793 customer comments were captured across all channels. There were 923 compliments received, which is broadly in line with the previous year. All the data will be analysed and full information and learning from complaints is provided in the annual report.

The Local Government and Social Care Ombudsman (LGSCO) have introduced a new Complaint Handling Code. The Council implemented the code from 1 April 2025 and the LGSCO will be reporting on it from April 2026. Any adverse LGSCO outcomes, with the learning and actions needing to be taken are routinely reported to CLT when published.

Briefings were carried out for all staff directly affected by the changes as investigating officers. This was also communicated to all staff via People Matters in March 25 and Core Brief in April 25.

Full details of the numbers and reasons for complaints and compliments and customer comments are published in the [Annual Complaints and Compliments report](#). The 2024/25 report is expected to be presented to the Resources & Delivering Value Scrutiny Board later in the year.

3.7 Assurance from External Inspections

- 3.7.1 External Audit: Grant Thornton are the Council's external auditors and there is a good working relationship with them. They have quarterly meetings with the S151 Officer, Deputy S151 Officer, monitoring officer and Head of Internal Audit to discuss any matters which the auditors may need to be aware of and vice versa. There is a team of audit staff who work alongside the Financial Operations Team to audit the annual accounts. External Audit provide regular verbal and written reports through Audit and Governance Committees, mainly on the annual accounts but they also report on grant audits that they conduct and the value for money audit work that they carry out in conjunction with the final accounts audit. They also carry out a separate ICT audit, which is reported alongside the accounts. The External Auditor also meets independently with the Audit Committee and Internal Audit, as per best practice.

Previous years' external audit reports include positive statements on both the accounts and the value for money conclusion. During 2024/25, the Council received final reports for 2023/24.

The 2023/24 Value for Money conclusion included two key recommendations. One related to the financial sustainability of the Council as a whole and was about the Council needing to continue and accelerate its current package of activities to address the significant structural budget deficit and reach a sustainable financial position in the medium-term.

The other was in relation to Children's Services and improving the economy, efficiency and effectiveness of Children's Services and continuing to progress the improvements required by Ofsted and the Children's Services Commissioner.

Both recommendations were accepted by management and will be followed up on by Grant Thornton as part of the 2024/25 Value for Money work.

- 3.7.2 Ofsted: Ofsted is the Office for Standards in Education, Children's Services and Skills, it inspects:

- Services that care for children and young people
- Services providing education and skills for learners of all ages
- Local authorities to find out how well they carry out their statutory duties in relation to schools and other providers.

Inspection reports are available on the [Ofsted website](#).

Ofsted, along with the Care Quality Commission (CQC), the Chief Inspector of Constabulary and Fire & Rescue Services (HMICFRS) and the Chief Inspector of Probation (HMIP) for England and Wales published a report in February 2022 following a joint targeted area inspection (JTAI) in Solihull.

The most recent full inspection conducted by Ofsted was an Inspection of Solihull Local Authority Children's Services in November 2022. The outcome of the inspection found Solihull inadequate across all inspection areas and inspectors highlighted nine overall areas for improvement including: leadership, timeliness and quality of decision making, quality of practice, the workforce, partnership arrangements, permanence, role of IROs and, corporate parenting and private fostering. A Statutory Commissioner was also appointed by the Department for Education in 2022, named Sir Alan Wood, and in the summer of 2023 Birmingham Childrens Trust (BCT) was identified as our improvement partner.

Over the period thereafter, the Council has continued to work with Sir Alan Wood and our improvement partner BCT who have been integral to the developments made. As part of the inadequate inspection finding, Ofsted over the 2023/24 and 2024/25 years have completed six monitoring visits evidencing sustained progress. The ongoing improvement work has been underpinned by a detailed transformation plan, and this has included a management of change and revised targeted operating model to ensure our services are resilient and moving forwards to meet the demands and needs of our communities, children and families as well as to provide an appropriate establishment to secure the development and delivery of high quality services. A key element of this has been to re-develop the Council's performance and reporting structures along with its vision, aims and objectives to realise its ambitions for children, young people and families.

The monitoring visits covered the following areas:

August 2023	Front door Services, Early Help, MASH (Multi Agency Safeguarding Hub), Assessment and Exploitation.
October 2023	Children in need of Help and Protection.
January 2024	Children subject to pre-proceedings, those on the edge of care including 16 and 17 year old children who present as homeless, children entering care.
April 2024	Planning for permanency, our corporate parenting role and the impact of our Independent Reviewing Officers (IRO's).
October 2024	Accommodation, Employment, Education and Training, Support transition into adulthood, staying close, as well as care experienced children who were at risk of specific types of harm, such as criminal and sexual exploitation.
April 2025	Front Door Services, MASH, EDT (Emergency Duty Team), Early Help and LADO (Local Authority Designated Officer).

Following The Youth Justice Service inspection in September 2023 with the overall service identified as requiring improvement, there was a further inspection in March 2025 which covered Out of Court Disposals. This was a national thematic review with overall findings across the twelve services inspected, due in the summer. Positive feedback was identified as well as areas for development from the inspection team.

In the spring 2024, the Council opened its first of three small homes. Following an Ofsted inspection of this unit in the autumn 2024, improvements were identified and as a consequence of this, children were required to be alternatively accommodated. However early in 2025 following rapid improvement work, a further inspection visit was undertaken, and this initial unit was once again able to accommodate children and as recently as March a further unannounced Ofsted inspection visit was

undertaken with positive feedback. The second home has accommodated one child as an unregulated arrangement but has had its registration visit on the 1 April 2025 and is now awaiting formal registration. Registration for a third home will be applied for when it is ready for inspection.

- 3.7.3 Care Quality Commission (CQC): The Care Quality Commission (CQC) monitors, inspects, and regulates Health and Social Care Services to make sure they meet fundamental standards of quality and safety. The CQC publishes performance ratings to help people choose care that is safe, effective, caring, responsive and well-led.

The latest inspection reports for each home are available on the Council's website and on the [Care Quality Commission](#) website.

From 1 April 2023, the Care Quality Commission has new powers to assess how Local Authorities deliver their duties under the Care Act 2014. The Council is preparing for CQC assurance against the [Assessment Framework for Local Authority Assurance](#).

Preparations for the inspection of Adult Social Care have been ongoing throughout 2024/25 to continue updating information reports, evidence documents and a self-assessment. There continues to be engagement with staff and senior leaders to ensure awareness and alignment to Solihull's preparations for inspection.

The Council has also been closely monitoring the inspection reports of other authorities to identify best practice and areas of learning.

- 3.7.4 Peer Challenges: There was an LGA Peer Health Check of the MASH (Multi Agency Safeguarding Hub/Front Door) and EDT (Emergency Duty Team – Out of Hours Team) within the Children's Directorate in February 2025. This was very timely and supported our ongoing developments across the Directorate, inclusive of our preparation for our next ILACS (Inspection of Local Authority Children's Services) monitoring visit in April as well as our anticipated full inspection in the Autumn 2025. The findings identified a considerable number of positives which included "excellent" partnership, multi-agency working, with co-location identified as a strength which supported "impressive information sharing" and good decision making. Management oversight was equally identified as a strength within the review. It is pleasing to note that suggestions for areas of development, which included the development of our performance management system and data, we had already identified as a key area of focus as we continue to improve and develop our overall services.

- 3.7.5 Ombudsman Complaints: The Local Government and Social Care Ombudsman (LGSCO) provides a complaint handling service to ensure that local public services are accountable to the people that use them and that local authorities put things right when they go wrong. From May 2025, the LGSCO will produce an Annual Review Letter for each Council (this was published in July in previous years), in which it publishes statistics relating to enquiries and complaints which have been made about them to the Ombudsman for the previous financial year.

This data is uploaded to an interactive map, which gives people the opportunity to see how their Local Authority is performing at the click of a button. The map collates the annual letters (published on the website in July) that the Ombudsman has sent to

each Local Authority, along with the number (percentage in previous years) of complaints that have been upheld following Ombudsman investigations, how often the local authority has complied with Ombudsman recommendations, and the number (percentage in previous years) of upheld cases where they find that the Local Authority has already produced a satisfactory remedy before the complaint reached the Ombudsman for the previous financial year. This map can be found at: [Your council's performance \(lgo.org.uk\)](https://lgo.org.uk).

During 2024/25, in terms of overall administration and in line with the Ombudsman's Annual Letter, the number of cases referred to Solihull Council by the LGSCO increased by 81%, from 36 in 2023/24 to 65 in 2024/25. Whilst there is a national trend upwards concerning the numbers of complainants contacting the Ombudsman, Solihull has seen a higher risk than the average Council.

Out of the sixty-five new cases referred, the Ombudsman chose to investigate 18 (28%). All of those that required a response were responded to within the timescales agreed with the Ombudsman.

Current internal data shows that the number of complaint investigations where the Council has been found at fault during 2024/25 is sixteen (four of which were ongoing investigations which were brought forward from 2023/24). This is a significant increase from the five upheld complaints investigated in 2023/24 and places the Council at a higher rate of upheld complaints per 100,000 population (7.3) than the national average (4.7). However, the Council was found to have delivered a satisfactory response in 25% of cases prior to referral to the ombudsman, which is an improvement on the 0% position in 2023/24. All of the individual decisions made by the Ombudsman are published on their website and can be found at lgo.org.uk.

There were five live ongoing investigations carried forward to 2025/26.

3.8 Group Activities

Our group activities are as defined in our Annual Accounting Statement. For the 2024/25 year our 'Group' relationships were as follows:

Solihull Community Housing (SCH), a 'not for profit' company set up and owned by the Council to manage its housing services.

Urban Growth Company (UGC), a special purpose vehicle created to realise the full economic potential of the HS2 Interchange Station and related infrastructure.

Mell Square Ltd, which holds the ground lease interests and freeholds of a number of key commercial town centre properties to enable the Council to continue to play an active role, with partners, in shaping the future of the town centre.

Solihull Energy Ltd, which is a newly formed company which will aim to create sustainable energy solutions to the borough.

The Financial Operations division provided financial support services to all these subsidiary companies for the 2024/25 financial year.

The Joint Venture Relationships are with the Coventry and Solihull Waste Disposal Company Ltd and Sherbourne Recycling Ltd.

4 Updates on Governance Concerns Identified in Previous Year's AGS (2023/2024)

Concerns Identified	Responsible Officer	Progress Update
The Financial Sustainability Board needs to drive work to quickly address the Council's financial savings gaps across all three years of the current MTFS to reduce the reliance on the Council's limited remaining usable reserves. This will require swift management action to control in year spending, and a review of arrangements for managing budgets and the presentation of financial information to ensure complete clarity and accountability. It will also require changes to the ways in which services are provided, so that we can match the future cost of services to the income that we are able to generate.	Chief Executive and Section 151 Officer	A Financial Sustainability Board (FSB) was set up in March 2024 to 'drive forward work to address budget gaps in the current MTFS, ensuring that there are plans in place that can be delivered'. This Board identified savings for 2025/26 and beyond. In January 2025, FSB then established a delivery Board to oversee these savings through a 'Corporate Transformation Programme'. The Corporate Transformation Programme has been established around seven major workstreams made up of five delivery programmes and two supporting workstreams and then a further seven priority projects. Alongside the Corporate Programme each Directorate also has its own specific transformation or improvement programme. Regular updates on Corporate Transformation will be shared through Resources and Delivering Value Scrutiny Board.
Unprecedented financial pressure continues from the costs of an increase in demand and keeping children safe. This includes the use of agency staff, children in care and home to school transport. A considerable investment is being delivered financially as well as through other support including through our Improvement Partner and DfE Commissioner. There is significant ongoing work across the Children's Directorate and the Council to deliver a balanced budget.	Director of Childrens Services	The significant ongoing work across the Directorate and Authority to deliver a balanced budget continues.
Children's Services Improvement journey following an inadequate ILACS (Inspecting Local Authority Children's Services) finding in Autumn 2022	Director of Childrens Services	There continue to be a series of monitoring visits most recently in April 2025 which was the sixth of a series of anticipated visits. We continually update and revise our improvement planning processes "Ambitious for Children" working alongside and supported by our Improvement Partner Birmingham Childrens Trust (BCT) and Sir Alan Wood, our DfE Commissioner.

Concerns Identified	Responsible Officer	Progress Update
There is still a range of HR monitoring and compliance reporting that needs to be completed and provided to managers to ensure effective management of key issues like compliance with mandatory training.	Head of Human Resources	Monitoring and Compliance Reports are now being produced and shared appropriately with management.
As a result of increased organisational threats like Cyber Security, the Council will need to review and potentially enhance its Business Continuity Plans, taking a view on how to potentially cope with an extended loss of critical business systems.	Corporate Leadership Team	Business continuity plans of all critical services are regularly tested and updated. HR and payroll related business continuity plans are currently being reviewed, updated, and will then be tested to ensure they are appropriate and robust.
Performance reviews of Solihull Community Housing (our arms-length management organisation (ALMO) that provides Social Housing) have identified improvements required in systems and processes, in particular relating to contract, project and associated financial management. Action plans are in place to address these and strengthen arrangements.	Assistant Director-Housing	A governance review was commissioned by SMBC/SCH to review current governance arrangements to ensure they provide appropriate levels of assurance to SMBC whilst also ensuring arrangements are streamlined and efficient. A task and finish group was set up to progress the recommendations which will conclude early in 2025/26.
The Internal Audit team carried out a series of audits across SMBC, SCH and Council Maintained schools. The following audits resulted in limited, or no assurance reports being issued Direct Payments – Level 4 • Agency Staffing – Level 4 • SCH Whistleblowing Allegations – Level 5 • SCH Spandrel panels replacement– Level 5 • Children’s Services Cash Usage – Level 4 The auditing of schools also raised some concerns which have been shared with the relevant director for action.	Various directorates as applicable	• Direct Payments follow up is scheduled for 25/26. • Agency Staffing was followed up and regraded as a Level 2 • SCH Staff Appointments follow up is in progress. • SCH Spandrel panels is being followed up as part of the SCH Contract Management follow up and is in progress. • Children’s Services Cash Usage is being followed up as part of the Children’s Finance Team Compliance review follow up and is scheduled for 2025-26.

5 Significant Governance Issues Identified During 2024/25

Using the Council's established risk management approach, "significant" governance issues are those that could potentially lead to one or more of the following impacts:

- Avoidable death
- Financial implications of more than £1 million
- Legal action or intervention from a statutory body, partner, or enforcement agency
- National media attention, potential Public Interest Report or Judicial Review

In addition, the Council will record details of any service areas where the level of internal control fell below the standards that the Council expects to achieve.

Following completion of the annual review of the Council's Governance Framework, the following issues have been assessed as significant and detailed actions plans developed to address the same.

Improvement(s) Required:	Responsible Officer:	Target Date:
The Corporate Delivery Board needs to continue to drive the Transformation Programme to assure delivery of the budget savings agreed, and to identify further savings to address future years gaps in the MTFS in order to rebuild the Council's financial sustainability. This will also require on-going management action to continue to control in year spending.	Chief Executive and Section 151 Officer	February 2026
The Internal Audit team has issued a number of limited or no assurance reports across SMBC, SCH and maintained schools for 2024-25 which will be followed up during 2025-26. There are also outstanding 2023/24 reviews which have yet to be followed up due to timing or resourcing issues: Children's Homes – Level 5 SCH Contract Management – Level 4 Children's Financial Team Compliance – Level 4 Financial Assessments – Level 4 ICT Assets – Level 5 (draft) Peterbrook School – Level 4 Reynolds Cross School – Level 4	Various directorates as applicable	March 2026

6 Conclusion and Evaluation

As Leader and Chief Executive, we have been advised on the results of the review of the effectiveness of the Council's Governance Framework. Our overall assessment is that this AGS is a balanced reflection of the governance environment, and the arrangements continue to be regarded as fit for purpose in accordance with the Council's Governance Framework.

We are also satisfied that over the coming year, the Council will continue to take appropriate steps to address the identified governance issues, and we will monitor their implementation and operation as part of our next annual review. In addition, we can confirm that the improvement recommendations made by External audit reports for 2023/24 were considered and are being acted upon.

Paul Johnson
Chief Executive

Councillor Karen Grinsell
Leader of the Council

Appendix A - Review of compliance

Solihull Council is committed to robust governance and transparency, and our governance arrangements are aimed to support the Council to deliver value for money and manage risk effectively across all our activity and at all levels of accountability. The AGS provides assurances that these processes are working in practice in line with our priorities. We have set out below, for each governance principle, our self-assessment of compliance in the year 2024/25.

Principle A: Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law.

Compliance overview

The key policies, procedures and practices set out in the Code of Corporate Governance remained in place and were applied throughout the year. Council policy documents (for example financial regulations and member/officer delegations and the managers handbook) are updated annually to reflect any changes to rules and regulations, delegations, and processes.

Examples

- The CIPFA financial management code is a fairly new requirement to ensure that there is more visibility of Councils financial management arrangements to ensure that Councils financial controls are effective as well as ensuring financial sustainability. The Council benchmarked itself against these requirements in recent years and reports compliance to the Audit Committee.
- Following 'Brexit' and the UK's subsequent withdrawal from the European Union (EU) the Government prioritised a fundamental review of public sector procurement regulations and processes and introduced the Procurement Act 2023 which came into force on 24th February 2025. The council's procurement service led on preparation for and implementation of the act. Officers managed the Council's preparedness plan and risk register to support our transition. The actions within the preparedness plan sought to mitigate identified risks such as publication of contract performance, increased process flexibility, etc. and how they are likely to impact the council.
- The Council is reviewing the Council's vision and values which is informed by the responses received through the Employee Engagement Survey 2024 as well as stakeholder feedback received through consultation on the council plan for 2025-30.
- A new Equality, Diversity and Inclusion (EDI) strategy sets out the Council's commitments and plans to improve the quality of life and life chances for everyone who lives, works, studies in, or visits the borough.

Principle B: Ensuring openness and comprehensive stakeholder engagement.

Compliance overview

The key policies, procedures and practices set out in the Code of Corporate Governance remained in place and were applied throughout the year

Examples

- Council and Committee meetings are available as webcasts at [Home - Solihull Metropolitan Borough Council Webcasts](#) and decisions are recorded and published. Our meetings allow for public attendance, and we have a petitions scheme to promote participation. Significant decisions involve public consultations where required.
- The council continues to use a range of solutions to maximise openness and stakeholder engagement. These include:

- A 'Stay Connected' email alert service to keep customers connected to and informed about Council services.
- The Solihull Place Survey gathers the opinions of residents every two years and provides a cross-cutting overview of our local communities. This, and historic information, are used to inform decision making.
- 'Your Voice Solihull' (the Council's digital platform for engagement activity) has generated a range of insight that is used by services for planning.
- Regular messages from the Leader of the Council that are published on the Council website and social media.
- Multi Agency Partnership Boards have been set up to ensure all key stakeholders work together to achieve the best outcomes for the client groups.
- Fair Treatment Assessments (FTAs) help us to assess the impact of the council's work and decision-making on diverse groups. The FTA guidance has been updated to include the Council's role as a corporate parent and clarify arrangements for FTA ownership, accountability, and record-keeping. The review has resulted in the FTA form including more helpful hints.
- Lunch & Learn webinars take place virtually once a month for all staff to learn more about projects and activities across the Council.

Principle C: Defining outcomes in terms of sustainable economic, social, and environmental benefits.

Compliance overview

The [Solihull Council Plan](#) is where we set out the overall strategic direction for the Council. In particular, it sets our strategy and our contribution to the delivery of Our Vision - Solihull: where everyone has an equal chance to be healthier, happier, safer, and more prosperous.

Details

- The current plan runs for the period 2020-2025 with the plan being updated annually. The plan identifies the key priorities for the council and is based on three themes
 - People and communities
 - A strong economy
 - Actioning our climate change declaration
- During 2024/25, we have started developing a new strategic framework for 2025 to 2030. We recognise it is vital that we [engage with residents](#), councillors, employees and local organisations to try and build common understanding about the vision and the role of the council in achieving this.
- The plan which is set for a period of 5 years sits alongside our Medium-Term Financial Strategy which reflects the Council is focused on working with partners to reduce inequalities in order to build sustainable and healthier futures for the people who live, work and learn in the borough.
- The council plan is further supported by a Corporate Capital Strategy (2024/25 – 2033/34) that sets out the Council's approach to the allocation of its capital resources and how this links to its strategic priorities and objectives at a corporate and service level and the revenue budget strategy. The ongoing implications for the revenue budget strategy are fully considered before any capital funding decisions are confirmed.
- Details of how the council performed against the council plan can be found in the [annual report](#) published on the council website.

Principle D: Determining interventions necessary to optimize the achievement of intended outcomes.

Compliance overview

We are pragmatic and utilise a variety of ways to provide services, based on what will deliver best value for our residents. The key arrangements for managing performance and delivery, to inform interventions, continued to operate throughout the year.

Examples

- The Council is under increasing financial pressure leading it to review services in the face of the funding available alongside reviewing the Council plan. In this context, delivery of the Council Plan requires resourcefulness, and we are responding in a variety of ways through our procurement practice. Our response includes strategies designed to maximise value for money – including ‘social value’ achieved from the Council’s spend and adopting the new public sector procurement reform (Procurement Act 2023) and the opportunities this now presents.
- A [Productivity Plan](#) was produced in July 2024, as required by government. It sets out our approach to delivering public services well, what we plan to do next, the challenges we face, and how government can help.
- Cabinet approved the establishment of a seed funding pot, initially from the budget strategy reserve to both accelerate existing transformation projects and explore the potential for further initiatives that could yield savings for the Council’s MTFS, given the current difficult financial position for the Council. The cabinet endorsed in respect of the Customer Services Transformation Programme, the approach of providing value for money through the Right Service, Right Place, Right Time principles and model.
- In April 2021, the Council completed the acquisition of Mell Square Limited with the intention of bringing forward a phased redevelopment of the centre. During 2024/25 the Council has partnered with [Muse Places Ltd](#), a leading national developer to [regenerate Mell square](#) as a part of the council’s Town Centre masterplan.
- The Council continues to progress its ambitious plan for redevelopment of the [Kingshurst Village](#) with a vision to make Kingshurst a sustainable, well integrated community with enhanced potential to benefit from its close proximity to the economic opportunities at the airport, NEC and the rest of the UK Central Hub.
- [Solihull Energy Ltd](#) is a limited company set up and owned by Solihull Council. This independent energy services company (ESCO) will be responsible for managing individual contracts and customer agreements associated with the Town Centre Energy Network. The Solihull Energy Ltd Business Plan 2025-28 was approved and adopted in April 2025
- Our Public Health team work with a range of services, agencies, and partners to support people to live longer and healthier lives by improving and protecting health and wellbeing and reducing inequalities. The details of services provided can be found on our [council website](#). Our Living Well in Solihull (LWiS) strategy 2023-28 is supported by a delivery and action plan and completed year 1 delivery of objectives.

Principle E: Developing the entity's capacity, including the capability of its leadership and individuals within it.

Compliance overview:

The Council needs appropriate structures and leadership, as well as people with the right skills, appropriate qualifications, and mindset to operate efficiently and effectively and achieve intended outcomes within the specified periods. The key policies, procedures and practices set out in the Code of Corporate Governance, focused on developing our capacity and capability, remained in place and were applied throughout the year.

Examples

- Listening to employees is important but acting on their feedback is even more important. During the period 2024/25 development of the Council's People Strategy 2024 – 2029 has been completed. The Council's People Strategy 2024-2029 has been informed through engagement with the Council's employees and has been designed to continue to build a workforce with the personal and collective resilience to drive us forward as an organisation and increase our ability to meet Solihull's resident's needs. A detailed plan has been developed for year one delivery of the Council's People Strategy 2024 – 2029. Interventions have been considered to ensure they meet organisational need and where possible can be implemented within a 'low cost/ no cost' approach, with maximum impact for employees. To ensure a more streamlined approach for people focused work, previously identified actions in the EDI Workforce Plan have been incorporated into the Council's People Strategy 2024-2029.
- Aligned to the aspirations set out in the Council's People Strategy 2024 – 2029 'Develop, Empower and Engage' Theme, an Organisational Action Plan for the SMBC Employee Engagement Survey 2024, has also been produced.
- The Council continues to explore opportunities to increase its capacity by working with the community. One such initiative progressed during the year is the [Match my Project](#) website that provides a meeting point for the business and community sector, where community organisations can get help for their projects from businesses working with Solihull.

Principle F: Managing risks and performance through robust internal control and strong public financial management

Compliance overview

The council recognises the need to ensure that the organisation's governance structures that it oversees have implemented, and can sustain, an effective performance management system that facilitates effective and efficient delivery of planned services. The key policies, procedures and practices set out in the Code of Corporate Governance for managing risks to outcomes through strong internal control remained in place and were applied throughout the year.

Details

The Council's risk, performance and financial management arrangements have been detailed earlier in this document. The links below will take you to these sections.

[Risk Management](#)

[Financial Management](#)

[Performance Management](#)

Principle G: Implementing good practices in transparency, reporting, and audit to deliver effective accountability.

Compliance overview:

Accountability is about ensuring that those making decisions and delivering services are answerable for them and the council plans and carries out its activities in a transparent manner. The policies, procedures and practices set out in the Code of Corporate Governance to promote transparency and accountability remained in place and were applied throughout the year.

Examples

- The council continues to have an effective Audit Committee that provides a source of assurance and complies with guidance. The committee works to a planned work programme to receive reports on themes including financial operations, Audit and risk, External audit in addition to assurance on specific initiatives being progressed.
- The Council demonstrates its commitment to openness by producing a suite of reports including an [annual report](#) covering the performance of the Council, value for money and stewardship of resources.
- The council published agendas, minutes, and decisions as well as reports detailing the criteria, rationale and considerations on which decisions are based. These can be found [here](#).
- Grant Thornton conducts an annual Value for Money review as part of the main audit of the Council's accounts and in the last year the Council also had a CIPFA assurance review ahead of the application to the MHCLG for the Exceptional Financial Support. The Chartered Institute of Public Finance and Accountancy (CIPFA) review confirmed that the Council's governance arrangements were sound, with clear decision-making processes and delegations.
- Adult Social Care (ASC) performance is measured in line with the Department of Health and Social Care (DHSC) national Adult Social Care Outcomes Framework (ASCOF) and performance is reported nationally at year end. Performance targets are set using benchmarking data for all local authorities that is published annually. Continuous improvement plans have been developed to strive towards top quartile finishes on this national framework. At the end of 2024/25, Solihull had a performance out-turn of six top quartile, and five upper quartile finishes for ASCOF metrics. ASC are monitoring how the ASCOF framework will be changing with the continued development of client level data – a new data set that will analyse people's journey through the social care system. ASC have been providing client level data to NHS Digital since the pilot scheme in 2021.
- Details of the Council's performance against the [Solihull Local Outcomes Framework](#) is published on our website.
- The [Ageing Well in Solihull: The Director of Public Health Annual Report 2024-2025](#) focusses on what we can do to allow more people in Solihull to reap the benefits of a healthy, productive, and satisfying older age.