



Through the eyes of the service user:

Improving Adult Social Care in Wolverhampton

March 2026 (*updated Sept 2026*)

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About us

Healthwatch Wolverhampton is the city's health and social care champion.

We're here to listen to your experiences of using local health and care services and to hear about the issues that really matter to you. We are entirely independent and impartial, and anything you share with us is confidential. We can also help you find reliable and trustworthy information and advice to help you to get the care and support you need.

As an independent statutory body, we have the power to make sure that NHS leaders and other decision makers listen to your feedback and use it to improve standards of care.

Healthwatch Wolverhampton is part of a network of over 150 local Healthwatch across England.



Introduction

Background

Adult social care plays a vital role in the lives of local people in Wolverhampton, and these services must work effectively for everyone who relies on them. In 2025, we received a good portion of feedback about Adult Social Care services. We have spoken to people at community events about what support is available for residents, and we have been signposting people to relevant services.

Based on the feedback we have gathered through our ongoing engagement and partnership work, we are aware of important issues and experiences that require attention. We are hearing about people facing challenges with communication, accessing vital information, and we have been speaking to people who have limited contact with others, live alone or are dependent on another person for support.

According to the *Adult Social Care Interim Market Position Statement 2025-2027*, home care accounts for the largest portion of long-term support provided to people in Wolverhampton; permanent residential care is the second largest area of support, and direct payments are the third largest.

The *Measures from the Adult Social Care Outcomes Framework* (ASCOF) for England, 2024-2025, highlighted that the proportion of carers in Wolverhampton reporting that they had as much social contact as they would like has increased from 28% in 2022 to 30% in 2024. However, the proportion is higher in over-65s compared to any other age bracket.



It is also highlighted that in Wolverhampton: **'The local population, aged 65 and over, will increase by 33% by 2040, with the largest increase for people aged 90 and over (58%)'**. This data highlights the importance of understanding people's experiences with Adult Social Care. By doing so, we can identify areas that need improvement and address any barriers that service users face. This will help the local authority and providers better accommodate those who may require our support in the future.

What we wanted to find out

We wanted to hear from people who use Adult Social Care services in Wolverhampton to gain a better understanding of their experiences. We also wanted to know the types of services residents are receiving, how well these services work together (if using multiple services) and how they communicate with service users. We also wanted to know individuals' needs and any improvements they feel need to be made.

All the insights gathered throughout the project will be used to advise individuals responsible for Adult Social Care services in Wolverhampton on how to enhance and improve these services for all residents. It will also inform the integrated neighbourhood team whose work will affect many people, including those who will be receiving adult social care. As such, we have been working with One Wolverhampton's engagement team to gather data. This report will give people the opportunity to have their voices heard and help bring about positive change to the Adult Social Care services they use. This report features detailed case studies from people we have spoken to.

One Wolverhampton is a collaboration of health, social care, voluntary, and community organisations working to drive the delivery of key health and social care ambitions within the city. Their priorities for 2025-26 include the development of Integrated Neighbourhood Teams (INTs) to better meet individual needs through closer working of services.

What we did

We worked on this project between September 2025 and February 2026 and used a community-based approach to gather people's views.

One-on-one conversations

We prioritised one-on-one conversations with Wolverhampton residents in environments where they felt safe and comfortable.

Interviews

We asked participants a list of key questions and additional prompts through semi-structured interviews to gain a deeper understanding of their experiences using the Adult Social Care service. We also conducted non-structured interviews if that was the participant's preference.

Survey

We created an online survey, which was also available in a physical format, for the public to complete while we attended community events. This was to ensure a wide range of voices were heard. We collected 16 responses.

Key messages

The key themes that emerged from what people told us centre around the need for better access to information, more support for service users, and improved communication.

- **Improved communication:** Some people have reported experiencing difficulties with communication when trying to navigate Adult Social Care services. Some feel that they must 'chase' for updates. Additionally, there are concerns about the communication between different services, with people often unsure about which service is responsible for their care.
- **Access to information:** There is a lot of information available, but people find it difficult to access. Some individuals have reported that navigating the Council website is challenging. Additionally, some people we have spoken to struggle with technology and others have limited mobility, which makes it hard for them to seek help in person.
- **Further support:** Many people we have spoken to either live alone, rely on another person or have limited contact with others. This can sometimes lead to feelings of isolation, which can negatively affect their mental health.



“When I spoke to staff over the phone and in person, it was unclear who I was talking to—whether they worked for the council or if they were from a third-party provider. I found myself having to ask them repeatedly who they worked for.”

This type of experience has been shared more than once.

What people told us

Case studies: one-to-one conversations

Through in-depth conversations with individuals, we collected feedback that highlights their experiences of using Adult Social Care services. The testimonies given to Healthwatch Wolverhampton align with other feedback we heard. All names have been changed.

Shauna's story

Shauna is elderly, and after having a stroke the previous year, she needed assistance in regaining her independence. She began her journey at New Cross Hospital and was later discharged to a rehabilitation ward at Cannock Chase Hospital, which she found to be a traumatic experience. The discharge from New Cross Hospital to Cannock Hospital was abrupt, with her next of kin only finding out after she had started the journey from one hospital to another. Her personal belongings went missing, and there was a lot of conflicting information about her condition. Shauna shared her initial experience of using Adult Social Care services after being discharged from Cannock Chase Hospital.

“I was being discharged to a care home in Wolverhampton, and the first time I heard about it was on my moving date. My next of kin had to rush to the care home to help me move in. After having a not so nice experience in the hospital, again, not being told about my moving date added to the stress. I wasn't even given a choice of which care home I would like to go to.”

Shauna was also dissatisfied with her experience at the care home. She felt that the quality of care was poor, the food was subpar and that her personal and medical needs were not being met.

“My daily diabetic needs were not met, which really concerned me. The waiting times for a response to the call bell were so long. I felt that the staff did not seem invested in their jobs at all.”

Shauna mentioned that her assigned social worker while she was in the care home was very helpful and supportive. However, the social worker sometimes believed she knew what was best for Shauna's health and struggled to work effectively with her next of kin. Eventually, her social worker arranged for her to attend a rehabilitation centre in Bilston as part of her journey back home.

“The rehabilitation centre was excellent, and the social worker did her best to ensure I received as much support as possible to return home independently. They organised home adaptations and occupational therapy for me. I felt well supported.”

When Shauna was able to move back home, she was provided with various technologies, including a wristband that alerts services if she falls, an Alexa device, and a ring doorbell. These adaptations have improved her independence and made her feel safe in her own home. She also mentioned that the contractors were excellent and installed all the adaptations quickly.

“I have worked very hard to own my own home since the 1960s, so I want to remain in my home as long as possible. Without the support, I wouldn't have been able to do that.”

Shauna explained that her next of kin was quite confused about the support provided by the hospital compared to what the council offered. For instance, the council had a grant available to install a toilet in her house, but she was unaware of this until after she had purchased the materials to complete the work privately. Later, she learned that the council could have supplied and installed the toilet for her.

While Shauna acknowledges that the support she has been given has improved her quality of life, she is also aware that her condition might get worse. She stated that

she is very fortunate that she can pay for anything that the council cannot provide, but she knows this is not the case for everyone. She also thinks that if others had had to go into hospitals or care homes, their experience could be just as bad as hers.

Q **“Focusing on more preventive measures is the best way forward. I would like to see more investment in our local communities and more focus on people like me, who are getting worse, to prevent them from going into care homes and spending longer in hospitals.”**

Feedback from Shauna’s next of kin:

Q **“One major issue is the communication between the different services. Communication between the hospital and the council was confusing. For example, who was responsible for providing her [Shauna] with a new bed? Carers are left to navigate the system by themselves, rather than services providing the appropriate information. Occupational therapy was confusing; when multiple groups get involved, there is an overlap.”**

Kyle’s story

Kyle has a disease that greatly affects his mobility. He relies heavily on his father for support around the home and when he leaves the house. Having this condition has resulted in disruptions to Kyle’s day-to-day life.

Q **“This condition can make me feel depressed at times. I miss being able to see my friends and socialising.”**

In the past, Kyle received support from a social worker who would visit him. Kyle found the social worker to be supportive at first, assessing his living conditions, providing recommendations on home adaptations, and even offering him some new equipment to help him around the house.

However, there was a lack of communication going forward, as he did not receive many updates regarding the home adaptations he needed. As a result, Kyle attempted to look elsewhere for support, but due to his mental health at the time, looking for support by himself was difficult.

Q **“It sometimes left me feeling tired, exhausted and drained.”**

Kyle’s former social worker also suggested that he consider moving into a bungalow to better support his needs. However, Kyle is reluctant to leave his current home due to having many family members and friends living on the same street. He believes that if he moves, he would become more isolated, which would negatively impact his quality of life.

Q **“I have lots of memories in my house about my mum and dad and growing up. Adult Social Care services mean that I can stay here comfortably.”**

Kyle’s former social worker also suggested that he consider moving into a bungalow to better support his needs. However, Kyle is reluctant to leave his current home due to having many family members and friends living on the same street. He believes that if he moves, he would become more isolated, which would negatively impact his quality of life.

 **“I have lots of memories in my house about my Mum and Dad and growing up. Adult Social Care services mean that I can stay here comfortably.”**

Kyle later received help from his local councillors, who happened to be walking down his street one day. He felt that they really listened to him and provided clear information and reassurance that he would get the support he needed. Since meeting his councillors, Kyle found the service to be fast and effective. Although he appreciated the quick installation of home adaptations, he believed there was still a lack of sufficient communication from the council.

 **“I spoke to someone from the council over the phone, and I couldn’t understand much of what they were saying. Also, the people installing the outdoor handrails turned up one day without informing me, after I persistently asked the council when they would be coming. They did install the railings quickly, which was good, and the contractors were very pleasant and kind.”**

Kyle also described some of the workers as being ‘judgemental’ at times, which he found frustrating.

 **“I later found that the outdoor handrails were loose, so I had to call them back up to come and fix them. Different contractors from the same company came back, and they blamed me for it being loose; they said I was ‘swinging on the rail’. I tried to laugh it off, but I got annoyed with them.”**

As a result of the home adaptations being installed (even though there is still more to be done), Kyle feels much more independent in his own home. He can move around his house much more easily with the support of physiotherapy, and he is less inclined to ask his father for support.

Theresa’s story

Theresa supports her father, who has complex health needs, the main one being cancer. He is unable to perform certain tasks unaided in his own home. She described how she found accessing Adult Social Care services was for him.

 **“I found it easy, and it didn’t take long at all to get in touch with them. There were a couple of phone calls, and he had mobility aids fitted around the house, including handrails and bed lifters.”**

Theresa was very pleased with the communication from the council. They provided her with updates, appointment schedules, and information about when the home adaptations would be installed. As a result, her father is now managing daily tasks around the house.

While Theresa is satisfied with these improvements, she has been exploring sheltered accommodation for her father, though she has found it difficult to obtain. The application process does not consider the individual’s illness and mobility, and there are certain requirements that must be met before acceptance, such as selling her father’s house. Theresa feels that this process needs improvement.



Other feedback

What improvements did people want?

We asked everyone who participated, including the 16 people who took part in the online/physical surveys, what improvements they would like to see in Adult Social Care services. This is what they told us.

Better communication

"I would like to know specific times and dates for when my home adaptations will be fitted and installed."

"Regular contact would be good to keep me updated on my requests. So, for example, if I am going out that day, I can rearrange or have a neighbour or friend who could be in when I am not."

"My husband was discharged from the hospital to step down. I wasn't informed that my husband had been referred to continued health care (CHC) until I received a letter informing me. There needs to be better communication overall."

"I had an over the phone care assessment for my mother, and after the call, I never received anything back for ages, so I had to chase it up. I had to call between 5-6 times to chase it up. It's not easy to get hold of them at the council. The communication needs to be better."

"The discharge from hospital to care homes for those who are on the discharge to access pathway has lots of problems. Many are told they will get quick access to physiotherapy, and this is simply not true." – feedback given from a care home.

More information and easier access

"There needs to be more information about what services are out there and how to access them."

"I have struggled to navigate the council website in the past; it needs to be easier to use."

"Sometimes there is confusion about what support is out there for me. Not only am I a carer, but I am also elderly."

Reduction in waiting times

"Waiting times are probably the main issue that impacts me today. I am aware that it is a nationwide issue across all health and social care services, but I do not feel much is achieved or made particularly clear, especially as an elderly person. I am always waiting around for something to happen."

Staff and employment

"I think the council needs to employ more social workers. It was clear my social worker was overloaded with work, which affected the amount of time she could spend with me."

"I believe there should be an on-call navigator who can communicate on behalf of the council and the hospital to keep people informed."

"There is a lack of compassion and understanding about age-related issues from staff. For example, home help service is provided, but not necessarily with sensitivity."

Local communities

"I would like to see more investment in our local communities and more focus on people like me, who are getting worse, to prevent them from going into care homes and spending longer in hospitals."

Conclusion and recommendations

Based on our findings, we recommend the following actions to help those responsible for Adult Social Care services and the integrated neighbourhood team model to be a success and to tackle key areas and improve support for local people.

Communication

All support services must communicate in ways that are clear, accessible and efficient for everyone. However, some service users have noted that they are not receiving regular contact, which often leads to long waits and a lack of updates. Other people have found it difficult to contact services in general. Some people have also expressed confusion regarding which services offer specific types of support.

Recommendations

- Provide more on-call care navigators who can communicate on behalf of the council and other services to keep service users informed.
- Train staff to clearly identify themselves and their service in every communication with service users and carers.

Accessibility of information

Some service users highlighted a lack of clarity about what information and support is available. Others have had difficulty navigating the Council website, and some must navigate the system entirely independently. Other people may not have the ability or the resources, such as technology, to search for the information they need. People need access to clear, accessible materials. When this information doesn't

reach service users or is unclear, people are more likely to access the wrong service or avoid seeking care altogether.

Recommendations:

Simplify or redesign the City of Wolverhampton Council website adult social care page so that it is easier for service users to navigate.

- Clearly highlight any grants and other financial support for residents on the Adult Social Care page on the Council website.
- Leaflet areas where those using Adult Social Care services live, with useful information and contact details.

More support

Through our conversations, we have learned that some individuals may have negative experiences in hospitals or care homes, or even face health issues before accessing Adult Social Care services. These experiences can adversely affect their wellbeing. People we have spoken to either live alone, depend on one individual or have limited contact with others. Service users must get the best support throughout their Adult Social Care journey.

Recommendations:

- Employ more social workers to provide users more time with their assigned social worker. This can additionally give carers more free time for themselves.
- More investment in local communities to reduce the time spent in hospitals and care homes for service users.

Next steps

Healthwatch Wolverhampton aims to collaborate with local providers, including the local authority and One Wolverhampton, to host an Adult Social Care awareness event that supports individuals in accessing healthcare information. This initiative will help address the concerns raised by the community regarding information accessibility. Once the Integrated Neighbourhood Team is established, we will assess whether communication between services has improved. A report on the future awareness event is planned, along with an update on its outcomes.

Stakeholder response

Since publishing this report, we have received an update from the local authority outlining actions taken in response to our findings and recommendations.



Andrew Wolverson, Director of Adult Social Care at City of Wolverhampton Council.

We welcome the findings of Healthwatch Wolverhampton and would like to thank everyone who shared their experiences to help improve Adult Social Care services within the city. The report highlights several key themes around communication, access to information and support, many of which align with our own improvement priorities and transformation programme.

Since this report was completed, Adult Social Care has undertaken significant service transformation to strengthen frontline delivery, improve oversight and enhance the experience of people who draw on care and support.

A major organisational restructure has been implemented, creating a more robust operational model with increased management capacity, clearer accountability and stronger professional leadership. The new structure has strengthened support for frontline practitioners, improved decision-making and created greater resilience across services. This investment is helping us to improve the timeliness of responses, strengthen communication with people and their families, and provide more effective oversight of individuals' journeys through Adult Social Care.

We have also continued to invest in approaches that support people to remain independent for longer. This includes the further development of Technology Enabled Care, expansion of digital solutions that help people remain safe and connected in their own homes, and a stronger focus on prevention and early intervention. These initiatives directly support the ambition highlighted within the report to reduce avoidable admissions to residential care and hospital settings and enable people to live independently within their communities for as long as possible.

Recognising the concerns raised regarding access to information, we are reviewing the Adult Social Care section of the Council website. This work will focus on making information easier to find and understand, simplifying navigation, improving accessibility, and providing clearer information about available services.

Alongside this, we are improving the range of information available through digital and community channels, ensuring people can access support in ways that best meet their needs. This includes strengthening links with community organisations and partners as part of our prevention agenda and neighbourhood-based working.

The development of Integrated Neighbourhood Teams across Wolverhampton also provides an important opportunity to address some of the communication and coordination issues identified by people who draw on care and support. Through closer working between health, social care, voluntary sector and community partners, we aim to provide a more joined-up experience, reducing duplication and ensuring people receive the right support at the right time.

Progress is already being made to improve how carers access information, advice and support through digital channels. Using funding secured through the Accelerating Reform Fund (ARF), Wolverhampton has introduced several new digital tools designed to increase choice and control for carers around the clock. These include an online self-assessment and self-help resources, a digital portal that uses AI technology to engage with carers, and a 'Virtual House', which provides signposting to simple equipment and aids that can be purchased and used in the home to promote independence. The intention is not to replace personal contact with digital tools, but to give carers more ways to access support at a time that suits them and to access information independently where appropriate. Early feedback and usage data will continue to be monitored to understand how these developments contribute to improved access and carer experience.

Adult Social Care remains committed to continuous improvement and will continue to use feedback from Healthwatch, people with lived experience, carers and partners to shape future developments. We recognise that there is more to do and remain focused on delivering person-centred, accessible and responsive services that support people to achieve the outcomes that matter most to them.

Thank you

We want to thank everyone who shared their experiences with us at events, via our survey, and those who participated in a case study. Hearing about your experiences has helped us better understand some of the key issues people face when using Adult Social Care services in Wolverhampton and has enabled us to identify areas where improvements can be made. We also want to thank all our volunteers who contributed to our community engagement work.

Further reading

1. **City of Wolverhampton Council, Adult Social Care services:** <https://www.wolverhampton.gov.uk/health-and-social-care/adult-social-care>
2. **One Wolverhampton, Black Country Healthcare:** <https://www.blackcountryhealthcare.nhs.uk/about-us/onewolverhampton>
3. **Healthwatch Wolverhampton, Adult Social Care:** <https://www.healthwatchwolverhampton.co.uk/advice-and-information/2024-09-15/what-adult-social-care>
4. **Adult voice and choice:** <https://www.wolverhampton.gov.uk/health-and-social-care/adult-social-care/about-adult-social-care/adult-voice-and-choice>





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