

Governance, management and sustainability

Score: 2

2 - Evidence shows some shortfalls

The local authority commitment

We have clear responsibilities, roles, systems of accountability and good governance to manage and deliver good quality, sustainable care, treatment and support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate.

Key findings for this quality statement

Governance, accountability and risk management

The local authority was going through a significant transformation which included the "Being our Best programme" which was council wide. More specifically to adult social care, the transfer of staff back in house meant some leadership structures were new and developing. Leaders had a good understanding of where the local authority needed to improve adult social care and had plans in place to improve them. Actions to improve governance such as the implementation of the newer enhanced Power BI data system had yet to be completed. Leaders told us how they anticipated the transfer and review of job profiles within teams would enable staff to work better across teams and have access to support, knowledge, and guidance to effectively carry out their roles. Staff told us communication regarding the transformation and review of job profiles was not openly transparent and this caused anxiety for staff who did not always feel safe and secure in their roles. Leaders and staff identified it would take time for new cultures, structures and processes to embed.

The local authority identified gaps in overall governance which were planned to be addressed after bringing statutory functions back in-house after several years of these being managed by an external commissioned company. Leaders told us they recognised the local authorities' oversight was limited when services were externally commissioned and had recognised that more work was needed to clearly define the standards of practice for example, better oversight and improved quality assurance. Leaders told us there was a clear focus on improvements, the local authority told us senior leaders have implemented a Quality Assurance Framework to support the monitoring and oversight of improvements. We found a strong strategic focus amongst senior leaders, with awareness and openness about where they needed to improve. Despite staff telling us about their anxiety about the transfer, they also told us the leadership team was knowledgeable and approachable. Leaders told us they were taking steps to ensure they were visible to staff, by visiting teams and holding some lunch and learn sessions to improve knowledge and practice. The implementation of the PSW had helped improve communication between frontline staff and leaders. We saw examples of improvement such as the interim appointment of a PSW, prior to this the PSW role was vacant for 9 months which had negatively impacted on the quality and oversight of practice. Some improvements had been made since the appointment of a new PSW such as providing support to staff to understand the principles of the MCA 2005 and identifying gaps in eligibility following a Care Act assessment and quality of records and assessments.

Staff and leaders told us there was currently a lack of governance and oversight in relation to audits and the analysis of findings. Quality assurance within individual teams was informally carried out with staff discussing complex cases with each other and using each other's knowledge and experience to inform practice, rather than through structured arrangements. Plans were in place to improve overall governance, including an intention to carry out regular audits and further dip sampling of work to quality assure assessments, care plans and reviews. Leaders have also identified legal literacy and record keeping as areas for improvement. Some improvements have already been made, with the implementation of a practice forum in which staff took complex cases for decisions on care and funding. All cases that were presented at the practice forum were reviewed by a head of service or assistant director to improve consistency and oversight, this included any open safeguarding concerns relating to the person. Leaders told us they used this information to inform future learning and improvement. Since November 2023, 741 cases had been presented at the practice forum.

Staff told us identifying risk in relation to delivery of social care duties was mainly managed by the team managers and staff had little insight into how this was done. The oversight and management of risk was inconsistent and varied from team to team, for example, there was no mechanism for risk review in the manager's absence in some teams which could mean work may not be prioritised effectively and could result in harm to a person with care and support needs. The ways that waiting lists were managed was also inconsistent across teams. Performance data did not give a clear oversight of risk. However, there was a plan in place to introduce an improved Power BI data system that would support leaders with quality assurance and easier identification of risks. The Director of Adult Social Care (DASS) told us they had good working knowledge of risk, safeguarding and quality assurance and reported this monthly to the Chief Operating Officer. Leaders attended a newly introduced quality assurance board meeting to ensure strategic oversight of adult social care. Meeting minutes reviewed from 18 July 2024 showed data from brokerage, updates on extra housing, recruitment and finance however, these meetings were yet to be fully embedded in practice.

Strategic planning

The local authority had a clear 3-year strategy for adult social care which was being implemented through an ambitious transformation programme which was taking place at the time of the assessment. However, much of the transformation work was in the early stages and was yet to be fully implemented and embedded.

The local authority told us they were on a journey to developing a positive performance culture with ambitious plans for improvement. Leaders told us their priorities were focused on addressing service gaps and ensuring accountability in decision making. The adult social care strategy had 3 core commitments: to deliver a service focused on empowerment to deliver the support required; to recognise the value of communities, assets and resources available locally to support residents to be active and fulfilled, including the vital roles played by the Community Wellbeing Hub; and to focus on the delivery of quality provision to help people to progress and lead enjoyable and meaningful lives. The local authority described how they would be bold, ambitious, innovative and adaptable to support people to live the life they wanted to lead, as evidenced in their ASC vision and strategy.

Underpinning the strategy was the internal practice offer, which focused on having knowledgeable staff to provide effective support to people in a person-centered way. Leaders identified the need for further training and recruitment to ensure there were enough knowledgeable and experienced staff to carry out their social care duties effectively.

Information security

There were systems in place for the safe management of data. Teams told us how they followed the local authorities processes for safe handling and sharing of information. We also heard examples where information was shared between agencies such as out of hours duty shared with another local authority. There were plans and protocols in place to ensure information was shared and recorded securely.

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