

# Governance, management and sustainability

Score: 3

3 - Evidence shows a good standard

## 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

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The quality of leadership and governance in Northumberland was effective, with a clear corporate vision, high quality relationships, supported by clear governance pathways and practices. Corporate governance was integrated with adult services across several projects and forums; a strong adult services governance framework was in place to support strategic and operational requirements, with roles and responsibilities defined and leader visibility emphasised. Risk management and business continuity was in place to support managers and different areas of adult services in emergency situations, with clear oversight of performance quality.

The lead member and shadow lead member worked well with the DASS and senior leadership team to ensure accountability and services delivered were responsive to the needs of people with eligible care needs. The lead member understood and spoke of the opportunities and risks to the delivery of adult social care in Northumberland and had insight into services both strategically and operationally. They felt able to challenge the senior leadership team, demonstrating oversight of key areas of work such as DoLS.

Current Overview and Scrutiny Committee (OSC) arrangements needed to be strengthened due to a change in leadership which had meant there were gaps in understanding critical areas of delivery, however the local authority was able to demonstrate how OSC had challenged and supported the delivery of current services prior to the change.

The leadership team were respected and respectful of each other. The CEO had built a team with a shared vision connecting all parts of the organisation to work together.

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The leadership team spoke highly of staff and were proud of the work they do. Leaders felt staff were dedicated and worked hard to ensure that people had the best outcomes in Northumberland. Leaders in Northumberland have created an open, respectful and challenging environment to work in which extended across to its external partners. Staff and partners felt able to challenge. The PSW and POT were highly valued members of the senior leadership team and felt able to influence the DASS and senior leaders. This allowed practice to be aligned and responsive to strategic ambitions, which in turn were well informed by best practice professionalism which kept people at the heart of the work of the local authority.

The local authority had completed an audit of their 'Direct Report Meetings' to ensure appropriate governance was in place in adult social care services. This audit reviewed whether groups were fulfilling their purpose, with decision making being undertaken by staff with appropriate seniority. There was clear oversight from the senior management team and relevant actions were outlined in response to the audit to support the governance structures in place. Recommendations included ensuring that all meetings had clear terms of reference and identified deputies to ensure the purpose for meetings was clear and continued when people were unable to attend.

Performance management and reporting was well used in Northumberland. For example, the Joint Management Group for CHC conducted management meetings on a quarterly basis to review the performance of CHC activities and aftercare commissioning, including information about service delivery and the management of expenditure. Health partners recognised the governance structures in place were strong within the local authority both at strategic and operational levels and highlighted the authority's full engagement across shared forums.

The Principal Social Worker highlighted the safeguarding adult reviews, and lessons learned ensured and provided assurance for the quality of practice. The local authority's audit framework specified team managers of frontline teams were expected to complete at least 2 quality audits a month, including the identification of specific actions in relation to cases and any learning, improvement and personal development for practitioners.

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There were mechanisms for understanding the experience of people receiving adult social care services in Northumberland. The local authority used ASCOF data and other feedback forums such as the People's Advisory Panel, the People's Experience Working Group, and surveys of people's experiences from providers to inform strategic decision making. Through contract performance, the voice of people who used services was sought and considered to understand and evaluate the effectiveness of services. The local authority recognised this area of work could be improved to understand the performance and outcomes of services.

The local authority's Quality of Practice Framework was implemented to support the delivery of high-quality support service to meet adult social care needs. The framework was based on a range of local and national statutory requirements, policies and procedures. The Adult Services Quality and Governance Group was the main forum for discussing the findings of quality assurance activities. Quality assurance activity undertaken included people's feedback, audits, self-assessments, staff feedback, safeguarding learning reviews and performance monitoring. An example of improved processes was the implementation of a standardised outcome measure in occupational therapy to provide evidence-based outcomes.

Risks were well understood across all elements of the local authority's work, and the leadership team actively worked to manage them. The local authority had a clear risk management process which included escalation routes where high-level risk was identified. Northumberland had oversight of their current risks and their potential impact on services. This was documented in relevant risk logs for each service and RAG (red, amber, green) rated. The local authority had risk registers in place for each service, and categorised risks as either corporate, strategic or operational. The person responsible for each risk was clearly stated, for example, operational risks were owned and managed by Service Managers, and corporate risks owned by the senior leadership team and cabinet. Staff understood how to escalate risks to be managed at the appropriate level.

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Northumberland had a good relationship with the Health and Wellbeing Board (HWB) members and adult social care representatives regularly attended meetings and were engaged with the work of the board. However, the local authority may need to consider how it shares its progress in relation to managing shared risks with the health and wellbeing board.

## Strategic planning

A corporate plan was in place for 2023-2026 with the priorities of tackling inequalities, driving economic growth, and achieving value for money. Next Steps for Adult Social Care in Northumberland 2024-2027 was a position statement linked to the corporate plan which assessed how well the local authority felt they were doing and what they could do to improve in the context of current national and local pressures. This included an emphasis on prevention and a reduction of needs, whilst addressing inequalities across the county which informed the service plan in adult social care. The service plan in place for adult social care articulated how service delivery and planned service improvements would achieve the Council's strategic priorities. Actions came under the 3 corporate themes and recognised where the local authority needed to improve, including appropriate actions in line with the Care Act. For example, actions included addressing current and future pressures in extra care, supported living, housing, promoting independence and reducing social isolation.

Senior leaders told us strategic planning could be further improved, for example, through the engagement of people with lived experiences. Whilst the autism strategy was written for people 'from the cradle to the grave', people we spoke with felt there was too much of a focus on younger people and school leavers. Staff told us improved engagement would allow a sharper focus to address areas such as poor employment, and mental health support available for young adults living with a neurodivergent condition, people with learning disabilities, and autistic people.

## Information security

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The local authority had systems in place to ensure information was held securely and confidentially, and the integrity of information was maintained within the organisation and across its partners. OneCall were able to share how they effectively accessed information systems for children, adults, mental health and hospital information to process referrals and information they received in a secure and agreed way. NHCT confirmed local authority staff had access to NHS systems, however this was controlled, and only accessed on a 'need to know' basis where agreed. Access to systems and data were risk managed around patient care and safety, and the safety of staff. The NHCT confirmed they had a risk register in place.

The local authority used SWIFT to record information about people it supported and was in the middle of a transitional process for its new information management system. Some records were kept outside of the system, for example, information relating to the management of providers, but were held securely. Staff had been engaged in developing pathways for the new system. The new system aimed to help the local authority to capture further insight and manage performance. Senior leaders saw this as an opportunity for the local authority to capture more information than it currently held, enabling them to better understand how the local authority met, identified and anticipated service need. For example, the current system did not capture all the protected characteristics under the Equality Act 2010 and system changes presented an opportunity to do so.