

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

The local authority was going through a period of transition in leadership and governance. There had been a recent change in the political leadership of the council and the DASS was also relatively new in post having been appointed as Director of Adult Social Services 5 months prior to our assessment. Prior to that they had been in the interim post of Director of People which included Adults and Childrens services for 7 months. Governance and management systems were in place from the previous political leadership, ensuring oversight and scrutiny from members. Members understood their roles but were still in the process of learning the detail. Areas for improvement had been identified to increase accountability and scrutiny for Adult Social Care by merging scrutiny for adult social care with health. At the time of our assessment, scrutiny for adult social care was within scrutiny for all council business which meant it did not always get prioritised.

There were systems in place to provide assurance on the delivery of Care Act duties, including quality and risk and the experience and outcome for people using services. Management of performance and risks were embedded through front line teams. Managers were aware of where there were issues and concerns and monitored the work of frontline teams. There was a culture of gathering feedback from people using services to review and improve practice and ensure person centred approaches.

There was a stable leadership team, with clear roles, responsibilities, and accountabilities. Staff told us leaders, including the DASS, were visible, supportive, and approachable and worked with them to identify and resolve issues. There was a positive culture, staff told us it was a good local authority to work for. Staff reported having good support and supervision including consideration of their wellbeing.

There were systems in place to manage risk, safeguarding was embedded in all teams. There was a risk-based approach to managing waiting lists. The highest risk was prioritised for immediate action. Leadership worked closely with partners to manage risk across the system.

Strategic planning

Recent changes in the political leadership of the local authority meant some of the strategies had not yet been reviewed and aligned to the new leadership. However, partly because of the Covid-19 pandemic some of the goals and aspirations of previous strategies had not been met. For example, improving provision for people with complex needs and reducing the number of out of area placements which had been a goal in the market position statement. The context within which the local authority was operating meant that there was a relatively stable provider market, with high quality care. The local authority had trust in providers which meant the local authority was able to meet people's needs with existing provision. This meant there was less incentive for active market shaping. As needs were changing, more people with complex care needs and more people wanting to remain in their own homes, the growth in the number of older people, along with financial pressures meant there was an imperative need to have a more active approach to market shaping. There was an awareness of, and conversations about performance, inequalities, and risks for the future, but these had not yet been translated to strategy under the new leadership. There was a focus on dealing with financial matters. The local authority was aware there was more work to be done to develop proactive strategies based on the data including inequalities and future growth to shape the market and services within the available finances. More focus needed to be placed on measuring impact and savings of preventative work for example, which could improve outcomes for individuals as well as help reduce future costs of an aging population and address the high numbers of working aged people with long term care needs.

Information security

The local authority had systems in place to maintain the security availability, integrity and confidentiality of data, records, and data management systems. Electronic recording systems were in place with restricted access for those working with people using services. The local authority had a system in place to ensure security if physical records were printed, for example to give a person a copy of their care plan. Where documents were emailed, there was the additional requirement that a secure email system was used. If information was sent to third parties a secure portal was used. All staff were trained in the use of the secure systems.
