

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 were going through a significant transformation which meant leadership structures were new and developing. The governance and accountability during transition was strong, leaders had a good understanding of where the local authority needed to improve and the plans in place to bring about improvements were robust. We heard from staff and leaders how they anticipated that the transformation would enable them to work better across teams, such as with children's services, housing or finance. However, it will take time for new structures and processes to embed. Staff described strong leadership and we heard from leaders how they remained accountable to staff and people who used their services. However, at the time of this assessment many leaders were in interim roles and some of the actions to improve governance, such as implementing new IT systems, had not yet completed.

The local authority had identified gaps in overall governance which were planned to be addressed by bringing statutory functions in-house after six years of these being managed by a local authority trading company. At the time of this assessment there were interim senior leadership team arrangements in place to mitigate the impact of the change and ensure governance arrangements were in place whilst the transition was in progress. We found a strong strategic focus amongst senior leaders, with awareness and openness about where they needed to improve. There was a Transformation Plan and a Transformation Board in place to provide guidance and oversight of the extensive change which was taking place.

Staff consistently spoke positively about the senior leadership team and demonstrated an awareness of the strategic direction of the local authority. Staff told us transitions had been handled well and gave positive feedback on the approach taken by senior leaders. We saw senior leaders took steps to ensure they were visible to staff, by holding regular all staff calls and meetings with small groups of staff, as well as regular local authority events where staff could meet and talk to leaders and share ideas or feedback. Senior leaders also told us they had taken practical steps to provide forums for staff to share ideas or concerns, as well as being physically present in the office and working alongside staff. The Chief Executive Officer (CEO) and the Director of Adult Social Services (DASS) had been in post for just over a year and staff told us they felt able to speak directly to them, as well as using local authority systems and process to have their voices heard.

There had been a change in political administration at the local authority in May 2023 and this had seen new leads and committee chairs take office around the same time as the new CEO and DASS came into post. Despite it requiring time for these relationships to embed and for the new administration to develop their scrutiny functions, we saw evidence of decisions and strategy being effectively scrutinised by members, and we heard how leaders and staff had supported this by working with members and responding to issues. We heard about a positive professional relationship with healthy challenge.

The local authority told us they were on a journey towards developing a positive performance culture. We saw evidence of increased monitoring of quality and data, but some of the actions had not yet taken place. The local authority had already recognised limitations to their use of data caused by their case management system. The DASS had introduced regular performance meetings in which data relating to Care Act duties was used to understand performance in areas such as safeguarding, waiting times and commissioning. We observed staff and leaders had a good understanding of where to focus, such as responding to waiting lists for safeguarding by introducing the safeguarding hub or plans to improve around DoLS. However, we also saw that some data was difficult to collate and leaders were keen to address this through new IT systems. Despite the limitations of the current system, at the time of assessment senior leaders had a good understanding of performance and we heard from staff how this filtered through to teams who also understood their own performance and expectations.

Staff and leaders told us monthly quality assurance audit meetings were in place to enable staff to discuss complex cases, reflect on good practice and facilitate shared ownership of decisions. These sessions were led by senior staff and were designed to encourage creativity, transparency, and openness. However, we also heard the data used was mostly quantitative rather than qualitative, which created barriers to effective discussion in areas such as outcomes and strengths-based work.

Health partners described clear lines of accountability and escalation processes. For example, they described positive work around winter pressures meetings where leaders worked closely with them and overcame challenges by being accountable and working proactively with leaders across the integrated care system.

Strategic planning

The local authority had a clear strategy which was being implemented through the ambitious transformation programme taking place at the time of this assessment. However, much of the transformation had not been implemented yet and the local authority was having to carefully prioritise where it focused resources.

The adult social care strategy ran from 2023 to 2026. It described the local authority's aims to produce positive outcomes for people, promote people's independence, integration with partners, digital innovation, and efficient management of resources. The strategy's delivery plan spanned 6 core objectives and included changes to systems, models of assessment, and structures, to improve outcomes and focus on better performance management through access to improved data and analysis.

The local authority was introducing new technology to support their strengths-based approach to Care Act 2014 assessment and unpaid carers assessment. We heard examples of good social work practice, and a learning culture. The Principal Social Worker and Principal Occupational Therapist roles were used to inform strategic direction. Whilst these roles had been involved in setting the interim strategy, they did not sit alongside directors at a senior level within the organisational structures.

Information security

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

Leaders and partners told us how they had agreements in place to ensure data was shared safely and all parties were clear about what was being shared and its intended use.