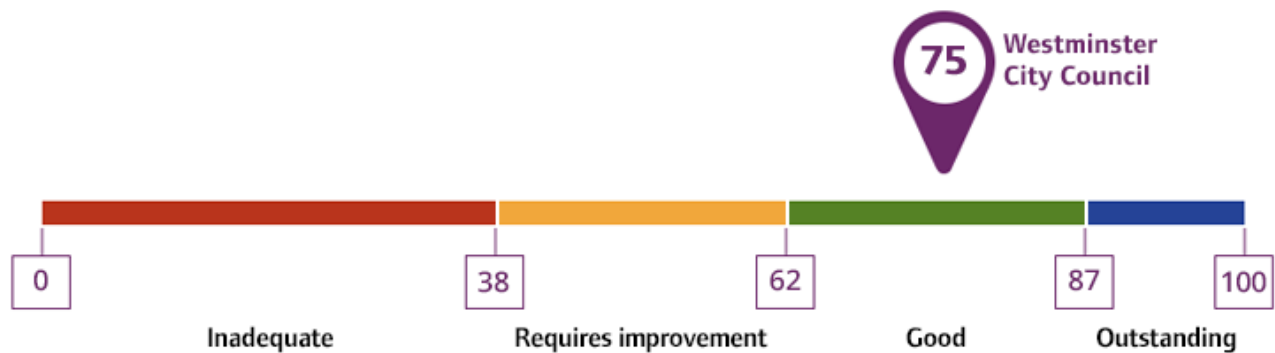


# Overall summary

## Local authority rating and score

Westminster City Council

Good



## Quality statement scores

Assessing needs

Score: 3

Supporting people to lead healthier lives

Score: 3

Equity in experience and outcomes

Score: 3

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## Care provision, integration and continuity

Score: 3

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## Partnerships and communities

Score: 3

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## Safe pathways, systems and transitions

Score: 3

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## Safeguarding

Score: 3

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## Governance, management and sustainability

Score: 3

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## Learning, improvement and innovation

Score: 3

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# Summary of people's experiences

The feedback we received was mostly positive from people and unpaid carers about their experiences of assessment, care planning and reviews.

People could easily access information and advice on their rights under the Care Act and ways to meet their care and support needs. This included unpaid carers and people who fund or arrange their own care and support. Most people told us the information and advice provided was clear and concise, which helped them to understand the process as well as the support arranged for them.

We had positive feedback about the assessment process. People told us they felt listened to and their wishes were considered with support plans tailored to meet their needs. However, people's experience of direct payments was mixed. Where it was positive, people described being able to use direct payments to meet cultural needs.

Most unpaid carers told us the local authority supported them well, including funding respite. However, some people felt there was a lack of specialist respite provision to meet unpaid carers needs. There were identified gaps in contingency planning, as some unpaid carers told us there was no plan in place in the event of an emergency and they were unable to fulfil their caring role at short notice.

Overall, the feedback around hospital discharge was positive as people felt the journey was seamless due to good communication. People shared positive comments about the relationship with staff, as they found them supportive and responsive. People felt listened to and valued by senior leaders when they suggested improvements to services.

We received positive feedback from The Local Account Group who represented the views and wishes for people and unpaid carers. They felt listened to and were able to influence policy and services run by the local authority. Their suggestions were welcomed, and they felt valued by the senior leadership team.

## Summary of strengths, areas for development and next steps

The local authority offered multiple options where people could access information about adult social care. The local authority had a dedicated website for adult social care which provided a large range of information about assessment eligibility, which included information for unpaid carers. As part of the local authority's improvement plans, they intended to develop an online self-referral process to provide a responsive and effective service.

The local authority had a responsive and timely approach when carrying out assessments and reviews, with no waiting lists for people to be screened pending an assessment. The local authority had set a target to complete assessments within a 28-day period, and performance data showed that over 95% of cases are completed in advance of that target. Prioritisation of allocation of cases was reviewed, which showed good management oversight.

Staff demonstrated a person-centred approach during assessment and support planning. This was evidenced in the success of the reablement provision which showed over 90% of people who received short-term support no longer required ongoing care. Staff raised some stock-related challenges around waiting for equipment which contributed to hospital delays. Senior leaders told us they were working with the provider to address this.

The need to support unpaid carers was recognised by the local authority who had invested in a partner organisation to support with carers assessments and reviews. There were gaps identified in terms of reaching out to carers from seldom heard groups. For example, Unpaid carers within ethnic minority communities did not always seek support where it was needed as their caring role was viewed as different to other cultures. The local authority was not always aware of unpaid carers in communities as they were not asking for help and this was a gap in support. The local authority had acknowledged this gap and was working with partner agencies, people and unpaid carers to address some of the inequalities.

The local authority was committed to reducing and tackling health inequalities in the Borough. This was evidenced in a number of strategies which were co-produced with staff, partners, people and unpaid carers.

The local authority's independent advocacy service was well resourced to deliver statutory and non-statutory advocacy support. However, staff told us this service was not always available and at times there was a wait to access an advocate.

The local authority had a dedicated direct payments team who provided support to people, unpaid carers and staff. Some frontline teams explained the uptake of direct payments in their teams had been low. Local authority leaders had been aware and had plans to develop the direct payments offer.

All staff involved in safeguarding work were suitably skilled and supported to undertake safeguarding duties effectively. Safeguarding training had been accessible for all staff and partners. Staff were required to complete mandatory safeguarding training.

Overall, frontline teams told us they were aware of learning from Safeguarding Adult Review's (SAR's) and serious incident reviews. However, staff told us there needed to be more focused work on improving the SAR process. There was acknowledgment of improvements to be made relating to safeguarding adult's reviews through reflection and changing practice and processes.

Staff had access to good quality supervision and had manageable workloads. They had benefitted from the training opportunities for continuous professional development. Staff also noted they did not always receive training that was related to their area of work. The local authorities training gap analysis also identified areas of improvement to specialist training.

The local authority showed commitment to co-production through involving people and unpaid carers in designing services, systems and reviewing practice at all levels. The Local Account Group presented the peoples and unpaid carers voice and participated in the recruitment of senior staff.

The local authority positively supported internships internally, for young people with disabilities to engage in development opportunities. We were able to see examples of this whilst we visited the local authority.

When the local authority worked in partnership with other agencies, there were clear arrangements for governance, accountability, monitoring, quality assurance and information sharing.

The senior leadership team was well established and stable. Frontline teams across the service spoke highly about the leadership team and found them approachable and supportive. Staff felt they were trusted to make decisions and they did not feel there was a sense of hierarchy. Senior leadership created a working culture based on trust and autonomy and this was evidenced in the small number of panels for decision making. In our conversations with teams, it was evident the leaders were visible, capable and compassionate.

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