

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

Telford and Wrekin's demographic changes and changes in adult social care need as a borough were mirrored by structural and strategic changes within the local authority. Supported by the cooperative and commercial focus of the local authority, staff, leaders, and cabinet members had worked closely with partner organisations to make difficult strategic decisions on resources. Resources across the Council were reviewed to meet changing needs and increased demand for Adult Social Care services. This had led to reviews of all partnership boards, workforce structures and processes, and a strengthening of focus on community-based services to ensure the local authority met its Care Act 2014 duties and closed the gaps in health inequalities across the borough.

Whilst governance and accountability remained strong at all levels within the local authority, the changes ways of working, combined with challenges in recruitment of staff in particular areas, meant there were inconsistent practices impacting on people receiving services. People told us of mixed experiences when engaging with the local authority frontline teams; most people said they found staff to be skilled, knowledgeable, and compassionate but others gave examples of poor communication of outcomes, a lack of engagement, and variable understanding of people's rights. This was in keeping with the reasons given by senior leaders for the new ways of working to address inconsistent work practices.

There were a number of strategies in development or recently completed. The recent review of the leadership structure had not had time to embed. Senior leaders told us they understood the priorities for adult social care and were putting the infrastructure in place to address these. However, these changes would take time to embed and at the time of the assessment it was too soon to comment on the sustainable impact of these changes.

Staff, leaders, and partners highlighted increased waiting times for assessments, particularly occupational therapy and DoLs assessments, and confusion around direct payments, as areas of learning and development. Senior leaders told us changes to processes and team structures had improved waiting times following feedback from people raised through the various local authority feedback opportunities and through the Making it Real Board, as well as the local authority's complaints procedures. Data provided as part of the assessment (yet unpublished) indicated a reduction in waiting times in April to June 2024. However, it was too soon to confirm if these improvements were sustainable, and the local authority were monitoring progress through partnership boards.

Staff and partners told us of strong, visible leadership from senior managers who had a good understanding of the challenges faced by the local authority due to effective coproduction, engagement and use of data and insight. We saw a culture of learning, transparency and accountability embedded throughout the local authority, driven by leaders and cabinet members with a clear vision of how the council needed to realign to meet future service demands.

Telford and Wrekin had strong working links with place-based partners ensuring priorities and funding arrangements were agreed through the strategic commissioning boards to reduce the risk of delays in service provision. The local authority's Adult Social Care vision was "working together with people, key partners and communities to enable people to live well and independently in Telford and Wrekin." This was brought to life through a preventative, person-centred, strengths-based and community asset-based approach.

The Adult Social Care governance arrangements for delivering Care Act 2014 duties saw frontline teams working with service delivery managers with specific roles and responsibilities covering all aspects of Adult Social Care. Partnership boards and forums provided clear, effective overview and scrutiny, as well as quality assurance and review processes through regular meetings, updates, data analysis and reviews to inform learning and development.

Leaders, cabinet members, partners, staff, and people with lived experience worked together to monitor performance and improve the quality-of-service provision across the borough. The local authority understood local, regional, and national needs and risks to meeting their Care Act 2014 duties. They managed these through corporate and departmental registers, enabling actions to be taken to mitigate concerns and escalation processes for more immediate risks.

Feedback from staff, leaders, people using services, and partners unanimously highlighted coproduction and engagement as a strength of the local authority. Underpinned by the Making it Real Board, people with lived experiences were represented throughout all local authority process and structures. People's care and support experiences influenced strategic decision making and people told us they felt they had a genuine impact on service delivery.

Strategic planning

The local authority used information about risk, performance, inequalities, and outcomes, to allocate resources and inform strategic planning. This enabled them to deliver the actions needed to improve care and support outcomes for people and local communities.

Feedback from people, partners, staff, and regional/national data sources was used as a driver for implementing change. Strategic improvement plans had clear lines of accountability, actions, and resource allocation, as well as reviews and updated actions where relevant. Staff told us leaders were visible and "led from the front," with senior leaders and cabinet members regularly engaging with community events and staff forums to ensure strategic decisions were based on people's needs, experiences and outcomes.

The local authority's priorities include the Home First strategy (community-based approach to services including working closely with the voluntary and community sector), promoting independence, and improving access to services. Staff surveys, completed by the local authority in 2023 suggested 93% of Adult Social Care staff understood the council's priorities and their roles in achieving this.

The local authority had established a 'Housing Task Force' and an 'Adult Social Care Accommodation Oversight Board' which included senior commissioners and Managers from across Adult Social Care and Housing. The Directors of Adult Social Care, Housing and Finance attended to ensure oversight and scrutiny in the identification and prioritisation of housing investments as delivered against people's need, including supported accommodation and more bespoke solutions.

Telford and Wrekin's Adult Social Care Workforce strategy was in development at the time of the assessment, however the workforce position statement (Jan 2024) recognised ongoing investment in staff, unpaid carers, personal assistants, and community-based volunteer organisations, was an essential priority in meeting the increased local demands for care and support services. This included a commitment to ensure pay rates were sustainable for care provision and uplifts reached staff. The new, 3-year, workforce strategy aimed to ensure fee-modelling considered inflationary pressures on wages, demand pressures, travel time, and training, to encourage people to live and work in the borough and attract the skills and experience needed to deliver quality Adult Social Care services.

In addition to the recent review of the All-Age Carer's strategy, at the time of the assessment the local authority was developing a new Adult Social Care Prevention strategy, an All-Age Mental Health strategy, and a new place-based strategy to improve supported accommodation options in the borough past the current 2025 targets.

Staff and leaders told us how ongoing changes to processes had improved performance and helped deliver better outcomes for people using services and unpaid carers. For example, culturally competent staff recruitment and training programmes, along with changes to oversight and monitoring structures, had begun improved uptake of direct payments and reduced waiting lists for Care Act 2014 and carers assessments, with progress around DoLs and equipment assessments as well. Learning from concerns around consistent approaches, shared by people with lived experience, had begun to improve communication of safeguarding outcomes and new processes for keeping people involved in their case progression. Training programmes around MCA 2005 assessments, DoLs, and safeguarding, as well as improved scrutiny and support had enabled staff to start to address concerns around restrictive practices.

Ongoing engagement with community groups to understand local priorities for health and wellbeing, in conjunction with data and insight sources and partner organisations, aimed to improve the diversity of people's voice within the local authority and to help address new and emerging health inequalities. For example, the Making it Real Board were working closely with the Independent Living Centre to provide accessible information, assistive technology, and adaptations to a range of community groups, including people with multiple health conditions. Staff inclusion champions were collaborating with local authority and provider recruitment teams to ensure representative workforces who could meet the cultural and ethnic needs of growing local communities such as Ghanaian, Afghan, and Ukrainian groups.

People told us the work the Making it Real board were doing on improving accessible information standards was having real, positive impacts for people's lives. For example, senior leaders had updated the principles for identifying communication needs and how this should be recorded during Care Act assessments, as well as providing tools to support staff with the process.

Identification of new and emerging groups with communities had impacted on workforce development strategies. Senior leaders told us how equalities data was being used to identify gaps in provision and to enable meaningful, culturally appropriate staff recruitment to continue to reflect the community champions identified to work with coproduction groups. For example, the local authorities Adult Social Care Charter had been co-produced to identify the principles and approaches expected from all staff teams. This included always promoting independence, listening with empathy, and respecting people's decisions.

Information security

The local authority had arrangements to maintain the security, availability, integrity and confidentiality of data, records, and data management systems. Online information and advice were available on cyber-security, and a statement of compliance explained how personal data was collected, stored, used, and destroyed.

Information sharing protocols were agreed by the local authority data protection officers and supported secure sharing of personal information in ways which protected people's rights and privacy. Partners told us this needed further work to include voluntary and community organisations.

Staff had data protection training, and the local authority had an information governance team and Caldicot Guardian with oversight of this. A Caldicott Guardian is the senior person responsible for protecting the confidentiality of people's health and care information.