Learning, improvement and innovation

Score: 2

2 - Evidence shows some shortfalls

The local authority commitment

We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research.

Key findings for this quality statement

Continuous learning, improvement and professional development

Staff told us there was an inclusive positive culture of continuous learning. There was consistent feedback which outlined the availability of good quality opportunities training including apprenticeships and specialist training in an area of interest.

Senior management told us the local authority was self-aware and willing to hold a mirror up to itself to ensure 'we all do our best'. Continual learning and improvement were cited as an area of commitment.

Staff told us that there was no principal OT, with no plans to create the role. They felt this left no one to drive improvement and innovation in practice in occupational therapy. The local authority had a number of initiatives aimed at improvement in this area including a small equipment pathway. However, staff told us that they felt there were some missed opportunities to improve service provision, such as training other staff to ease the workload.

Staff told us that there was good relationship with senior leads and a good network nationally. We were told that the workforce was educated and worked together well. Examples were provided around the strong links between community case workers and hospital team and home first which had supported people to return home. Partners identified gaps in safeguarding, specifically around the lack of monitoring of whether learning from safeguarding concerns had been effective to drive improvement. We were told that some learning events had taken place but monitoring of implementation of learning was left to individual organisations with no substantial oversight by the local authority. Staff told us they were unsure about how complaints were dealt with, and how information from the SARs was collated. Staff were unclear on how the learning from SARs were shared to support and improve practice in front line teams.

Staff described good line management support and regular supervision. They told us that regular group reflective sessions with other professionals had created a positive learning culture.

There were examples of additional training to ensure Care Act duties were delivered. The Hospital Discharge and Reablement Team were provided with MCA training to encourage positive risk taking and enable more people to return home rather than go straight into the care service.

There was a wide offer of different training available to staff including grant funded qualifications and specialist training. Staff told us there was limited specialist training for the deaf services team, with them receiving generic training.

The local authority was particularly proud of training delivered to neighbourhood community teams and working with frontline social workers which supported them to address barriers to people accessing services.

The local authority had worked collaboratively with people and partners on specific projects, there were examples provided by partners of joint working on a handbook of information and training on moving and handling to assist unpaid carers. There were further examples given of co-produced guidance on transitions which positively assisted the local authority to promote new ways of working to improve people's lives.

The local authority acknowledged that more work was needed around co-production, there were pockets of co-produced work, but this had not been embedded throughout the organisation. This had meant peoples experiences were not consistently being used to shape service provision. There was a commitment to improve this area with the commitment of a new post which would also look at capturing the views of people with learning disability and their carers.

There was also an evident culture of sharing information and best practice with peers in the local authority, staff spoke of networking with other teams and sharing reflective learning across different areas. There were mixed views around sharing best practice with partners. Partners specifically identified that communication could be problematic between providers and the local authority as they waited long periods of time for the outcome to safeguarding referrals.

Learning from feedback

There were systems in place to obtain peoples feedback about their experiences of care and support. The local authority had carried out surveys in relation to carers experiences and staff. The feedback from carers generated a high volume of negative comments over a range of themes. Partners informed us the local authority had now made unpaid carers a high priority on their agenda demonstrating a desire to learn from the feedback. Providers told us the recent carers forum had provided positive opportunities for carers to express their experiences however they were not aware of any feedback on outcomes from the local authority.

The local authority had a clear process to monitor and manage complaints. Their annual complaints report dated 2023 highlighted a total of 106 complaints received, with 21 upheld and 18 partially upheld (45%). The highest category for complaints received was 'poor or lack of communication'. A 'delay in service' is the second highest category followed by 'staff conduct or behaviour'. Community support is the category in which the most complaints had been received (48 out of the total of 106). There was 1 complaint upheld from the Local Government Social Care Ombudsman. The local authority had produced an improvement plan in response to the complaints report which set out key areas of development. The local authority also kept a record of compliments in order to understand where things were going well.

There were mixed views from partners on how learnings from safeguarding reviews were being captured, positive examples were shared around how collecting feedback from residents on commissioned services had been valued and considered appropriately by commissioners.