

## **Overall summary**

## Local authority indicative rating

Good: Evidence shows a good standard

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

Overall feedback from people was positive in relation to the approach of front-line staff, and the care and support provided. Staff focused on providing the best care and support for people.

Staff were overwhelmingly positive about working for the local authority including the leadership and culture. Support with staff well-being, learning and development, and career progression was good.

Locality teams worked in integrated teams with health partners in 2 of the 3 areas. In Waveney, some teams were co-located with health partners. All teams knew their communities well and understood the needs of people using services.

Integrated working with health partners strategically was particularly positive with mature, valued partnerships. There was a clear focus on prevention and public health. Data was gathered and used to inform the strategic approach, focusing on areas for improvement and to drive action.

Systems and governance were in place to enable the local authority to assess and understand how well it was performing as an organisation and act on it. A culture of learning and improving from incidents was embedded.

The local authority digital care partnership was a strength. Technology such as sensors and falls prevention equipment were used in people's own homes to help them live independently and provide reassurance to carers. There were plans to develop further digital solutions to continue to support people in creative ways such as plans to use virtual reality technology for people living with dementia.

Mental health services in Suffolk had previously been provided within a health trust. In 2022 this agreement ended, and staff moved across to work for the local authority. Staff were exceptionally positive about this move, and the benefits for them and felt this enabled them to provide an improved more holistic service for people.

People, staff and partners who used Customer First, the initial point of contact when contacting the local authority, reported delays in getting through and for some assessments. Mental Capacity assessments had been identified as an area for improvement and training had taken place to improve staff knowledge. Personalisation and Deprivation of Liberty Safeguards (DoLS) assessments were two other areas where improvements were underway.

The transitions of young people from children to adult services were referenced by managers and staff as an area where the current system was not effective, so changes were being implemented. Feedback from people using services and a Healthwatch report in relation to transitions, confirmed improvements were required.

Challenges were reported with ensuring suitable accommodation was available for people. Gaps in provision were identified, for example in dementia care, nursing care and services for people with complex needs. Staff showed some understanding of working with people from seldom heard and ethnic minority groups, and the local authority had recognised this as an area for improvement and started to take steps towards this, however further work was required. The use of data had been identified as being one way to drive this forward and to create services suitable for all people living in Suffolk.

Voluntary sector and care partners told us improvements could be made in better partnership working, communication, and how systems joined up together. This would improve information sharing, learning, and give a better understanding of people's needs in local communities.

## Summary of people's experiences

People told us about delays in getting through to the contact centre, Customer First, and in reviewing their care, and the impact of this. Relationships with front line staff were reported as positive and people gave us some good examples of when they or their carer were supported well with flexible care which was suitable for their needs.

The care records we reviewed included assessments of capacity and identified people's wishes. We saw some clear and detailed processes documented for people, for example, from admission to hospital, to permanent placement in a care home. People told us assessments were holistic and looked at health needs as well as the social aspects of their lives.

A people-led advocacy organisation in Suffolk, that included people with learning disability and autistic people, told us about their positive involvement in developing the learning disability strategy with the local authority, and how proud they were of this achievement.

© Care Quality Commission