

# Learning, improvement and innovation

Score: 3

3 - Evidence shows a good standard

## 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

There was an inclusive and positive culture of continuous learning and improvement. Local authority staff had ongoing access to learning and support so that Care Act duties were delivered safely and effectively. Staff were supported and encouraged to carry out training relevant to their roles to support practice.

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Leaders worked together with staff to identify through audits any themes and trends for staff training. Quality assurance was monitored via several routes to ensure continuous learning and improvement. For example, practice forums and Internal Quality Assurance Meetings (IQAM) in which staff would present their work and discuss options and least restrictive practice. Staff found the IQAM meetings useful and supportive however, it was unclear as to how often these meetings took place with some were monthly and others reported they were weekly. Leaders confirmed IQAM meetings were held daily with staff attending the relevant IQAM for their service for example, there would be a focus on older people's mental health on one day and Learning disabilities and transitions on another day.

There was support for continuous professional development. Staff were supported to progress in their career. There were members of staff who had completed their Apprenticeship, Assessed and Supported Year in Employment (ASYE), and had been supported to progress to more senior roles.

The local authority worked collaboratively with people and partners to actively promote and support innovative and new ways of working that improved people's social care experiences and outcomes. The local authority worked well with providers to ensure quality assurance and best practice for providers. There were examples of where the local authority had been approachable to providers, supported with quality assurance and provided training opportunities for to the workforce to ensure good quality care.

Co-production was embedded throughout the local authority's work. There were several co-production groups that were being held including a carers co-production group and a commissioning co-production group, feedback from people involved in co-production work was positive. Those involved were respected and listened to and felt their opinions were considered when making decisions.

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The local authority shared learning, best practice and innovation with peers and system partners to influence and improve how care and support was provided. Multi-disciplinary teamworking supported learning across teams and across health and social care. We heard how the local authority learnt from neighbouring local authorities to improve practice for example, staff told us about a communication method a neighbouring local authority was using for people with learning difficulties and were considering it use in Islington due to its success. Partners spoke positively about their shared learning with the local authority and how the local authority were willing to listen and learn from partners and people who use services.

The local authority also introduced the role of quality assurance lead with the focus on learning and improvement. The quality assurance lead worked closely with the PSW and POT to improve practice on the frontline.

The local authority actively participated in peer review and sector-led improvement activity. The local authority drew on external support to improve when necessary.

## Learning from feedback

The local authority learned from people's feedback about their experiences of care and support, and feedback from staff and partners. This informed strategy, improvement activity and decision making at all levels. For example, the local authority attended a monthly meeting with an organisation called Diverse Communities Health Voice to better understand the voice of people from seldom heard groups. Partners told us this helped to break down barriers for people and built relationships with people in the community, raising awareness of adult social care and the support available for people. This information was then used when planning and commissioning services.

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The local authority identified dealing with complaints as an area for continued improvement. Improvements had been made by providing staff who deal with complaints further training and implementing a new case management system in January 2024 to support with the response and reporting of complaints. Data provided by the local authority showed they received 96 complaints between 1 April 2023 and 31 March 2024 of these complaints 32% were partially upheld, 22% upheld and 46% not upheld. This was an improvement on data provided for 1 April 2022 to 31 March 2023 in which the local authority received 95 complaints with 62% being partially or fully upheld. Themes and trends of complaints were reviewed with most complaints being about communication from staff. Staff we spoke with told us communication with people had improved and teams would regularly contact people who were waiting for an assessment or contact to keep them updated on their progress.

There were processes to ensure that learning happened when things went wrong, and from examples of good practice. Leaders encouraged reflection and collective problem-solving. Staff could speak with their team, their manager and leaders openly and honestly and to gain advice and support both formally in supervision and informally. Some teams held regular meetings to discuss complex cases and to reflect and learn from practice.