

# Governance, management and sustainability

Score: 1

1 - Evidence shows significant shortfalls

## 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

The senior leadership of adult social care in the local authority had faced significant instability in recent years. This, alongside wider council strategic decision making, had a significant impact on the ability of the local authority to deliver people's experiences and outcomes under the Care Act.

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Staff, leaders and partners recognised the significant impact instability within the local authority leadership of adult social care. There had been 5 Directors of Adult Social Services (DASS) in the last 5 years. Partners described a lack of a clear vision and strategy. One partner said this had resulted in conflicting priorities and directions, while another talked about a lack of continuity which had made the implementation of long-term strategies difficult. Some managers within the service described clear priorities under one DASS that had been changed under interim arrangements. One senior leader described prioritisation of saving money over quality, which some staff told us persisted in some processes. People with lived experience of services told us there had been a lack of strategic vision and direction as a result of restructures and unstable leadership. They said this had resulted in abandoned projects which had caused frustration and reduced engagement from the community.

Staff had been affected by senior leadership instability. At the time of our assessment the new DASS, who had been in post for a few months, had made it a priority to meet with all teams and improve the visibility of senior leaders. This had not been staff experience in previous months under previous leadership arrangements. Some staff told us it had been difficult to access management and they hadn't been listened to by leadership. One team described the instability in leadership had affected their team through changes in direction of where they would be structurally which had created uncertainty.

Some senior management posts had been stable over recent years, which was recognised as helpful by some partners, and particularly in relation to safeguarding activity. Many of the staff, leaders, partners and people we spoke to throughout our assessment were hopeful that the stability of a new DASS, who had already begun to identify and act on issues and outline their intentions, would have a significant positive effect on culture, strategy and outcomes.

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Instability had likely affected the position of adult social care as a clear priority against a backdrop of financial decision making corporately. For example, a vacancy management process was introduced to scrutinize requests to recruit in line with identified priorities to better manage the local authority's financial situation. When looking to recruit, teams sought approval through a corporate function. We received some feedback that there was disproportionate scrutiny on adult social care requests. Additionally, it was not clear where risk had been considered to recruiting to registered roles. Vacancies in the Deprivation of Liberty Safeguards (DoLS) team, for example, had resulted in a significant increase in the number of people on their waiting list, potentially infringing on people's human rights. Some staff told us staff in unregistered roles were taking on additional responsibilities and often working more in line with registered roles, in some cases in response to the vacancy management process. While most staff told us they felt supported by direct line management and peers, this created a culture of normalization of working beyond remit. It was not clear that corporate functions beyond adult social care were enabled to consider the impact of these decisions on people's experiences and outcomes or within the context of the local authority's legal obligations under the Care Act or Mental Capacity Act, for example. Some vacant posts had recently been agreed for recruitment to mitigate this issue.

Leaders told us decisions made to offer no fee uplifts for private providers who were commissioned by the local authority to deliver care and support had not been through appropriate governance procedures. Approved within wider budget proposals, there had been no wider discussion at Cabinet, full council, or Health, Care and Wellbeing Overview and Scrutiny Sub-Committee which outlined the reasons for and impact of the decision. This should have included full understanding of the local authority's duties under the Care Act to ensure sustainability of the market. This decision affected local authority relationships with providers and their sustainability, putting packages of care at risk. Following our assessment, the local authority confirmed that this issue had been identified, and additional action had been taken to review and agree uplifts. However, this raised concerns around the governance and accountability arrangements at several levels of the council.

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The local authority's corporate risk register highlighted some performance metrics and key issues or considerations regarding risk to services delivering adult social care support. Performance data in this risk profile tended to focus on financial spending and provider activity. It was not clear how wider assessment activity and internal provision was considered within this risk profile, for example. Risk profiles were updated every 3 months and twice a year to Cabinet. Adult social care risk was reported under one overall risk that there was a failure to strategically plan, manage and deliver critical adult social care and health services. Key controls were provided, each of which were rated for effectiveness. However, risks were not aligned against the legal framework the local authority operated under. This made it difficult to assess which key controls were mitigating the more detailed areas of risk as it related to delivery of Care Act and other functions.

## Strategic planning

A lack of available and appropriate data had affected the ability of senior leaders to oversee performance and strategically plan. Some leaders told us key data on adult social care performance, including against national outcome measures, had not been reported to Cabinet or Health, Care and Wellbeing Overview and Scrutiny Sub-Committee since October 2023. One elected member told us that while they were confident in the data they received, they weren't receiving everything they should. They said this was needed so they could ask the right questions and challenge where required. Leaders recognised the need for improved performance reporting in order to effectively evidence the impact of programmes of work, supporting the call for investment. Operationally, managers had access to information to understand where there were resource pressures and to manage risk which was reviewed weekly. The local authority was improving their data reporting at the time of our assessment.

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There were some examples of where data had been used to inform planning and enabled solutions to be presented. In one example, the local authority were responding to backlogs in the Disability Resource Team by exploring a relationship with a private provider to take on assessments and support in order to reduce people's waits for services. This represented an understanding of risk and capacity. This was ongoing at the time of our assessment.

Some strategic work was not in place, out of date or in progress at the time of our assessment. There was no specific adult social care strategy in place, or strategy for prevention and working with the community and voluntary sector in the county, which some staff had identified as gaps. The Older People's Housing Strategy had ended in 2024, for example. A new housing strategy was in consultation and a learning disability plan was in development with people and partners. While some staff told us they understood strategic direction, commissioning strategies were not outlined in detail. These examples formed a picture of series of gaps in strategic planning that would have provided a framework for performance and the achievement of improved experiences and outcomes for people in the county.

Leaders were aiming to outline key manageable and achievable priorities in terms of transformation and improvement in adult social care. There were 17 key areas of development identified, though further prioritisation was ongoing at the time of our assessment. A very early draft vision document was also in development and had been shared with some senior leaders in the local authority to outline some intended strategic direction. There was a clear intention from leaders to complete meaningful co-production with people, staff and partners to ensure this starter vision was representative and driven to deliver the actions needed to improve care and support outcomes for people and local communities.

## Information security

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The local authority had arrangements to maintain the security, availability, integrity, and confidentiality of data, in relation to records and data management systems. Information sharing protocols supported the safe sharing of personal information in ways which protected people's rights and privacy.

Information on the local authority's website in relation to information security provided details of how to access records held about people. Sharing of information was in accordance with the Data Protection Act 2018 and the General Data Protection Regulations (GDPR). A specific privacy notice was available for adult social care and retention schedules were available. Information was shared with health systems to support partnership working.

During our assessment, the local authority shared personal information about people who used services in the East Riding with us outside of any personal data we requested. This was raised with the local authority, who conducted a full assessment and action plan in response to those data breaches.

Staff told us there were several documents within the local authority that were used to support operational activity that were not connected to the electronic recording system. The use of these documents represented information security risks as there are fewer access controls, such as two-factor authentication, and they can be less robust, risking data loss. The duplication of recording tasks across systems affected staff capacity and risked further information security incidents and data loss. Leaders recognised using additional systems and documents was not a sustainable position. The local authority was conducting a paperwork review at the time of our assessment to understand and streamline their data systems and make improvements.