

'The head, heart and mind of Camden is in the right place - on residents'



Thank You



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Overview



- We were told that you are positive about working in Camden, feel supported by your managers and told us you enjoyed your jobs
- We heard lots of really good examples that you are making a real positive difference in people's lives
- Clear commitment from your leadership that adult social care is seen as a core and important part of the organisation
- Excellent relationships across the Borough and with partners
- Innovation and creativity is key an we think you can use this to develop how you use data, auditing and Quality Assurance

File audits



The audits were based on recording on the file and not enriched by a supporting conversation with the practitioner. Sampled a total of 18 residents which incorporated different age groups, ethnicities, service user groups and whether the steps related to information gathering or enquiries. The audit took place before knowing about the audits by Belinda Oates. The following themes were evident from the files seen:

Good Practice:

- Relational work by practitioners
- Follow up on a frequent basis with joint visits with other practitioners
- Multi-agency work evident particularly with Health, Community Safety and Housing partners
- To share the 'Outstanding' practice audit

Areas for Development

- Anti-discriminatory practice not clearly evident
- Mental capacity in some instances were well identified and in others less so
- Comprehensive risk assessments
- Professional curiosity and challenge
- Voice of the resident to be more evident
- Recording standards with regard to summaries, chronologies, uploading of emails, practitioner work issues, use of jargon and acronyms
- Consider strengthening communication tools for those with communication needs and/or are non-verbal





- Rolling out of 'What Matters' using a coaching approach with commissioned service providers and to the developing integrated neighbourhood vision.
- Quality Assurance Board meets monthly and is now an operational and strategic steering group involving practice/leads and Team Managers.
- Data the Borough has good outcome data and this is being brought together with spend and activity data to provide a dashboard which can be analysed and used to support service development and improvements.
- Mental Health have moved away from double entry and now auditing MH safeguarding work which will be fed into action plan
- Review of 3 Safeguarding adult reviews leading to change in ensuring people living out of the borough have an allocated worker.
- Mental Health developing the mentoring audit process triangulate with practitioner, adult and manager





- Mental Health developing the mentoring audit process triangulate with practitioner, adult and manager
- Good work in auditing files (Belinda Oates, November 2022, Safeguarding Practice Audits 2023) which included feedback and training valued by staff.
- There is a supervision audit process in learning disabilities every 3 months themes around complex safeguarding; management oversight.
- Learning Disabilities Services have set up safeguarding surgery for those open over 6 months and look at sticking points – good practice





- Data and performance is clearly an area that Adult Social Care recognise needs prioritising. Could
 consider how the themes and details from current data can be shared with teams now to inform practice
 rather than waiting for the dashboard to be finalised
- Consider ways to ensure that managers and teams know what data is being collected and why
- Would there be benefits of setting targets for safeguarding indicators.
- Quality audits told that teams all doing this currently in their 'own way' and some skilling up of data skills and analysis needed.
- Are managers and supervisors using case load data as a way of 'managing' discussions with practitioners to look at practice. This may be an particular issue for less 'complex situations' is there a reliance on practitioners to share information.
- Performance and appraisal of individuals undertaken as 'coaching conversations'. Q how are individual
 performance issues picked up e.g. issues identified through the file audit. Q how are managers
 supported to address poor practice issues?





- Consider using the mentoring audit process used within MH services across all other services
- What Matters can trigger safeguarding workflow through Strength Based model. More to do to embed learning from File Audits
- How do team and service managers communicate the Beyond Audit findings to implement change and measure practice improvements wider than the individual practitioners involved in the audits?
- Mental Health Care Act workflow needs to be embedded; moving from CPA to Dialogue Plus
- Is the safeguarding impact of waiting lists well understood.



Summary of findings — 2. Extent that co-production and MSP is central to all that we do in ASC; how effectively is this demonstrated through our outcomes and performance measures?

The peer review team observed the following good practice:

- Co-production is talked about across a wider range of Camden colleagues as integral to the work in Camden, there were great examples given including the Experts by Experience in Learning Disability Services and the impact of Carers Voice in influencing housing policy.
- Reported relentless approach to challenging structural inequality at an organisational level
- Focus on research in practice and supporting PhD students
- Number of examples of opportunities for residents to support the Borough to improve practice including; Live a Good Life project which is co produced; Corporate co production strategy; Have 'reporters' who feedback and document the experience of adults; panels, forums, reference groups, experts by experience

- MSP didn't come through strongly in discussions
- Development of the Co-production lead role and the impact it will make





- Importance of engaging families in Safeguarding Adult Reviews – held to account in a more persistent way
- High ambition for co-production, power sharing and risk sharing and new lead in place since January
- Excellent examples of the approach to coproduction making a difference
- Expectations used as the cornerstone of all their work
- Language matters 'People who draw on care and support'
- Adult social care seen as the pioneers for doing things differently
- Adult social care is part of a corporate organisation with real shared understanding of working for the resident

- Ensure that it is clear that these things 'take time'
- In AMHP service most feedback comes from complaints – no way of collating and learning from feedback on resident and family experience of their service





- Adult Social Care is seen as central to the Borough with a clear shared ownership of safeguarding.
- Clear line of sight to Chief Executive and Leader.
 Political ownership of safeguarding, triangulation with what they are told in formal processes with staff and communities. Regular reporting on adults and children with DCS and DASS where data is provided with analysis & narrative to inform a discussion
- High level of self awareness, understanding and action plans about those areas that need to be strengthened

- Supporting People connecting communities board is chaired by Deputy Chief Executive.
- Opportunities to take stock and look at how to make improvements. Sense that there is an opportunity to take positive risks in Camden and that there is political support for doing things differently
- Weekly Open House meeting with one of the senior leadership team on a rota on a topic – routinely get about 50 staff members joining online



Summary of findings — 4.2 To what extent does our leadership and governance arrangements assure us of good safeguarding practice across ASC and the partnership including commissioned services?

- Relatively new management team, does the culture of quality improvement and what is takes to provide
 the best services consistently permeate across all the management layers.
- Is the new accommodation strategy fully exploiting the possibilities of embracing the principal of no decision about care without a decision about housing
- Are the plans for the Safeguarding Adult Board development around assurance and impact shared and understood.
- Would it be of benefit to think about quality priorities for the borough based partnerships.
- Would it be helpful to think about how safeguarding is described explicitly in the development of the integrated neighbourhood working.
- Would there be benefit in defining the relationship between the Safeguarding Adults Board and the borough based partnership .





- Care providers said that commissioners
 are accessible and supportive. Regular meetings
 are helpful looking at safeguarding to effect
 change in a non blaming way
- Approach to monitoring of spot purchased services is the same as for commissioned services.
- Well regarded provider forums and weekly QA newsletter for providers and staff.

- Is there more to do so providers raising safeguarding concerns receive a more consistent response and have the same level of confidence in the system?
 Could the referral method be made easier?
- Are providers well connected to the work of the Safeguarding Adults Board
- Could there be more alignment with the quality work for providers and the quality work for in-house providers
- Is the information and intelligence on provider quality shared wide enough and recorded in a way it can be made best use of?
- Is there more to do in regularly seeking feedback for people drawing on mental health services





Scope of the review

Safeguarding, looking at CQC I and quality statements specifically, the following KLOEs:

'1.Do we have a collective view of what good looks like in Safeguarding Adults and do we have effective arrangements for measuring this? (approach and performance)

2.To what extent is co-production and Making Safeguarding Personal central to all that we do in ASC; how effectively is this demonstrated through our outcomes and performance measures?

3. How do we demonstrate that our engagement strategies are inclusive and reach all groups in the community (how equalities and diversity issues are addressed)

Leadership, looking at CQC I and quality statements and specifically the following KLOEs:

4. To what extent does our leadership and governance arrangements assure us of good safeguarding practice across ASC and the partnership including commissioned services?

5.Are our safeguarding arrangements sufficiently aligned to our wider work on quality and our support to care providers?'

A note on methodology



- It is inevitable, with this volume of information and a relatively short time to process it, that there may be subtleties missed along the way. For this reason, the peer review is light on absolute judgments about the quality of services; the report is provided in the spirit of self-directed improvement and offers areas where the review team feel that Camden could profitably reflect in order to identify how services could improve, alongside identification of good practice. We have only included our themes and thoughts based on triangulated information; and this presentation and discussion is part of this triangulation.
- In addition, it should be highlighted that this peer review is a pilot. Learning on the process of this peer review will go on to inform future peer reviews.