

# Balcony or battlefield: supporting local authority senior adult social care managers through the Covid-19 crisis

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**This short commentary has been written by IPC Associate Lynda Bull. The piece explores how to support senior managers in adult social care and offers a number of considerations and suggestions. While it draws on current thinking, it is essentially based on Lynda's observation, her personal experience as an ex-director of adult social care and considered thought with the intention of being a helpful aide memoire for senior managers in adult social care.**

## **Balcony or battlefield**

The current Covid-19 pandemic is generating daily management challenges for local authority adult social care services; about how they work and where they should focus their day to day energy and effort.

General requirements such as social distancing, safe practices for managing a contagious condition coupled with specific requirements in Emergency Coronavirus Legislation relating to the Care Act responsibilities, make for anxious and uncertain times for staff and front-line managers; many of whom already felt under considerable pressure before this current crisis.

Local authority senior managers face particular challenges. It's understandable to feel it's all on the battlefield, but leaders even more than usual will need to be clear and confident whether they are on the balcony or on the battlefield. They need to show strategic leadership in terms of setting the immediate direction for their staff and rapidly developing collaborative and innovative arrangements with key partners, whilst at the same time ensuring those services they are responsible for, such as access, assessment, care management and possibly some directly provided or commissioning services, are responsive and managing changing priorities.

In this environment, staff and managers have to work differently, shift roles and with potentially different partners as well changing priorities. Whilst organisations' guidance such as the Kings Fund [Leading through Covid-19](#), Nuffield Health [Effects of remote working on wellbeing, stress and productivity](#) and the Community Care Inform's practical guide for [Developing emotional resilience and wellbeing in practitioners](#), offer helpful generic advice, it is important to work through what this could specifically mean for senior managers in adult social care:

## **Don't feel you have to know everything about Covid- 19 and its implications for your organisation**

In times of uncertainty it's tempting to think as a senior manager on the balcony you have to have all the answers. However, there is currently widespread uncertainty now (just watch the news!) and you can't be expected to resolve everything, although at the moment it's tempting to feel so.

- **Draw upon your experience** - you may not be able to fully assess the impact of Covid-19 on your services but you do know how to design and manage an organisation that focuses on people. You will be attuned to how individuals and teams can react to change and specifically within your organisation, the specific individual managers and teams most likely to quickly and confidently adapt and conversely where the more challenging people and structural issues are.
- **Be personally confident** – endorse strong practice and where there appears to be intransigence (individual or organisational) quickly establish whether there is foundation for this (undue anxiety that may need reassurance or a practical blockage that may need addressing) resolve them if possible, but don't over focus and move on. You don't need to dwell too long in this battlefield.
- **Be honest and trustworthy with everyone** – be clear what you don't know and if or when you will know something. This is as relevant with front line practitioners as it is to the Chief Executive and members. All will be anxious and need assurance that 'things are under control' but you will need to be clear what is unknown and what is currently difficult to resolve, whether it be expectations or resources.
- **Delegate more and use your managers to problem solve** – there are likely to be a greater range of practical issues that will need to be addressed from realigning access/duty functions to rapidly responding to hospital discharges and responding to care providers. Listen to them, carefully and quickly evaluate options, then stand on the balcony and make the decision.

### **Stay connected, make time for yourself and others**

As a senior manager it is worth just taking stock of your management style. You will have a preferred style of working, but in times of great challenge there can be a tendency to be expected to be heroic. This approach is like getting subsumed in the battlefield so is unlikely to be helpful or enduring, so make sure you have personal reflective time, with your team both individually and collectively and more strategically with corporate, partnership and professional colleagues. The balcony can be a lonely place. Stay connected with everyone.

- **Schedule short but regular periods of personal reflective time** in a safe space – just 15 minutes with a trusted colleague, coach or mentor will be beneficial.
- **Build in 'debriefs' with your management team** giving them a safe space to say how it is going, voice concerns and problems solve.
- **Be visible** – it's important you are seen on the balcony but personal contact in the battlefield is key. Visit teams, ensure regular virtual contact, proactively respond to positive and distressing stories, you will have staff personally affected by the virus....a personal word or even an email is appreciated more than you probably realise.
- **Stay professionally alert** - use your professional networks, whether they be local partnership ones, the national ones such as ADASS or focussed

advisory or information bodies. Just as importantly keep connected with your corporate colleagues and keep members in the loop.

- **Ensure specific Covid-19 operational guidance is timely disseminated** to all who need to be aware. Utilise and refresh your usual communication channels – newsletters, briefings, blogs, Q&As etc. Share in them positive developments but also the realities.
- **Stay engaged with users/carers** – ask yourself and others, are the usual mechanisms working ...is it worth, or even possible, to put in place any further feedback mechanisms to capture experience and learning?

### **Make sure the practical measures for Covid-19 are in place**

It's important that the practical stuff works for operational and frontline staff and as a leader you will have responsibility for the safety of the workforce and ensuring that they are carrying out their duties in line with specific requirements, including legislative changes. Your managers will have day to day responsibility, but you will need to be assured that the appropriate systems and arrangements are in place.

- **Specifically task individuals/groups** to develop specific workforce and operational guidance. There may well be corporate guidance, but it may need to be expanded to address adult social care issues, for example, remote working for duty/assessment workers, virtual assessments, and the rationale for home visits, accessing personal protective equipment for provider and fieldwork staff etc.
- **Keep any guidance under close review** and rapidly communicate any key changes. The current situation is fluid and it may be necessary to invoke the emergency legislation - new territory for everyone but as a leader you will be required to invoke and then enact any changes.

### **Think beyond Covid-19**

This is difficult to do at the moment, but as a strategic leader you will need to think beyond the current battlefield and capture the experience, reflect on the learning and potentially redesign for the future. Keep thinking, gathering thoughts from your managers and ponder!

- **What has surprised you?** It may be surprising that hospital discharges have been so swiftly achieved or that domiciliary care packages can be reduced – what does this say about collaborative work, oversubscription of domiciliary care etc? Community and voluntary groups have stepped up to support more vulnerable people – how feasible is it that this will endure? Have corporate colleagues become more involved and aware of adult social care? What has happened to staff recruitment and retention – staff may well have stayed put and stepped up but what will happen next?
- **What concerns you?** It is possible there is a suppressed demand as families and communities step up, will collaborative working wither as the emergency subsides, will the care home market survive and at what costs? Compassion fatigue for your staff (and you) may well be an issue – how can you continue to support staff and what are the longer-term implications?

- **What are others' experiences?** Are your peers experiencing similar issues and considering similar questions. What are providers and commissioners saying? How can you further the debate?

It's tempting at the moment to stay in the battlefield but senior leaders in adult social care have a key strategic role in leading their organisations through this crisis and into the future where it's highly likely that their services will need to change and adapt to a different environment. Events unfolding now will have an impact on future strategy so understanding, reflecting and capturing the issues is essential so leaders will have a pivotal role and stand firmly on the balcony.

Reassuringly senior adult social care managers as leaders should be confident and not forget that they already have an extensive range of skills, that are relevant now and that stand them in good stead at this difficult time.

<https://ipc.brookes.ac.uk/about-ipc/news/balcony.html>