

Governance and implementation



Overview of actions

Structured oversight, combined with a flexible approach to delivery, helped ensure the project stayed on track and could respond quickly to changing needs. A dedicated project manager, six-week reporting cycles and risk tracking maintained momentum. Forums, placements and CPD embedded collaboration into routine practice, while feedback loops drove continuous improvement and reinforced trust among stakeholders.

Ensuring structured oversight

Effective delivery required a governance model that combined rigour with flexibility, ensuring accountability through formal reporting while allowing adaptive responses to emerging challenges and provider n

- **Appointed an authentic, sector-credible lead** – A driven project lead with front line social care experience accelerated trust-building and follow-through with providers.
- **Effective project management** – A project manager co-ordinated LSIF delivery across multiple colleges, maintaining discipline and consistency in reporting, while acting as a central point for issue resolution and stakeholder communication.
- **Regular reporting cadence** – Six-week reporting cycles captured progress against objectives, documented impact and flagged risks such as under-utilisation or uneven engagement. This enabled timely interventions and transparent accountability to funders.
- **Tracked engagement quality, not just quantity** – Monitored curriculum co-design, placement feedback and CPD participation alongside attendance.



Implementing the approach

Operational delivery combined structured planning with strong relationship building, involving providers at every stage, and ensuring that all campuses offered the same high quality facilities and training that accurately reflect real care environments.

- **Placements by design** – Weekly placements for Level 3 learners, with tailored models for Level 1 and 2, were scheduled early in the year. This helped learners move more smoothly from the classroom into real care settings and ensured they regularly experienced situations and expectations that reflect actual workplace practice.
- **Forums and networks** – Engagement was scheduled deliberately, with multi-stakeholder forums every four to five months and borough-based registered managers' meetings twice yearly. This helped to maintain momentum while respecting operational realities.

Quality assuring engagement

Quality assurance relied on continuous feedback loops, ensuring that facilities, teaching and partnerships remained relevant and impactful throughout and beyond the funded phase.

- **Placement observations** – Learner experiences were monitored to spot any differences between what was taught in the classroom and what actually happens in real care settings. This allowed for sensitive feedback and updates to the curriculum, helping ensure training reflects real workplace practice and builds learner confidence.
- **Collaborative review** – Forums provided a platform for collective evaluation, reinforcing shared ownership of outcomes and continuous improvement across stakeholders, strengthening trust and long-term engagement.





Key decisions

- Established structured governance with a dedicated project manager, formal reporting cycles and risk monitoring tools to maintain accountability and timely action.

Key learning

Strong governance must be paired with flexible delivery to sustain engagement and quality beyond the funded phase.

- **Integrated CPD through collaboration** – Provider-led sessions doubled as staff development, ensuring teaching mirrored current practice and strengthened curriculum relevance.
- **Feedback-driven improvement** – Placement observations and forum discussions provided actionable insights, enabling rapid adjustments to delivery and reinforcing trust among stakeholders.