

Lancashire County Council

Cabinet Committee on Performance Improvement

Tuesday, 27th February, 2018 at 2.00 pm in Cabinet Room 'B' - The Diamond Jubilee Room, County Hall, Preston

Agenda

Part I (Open to Press and Public)

No. Item

1. Apologies for Absence

2. Disclosure of Pecuniary and Non-Pecuniary Interests

Members are asked to consider any Pecuniary and Non-Pecuniary Interests they may have to disclose to the meeting in relation to matters under consideration on the Agenda.

3. Minutes of the Meeting held on 6th December 2017 (Pages 1 - 6)

4. Summary of Standards at KS4 across Lancashire (Pages 7 - 12)

5. Corporate Risk and Opportunity Register - Quarter 4 (Pages 13 - 30)

6. Quarterly Corporate Performance Monitoring Report (Quarter 3) 2017/18 (Pages 31 - 44)

7. Urgent Business

An item of Urgent Business may only be considered under this heading where, by reason of special circumstances to be recorded in the minutes, the Chairman of the meeting is of the opinion that the item should be considered at the meeting as a matter of urgency. Wherever possible, the Chief Executive should be given advance warning of any Members' intention to raise a matter under this heading.

8. Dates of Future Meetings

Members are asked to note the following schedule of meetings for 2018/19, following the timetable of meetings being agreed by Full Council on 26th October 2017:

Wednesday 18th April 2018 at 2.00pm, Committee Room D

Wednesday 27th June 2018 at 2.00pm, Committee Room B

Thursday 4th October 2018 at 2.00pm, Committee Room B

Wednesday 5th December 2018 at 2.00pm, Committee Room B

Thursday 21st February 2019 at 2.00pm, Committee Room B

Thursday 18th April 2019 at 2.00pm, Committee Room B

L Sales
Director of Corporate Services

County Hall
Preston

Lancashire County Council

Cabinet Committee on Performance Improvement

Minutes of the Meeting held on Wednesday, 6th December, 2017 at 10.00 am in Cabinet Room 'B' - The Diamond Jubilee Room, County Hall, Preston

Present:

County Councillor Geoff Driver CBE (Chair)

County Councillors

A Atkinson

P Buckley

M Green

Mrs S Charles

H Khan

1. Apologies for Absence

No apologies for absence were received.

2. Disclosure of Pecuniary and Non-Pecuniary Interests

No pecuniary or non-pecuniary interests were disclosed.

3. Minutes of the Meeting held on 12th September 2017

Resolved: That the minutes of the meeting held on the 12th September 2017 be confirmed and signed by the Chair.

4. Customer Access Performance Report

A report was presented by Sarah Jenkins, Head of Service – Customer Access providing an update on the operation and performance of the Customer Access Service.

The Customer Access Service (CAS) was the first point of contact for 60% of all incoming telephony and email enquiries to Lancashire County Council. The strategic plan had been for additional services to be delivered by the CAS, in order to better serve the citizens of Lancashire, whilst improving costs and efficiency. Within the CAS is the dedicated Social Care Centre for Adult's and Children's Social Care, and the Customer Contact Centre delivering 26 services including Highways, Ask HR, Libraries, Blue Badge, Registration, Crisis Support, Waste and Welfare Rights.

The Committee noted that calls into Adults and Children's Social Care had reduced, as a result of safer, more effective referral pathways. The impact to Adults social care had been influenced by the Newton's programme of pathway to independence. Similarly, with Children's social care, a change of process had

been made at the front door, reducing the need for professionals to make repeat calls, by directing the contact to the most appropriate team at the first point of contact.

In relation to the Blue Badge Scheme, there had been improvements in application processing times and waiting times; lots of calls had been received in relation to eligibility and renewal. It was reported that the main reason for a Blue Badge being declined was that the applicant was not in receipt of the correct benefits and that, in these cases, once this had been rectified, the refusal would be look at again, resulting in the badge being awarded for applicants meeting the eligibility criteria. This meant that some people would have been included in the figures for both 'applications declined' and 'badges awarded'. The County Council had increased the offering of free internet access with some assistance in Lancashire libraries, to help people with the application which had to be completed online. However, it should be noted that there was a separate fast track application process for terminally ill applicants.

Following on from the audit, an improvement plan was currently being work on to review some of our processes in relation to the Blue Badge scheme and particularly our correspondence to improve customer experience. The issues raised included quality of the letters sent out and the lack of detailed responses.

In response to a query, Sarah confirmed that an annual review was completed to check whether any Blue Badges were no longer required. The County Council were able to render them as 'not in use' but it was noted that this was a difficult process, especially in relation to applicants who had deceased. The Blue Badge Service was part of the 'Tell Us Once' scheme, which allowed people to report a death to most government organisations in one go.

The Committee noted that, as part of the development of the Multi Agency Safeguarding Hub (MASH) model within Children's Social Care, changes had been made to the referral process, in order to ensure that qualified social workers dealt with concerns at the first point of contact.

Work had been undertaken with Corporate Communications to design a dynamic and engaging recruitment advertisement, including profiles on existing staff and their experience working for LCC. The new advert had been well received by applicants, demonstrating the benefits of working for the authority. Young people had said they preferred to submit a CV, rather than completing an application form and this had resulted in a much larger amount of applications being received. It was agreed that this should be discussed with Children Looked After (CLA) at the Corporate Parenting Board due to take place on 7th December.

The Committee were advised that the Genesys Project which supported enhanced multi channel contact and was also used by LCC Accounts Payable and Procurement Services, Emergency Duty Team, MASH Children's Services and BTLS Ask ICT, was currently in Phase 2, focussing on implementing new functionality such as telephony Auto-Attendant, in addition to new channels of contact including Web-Chat and Social Media.

It was noted that Customer Access were currently managing changes to the Crisis Support service, in order to cease the cash voucher payments currently provided, and replace them with food parcels.

It was reported that there had been a huge uptake on NoWcard online renewals and that we were currently in the re-issue period which occurred every 5 years, which was an extremely busy time for the CAS to assist customers whose badges were due to expire on 31st March 2018.

Resolved: That the Cabinet Committee note the contents of the report.

5. Risk & Opportunity Register Quarter 3

A report was presented by Paul Bond, Head of Legal and Democratic Services, providing an updated (Quarter 3) Risk and Opportunity Register for the Cabinet Committee to consider and comment upon.

The Committee noted that the updated Register would be presented to the Audit, Risk and Governance Committee on 29th January 2018.

The Cabinet Committee noted the following key highlights for this quarter:

- There was one deletion to the register:
 - CR28 – Risk of not fulfilling our duty in relation to Court of Protection applications. This had been deleted as Cabinet had approved a Prioritisation Tool which had reduced the risk score.
- Allowing for mitigating actions, the residual risk score for the other entries, as detailed in the report, remained at 12 or above, and therefore these issues remained on the register.

Due to a formatting error, the following entry had been omitted from the register:

- CO1 – Developing a new model for public service delivery in Lancashire.

It was confirmed that this would be added to the next quarterly update and would also be amended for the report to the Audit, Risk and Governance Committee meeting in January 2018.

Amanda Hatton confirmed that there would be an update for the next quarter on the recent Ofsted inspection for the SEND Service.

Resolved: That the Cabinet Committee note the updated Risk and Opportunity Register and the amendment to be made, prior to its consideration by the Audit, Risk and Governance Committee meeting in January 2018.

6. Quarterly Corporate Performance Monitoring Report – Quarter 2 2017/18

A report was presented on the Quarterly Corporate Performance Monitoring for Quarter 2 of 2017/18.

Start Well

It was reported that the number of Children Looked After (CLA) in Lancashire continued to increase. There was a high number of CLA in the Preston area, however, the Committee noted that the rates at which children were becoming looked after in the North and East were reducing.

The Access to Resources Team were working closely with children's social care to ensure optimum placements were identified. It was reported that it was difficult to find placements for some children and that we were currently looking at ways to how best we could work with these young people. A report would be presented to Cabinet in March 2018 on this.

Data released by Ofsted in September 2017 showed that there were two primary schools and four secondary schools in Lancashire judged as inadequate. The Committee noted that significant intervention support had been put into these schools and that early in the New Year, a meeting would take place with the Schools Commissioner. We needed to look at how the warning system was used and this would be detailed on the next quarterly update. County Councillor Driver stated it may also be helpful for Committee to have an overview report on where Academy orders had been received.

Ofsted Post Inspection Update

Amanda Hatton gave a summary of the actions and activity that had been implemented to improve the quality of services that support and protect children and young people.

The Committee noted that next iteration of the Continuous Improvement Plan had been developed and was framed against the following three key areas:

- Reduce the need for social work and care intervention and ensure effective prevention is in place;
- Ensure social work and care intervention is effective and efficient – making the right plans for children, offering appropriate support and minimising drift and delay – purposeful practice;
- Supporting long lasting and sustainable outcomes – permanence.

A revised Sufficiency Strategy for 2017-2020 had been agreed by Cabinet in October 2017, which set out how the Council would ensure that all children looked after had the right placement, in the right place at the right time, and the expectations for how this demand would change in the future.

It was noted that, as part of the implementation of the Residential Strategy approved by Cabinet in June 2017, additional resources were put in place to prevent young people coming into care, and to offer more outreach support and develop an adolescent support unit.

It was reported that HR and Learning Development were currently looking at Social Worker career pathways. It was noted that a report on this was expected in the near future.

The Committee were informed that LINX, along with the Barnardo's Young Carers Service and Children and Young People's Participation in Lancashire, had been shortlisted for the CYP Now awards. LINX had also received a national award for their campaign for Care Leavers across Lancashire to be exempt from paying council tax.

The Committee noted that we had a clear trajectory of improvement from Ofsted. A full inspection was due in Summer 2018, after the final monitoring visit.

Amanda Hatton wished it to be placed on record that staff had worked extremely hard in preparation for the last inspection.

Live Well

It was reported that the County Council was making progress in relation to the diversion of municipal waste away from landfill. County Councillor Green asked how the District Councils' policies on charging for green waste would impact on the landfill and diversion rate. Donna Talbot agreed to look into this.

Library visiting numbers had decreased by 15% when compared to the same period in 2016/17. However, only one of the libraries which had been re-opened had been included in the figures. Over the same period, there had been an 83% increase in e-book downloads. County Councillor Buckley was keen to improve the digital service and felt this would be a useful measure for the next performance monitoring update. Amanda Hatton reported that from January 2018, there would be a big push on reading from the Schools Improvement Service and a grime artist was also due to do some work with young people.

There had been an improvement in uptake figures for the DTaP/IPV/Hib vaccine for babies (provisional figure of 87.6) although it was noted that this was still lower than the recommended target (95%). A further report on childhood immunisations would be presented to a future meeting of the Health Scrutiny Steering Group.

There had also been an increase in the uptake of NHS Health Checks; this was 58.3% compared to the national figure of 48.9%.

It was reported that, despite there being more referrals, fewer people had commenced the Targeted Community Weight Management programme

compared to the last quarter. The Committee requested more information on this.

Key areas were currently being targeted in relation to road safety and there had been a significant reduction in the number of slight casualties. More detail was available in the Live Well Quality of Service Report which was due to be distributed to Cabinet Members.

Age Well

It was reported that Delayed Transfers of Care was still a cause for concern and that a focussed DToC improvement programme had been approved by the Health and Wellbeing Board, with associated significant investment.

The Committee noted that waiting times for social work assessments had improved with 85.3% being completed within 7 days, an increase of 3.1% from quarter 1 and 95.7% completed within 28 days, an increase of 1.2% from quarter 1. Waiting times for OT assessments had also improved in line with the drive to establish greater capacity and a more robustly managed OT workforce.

There had been a 9.6% increase between June and September in support to carers, through the award of direct payments. It was agreed that information in relation to Young Carers would be provided to the next meeting of the Committee.

Highlights were provided to the Committee for services outside of the Start Well, Live Well and Age Well areas.

Resolved: That the reported performance for Quarter 2 and the Ofsted post inspection update information and comments be noted.

7. Urgent Business

There were no items of urgent business.

8. Date of Next Meeting

The next meeting of the Cabinet Committee on Performance Improvement would be held on Tuesday 27th February 2018 at 2.00pm in Committee Room B – The Diamond Jubilee Room, County Hall, Preston.

L Sales
Director of Corporate Services

County Hall
Preston

Cabinet Committee on Performance Improvement

Meeting to be held on 27th February 2017

Report of the Head of Service (School Improvement)

Electoral Division affected: All

Summary of Standards at KS4 across Lancashire

(Appendix 'A' refers)

Contact for further information:

Stephen Belbin, Head of Service (School Improvement). 01772 531284,
stephen.belbin@lancashire.gov.uk

Executive Summary

A summary of standards at KS4 is provided for Committee Members.

Recommendation

The Cabinet Committee on Performance Improvement is asked to note and comment on the information within the report.

Background and Advice

Pupil achievement comprises of two key measures combined: attainment and progress. Members will be aware that further changes to statutory assessments at KS4 in secondary schools were implemented in summer 2017. This involved the replacement of A*-G grades in English and Mathematics, with the new grades 1 (low) to 9 (high), with grade 4 (standard pass) being the equivalent to a grade C, and grade 7 equivalent to grade A. In a move to raise standards, the new grade 5 has been named a "strong pass" (with no equivalent in the A*-G system). Attainment in Lancashire and districts within the national Performance Tables is therefore measured by the proportion of pupils achieving English and Mathematics grades of 4 and above, and grade 5 and above (the Basics Measure).

The second measure of attainment at KS4, Attainment 8, calculates a pupil's **total** grade across eight subjects (using the new 1-9 scale, with a maximum of 90 points):

- English (double-weighted);
- Mathematics (double-weighted);
- Any three other English Baccalaureate (EBacc) subjects (sciences, computer science, geography, history or languages);

- A further three subjects, which can be from the range of EBacc subjects, or can be any other GCSE or approved, high-value arts, academic, or vocational qualification.

The final attainment measure is the proportion of pupils achieving a specific grade in all five of the English Baccalaureate subject areas (English, Mathematics, Science, Humanities, Languages). In 2017, this is published at two levels: the proportion achieving A*-C in Science, Humanities and Languages, with a standard pass in English and Mathematics (Grade 4+); and the proportion achieving a strong pass in English and Mathematics (Grade 5+), and A*-C in the other subjects.

The other component of pupil achievement is the progress pupils make from KS2 to KS4. Progress 8 is based on students' **progress** measured across eight subjects as outlined above (comparing each pupil's Attainment 8 score with those of pupils with the same ability nationally, using the KS2 score as the starting point).

Because the English Baccalaureate, Attainment 8 and Progress 8 measures all require a specific combination of subjects, the results in these subjects will vary depending upon the specific curriculum which individual schools offer to their pupils (for example, schools who prioritise technology, arts or religious studies may see lower whole-school scores than others).

Details of the 2016/17 GCSE and equivalent entries and achievements of pupils at the end of key stage 4 are set out at Appendix 'A'.

Attainment 8

Across the whole of Lancashire, the average Attainment 8 score was 45.7, below the national average (46.4), whilst slightly above the North-West average.

The highest attaining districts were the Ribble Valley, followed by Lancaster and Preston. The lowest attaining districts were Burnley, Pendle and Hyndburn. However, rates of improvement in these three districts were greater than the rate across Lancashire. These rates of improvement are mirrored at KS2.

Basics Measures

The proportion of pupils attaining **Grade 4+** in English and Mathematics in Lancashire was just below the national average and above the North-West average. Attainment was lowest in Hyndburn, Burnley and Pendle; highest in the Ribble Valley, Rossendale and South Ribble.

At **Grade 5+**, the proportion in Lancashire was above national and North-West averages. The lowest-attaining districts were Burnley, Pendle and Hyndburn; the highest-attaining were Ribble Valley, Rossendale and South Ribble.

English Baccalaureate Measures

The proportion of pupils in Lancashire attaining the required combination of A*-C and **Grade 4+** passes was below the national average and above the North-West

average (reflecting lower levels of entry to these specific subjects in Lancashire). The highest-attaining districts were Rossendale, Ribble Valley and Chorley; the lowest-attaining districts were Hyndburn, Pendle and the Fylde.

The proportion of Lancashire pupils attaining the EBac measure including **Grade 5+** in English and Maths was below both the national average and that for the North-West. The highest-attaining districts were Rossendale, Ribble Valley and West Lancashire.

Progress 8

The Progress 8 score in Lancashire was in line with that in the North-West, but significantly below the national average, predominately because of low entry across the full range of English Baccalaureate subjects and comparison against the score for London, where positive progress for the significant proportion of ethnic minority pupils can be seen to skew the national data. The lowest scores in Lancashire were to be found amongst boys, disadvantaged pupils, those with SEN and White British pupils (with girls and pupils from ethnic minorities having positive scores). In addition, those who have moved schools during their GCSE course (often reflecting behavioural issues or unstable home lives) also have low Progress 8 scores.

The Progress 8 score was highest in the Ribble Valley (the only district with a positive overall score), Chorley and South Ribble. Progress 8 scores were lowest in Burnley, Rossendale and West Lancashire. Whilst Pendle was highlighted above amongst the lowest attaining districts at KS4, the Progress score was better than the Lancashire average.

Consultations

N/A

Implications:

This item has the following implications, as indicated:

Risk management

Lancashire, alongside many other Local Authorities, has a number of schools which are judged to be coasting. These schools are eligible for intervention by the Regional School Commissioner.

List of Background Papers

Paper

Date

Contact/Tel

None

Reason for inclusion in Part II, if appropriate

N/A

2016/17 GCSE and equivalent entries and achievements of pupils at the end of key stage 4 by local authority district and region of school location
Coverage: England, state-funded schools (including academies and CTCs)

Region/ Local Authority	Number of pupils at the end of key stage 4	Average Attainment 8 score per pupil	English and maths GCSEs			English Baccalaureate			Progress 8	
			Percentage of pupils entered for components	Percentage of pupils who achieved a strong 9-5 pass	Percentage of pupils who achieved a standard 9-4 pass	Percentage of pupils entered for all components	Percentage of pupils who achieved all components (including a strong 9- 5 pass in English and maths)	Percentage of pupils who achieved all components (including a standard 9-4 pass in English and maths)	Number of pupils included in the measure	Average Progress 8 score
ENGLAND	524,932	46.4	96.9	64.2	42.9	38.4	23.9	21.4	498,904	-0.03
NORTH WEST	72,289	45.6	97.2	62.7	40.3	34.7	21.7	19.1	69,301	-0.14
Lancashire	12,078	45.7	97.0	64.8	42.8	30.4	17.8	19.6	11,767	-0.14
Burnley	881	39.0	94.8	53.8	30.2	43.1	20.3	17.4	857	-0.34
Chorley	1,330	46.6	96.8	67.5	47.1	29.7	22.0	21.1	1,304	-0.10
Fylde	625	45.2	97.6	66.6	44.5	19.0	13.4	12.2	602	-0.23
Hyndburn	901	43.1	97.0	56.8	30.1	16.1	9.1	7.8	878	-0.20
Lancaster	1,282	48.5	97.3	66.3	46.6	27.5	20.4	19.5	1,233	-0.12
Pendle	902	40.7	96.8	54.3	32.6	22.6	10.0	8.9	859	-0.11
Preston	1,175	46.5	96.0	64.0	44.0	29.1	20.4	18.2	1,139	-0.03
Ribble Valley	874	50.2	98.6	70.7	50.9	32.4	23.8	22.8	860	0.01
Rossendale	813	47.1	97.5	70.5	48.8	34.8	24.8	23.1	802	-0.29
South Ribble	1,405	47.1	98.2	69.3	48.3	31.0	22.1	20.4	1,374	-0.03
West Lancashire	1,069	45.1	97.5	64.0	40.6	43.0	22.4	18.8	1,046	-0.24
Wyre	1,094	44.9	96.4	67.1	41.6	29.3	19.2	16.2	1,077	-0.23

Cabinet Committee on Performance Improvement

Meeting to be held on 27th February 2017

Report of the Head of Legal & Democratic Services

Electoral Division affected: (All Divisions);
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Corporate Risk and Opportunity Register Quarter 4

(Appendix 'A' refers)

Contact for further information:

Paul Bond, Head of Legal and Democratic Services, 01772 534676

Paul.bond@lancashire.gov.uk

Executive Summary

This report provides an updated (Quarter 4) Corporate Risk and Opportunity Register for the Committee to consider and comment upon.

Recommendation

The Cabinet Committee on Performance Improvement is asked to consider the updated Corporate Risk and Opportunity Register at Appendix 'A' and make any comments it considers appropriate.

Background and Advice

Following the corporate approach to reporting on risk and opportunity, the quarter 4 Risk and Opportunity register was recently reported to Management Team. Following this Committee, the Register will be presented to the next Audit, Risk and Governance Committee. An updated Corporate Risk and Opportunity Register is attached at Appendix 'A'.

It was decided at Management Team to undertake a full review of the Corporate Risk and Opportunity Register in the next month, to update it for the new financial year and new budget.

For this quarter, the key highlights in the register include:

- No new entries to the register.
- Several new opportunities:

Opportunity Identification Number	Opportunity Description
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CO6	Income Optimisation
CO7	The completion of the County Hall Old Building refurbishment including the development of the Exchange conferencing facility is almost done. This provides an opportunity to maximise the occupancy of the building and reduce staff travel time and costs through the provision of service focussed accommodation and facilities.
CO8	Develop and implement improved recruitment and retention practices to address increasing challenges

- allowing for mitigating actions, the residual risk score for the following entries remain 12 or above so the issue remains on the register:

Risk Identification Number (RIN)	Risk Description
CR1	Failure to implement fully the County Council's Medium Term Financial Strategy and deliver a longer term financially sustainable budget. Further mitigating actions added. Residual risk score increased to 20.
CR5	Inability to adequately protect and safeguard children. Further mitigating actions added. Residual risk score remains unchanged.
CR6	Failure to comply with statutory requirements and duties relating to CLA, children in need and children leaving care. Further mitigating actions added. Score remains unchanged.
CR7	Failure to recruit and retain experienced staff within Children's services. Further mitigation actions added. Residual risk remains unchanged
CR12	Inability to implement/maintain systems that produce effective management information. Further mitigating actions added but residual score remains the same.
CR16	Management of the County Council's assets. Further mitigating actions added but residual score remains the same.
CR20	Transforming care (Winterbourne). Residual score remains at 12.
CR21	Service user/customer risk associated with the inability to influence behaviour change in demand and expectations continue to rise. Controls and mitigating actions updated but residual score remains at 12.
CR25	Failure to implement and meet the statutory requirement to children and young people with special educational needs and/or disabilities. Further mitigation actions added. Residual score increased to 16 to reflect inspection outcome.
CR26	Proposed museums closures. Further mitigating actions added but residual score remains the same.
CR27	The mobilisation of the home care framework and subsequent service transfer process. Mitigating actions are being put in place but the residual score remains the same.
CR29	Delayed Transfer of Care. Controls and mitigating actions have been agreed but the residual score remains at 20.
CR30	Prevent people being drawn into terrorist activity. Controls and mitigating actions have been agreed to fulfil our duty but the residual score remains at 20.
CO1	Develop new pan-Lancashire approaches to public service delivery.
CO2	Delivering economic growth. Further maximising actions added.

CO4	Health & Social Care Integration. Narrative unchanged.
CO5	Apprenticeship levy and apprentice % in public sector. Narrative updated.
CO6	Income Optimisation: New opportunity added.
CO7	Exchange Conferencing facility: New opportunity added
CO8	Improved recruitment and retention policy: New opportunity added

Consultations

N/A

Implications:

This item has the following implications, as indicated:

Risk management

Good governance enables an authority to pursue its vision effectively, as well as underpinning that vision with sound arrangements for control and management of risk. An Authority must ensure that it has a sound system of internal control which includes effective arrangements for the management of risk. Failure to develop and maintain a Corporate Risk & Opportunity Register means the Council would be negligent in its responsibilities for ensuring accountability and the proper conduct of public business.

List of Background Papers

Paper	Date	Contact/Tel
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None

Reason for inclusion in Part II, if appropriate

N/A

Appendix A: Corporate Risk & Opportunity Register Q4 2017/18

Risk Identification Number (RIN)	Risk Description	Risk Type	Possible Consequences	Current Controls	Risk Score	Mitigating Actions	Residual Score	Risk Owner	Direction of Travel
CR1	Failure to implement fully the councils medium term financial strategy including the delivery of planned budget reductions	Economic	<ul style="list-style-type: none"> In year overspends if estimates within the MTFs for the current financial year do not reflect the actual position (eg demand and inflationary levels) and/or agreed savings are not delivered. This could lead to further budget pressures and result in reserves depleting more quickly than planned. Reductions in service and/or a drop in quality of delivery could lead to a legal challenge and damage the Council's reputation. New legislative requirements may not be met. The County Council may not be able to implement future large projects. Potential for infrastructure to deteriorate. Further national funding reductions could cause the minimum reserve position not to be maintained with the risk of not being able to set a balanced legal budget in future years. 	<ul style="list-style-type: none"> Monthly budget monitoring processes for Heads of Service and Directors with particular focus on agreed savings delivery. Ensure key programmes of activity (particularly linked to savings / downsizing) are adequately resourced. Quarterly Money Matters budget monitoring reports, MTFs, reserves and Treasury Management reports presented to members (includes capital). Management Team actions to monitor key areas of expenditure and consider remedial courses of action to address budgetary pressures. Robust Medium Term Financial Strategy and Plan, updated to reflect variations to resource and demand assumptions. Reserves regularly monitored and reviewed. Service challenges to be undertaken with the use of benchmarking information to support discussions and decisions in relation to future savings identification and service delivery models. 	25	<ul style="list-style-type: none"> Improve commercial and financial acumen. Continuously revalidate budget assumptions. Communicating with stakeholders to ensure an understanding of the council's financial position and need for change. Communicating specific proposals and service developments in the context of the financial scenario. Programme Office supporting services to deliver savings and bring forward savings wherever possible. Benchmarking work being undertaken to identify lowest unit cost comparators as part of future budget savings. Forecast underspend of £15.758m on the 2017/18 revenue budget. The forecast position however includes £54m from reserves. The revised forecast funding gap is £144.084m by 2021/22. 2018/19 budget agreed by Full Council in February 2018 that included £81m of new savings to be achieved over the next 4 years. A new Operational Plan has been agreed that has Financial Sustainability as one of its four key priorities. Service challenge will take place to review both costs and outcomes with a view to identifying further future savings to achieve a financially sustainable position. The final financial settlement for 20 18/19 included and additional (one-off) £3.449m for Adult Social Care Links to joint working including Healthier Lancashire programme with the NHS as to any opportunities / additional pressures (ongoing). Lobbying – Treasury and DCLG by utilising ongoing existing networks MP's / Members, LGA, CCN, SCT (ongoing) Development of response to the Treasury and DCLG of future needs assessment/allocation formula. Communicating specific proposals and service developments in the context of the financial scenario. 	20	Section 151 Officer	Work is continuously underway to review the budget position and identify potential decisions that could support reaching a financially sustainable position. Feedback into consultations from the government in respect of changes to the future funding of Local Government are a high priority as this could have a significant influence on financial sustainability.

CR5	Failure to adequately protect and safeguard children	Social	Children are put at risk of harm.	<ul style="list-style-type: none"> • MASH (Multi-Agency Safeguarding Hub) arrangements strengthened to ensure an appropriate multi-agency response where there are safeguarding concerns about a child. • Serious incident reporting in place with senior management line of sight to front-line practice. • Quarterly safeguarding meetings including the Chief Executive, DCS, Leader, Cabinet Member for Children, Young People & Schools, LSCB Chair and the Police. DCS meets with Cabinet Member and lead member on a fortnightly basis re current issues/developments. • SCR learning shared to improve safeguarding practice. • Effective audit framework in use. This has strengthened management grip and the quality assurance of practice. • External reviews of front-line practice completed including quarterly monitoring visits by Ofsted, the LGA peer review and six monthly DfE reviews. • Performance monitoring - action taken to address areas of underperformance via Data Quality and Performance Group. • Locality performance clinics chaired by CSC Heads of Service to address poor performance and reinforce good practice. • Monthly reports by the DCS to the Improvement Board on the quality of practice. • Increased Independent Reviewing Officer capacity and IRO completion of mid-point checks on case files to ensure timely progression of care plans for children looked after and subject to a child protection plan. • 12 Advanced Practitioner posts within the Audit Team provide advice and support to social workers & particularly ASYE's (Assessed & 	25	<ul style="list-style-type: none"> • Caseloads are in line with Improvement Board targets for "good and outstanding". • MASH redesign has progressed - 3 virtual locality teams now in place and consistent working practices established. • Director of Children's Services "line of sight" to frontline practice to ensure adequate protection and safeguarding of children in place. • Heat maps established to monitor performance. • Increasing numbers of experienced workers in post: <ul style="list-style-type: none"> April 17 - over 50% of Social Workers (SWs) were ASYE (Assessed & Supported Year in Employment), in Aug 17 this had reduced to 42%. Likewise the proportion of SWs with 3 or more years' experience has grown from 22% (Apr 17) to 34% (Aug 17). • Ofsted Monitoring Visit October 2017 - improvements noted in quality of practice - "good to requires improvement"; practice is compliant with statutory requirements; audit effective and leads to actions (Focus on Children In Need CIN). • Improvement Plan in place and further 12 week Improvement Plan in development to ensure a focus on agreed priorities. • Improvement and Accountability Board established, chaired by the Chief Executive to oversee implementation of the Improvement Plan and ensure services for children & families are effective and improve outcomes for children. • Locality practice improvement meetings held. • Ongoing work to improve processes and practice in the MASH providing greater social work oversight and more timely decision making at the point of referral, with professionals able to speak directly to a qualified social worker with additional temporary capacity agreed to support this. • Agency social work team in place in the North providing additional capacity. • Work is ongoing to embed the risk sensible model across the multi-agency partnership, incorporating a more strengths based approach. • Sufficiency and commissioning strategy action plan has been developed to promote early permanence for children. • Leadership Academy is in development. 	16	Director of Children's Services	The risk is being managed

				<p>Supported Year in Employment) in respect of practice improvement.</p> <ul style="list-style-type: none"> • Monthly compliance reporting of Strategy Discussions. • Social Work Academy established providing robust induction and continuous professional development for social workers. • Heat maps used to monitor performance and report on Annex A requirements in preparation for inspection by Ofsted. 					
CR6	<p>Failure to comply with statutory requirements and duties relating to children looked after, children in need and children leaving care.</p>	Legal/Political	<p>LA is legally and possibly financially liable, judicial review. Further OFSTED intervention.</p>	<ul style="list-style-type: none"> • Corporate legal oversight. • Quarterly Safeguarding Report. • Serious incident reporting to ensure appropriate management oversight. • Serious Case Review learning shared. • Peer Review and Challenge. • Stronger management oversight in Districts. • Advanced Practitioners in post. • Case file audits check compliance and quality of practice. • Multi-agency inspections. Sector led Peer Review. • Performance monitoring - action taken to address areas of underperformance. 	25	<ul style="list-style-type: none"> • Ofsted Monitoring Visit October 2017 - improvements noted in quality of practice - "good to requires improvement"; practice is compliant with statutory requirements; audit effective and leads to actions (Focus on CIN). • Work in line with the residential and sufficiency strategies has been delayed as property works to the Bungalow (which will be the complex needs unit), Slyne Road (the ASU), and South Avenue (the crisis unit) is not yet complete. • DfE six month review in November 2017 similarly noted that the quality of practice was improving and plans were in place to embed and sustain improvement, although there remained inconsistency in the quality of practice. • Leaving care performance indicators show improvement. 	16	Director of Children's Services	The risk is being managed
CR7	<p>Failure to recruit and retain experienced Social Work staff</p> <p>Failure to recruit and retain Independent Reviewing Officers.</p> <p>Failure to recruit and retain experienced BSO staff.</p>	Organisational	<p>Inability to deliver effective services. High caseloads. Lack of management oversight. Increased staff turnover. Increased agency spend.</p>	<ul style="list-style-type: none"> • Additional funding envelope. • Enhanced recruitment including children's services recruitment evenings and use of social media. • Agency social work team is currently providing additional capacity in the North Locality. • Weekly monitoring of SW workforce position and social work caseloads. • Increased focus on retention and conditions. • Additional temporary capacity provided for MASH. • Workforce Strategy Board established to ensure strong focus on recruitment and retention and workforce development. • Leadership Academy in development with a particular focus on skilling up first line managers to strengthen leadership of practice. 	25	<ul style="list-style-type: none"> • Number of experienced workers in post continues to increase - there has been a reduction in the proportion of newly qualified (ASYE) Social Workers: <ul style="list-style-type: none"> ○ April 17 - over 50% ○ Aug 17 - 42% ○ Dec 17 - 29.2% • The proportion of social workers with 1-3 years' experience has increased, as staff retention improves, and experienced workers now account for 70.8% of all qualified social workers. 	16	Director of Children's Services	The risk is being managed

CR12	<p>Failure to implement/maintain systems that produce effective management information</p> <p>Failure to improve quality of data in Liquid Logic's systems (LCS/LAS)</p> <p>Operational failure in the main IT Computer Suite (T101)</p> <p>Management Team and Cabinet need to consider service level required for business intelligence because there are insufficient resources to meet current need</p>	Organisational	<p>Ineffective collection, collation and input of data Ineffective use of business intelligence, resulting in the inability to identify and respond to changing trends and inform strategic decisions. Impact on strategic planning, understanding and management demand e.g. around demographics and ageing population profile Ineffective reporting arrangements.</p> <p>Statutory returns will be compromised, so incorrect performance will be reported nationally. OFSTED/CQC/LGA and other external organisations will be using inaccurate information to judge performance. Service planning and management will be severely compromised.</p>	<ul style="list-style-type: none"> Information management strategy. Data Quality processes. Oracle. Local Information Systems. Corporate performance information. JSNA and other needs assessments Weekly provision of information to operational managers. Monthly Performance Books or dashboards provided to Start Well Management Team and Adults Leadership Team. Use of exception reports to flag up data quality issues. External support to focus on Children's Services data issues. Introduction of new governance arrangements for children's services. Introduce a new performance management framework that is aligned to draft corporate strategy. Accuracy Working Group and performance management framework ensuring continued use of management reports within children's social care were established Significant number of core systems in place and associated integration technology. Greater investment in mobile devices to support the property strategy and new ways of working - Social Care/Highways etc. Monitoring and performance information available. Digital board established with engagement from key senior managers - targets in place and roadmaps developed for the rollout of key initiatives and priority areas. Savings tracker in place. Digital Health Board representation and at operational group level. Integration tools with health developed and others under development. Integration tools with police in development. Significant potential needs to be maximised - focus on channel shift with required changes to internet site and approach to mobile applications to maximise the potential. New web tools available through the new customer access system being rolled out and once proof of concept 	15	<ul style="list-style-type: none"> 'Passport to Independence' reporting work stream incorporating exception reporting. 'Project Accuracy' for Adults Services focussing on procedures and data quality is now underway. Significant inroads made in improving data accuracy; this work is ongoing. Development of improved performance and quality reports and heat maps is improving managerial oversight. Clear governance structure in place to ensure a continued focus on data quality/accuracy: <ul style="list-style-type: none"> Data Quality and Performance Group. LCS Systems Steering Group - provides governance to the DQP Group. Practice Improvement Meetings (PIMs) looking at performance and data quality. Children's Portfolio Review Board - development of systems within Children's Services. <p>Governance Boards established for Early help Module, Education, Health and care Plans module and the Education Management System.</p> <ul style="list-style-type: none"> Performance sub-group reporting the Improvement Board Chair Additional temporary resource employed within Business Intelligence to provide reports for Project Accuracy 2. Highway asset Management System - Business Analyst to be assigned to support solution design In relation to core systems, boards and working groups established to oversee progress and to set targets. Ongoing engagement with services to identify major benefits and to support implementation. Post system implementation groups in place to identify areas for development/opportunity and then be linked to system roadmaps and transformation change. 	12	MT /Director of Programmes & Projects	Level
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				tested will be rolled out in a targeted way.					
CR16	Failure to adequately manage the county council's land, highway and property assets	Organisational	Service users or members of staff being harmed. Potential increased cost of repair as a result of failure to appropriately maintain council owned assets and buildings	<ul style="list-style-type: none"> • Manage health and safety risks to customers and staff and ensure budgets are managed effectively to maintain assets to a satisfactory standard. • Monitor asset condition and ensure appropriate action taken to manage identified risks. • Effective planning and programming method of delivery. Management of organisational transition and effective engagement with operational services • Manage health and safety risks of customers and staff and ensure budgets are managed effectively to maintain assets to a satisfactory standard. • Consider and manage risks associated with redundant properties. Planned maintenance approach. Risk assessments and regular H&S inspections. Presently undertaken by various operational service areas. 	16	<ul style="list-style-type: none"> • Ongoing application of Transport Asset management Plan principles whilst managing defect repairs to keep roads safe and serviceable and meet public expectations. • Cabinet agreed new facilities Management Structure to ensure a consistent approach across all properties is in place and that the county council is legally compliant. • Review approach to monitoring and managing property assets and risk mitigation ensuring appropriate action where necessary. • Cabinet in October approved the delivery of a programme of works to Older People's Residential Homes 	12	Director of Property	Level – In relation to assets the trend is downwards as the Premises Compliance Team improve strategic premises management activity
CR20	Transforming Care (Winterbourne)- the accelerated discharge of the population of adults with a Learning Disability from secure hospital in-patient beds into community houses	Economic/Political/Social	Increased pressure on the adult social care budget. Resettlement from hospital to community health and social care packages shifts the funding responsibility from solely NHS to a shared responsibility between CCG's and LA's to fund these high cost intensive health and social care packages. LCC may not be able to afford these new packages of care in the current financial climate. There is a National Plan to facilitate discharge therefore there is a reputational and political risk in not achieving as	There is a governance structure for the Fast Track programme through the Fast Track Steering Group with representation from LCC Director Adult Social Care and HoS Commissioning working alongside SRO's from NHS and CCG's in order to achieve agreement on financial issues including the dowry and any future agreement for a pooled budget. There are identified workstreams each with a defined action plan with leads identified from commissioners across Lancs. Workstreams are monitored by the Steering group in addition to oversight by NHS England. The trajectory for possible discharge Sept 15- Mar 19 is to be carefully monitored so appropriate development and procurement of suitable housing and care can be planned for. Development of a pooled budget between health and social care currently being developed. Still an	16	<ul style="list-style-type: none"> • Improved engagement with procurement colleagues to ensure due process is followed operationally in meeting the needs of this population. • Lancashire's Fast track plan identifies the implementation of a revised model of care for people with LD improving crisis support through multi-disciplinary teams. • This approach is aimed at reducing admissions and supporting providers to maintain a person's tenure in their chosen house rather than re-enter hospital. • The plan commits to securing improved and alternate care and housing solutions for this population with the aim of creating shared tenancies with back ground support, rather than the current single tenancy model currently used, which will be more cost effective. There are plans to stimulate the provider market to inform 	12	Head of Service, Policy, Information and Commissioning (Live Well)	Level

			Lancashire is identified as a National Fast Track programme for this work due to the high number of Lancashire residents currently in in-patients LD hospitals. The closure of Calderstones hospital is part of this national plan. Failure to agree locally a reasonable figure for a dowry that is planned to follow a person from hospital (NHS) to LA's is a further financial risk.	interim agreement in place that funding for discharges comes 100% from health until the development of the pooled budget. Management Team have taken a position that all discharges will be funded by CCGs not by the Local Authority for the immediate future. Management Team have also committed to the development of a Pooled Budget with the NHS.		innovative solutions to providing for these peoples care			
CR21	Service user/Customer risk associated with the inability to influence demand whilst expectations continue to rise	Reputation al/social/economic/political	Demand and expectations continue to rise against a backdrop of reduced resources, thus leading to service failure and an increase in complaints. Failure to integrate health and social care to reduce pressures on demand and expectations as a result of ageing population. Unacceptable waiting times for assessment and reviews including occupational therapy, safeguarding and social care reviews.	<ul style="list-style-type: none"> • Consultation and engagement with service users and customers. Co-ordination of communications. Changes and impacts communicated to stakeholders. Impact assessments. Alternative delivery options being explored as part of base budget review option development. Learning from complaints and oversight at CCPI. 	16	<ul style="list-style-type: none"> • Alternative delivery options being explored as part of base budget review option development • In relation to adult and children's social care Newton Europe have been partly engaged in this area of work • See opportunities entry on Healthy Lancashire • Early help and prevention investment in integrated wellbeing services • Children's demand management strategy • Additional capacity is being secured in key areas such as social work and occupational therapy • Realignment of management capacity in adult social care to provide improved focus on operational priorities • Clear triaging/prioritisation schemes at Customer Access Centre • Work with Newton Europe is underway to improve productivity • Working with health partners to improve arrangements around discharges from hospital • Communicating with stakeholders to ensure an understanding of the councils financial position and need for change • Communicating specific proposals and service developments in the context of the financial scenario • Financial management board monitoring budget pressures • 0-25 Board work ongoing • Adults demand assumptions – independent scrutiny and challenge by LGA • Partnership event focussing on risk and demand within children's services • Continued prioritisation of activity focussed on demand management and providing appropriate and effective placements for young people. 	12	MT	↓ Downwards.

CR25	Failure to implement and meet the statutory requirement to children and young people with special educational needs and/or disabilities.	Organisational	<ul style="list-style-type: none"> • Not providing adequate service which places the LA at risk of appeals to SENDIST Tribunal, increased reputational risk via complaints corporately and to LGO. • Unmet need will result in CYP failing to meet their potential and therefore not be supported as positively as possible into adulthood. • The failure to recruit and retain staff. • Lack of confidence in LA services. 	<ul style="list-style-type: none"> • Following the SEND Local Area Inspection a WSA is being drafted to identify improvements to the service offered by LCC and the Clinical Commissioning Groups. The following areas were identified as requiring action: <ul style="list-style-type: none"> ○ The lack of strategic leadership and vision across the partnership ○ Leaders' inaccurate understanding of the local area ○ Weak joint commissioning arrangements that are not well developed or evaluated ○ The failure to engage effectively with parents and carers ○ The confusing, complicated and arbitrary systems and processes of identification ○ The endemic weaknesses in the quality of EHC plans ○ The absence of effective diagnostic pathways for ASD across the local area, and no diagnostic pathway in the north of the area ○ No effective strategy to improve the outcomes of children and young people who have SEN and/or disabilities ○ Poor transition arrangements in 0–25 healthcare services ○ The disconcerting proportion of children and young people who have an EHC plan or statement of SEN who are permanently excluded from school ○ The inequalities in provision based on location • The lack of accessibility and quality of information on the local offer. 	25	<ul style="list-style-type: none"> • Implementation of the early help (IT) module. • Recruitment of qualified staff funded by the SEND reform grant. • Commissioning arrangements with Health being reviewed. • The actions to implement the Written Statement of Action. • Strategic reporting and monitoring of improvement plan at Cabinet and CMT level. • Active leadership of Health and Wellbeing Partnership is leading SEND improvement plan. 	16	Head of Special Education Needs and Disability	The Local Area SEND Inspection identified serious weakness in delivery of the SEND Reforms.
CR26	Proposed museum closures	Organisational/political/reputational/financial/legal	<p>The proposal to close five museums has attracted negative publicity nationally, regionally and locally due to the national importance of the sites and collections</p> <p>Impact on staff leading to sickness absence</p>	<ul style="list-style-type: none"> • Regular contact is being maintained with colleagues in the commissioning team, asset management, equality and diversity, communications and business intelligence as and when required. • Decisions on process continue to be cleared through legal services 	16	<ul style="list-style-type: none"> • The County Council has committed to re-open and manage Fleetwood Museum from the 1 April 2017 until the formal transfer to Fleetwood Museum Trust as the new operator is completed. • The proposed transfer to the Fleetwood Maritime Trust will need approval at March Cabinet meeting. • A Cabinet Working Group (CWG) with a cross party membership together with senior officer representation has been set up to ensure that 	12	Head of Libraries, museums, culture & registrars	Level

			<p>Financial risk associated with not being able to close buildings because of the statutory responsibility to provide the service</p>	<p>and cabinet member where appropriate.</p> <ul style="list-style-type: none"> Expressions of interest have been invited for interested parties who can show that they have the resources and expertise to continue operating the museums and ensuring their collections continue to be made accessible to the public. English Heritage have indicated that they will not submit an offer following discussions aimed at the transfer of ownership of Helmshore and Queen Street Mills. There are, however, ongoing discussions with Historic England regarding these two sites. Fleetwood Museum will reopened on Good Friday, 14 April 2017 and the county council will manage the museum until the formal transfer to Fleetwood Museum Trust as the new operator is completed, expected to be no later than the start of June 2017. Negotiations are continuing with regard to the future operation of The Judges Lodgings and Museum of Lancashire. 		<p>any handover of buildings and services which may take place is fair and robust.</p> <ul style="list-style-type: none"> The CWG will meet on a monthly basis and make recommendations to cabinet. Information has been circulated to assist all staff with issues which may impact upon their health and wellbeing as a result of the proposals to close buildings. Head of service and senior service managers communicates changes to all staff on a weekly basis. 			
CR27	The mobilisation of the home care framework and subsequent service transfer process	Organisational/political/reputational/financial/legal	<p>Risk of legal challenge to the tender process</p> <p>Risk of significant increased costs to the Council</p> <p>Risk of challenges in the mobilisation and transition</p> <p>Capacity issues within teams to support the mobilisation and transition to the home care framework and ensuring that the Council's systems are able to support the requirements of the home care framework structure.</p> <p>Challenges relating to providers</p> <p>Potential disruption caused to service users.</p>	<ul style="list-style-type: none"> Staff and County Councillor briefing notes have been shared. Steering group established. Mobilisation workshop with services who will be required to support the project. Evaluation of the implications for services have been identified through a self-evaluation form completed by each service who will be impacted. Work has already been undertaken around systems. Council services who have been engaged have a good understanding of the implications and what needs to be done. 	16	<ul style="list-style-type: none"> Transforming Social Care in Lancashire Board to oversee the mobilisation of the home care framework and subsequent service transfer process and that the Home Care Mobilisation Steering Group should report to this Board for decision making. 	12	Director of adult services	level

CR29	Delayed Transfer of Care (DTC)	Organisational	Service users staying longer in an acute hospital setting leads to deconditioning of service user (older people often lose skills and the physical ability to undertake activity), which increases reliance on social care post discharge and as a result an increased cost. Increased pressure on adult social care. Cost to the health economy, as prolonged hospital stay, will increase tariff. Effect on relationships with health economy and wider political impact. Inability to agree or deliver DTC targets. Inability to manage short term pressure for reablement services.	Regular data set produced and analysed by business information. Cluster boards for P2I for reablement and acute joined to ensure good coms. Focus at BCF meetings. iBCF spending plan, which is intended to have positive impact on DTC, agreed by HWBB in August 2017.	20	Commissioned home care framework. Increased capacity of reablement service including development of options to manage short term pressures. Weekly "winter" ops and commissioning meeting. Implementing of eight high impact changes using iBCF monies to facilitate. Roll out of passport to independence in an acute setting. Development of dashboard to provide better MI within LCC. Discussions to ensure that activity related to DTC Dashboards is joined up across the STP. DTC Board established. Programme Office defined future governance and programme management arrangements for BCF/iBCF/DTC in LCC. Continued scrutiny by elected members. Mitigating actions above will not enable DTC targets to be met within agreed timescales.	20	Exec Director of Adult, Health and Wellbeing Services	Level
CR30	Failure to Prevent people being drawn into terrorist activity	Social	People suffer harm as a result of a terrorist incident.	<ul style="list-style-type: none"> • Burnley district has been identified as a level 2 priority area. • Multi -agency Contest Board in place and key risks identified to Lancashire Chief Executives Group. • Multi-agency Prevent delivery plan in place. • Local Risk Assessment Process in place. Channel process in place for referrals and intervention. • Robust reporting structures in place to respond to concerns/problems. Training Programme in place. • Safeguarding policy and procedures reflects Prevent Duty. • Other relevant policies and procedures including ICT reflect Prevent Duty. • Engaged with a range of civil society groups. • Established reporting structures in place. 	20	<ul style="list-style-type: none"> • LCC Prevent Duty Strategy and Development Plan 2016/18. • Prevent Duty E-learning mandatory for key frontline and safeguarding staff (available on intranet for all staff, however, those staff without access to ICT the Prevent training is delivered through other mediums e.g. team briefing, newsletters, leaflets). • LCC attend Contest Board. • LCC Vice Chair of Lancashire Prevent Delivery Partnership (LPDP), other key services reps attend. LCC reps also attend Lancashire Hate Crime and Cohesion Group, Lancashire Adults and Children's Safeguarding Boards and Lancashire Schools Equality Group. LCC Vice Chair of Lancashire Channel Panel. • LCC Single Point of Contact (SPOC) links in with Emergency Planning and Lancashire Resilience Forum through HoS Health, Safety and Resilience. How to report concerns guide on LCC intranet. • LCC SPOC appointed as Home Office Prevent Peer which enables learning good practice from across England & Wales. • Prevent Duty built in to policies and procedures. LPDP currently developing Lancashire Prevent Communications plan with the pan Lancashire Communications group – LCC Communications rep part of process. • LPDP Communications plan will include:- Lancashire wide messages responding to 	20	Dir of Property	Although mitigation actions are in place and the County Council has demonstrated that we are meeting requirements of the Prevent Duty the residual risk score remains high to reflect nation threat level

incidents, safety messages, busting myths, promoting good news stories, sharing information through social media etc.

Opportunity Identification Number	Opportunity Description	Opportunity Type	Possible Benefits	Progress to date	Opportunity Score	Maximising Actions	Residual Opportunity Score	Opportunity Owner	Direction of Travel
C01	Develop new pan-Lancashire approaches to public service delivery	Political	Local public services working together to gain the best opportunities for Lancashire.	<ul style="list-style-type: none"> Discussions about how best to take this issue forward are ongoing 	12	<ul style="list-style-type: none"> Lancashire Leaders meeting 20th February 2018 	16	MT	Level
CO2	Delivering economic growth	Economic	<p>Continued successful delivery of the LEP's current strategic economic growth programmes.</p> <p>Successfully secured new resources for Lancashire to support job and business creation, housing growth and the delivery of strategic transport infrastructure linking to drive economic growth and regeneration, linking residents and businesses with economic opportunities.</p> <p>There is unlikely to be further Growth Deal funding opportunities, though the development of Local Industrial Strategies may provide further opportunities in the future, though scale and timescales are not known.</p> <p>It is looking increasingly likely that the current</p>	<ul style="list-style-type: none"> Lancashire Enterprise Partnership has secured almost £1 billion of national resources to deliver a transformational programme of economic growth which see the delivery of new jobs, business and housing growth and strategic transport infrastructure. Key programmes/projects secured include the Preston, South Ribble and Lancashire City Deal, Growth Deal, three Enterprise Zones, Growing Places Funding, Boost Business Lancashire and Superfast Broadband. ESIF monies, both Regional Development Funds and Social Funds, totalling circa £200m are currently ringfenced for use in Lancashire (LEP area) over the next 5 years. This supports business support initiatives, innovation investment, environmental and flood mitigation measures as well as skills development and employability work. Post Brexit vote, projects which have been through the full approval process are not able to sign a final contract with MHCLG and project funding is being restricted to spend prior to end 2018. Significant beneficiaries include LCC, other local authorities, HEI's and Colleges. 	12	<ul style="list-style-type: none"> Work with local authority partners to ensure national resources to support economic growth and regeneration are secured. Maximise the support from key local and national public and private sector stakeholders outside of the County Council. The County Council to give greater consideration to using its investment and prudential borrowing capacity and investment funds to bring forward a portfolio of strategic development opportunities. A new Operational Plan has been agreed that includes economic growth as one of its key priorities Economic Development's main ERDF project Boost, has secured a Grant Funding Agreement and is applying for funding to the end 2021. Business Growth Service staff will, as far as possible, seek to frontload activity and spend within this project in-case funding or activity is prematurely curtailed. For the programme as a whole, we have issued calls in all measures in an effort to defray as much of the programme as early as possible. We are now looking to a further bid which could take the project to 2021. 	16	Director of Economic Development and Planning	<p>Recent Growth Deal settlement of circa £70m will provide resource for six key projects to advance over the next three years. The LEP has secured a £320M Growth Deal programme to be delivered by 2021. We are now looking to develop a Local Industrial Strategy to maximise new funding opportunity. New national housing and transport infrastructure funds will be targeted in support of local strategic priorities.</p> <p>Whilst the opportunity to secure EU funds (underwritten by HMG) looks more positive in the medium term, we are also preparing in</p>

			European Structural and Investment Fund (ESIF) programme will run through to its planned conclusion at the end of 2020. Some early policy announcements have been made around a replacement UK Shared Prosperity Fund but it is unclear how this will compare to EU funding in terms of scale, focus and priorities.						the event that EU Structural funds are replaced with complete rounds of national or sectoral productivity funding. The development of a UK Shared Prosperity Fund could also create new funding opportunities for place-based growth strategies – though further details not expected until later in 2018.
CO4	Health and Social Care Integration	Organisational	<p>The principle of the separate organisations working together to align plans, strategies and budgets will involve the development of new delivery models and ways of working, to avoid duplication and focus activity where it is needed, recognising that current models of service delivery are unsustainable. Integration would provide the best opportunity to minimise the impact of funding reductions as well as providing a better offer for service users</p>	<p>Participation in the Healthier Lancashire programme building upon the "Alignment of the Plans" work undertaken</p> <p>Sustainability and Transformation Partnership (STP).</p> <ul style="list-style-type: none"> • Influencing and shaping the process to take account of Combined Authority objectives if and where appropriate. • Aligning, where appropriate with existing work at a pan Lancashire level, and within individual health economies. • Consideration of new models of delivery and potential new funding arrangements, such as pooled budgets where appropriate. 	12	<ul style="list-style-type: none"> • Recognise the need for: an ambitious vision, robust partnerships, clear and credible delivery plans, and strong leadership and governance arrangements at a pan-Lancashire level. • Lead the integration agenda, recognising the need for an ambitious vision, robust partnerships, clear and credible delivery plans. Strong leadership and governance arrangements at a pan-Lancashire level. • Consultation on new governance framework. 	16	MT	Level

CO5	Apprenticeship Levy and Apprentice % in Public Sector	Political Economic Social Reputational Organisational	Increase in Apprentices in the workforce and use the Apprenticeship levy to its maximum benefit to support critical development needs in the County Council	The Apprenticeship Levy is live from April 2017 and the first payment from the digital account was in May 2017. Work is being undertaken across LCC with Heads of service or their representatives to discuss their overall workforce development and what part the Levy could play in this.	12	<ul style="list-style-type: none"> Maximise the benefits of the Apprenticeship Levy within LCC by working in conjunction with Management Team, Finance and HR to embed this into structures across the organisation. Working with services to identify the quick wins where these suit their business need and to thus eliminate training expenditure where we can, and link to Levy fund. L&D are speaking to Heads of Service to see how their training needs can be creatively addressed to link with the Levy, where possible. Heads of Service have been asked to report to L&D any current areas of training expenditure commitment that they have entered into. Heads of Services have been asked not to enter into any further financial commitments without speaking to L&D 	15	Dir of Corporate Services	Upwards
CO6	Income Optimisation	Economic	An additional £2 - £4m of hitherto undetected income can be secured	Following a successful business case, and the use of the additional staff resource available since the restructure, income has significantly increased. Further research to identify additional cases to be billed is ongoing.	16	<ul style="list-style-type: none"> Improve liaison with NHS bodies/LCC Social Care to identify billable cases promptly, particularly in relation to Mental Health. 	16	Dir of Financial Resources	Radiates
CO7	The completion of the County Hall Old Building refurbishment including the development of the Exchange conferencing facility is almost done. This provides an opportunity to maximise the occupancy of the building and reduce staff travel time and costs through the provision of service focussed accommodation and facilities.	Organisational	Staff time and costs can be reduced through the provision of corporate accommodation. The ability to manage and maximise the use of the building and provide facilities to support training and other partner events.	The Exchange opened on 1 August 2017. All training from the Leyland Learning Centre has been transferred to the new training suite within the facility. In addition to this, the conferencing provision from Woodlands has been transferred as have all bookings. The wider refurbishment of County hall old building introduces much needed additional meeting rooms and greater use of existing space through open plan working. A new staircase to support the increased occupancy has also opened.	12	<ul style="list-style-type: none"> At this stage, a light touch approach is being adopted until the new facilities are fully embedded within the organisation. Once any initial problems/issues have been identified and resolved, detailed performance management information will be produced and a campaign to maximise usage, and if needed, generate more income will commence. The FM restructure will provide resource to robustly take this forward and commence marketing and external customer opportunity. Work ongoing with Comms to develop information for LCC website. 	12	Director of Property	New

CO8	Develop and implement improved recruitment and retention practices to address increasing challenges	Organisational	Reduced staff turnover, especially 'hard to fill' roles; improve staff morale; reduce costs; reduce sickness absence; improve productivity.	Draft action plan produced. Focus initially on Children's and Adult Services.	12	<ul style="list-style-type: none"> Align to wider draft 'People Strategy' 	16	Dir of Corporate Services	

Key to Scores

	CATASTROPHIC (for risk) OUTSTANDING (for opportunity)	5	10	15	20	25
	MAJOR	4	8	12	16	20
	MODERATE	3	6	9	12	15
IMPACT	MINOR	2	4	6	8	10
	INSIGNIFICANT	1	2	3	4	5
		RARE	UNLIKELY	POSSIBLE	LIKELY	CERTAIN
			LIKELIHOOD			

Cabinet Committee on Performance Improvement

Meeting to be held on Wednesday, 27 February 2018

Report of the Chief Executive

Electoral Division affected: All

Quarterly Corporate Performance Monitoring Report – Quarter 3 2017/18

(Appendix 'A' refers)

Contact for further information:

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Executive Summary

This Corporate Performance Monitoring Report provides an overview of performance activity across the Council covering September to December 2017 (Q3).

Key points to note:

- Improved performance for Children's Social Care (CSC) referral and re-referral rates.
- The timeliness of CSC assessments, although better this quarter, requires further improvement.
- The Children Looked After (CLA) rate has increased further and the number of CLA was at its highest ever.
- Average CSC social worker caseloads are lower than most other authorities.
- The number of all killed or seriously injured and slight casualties on Lancashire roads is down for the first 3 quarters of 2017 compared to the previous 3 years.
- Adult Social Care waiting times for social work assessment have generally improved. A big increase in occupational therapy assessments completed suggests that waiting times for Occupational Therapists (OT) assessments are improving although OT waits are still often excessive.
- There is a slight improvement in the numbers of adults and older people being admitted to residential care compared to Q2, although the admission rates are still high compared to other local authorities.
- Reablement performance continues to improve, driven by the Passport to Independence Programme. Greater numbers receiving reablement is matched by improved outcomes.
- Delayed Transfers of Care are still a concern. Performance attributable to social care is now improving, though ranks low nationally.
-

The latest post (safeguarding) Children's Service Ofsted inspection update has been attached at Appendix 'A'.

Recommendation

The Cabinet Committee on Performance Improvement is asked to comment on the reported performance for quarter 3 and the Ofsted post inspection update information provided.

Background and Advice

Corporate performance monitoring arrangements across the authority as a whole are currently being revised and improved to reflect the new management structure and provide managers with more timely and comprehensive performance information. Future performance will be monitored and reported against the executive management structure that has been in place since January 2018.

Performance Summary Start Well

Key for performance:

On track/good	Slightly below desired level	Requires improvement
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Performance Measure	Good is High or Low	Dec 2016	Q1 2017/18	Q2 2017/18	Q3 2017/18 (Dec 17)	Last 6 month average
Contacts and Referrals to Children's Social Care						
Number of contacts	-	2,491	8,521	7,887	8,632 (2,467)	2,753
Percentage of contacts that lead to a referrals	H	34.1%	29.1%	29.6%	34.8%	32.0%
Referral rate	L	32.3	33.9	27.0	32.3	34.6
Percentage of referrals that are re-referrals	L	19.0 %	21.9%	16.3%	17.0%	19.2 %
Timeliness of assessments by Children's Social Care						
Percentage of completed assessments which took over 45 days	L	17.4%	19.6%	32.6%	22.8%	25.2%
Children in Need and Children on Child Protection Plans						
Number and rate of children with a Children in Need Plan	L	-	1,966/79.6	1,952/79.4	1,845/74.8	78.9
Number and rate of children with a child protection plan	L	67.0	1,288/52.5	1,241/50.3	1,273/51.6	51.6
Percentage of children with a repeat child protection plan	L	17.0%	17.3%	19.7%	19.5%	19.6 %
Children Looked After						
Rate of CLA number/per 10,000	L	73.3	1,875/76.4	1,921/77.8	1,950/79.0	78.2
Percentage of CLA in 3 or more placement over last 12 months	L	7.9%	7.1%	8.4%	9.2%	8.3 %
Workforce						
Percentage of staff on Assessed and Supported Year in Employment (ASYE)	L	45.7%	39.2%	43.4%	29.2%	41.6%
Percentage of staff who are experienced social workers (3+ years)	H	-	30.7%	22.0%	18.9%	22.3%
Average caseload per social worker	L	-	20.0	19.2	21.7	20.8

Children's Social Care

There were 8,632 contacts received by children's social care. 3,010 of those contacts (34.8%) led to a referral. This was an improvement on the previous quarter indicating that more appropriate contacts are being received. A third of all contacts originated from the police.

Although the position has improved since Q2, 22.8% of assessments completed in Q3 took over 45 days, which is longer than all comparator averages: national 16.6%, regional 16.7%, and statistical neighbours 12.3%.

There were 1,845 Children in Need (CiN) plans open during the quarter equating to a rate of 74.8 (per 10,000 0-17 population), which is higher than our internal 'good' performance threshold of 67. The highest proportion of CiN plans (26.2%) were for children with special educational needs and disabilities (SEND).

The number of Children Looked After (CLA) has continued to increase and in November the figure (1,953) was the highest ever recorded for the Authority. The Lancashire rate (79.0) was significantly higher than the recently published national (62.0) and statistical neighbour (65.5) rates, but significantly lower than the regional rate (86.0). The rates are particularly high in Burnley (119.8), Preston (104.7), Pendle (102.8), and Hyndburn/Ribble Valley (79.5%).

The proportion of newly qualified social workers (ASYEs) within Lancashire has reduced which indicates that retention of newly qualified staff is improving. However, the proportion of social workers with over three years' experience (18.9%) has worsened during the year indicating that experienced staff are leaving the authority. The average caseload for all social workers (21.7) is comparatively good.

Performance Measure	Good is High or Low	Dec 2016	Q1 2017/18	Q2 2017/18	Q3 2017/18 (Dec 17)	Last 6 month average
Adoptions						
Average time between a child entering care and moving in with their adoptive family, for children who have been adopted (days)	L	730 days (Q3 16/17)	478	536	347	434 (year to date - ytd)
Days between a local authority receiving court authority to place a child and the local authority deciding on a match to an adoptive family (days)	L	397 days (Q3 16/17)	173	283	102	167 (ytd)
Youth Justice						
Rate per 100,000 of first time entrants to youth justice system	L	309 (Jul 15 - Jun 16)	228	215	204	204 (Jul 16 - Jun 17)
% of YP reoffending	L	41.8% (Oct 13 - Sept 14)	42.1%	42.3%	43.0%	43% (Oct 15 - Dec 15)
Special Educational Needs and Disabilities						
Rolling average Special Educational Needs statements transferred to Education and Health Care plan	H	233	236	257	293	293 (Sept 14-Jan 18)

Adoptions

The average time between a child entering care and moving in with their adoptive family has improved on the previous quarter. The time taken for children to be matched with an adoptive family following a court authority has also decreased significantly. 76 percent of children waited less than 14 months between entering care and moving in with their adoptive family during quarter three. So far in the reporting year there have been 57 adoptions. At the end of quarter three 105 children were awaiting adoption, with no adoption breakdowns reported in the year so far. 20% of the children coming out of care during quarter three were adopted.

Youth Offending Team

There were fewer first time entrants to the youth justice system and Lancashire remains lower than the national (326.0) and regional (292.0) and statistical neighbour rates (239.0).

Published data from the Ministry of Justice suggests the proportion of Lancashire youth re-offending was still higher than the national (37.8%) and regional (40.7%) rates.

Special Educational Needs & Disabilities

The rate of transfer from statements of special educational needs to education and health care plans has increased. The SEND service are required to complete a monthly return to the DFE which identifies two forecasts regarding the transfers of SEN statements to Education, Health and Care plans. The response focusses on the number of outstanding transfers to complete and the number that the LA forecast will be completed by the statutory deadline. Whilst the process is very challenging for the service it is forecasted that we will meet the statutory deadline of 31st March 2018 and therefore continue to communicate this to the DFE.

However, concerns about the quality of the plans were raised in the Ofsted and CQC joint local area inspection for SEND which took place in November 2017. Further details are in Appendix A of this report.

School Improvement

A separate report on educational attainment is provided at agenda item 4.

Live Well

Performance Measure	Good is High or Low	Q3/ Dec 2016	Q1 17/18	Q2 17/18	Q3 17/18	Year to date (17/18)
Waste management						
% of recycling, re-use and composting	H	45%	46%	44%	43%	43% 17/18 forecast
% diversion of municipal waste away from landfill (including recovery)	H	49%	53%	51%	51%	51% 17/18 forecast
Libraries and museums						
Number of visits to libraries each quarter	H	895,146	845,866	913,329	866,398	2,625,593
Number of visits to museums each month	H	39,242	70,140	89,013	41,554	200,707
Number of E-Book downloads each month	H	40,516	49,249	53,023	52,492	154,764
Number of library real issues each month	H	928,397	913,949	997,359	857,734	2,769,042
Planning applications						
% of minerals and waste planning applications determined within 13 weeks	H	44%	60%	56%	90%	68%
% of Regulation 3 planning applications determined within 8 weeks	H	67%	70%	91%	75%	79%

Waste

The reduction in recycling, re-use and composting is due to increased residual waste at both kerbside and Household Waste Recycling Centres alongside reductions in the amount of green waste collected at kerbside following the introduction of charges for its collection by many district councils. The amount of recycling collected has seen little change.

Libraries

There is a national trend of a decrease in the volume of loans from libraries. It is generally recognised that libraries should not be measured on the volume of book loans alone, a point recently reiterated by the Minister with responsibility for Public Libraries in England and Wales.

Many citizens use their library for other reasons. Some library users rarely borrow a book or don't borrow in high numbers but regard their library as enabling them to use a community space, have digital access, feel less isolated and have access to information and community activity. Libraries provide cultural venues with activity that brings enjoyment and supports the health and wellbeing of those citizens who visit them.

The service is developing a range of new indicators to cover the Society of Chief Librarians 6 offers which the service is required to deliver and are featured in the library strategy.

Planning

10 County Matter minerals and waste (i.e. major) applications were determined within quarter 3, of which 9 (90%) received a decision within the 13 week decision period. The other application was determined within an agreed time extension.

8 applications for LCC's own Regulation 3 development were determined in quarter 3. 6 (75%) of these were determined within 8 weeks (there is no national standard in respect of this indicator, but 8 weeks is the standard set for district council applications of a similar scale).

Performance Measure	Good is High or Low	2016/17	Q1 17/18	Q2 17/18	Q3 17/18	17/18 year to date
Public Health						
The proportion of babies (at 12 months age) immunised with the DTaP/IPV/Hib vaccine	H (quarter in arrears)	89.4%	87.6%	88.8%	Available in Q4	88.2%
Health Checks						
Number of NHS Health Checks offered to eligible population	H	75,892	23,409	22,846	21,185	67,440
Number of NHS Health Checks completed	H	47,107	9,172	10,020	14,958	34,150
% completed of NHS Health Checks offered (Cumulative)	H	62.1%	39.2%	43.9%	70.6%	50.6%
Troubled Families Unit						
Troubled Families Unit (TFU) - Number of families attached to the programme	H	4,305 (Q4, 2016/17)	6,108	6,493	8,018	8,018
- Payment by results claims (submitted to the DCLG)		338 (total – 2016)	-	-	841 (2017)	1179 (current total)

Public Health

The DTaP/IPV/Hib vaccine protects babies against five different diseases: diphtheria, tetanus, whooping cough, polio and Hib. Data quality issues were identified as a problem when investigating the decline in uptake figures; with the level of performance presented and discussed with NHS England at Health Overview and Scrutiny Steering Group. The Pennine Lancashire Immunisation Uptake Group was created to address the issues and there are several improvement projects underway. Uptake figures for 2017/18 Q2 have since increased

to 88.8% (provisional figures) from 87.6% in 2017/18 Q1, although still remain lower than the 95% target recommended by the World Health Organisation.

Health Checks

The Health Check programme is designed to spot early signs of stroke, kidney disease, heart disease, type 2 diabetes and dementia. Since the 5 year programme started in April 2013 89.1% (December 2017) of the eligible population (aged 40 – 74) have been offered a Health Check; the target being 100% of the eligible population to be offered one check over the 5 year programme. Steady improvements have been made to the number of NHS health checks completed since the beginning of the programme, with current uptake across the whole programme at 59.2%. However the service delivering Health Checks in community settings is currently under performing in terms of activity levels, and is consequently subject to enhanced contract monitoring.

Troubled Families Unit

Lancashire has been 'spot checked' by the DCLG to ensure that the claims made under the terms of the Troubled Families programme were valid and robust. Very positive feedback was received regarding the programme delivery in Lancashire and the team were impressed with the progress that has been made.

The cumulative total of 1,179 'payments by results' (PBR) claims as at 31st December 2017 is behind the targeted position for the year. There is a positive relationship between Lancashire and the national Troubled Families team following a number of visits to the authority and the evidence that the council has been able to provide to meet the aims of the programme. There is a recognition that Lancashire entered into phase 2 of the programme later than other Local Authorities and on that basis the numbers of payment by results claims would be affected. There is an action plan to increase the payment by results claims before the end of the financial year with the aim to a cumulative total of 1,838 families achieving significant and sustained progress. This has been accepted by the national Troubled Families team.

Road safety						
Performance Measure	Good is High or Low	Q1-3 2014	Q1-3 2015	Q1-3 2016	Q1-3 2017	2017-2016 change
All KSI and slight casualties	L	3,274	3,169	2,940	2,579	-14.0%
All KSI	L	553	504	488	458	-6.55%
Child casualties	L	392	354	320	285	-12.28%
Child KSI	L	52	71	51	53	+3.77%

Road Safety

Work is on-going to identify trends and emerging problems in all casualty types across Lancashire, working with colleagues in the Lancashire Road Safety Partnership. This work enables interventions to be targeted most efficiently. Initiatives targeted at children include Right Start Child Pedestrian training which provides young children with a strong underpinning knowledge of road safety. It is a progressive practical training course that starts in Reception (Stage 1) and works through to Year 2 (Stage 3), available to all primary schools in Lancashire. New schools identify volunteers who receive a training session to enable them to deliver the course in school. Bikeability cycle training is delivered to Year 6 children, funded by the Department for Transport grant, with 3429 children trained during Q3.

Healthy Lifestyles				
Performance Measure (reported a quarter in arrears)	Good is High or Low	2016/17	2017/18 Q1	2017/18 Q2 (Cumulative)
Targeted Physical Activity referrals	H	7,291	2,116	5,309
starters		5,506	2,784	5,466
completions		3,550	2,181	4,286
% completions		64.5%	78.3%	78.4%
Targeted Community Weight Management referrals	H	3,194	1,053	2,337
starters		1,546	674	1,326
completions		991	417	773
% completions		64.1%	61.9%	58.3%

Healthy Lifestyle

Active Lives Healthy Weight services comprise Targeted Physical Activity and Community Weight Management programmes. There are five services commissioned within Lancashire, based on local health economy footprints.

The Targeted Physical Activity programme targets adults who do not meet the recommended 150 minutes of physical activity a week, and children/young people who do not meet the recommended levels of physical activity of 60 minutes a day. The service offers an initial assessment and referral to a physical activity specialist or service according to capability and needs, with opportunity to participate in a 12 week physical activity programme.

The Targeted Community Weight Management Service targets adults with a Body Mass Index (BMI) of between 25 and 35; and children aged 4-18 classified as being overweight and obese weight for their height; offering a 12 week programme of behaviour change support.

Referrals in both programmes are through self-referral and indirectly through other professional staff such as GPs, pharmacies, health visitors etc. The providers are responsible for promoting the services in their locality, with quarterly targets for completions set at 65% of those recruited.

Participate in a programme over a twelve week period which may span two reporting periods. Across Lancashire the Targeted Physical Activity programme is generally meeting completion targets, although those targets in the Community Weight Management programme are showing slight underperformance. Performance is discussed with providers to understand the reasons why people are not completing programmes, recognising that this is part of a much wider and complex behaviour change issue.

Age Well

Note: ASCOF refers to the Adult Social Care Outcomes Framework which is a suite of national performance indicators.

Performance Indicator	Good is: H/L	Q1 2017/18	Q2 2017/18	Q3 2017/18	Eng Av
Adult social care - personalisation					
Adults aged over 18 receiving self-directed support (personal budgets) (ASCOF)	H	78.4%	78.0%	77.3%	89.4%
Adults receiving direct payments (ASCOF)	H	23.4%	23.6%	24.0%	28.3%
Support for carers					
Carers receiving direct payments for support direct to carer (ASCOF)	H	99.1%	98.8%	98.7%	74.3%
Carer assessments completed	H	1, 246	1,198	1,170	-
Support for people with learning disabilities					
Proportion of adults with learning disabilities who live in their own home or with their family (ASCOF)	H	80.2%	83.0%	82.5%	76.2%
Support for people to remain independent					
Permanent admissions to residential and nursing care homes per 100,000 pop aged 18-64 (ASCOF)	L	19.6	18.6	17.0	12.8
Permanent admissions to residential and nursing care homes per 100,000 pop aged 65+ (ASCOF)	L	782.4	778.2	734.2	610.7
Number of permanent admissions to residential and nursing care homes pop aged 65+ in a rolling year	L	1,892	1,883	1,826	-
Number of reablement referrals	H	1,492	1,827	1,904	-
Number of completed reablement support plans	H	1,486	1,427	1,807	-
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (ASCOF)	H	83.9%	87.6%	87.4%	82.5%
Timeliness of assessment and support					
Assessments completed within 7 days	H	82.2%	85.1%	85.6%	-
Assessments completed within 28 days	H	94.6%	95.6%	95.6%	-
Total number of Occupational Therapy (OT) assessments	H	1406	1779	2161	-
Delayed Transfers of care (DToc) – total delayed days	L	4,643 (June17)	4,511 (Sept 17)	3,903 (Dec 17)	-
Quality of services					
Care Quality Commission (CQC) – Care Home ratings good/outstanding	H	74%	74%	74.5%	78.9%
CQC Community Care Service ratings	H	85.5%	86%	87.5%	84.4%

The proportion of people with personal budgets is below the national average, but is improving steadily as expected through targeted reviews.

The Q3 residential admissions indicators for adults and older people have both improved slightly from Q2 which is in line with the Passport to Independence work. The admissions to residential care for older people are still significantly higher than the national average and are unlikely to achieve the Better Care Fund target of 1795.

The number of reablement referrals has increased by 4.2% with the number of completed reablement support plans increasing by 26.6%. Both measures indicate that greater numbers of people are being offered reablement in accordance with the aims of the Passport to Independence programme.

The Lancashire monthly total for delayed transfer of care (delayed days) has decreased by 644 days (-14.2%) compared with an overall decrease of 3.8% for our comparator authorities and a decrease of 6.3% for all authorities.

Timeliness of assessments has continued to improve. The number of occupational therapy assessments has increased in Q3 by 21.5% (from 1779 to 2161) which suggests that waiting times for OT assessments are improving. This is in line with the increased capacity within the service and a more robustly managed OT workforce. However, OT waits are still often excessive and are not always easy to track.

The Lancashire figure of 74.5% of care home ratings being good or outstanding now falls within the third quartile of NW authorities (4th quartile is best) and the second quartile of all English authorities when ranked by percentage of overall rating of good or outstanding. Lancashire has now exceeded the above-average threshold for the NW (71.5%), but remains short of the above-average threshold for England (80.0%).

Of the total 200 community care services inspected, 17 services are operated by the County Council itself. 3 (17.6%) out of 17 community care service achieved an overall rating of an outstanding service, 13 (76.5%) community care services achieved an overall rating as good and only 1 (5.9%) service was overall rated as requiring improvement.

Consultations

Members of Management Team(s) have previously received the information in this report.

Implications:

This item has the following implications, as indicated:

Risk management

No significant risks have been identified in relation to the proposals contained within this report.

Local Government (Access to Information) Act 1985

List of Background Papers

None

Reason for inclusion in Part II, if appropriate

N/A

Appendix A - Ofsted Post Inspection Update

Ofsted Monitoring Visit

The last Ofsted monitoring visit took place on the 30 & 31 October 2017 and focused on the quality of help and support given to children in need. This was the fifth monitoring visit since the local authority was judged inadequate following the inspection in September 2015. The findings were published on the 29 November 2017. [Click on the link to view the letter.](#)

It was noted that the authority continued to make progress in the improvement of services for children and the quality of auditing activity had improved significantly. In all cases tracked inspectors broadly agreed with our own audits and social workers valued the learning from this. Management oversight of child in need cases had improved and children in need were being seen regularly, with evidence of direct work being undertaken to capture their views. Child in need plans were being regularly reviewed by social workers and there was evidence of the involvement of partner agencies and schools in particular, in supporting children. However, further work is required to ensure plans are outcome focused and are more specific about the purpose of social work involvement. Staff spoke about children and families with knowledge and genuine care. Whilst regular staff supervision was taking place, the recording of this was too variable.

There remains a strong focus on improving the quality of practice and the Advanced Practitioners (APs) are delivering a series of workshops across Children's Services focused on purposeful practice and the child's lived experience. This includes a workshop on supervision for practitioners and managers. The APs also continue to offer reflective supervision sessions to social workers in respect of more complex casework and deliver ASYE (Assessed and Supported Year in Employment) workshops to support newly qualified staff, as well as risk sensible clinics to further embed a more strengths based approach to the use of the risk sensible model.

The next monitoring visit is scheduled for the 27 and 28 February 2018 and will focus on the MASH, (Multi-Agency Safeguarding Hub) and the interface with early help services.

SEND Inspection

In November 2017, Ofsted and the Care Quality Commission (CQC), conducted a joint inspection of the local area of Lancashire, to judge how effectively we have implemented the special educational needs and disability (SEND) reforms, set out in the Children and Families Act 2014. The inspection took place between 13 and 17 November 2017 and involved five inspectors undertaking a range of activity from reviewing documentation, observing frontline practice and face to face meetings with a range of service users. They spoke to staff at all levels, to SEND service providers, to children and young people with SEND, their parents and carers, governors, and leaders from the local area for health, social care and education. The finding of the inspection is that the local authority and the area's clinical commissioning groups (CCG's), have been asked to submit a joint written statement of action to Ofsted, because of identified areas of weakness in the local area's practice. The local area strategic partnership, including school leaders, will be working with Ofsted, CQC and the Department for Education (DfE) to deliver a SEND action plan to address the issues identified by the inspectors. Work has already begun on addressing the issues found by the inspectors and we have identified and started to implement a number of actions in response to Ofsted's findings.

The main issues we will be working on are as follows:

- Ensuring children and families are at the heart of what we do.
- Robust and comprehensive assessments of children who have SEND are carried out in a timely way.

- Strategic oversight of SEND across the local area.
- The appointment of designated clinical officers to fulfil the designated medical officer function.
- Developing a shared understanding of co-production with children, young people, families and other partners.
- Refreshing and publicising the Lancashire local offer.
- The further development of pathways for Autistic Spectrum Disorder including diagnoses across the local area.
- Collaboration with school leaders to reduce the exclusion of pupils with SEND.

To help achieve these improvements, we have taken a number of actions since the end of the inspection last month. These have included:

- Setting up a SEND partnership board that includes representatives from parents and young people.
- Changes to the Local Offer.
- Advertising Designated Clinical Officer posts.
- Sending questionnaires to all families with children with an Education, Health and Care Plan in order to elicit their views and experience in greater detail.
- Arranging to meet school leaders to deliver ways to reduce exclusions as a matter of urgency.

The development and delivery of an improvement plan will be closely monitored by the DfE and Lancashire's Improvement and Accountability Board. The effective implementation of the improvement plan will be critical to achieving an improved outcome when Ofsted undertakes a further, shorter inspection of these services in due course.

New Inspection Framework

In January 2018, Ofsted implemented a new inspection framework for the inspection of local authority children's services (ILACS). This applies a proportionate and risk based approach to inspection incorporating a number of elements:

- Local authorities sharing an annual self-evaluation of the quality and impact of social work practice.
- An annual engagement meeting between Ofsted's regional representative and the local authority, to review the self-evaluation and what is happening in the local authority.
- Ofsted local authority intelligence system (LAIS) which brings together data and information about the local authority.
- Focused visits that look at a specific area of service or cohort of children.
- Standard and short inspections where Ofsted make judgements using a four point scale. (Outstanding, good, requires improvement to be good and inadequate). Graded judgements are made for: overall effectiveness, the experiences and progress of children in need of help and protection, the experiences and progress of children in care and care leavers and the impact of leaders on social work practice with children and families.
- Joint targeted area inspection (JTAI).

Following either an inspection or focused visit, Ofsted will publish a report or letter setting out their findings. Where concerns arise about a local authority the regional director will decide whether to undertake an inspection (standard or short) or whether a focused visit would be more appropriate. Progress in between inspections will be reviewed through the local authority's self-evaluation and annual engagement meeting. The approach aims to support improvement whilst still holding the local authority to account in meeting their legal responsibilities to children in need of help, protection and care.

The self-evaluation should answer three questions:

- What do you know about the quality and impact of social work practice in your local authority?
- How do you know it?
- What are your plans for the next 12 months to maintain or improve practice?

Standard and Short inspections will focus on social worker's direct practice with families and will include: scrutinising and discussing a sample of children's cases; meetings with children, young people, care leavers, parents and carers, foster carers and adopters; shadowing staff in their day to day work and observations of practice in multi-agency and single agency meetings.

Ofsted have confirmed that Lancashire's re-inspection will be completed under the previous Single Inspection Framework that was used to inspect Children's Services in 2015. Under the new inspection framework, local authorities judged inadequate remain subject to quarterly monitoring visits. Local authorities judged to be requires improvement to be good will receive a standard inspection (once in a 3 year period) and up to 2 focused visits in between inspections and a possible JTAI (would replace one of the focused visits).

Ofsted Annual Conversation

Lancashire's annual conversation with Ofsted was held on the 15 January 2018 to review progress and performance. In line with the introduction of the new inspection framework there was a particular focus on the quality and impact of social work practice, how this is known and the plans for the next 12 months to improve practice. An update was provided to Ofsted in respect of the measures being taken to improve practice and the findings of recent external reviews, including the LGA Peer Review, Six Month DfE Review and recent Ofsted Monitoring Visits. However, there was challenge from Ofsted regarding the pace of the improvement work and evidence of impact.

