**Lancashire County Council**

**Cabinet Committee on Performance Improvement**

**Wednesday, 27th June, 2018 at 2.00 pm in Committee 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 18th April 2018** (Pages 1 - 8)

**4.** **Corporate Risk and Opportunity Register Quarter 1** (Pages 9 - 24)

**5.** **Quarterly Corporate Performance Monitoring Report - Quarter 4 2017/18** (Pages 25 - 52)

**6.** **Lancashire Key Stage 4 Recovery Plan** (Pages 53 - 60)

**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.** **Date of Next Meeting**

The next meeting of the Cabinet Committee on Performance Improvement will be held at 2.00pm on Thursday 4th October 2018 in Committee Room B – The Diamond Jubilee Room, County Hall, Preston.

L Sales

**Lancashire**
County
Council

Director of Corporate Services

County Hall
Preston

**Lancashire County Council**

**Cabinet Committee on Performance Improvement**

**Minutes of the Meeting held on Wednesday, 18th April, 2018 at 2.00 pm in Cabinet Room 'D' - The Henry Bolingbroke Room, County Hall, Preston**

**Present:**

County Councillor Geoff Driver CBE (Chair)

**County Councillors**

| | |
|---|---|
| A Atkinson | H Khan |
| M Green | G Gooch |
| C Crompton | S Turner |

## 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 27th February 2018

**Resolved:** That the minutes of the meeting held on 27th February 2018 be confirmed and signed by the Chair.

## 4. BT Lancashire Services Governance and Performance Monitoring

Gabby Nelson, Head of Core Business Systems, presented a report providing an update on the Service Governance and Performance Monitoring of the County Council's strategic partnership with BT Lancashire Services. The report covered April 2017 to February 2018.

Further information providing a more comprehensive measurement of service delivery was provided at Appendix 'A'.

The **Payroll and Recruitment Service** had been restructured in February 2018, providing more integration and flexibility. The restructure had enabled a recurring saving of £174k per annum with effect from 2018/19. It was reported that all contractual and non-contractual performance targets had been met between April 2018 and February 2018.

It was reported that, in 2017, 99.7% of the **Disclosure and Barring Service** forms had been processed within 48 hours, which was well ahead of the 75% key performance indicators. A new system for Disclosure and Barring Checks would

be implemented from July 2018 which would reduce application processing time by 50%, negate errors and improve security.

The **Improved Management Information and Reduction of Overpayments** enabled more robust and detailed monitoring of service activity, specifically around overpayments and payments on account.  As a result of this, both the volumes and values of overpayments were forecast to reduce by around 30% from 2016/17 to 2017/18.

The Committee noted that 86% of County Council staff felt the Recruitment Service exceeded expectations or was good.

In relation to **Information and Communications Technology Services**, it was reported that all contractual performance targets were being met.

The Committee noted that the County Council had not been affected by the **global cybercrime ransomware attack** in May 2017, largely due to the significant investments in Security Systems and products, the effective security measures put in place by ICT services to protect the County Council's network and services, and through the co-ordinated response by staff as details of the attack began to emerge.  A letter from NHS England had been received thanking County Council for their assistance with the cyber attack, which was set out at Appendix 'B' with the agenda papers.

It was reported that the new **ICT portal** was simpler to use and that incidents/requests submitted through the portal were prioritised with dedicated resource ready to respond within 30 minutes.  Customer satisfaction had significantly improved and users no longer needed to wait in a telephony queue. Over 95% of customers had rated the service as excellent or good, as opposed to around 50% over the past three years.

On the whole, the **Asset Management System** was running successfully, although there had been issues with the Highways Asset Management System (HAMS).  It was reported that there was a re-education programme ongoing for HAMS.

The new **On Line Schools Admissions system** had been very successful and the primary school offers had been sent out within the time agreed. Implementation for the **Early Help Module & Education, Health and Care Plans** was planned for December 2018.  This would enable the County Council to deliver a complex, fully integrated system for children's services as we would have a strong suite of children-related systems, once these went live.

The new **Condeco room booking system** had been in place since August 2017 and had proved successful.  The Committee noted that the facility for meetings room bookings to be cancelled automatically by the system if they had not started within 15 minutes, had increased the availability of rooms for meetings.

The **secure email pilot** commenced in January 2018 and the **collaboration workspace** would be piloted in April 2018. Both solutions would significantly improve data protection compliance.

**Partnership working** was being taken forward in the sharing of data and shared/agile working. The Committee noted that data could be shared with the NHS and it was planned to include electronic hospital discharges that would provide real time information on patients that had been discharged from hospital but who may need social care. The **Lancashire Patient Record Exchange Services** initiative would allow the sharing of information between different areas of the NHS and various North West organisations, including Lancashire County Council. This meant that, within the social care system, officers would be able to view health summaries from the Clinical Commissioning Groups. It was reported that the 5 Health Trusts all had different systems so it would take up to 12 months for the project to be amalgamated into the Digital Discharge to Social Care Project.

A proposal for electronic interaction between Lancashire Constabulary and Lancashire County Council in relation to information exchange, had been approved and was due to be implemented from December 2018.

The County Council was moving towards an **agile workforce**; over 60% of the workforce were now using a laptop, allowing them to work from any location with a Wi-Fi connection. The target was for 80% of the workforce to have a laptop by 2020.

In relation to financial benefits, the Committee noted that significant progress had been made in delivering the required savings. Details of the savings were provided to the Committee and it was noted that work continued on this.

**BT Lancashire Services Staffing Update**

Mark Mayer, Chief Executive, BT Lancashire Services, reported that feedback from the staff events which took place in February (separate, service-focussed events for both the Revenue and Benefits Service (West Lancashire) and the Payroll and Recruitment Service) had been positive. We needed to make sure staff were more pro-active, supportive and innovative.

The Committee noted that the West Lancashire Borough Council health and safety team had undertaken an external audit of the Revenue and Benefits Service, which had resulted in a pass mark of 73%; a much improved score from 57.5% in 2016.

In relation to new technology, the importance of always following processes properly and always providing data accuracy had been emphasised to staff. It was also essential for Managers to be involved in between users and senior sponsors.

**Resolved:** That the Cabinet Committee note the report and that a further report will be presented in 6 months time.

5.      **Transforming Care Programme for People with Learning Disabilities & Autism**

Ian Crabtree, Director of Adult Social Care Transformation, presented a report providing an overview of progress of the Transforming Care Programme for People with Learning Disabilities and Autism and the County Council's contribution to the programme.  An update was also provided on the funding position taken by the County Council in relation to discharges and progress on a pooled budget arrangement.

The Transforming Care Programme had originated from the abuse scandal at Winterbourne View in 2011, highlighted by the BBC Panorama programme.  The Local Government Association and the Association of Directors of Adult Social Services supported the plan which publicly committed to a programme of a review of inappropriate and outmoded in-patient facilities, with the aim of establishing stronger support in the community.

It was reported that the discharge trajectory set by NHS England was 89.  There were 97 individuals in hospital as at February 2018; this was the first quarter where the trajectory had been markedly missed.   However, it should be noted that this was not a true reflection of the success of the programme, which had discharged 50 of the original cohort of 107 individuals who had been in hospital at the start of the programme in April 2016.  It was reported that no discharges had been held up due to the funding position taken by the County Council of no longer contributing to funding for those discharged from learning disabilities inpatient facilities, until there was clear, legally binding commitment from the NHS to fund the full lifetime cost of these services for those awaiting discharge through a newly developed pooled budget.

The Committee noted that the County Council were taking the lead on the Flexible Agreement framework which supported the Transforming Care Programme.  The aim of the framework was to improve the quality of the providers selected to support individuals who were previously in-patients, commission new models of care for individuals which created efficiencies by commissioning for more than one individual, alongside delivering quality care and support which focussed on developing individuals' independence and safe access to their community.

It was reported that medium secure environment placements were currently based at the Calderstones in Whalley, but that these would move to the Ashworth Hospital site in Maghull, although his may only happen in 2021.

**Resolved:** That the Cabinet Committee note:

(i)     the progress on discharges of people with Learning Disabilities & Autism;

(ii)    the funding position taken by the County Council in relation to the non-funding of discharges; and

(iii)   the progress made so far in developing a pooled budget with partner organisations for people with Learning Disabilities & Autism.

## 6.    Adult Services – Prioritising and Managing Assessment Activity

Ian Crabtree presented a report in response to questions about entry CR21 on the Quarter 4 Corporate Risk and Opportunity Register, which had been raised at the last Cabinet Committee meeting.  Papers in relation to the following were circulated to Committee Members:

- LCC Safeguarding Report for the quarter ending 31 March 2018 for the Lancashire Adults Multi Agency Safeguarding Hub

- Delayed Transfers of Care Analysis – Lancashire February 2018

Details were provided to the Committee of the five broad approaches to managing excess or increasing demand across adult social care.

At the last Cabinet Committee meeting, concerns had been raised about the waiting times for assessments and reviews for safeguarding, hospital discharge and occupational therapy, and further information was provided to the Committee on these.

**Safeguarding**

In addition to the 28 social workers and four social care support officers, agreement to 6 agency staff (2 per area) being appointed was reached, on a temporary basis, to ensure elimination of backlogs and reduction in waiting times. It was noted that there was no difficulty recruiting staff for the safeguarding teams.

The criteria as to what was a safeguarding case, and what response was required, was made by the Multi Agency Safeguarding Hub.  Details were provided to the Committee on the following 4 priorities:

- Priority 1 - To be allocated immediately as an urgent response is required
- Priority 2 - To be allocated within 24 hours
- Priority 3 - To be allocated within a 2 week period
- Priority 4 - To be allocated within a  4 to 6 week period

Generally, the response times were showing major improvement over the last few months, due to improved management grip and the additional temporary staffing.

However, it should be noted that there were, at times, significant weekly fluctuations, due to routine staff absences and/or unusual surges of new referrals.

**Hospital Discharge**

The Committee noted that substantial additional resources from the Improved Better Care Fund and significant redesign of the system for managing hospital discharge had been underway for several months in Lancashire. Overall, there had been a gradual but sustained improvement in reducing delayed transfers of care over the last 6 months, with some short periods where problems escalated, due to flu outbreaks or severe weather. The Committee noted that Preston and Chorley accounted for 60% of the delays and that this needed to improve

A query was raised about working with registered social landlords where individuals due to be discharged required adaptations to their home. It was confirmed that the County Council held the funds for Disabled Facilities Grants and administered the scheme. However, it was for the District Councils to work with the social landlords to discuss the best use for the grant funding for individuals. It was the county council's responsibility to ensure that discharge was not delayed and that the funds were spent on what aids/adaptations were required. It was reported that interim arrangements could be put in place whilst any adaptation work was being completed. Ian Crabtree would provide further information to the Committee on how the County Council worked with social landlords.

**Occupational therapy**

Over the last year, new posts had been established and recruited to, resulting in the occupational therapy workforce being doubled to 40 qualified Occupational Therapists. In addition, there had been a further campaign aiming to recruit nine newly qualified therapists, which would enhance the career pathway for staff wishing to work for the local authority. The Committee noted there had also been a major increase in posts of Social Care Support Officers working in this field.

**Reablement**

There was a lack of Occupational Therapists in the Reablement Service which was creating significant operational challenges. The county council's guidance stated that all individuals in reablement should be seen within 72 hours. Due to the current volume of referrals, and the speed of flow outstripping staffing capacity, initial visits were currently taking five to seven days to arrange across all localities.  .

**Community - Equipment**

It was reported that average waiting times had come down considerably for community occupational therapy assessments and that this trend continued to improve across the county. However, improvements still needed to be made. Referrals for community assessments were prioritised according to a decision

making framework which meant that those in greatest need and risk were seen much more quickly, and a copy of the framework was set out at Appendix 'A' to the report.

**Resolved:** That the Cabinet Committee note the mitigations in place for managing this Corporate Risk relating to Adult Services demand.

7.      **Withdrawal from the European Union: Implications for Lancashire County Council**

Kieran Curran, Policy Manager, presented a report updating the Cabinet Committee on some of the more significant issues facing the County Council in the wake of the United Kingdom's exit from the European Union. At the Cabinet Committee's meeting in September 2017, further information had been requested.

The Committee were updated on the following range of issues:

- Impact on regional economic growth
- Impact on inward migration
- Impact on workforce
- Impact on manufacturing
- Impact on the National Health Service
- Impact on European Union structural funding streams
- Representation of local government in the withdrawal negotiations and beyond
- Survey: a view from Leaders and Chief Executives
- Devolution and regulatory powers
- Impact on regulatory frameworks

It was reported that there was no significant progress in relation to regulatory issues and funding streams. A query was raised about the tendering process. The Committee noted that any future work around this would need to focus on the main regulatory impacts of procurement, Human Resources and waste.

The latest figures from the Purchase Managers Index showed that business activity in the North West was now growing faster than London and further information was provided to the Committee in relation to single market, free trade and no deal for the UKs Government regions.

In relation to the impact on workforce, it was reported that the Migration Advisory Committee had been commissioned by Government to consider the impacts of withdrawal on the United Kingdom labour market and aligning the United Kingdom's immigration system with a modern Industrial Strategy. This report was due to go out for consultation later this year.

it was reported that a recent poll of members by the North and Western Lancashire Chamber of Commerce revealed that, whilst a majority of

respondents had never employed EU migrant workers, there were some concerns that employment restrictions would harm productivity and significantly increase labour costs.

The Chair wished to take up the offer of officers providing specific information in relation to potential or likely impacts on a range of issues of interest to the county council (including workforce recruitment and the likely effects of withdrawal on key industries in Lancashire), so Members could take up these issues with H.M. Government.

A further report would be presented to the Committee in September/October, proving more information and clarity, in addition to including the findings of the Housing, Communities and Local Government Committee inquiry.  In addition, the risks/opportunities would be included in relation to the impact on regional economic growth.

**Resolved:**  That the Cabinet Committee note the report.

## 8.	Urgent Business

There were no items of Urgent Business.

## 9.	Date of Next Meeting

The next meeting of the Cabinet Committee on Performance Improvement would be held on Wednesday 27th June 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 Wednesday, 27 June 2018

**Report of the Head of Legal & Democratic Services**

| Electoral Division affected: |
| (All Divisions); |

**Corporate Risk and Opportunity Register Quarter 1**
(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 1) Corporate Risk and Opportunity Register for the Cabinet Committee to consider and comment upon.

**Recommendation**

The Cabinet Committee is asked to note the updated Corporate Risk and Opportunity Register as set out at Appendix 'A'.

---

**Background and Advice**

Following the corporate approach to reporting on risk and opportunity, the quarter 1 Risk and Opportunity register was recently reported to Corporate Management Team following a review of the register. The register has now been updated to reflect changing priorities and the budget. It has also been aligned to the Annual Governance Statement and it is the primary means of reporting progress for the main issues raised in the Annual Governance Statement. Following this Cabinet 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'.

As stated above, it was decided at Corporate Management Team to undertake a full review of the Risk and Opportunity Register, and to update it for the new financial year and new budget. Allowing for mitigating actions, the residual risk score for the following entries are 12 or above.

Lancashire
County
Council

| Risk Identification Number (RIN) | Risk Description |
|---|---|
| CR1 | Delivering the Operational Plan to ensure a strong and sustainable County Council<br>• Establishing a strong and visible leadership team<br>• Embed a focus on service delivery to secure a better service at a lower cost<br>• Develop a sustainable financial strategy<br>Allowing for mitigating actions the residual score is 16 |
| CR2 | Protect and safeguard children. Further mitigating actions added. Residual risk score remains unchanged. |
| CR3 | Complying with statutory requirements and duties relating to children looked after, children in need and children leaving care. Score remains unchanged. |
| CR4 | Recruit and retain experienced staff within Children's Services. Further mitigation actions added. Residual risk remains unchanged |
| CR5 | Managing our data well and producing effective management information. Allowing for mitigating actions the residual score is 12. |
| CR6 | Implement/maintain core systems that support the organisation, deliver transformational change and deliver efficiencies, cost reductions and produce effective management information that supports management decision making. Allowing for mitigating actions the residual score is 12. |
| CR7 | Delivering major projects/schemes on time and within budget. Allowing for mitigating actions the residual score is 12. |
| CR8 | Delivering a statutory service for children and young people with special educational needs and/or disabilities. Allowing for further mitigating actions the residual score remains at 16. |
| CR9 | Discharge of patients from hospital into their own home or enablement/short term care in a safe and timely manner. Allowing for mitigating actions residual score remains at 20. |
| CR10 | Adult social care provision is adequate and responsive to meet current and future demand. Allowing for further mitigating actions the residual score remains at 12 |
| CR11 | Supporting disadvantaged families to fulfil their potential (Troubled Families Programme. Allowing for further mitigating actions the residual score remains at 16 |
| CO1 | Delivering the Operational Plan to ensure a strong and sustainable County Council<br>• Delivering growth and prosperity for the whole of Lancashire<br>This opportunity has a score of 16 |
| CO2 | Apprenticeship Levy and Apprentice % in Public Sector. This has an opportunity score of 15 |
| CO3 | Develop and implement improved recruitment and retention practices to address increasing challenges. This has an opportunity score of 16. |

**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 and 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


Reason for inclusion in Part II, if appropriate

N/A

## Appendix A: Corporate Risk & Opportunity Register Q1 2018/19

| Risk Identification Number (RIN) | Description | Risk Type | Possible Risk Consequences | Current Controls | Risk Score | Mitigating Actions | Residual Score | Risk Owner | Direction of Travel |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| CR1 | **Delivering the Operational Plan to ensure a strong and sustainable County Council**<br><br>1. Establishing a strong and visible leadership team | Economic | • Inability to deliver a balanced budget from 2021/22<br><br>• Inability to attract high calibre candidates for the positions of chief Executive and Executive Director of Children's Services leading to less effective governance arrangements<br>• Lack of buy-in/engagement from staff<br>• Managers do not possess the leadership skills required, leading to demotivated staff and poor service delivery<br>• The organisation does not have the right people in the right jobs leading to service failure<br>• Staff do not know what is expected of them and they do not possess the skills to adequately do their job<br>• Unable to meet Terms and Conditions savings targets | • Priorities Board established comprising work stream leads and chaired by the Chief Executive<br>• Time table for each work stream has been developed and agreed<br>• Programme Office is managing the overall programme of activity<br><br>• Employment Committee have considered the process for the recruitment to the Corporate Management Team posts<br>• Revised recruitment process rolled out<br>• Draft Corporate dashboard presented to Corporate Management Team<br>• Corporate Management Team (CMT) development<br>    ○ Structured weekly meetings arranged<br>    ○ Individual 121s in place with Chief Executive<br>    ○ CMT members seeking external coach/mentor<br>• Draft People Strategy<br>• Draft values and behaviours<br>• Implementing a visibility campaign<br>    ○ Weekly core brief<br>    ○ Monthly 'back to the floor'<br>    ○ Regular web casts | 20 | • A further report to Employment Committee setting out next steps for recruitment<br>• Work stream timeline to be reconsidered with reference to the draft People Strategy and actions re-prioritised<br>• Roll out revised Personal Development Reviews<br>• Agree approach to talent planning<br>• Agree approach to succession planning<br>• Develop management development programme<br>• Undertake baseline staff survey<br>• Draft People Strategy to be shared with wider leadership group<br>• A refreshed intranet that establishes clear messages and a real sense of purpose | 16 | Overall Risk Owner is CMT however there is a lead officer for each work stream | This is a new risk that is being monitored by both the Priorities Board and CMT |

| | | | | | |
|---|---|---|---|---|---|
| 2. Embed a focus on service delivery to secure a better service at a lower cost | | • Services become unsustainable and we cannot fulfil our statutory duties<br>• Compounds ability to set balanced budget | • Service challenge information consulted upon and distributed<br>• Progress made with Local Government Association regarding external challenge | • Service challenge process has commenced in 10 service areas<br>• Mid-point review meetings being scheduled | |
| 3. Develop a sustainable financial strategy | | • Unable to deliver a balanced budget from 2021/22<br>• Insufficient reserves<br>• Services become unsustainable and we cannot fulfil our statutory duties | • CMT have agreed financial targets for Executive Directors based on financial analysis<br>• Targets based on median county council spend<br>• Early outcome from service challenges to be reported back to CMT | **Commercialisation**<br>• Commercialisation strategy being drafted<br>• New income streams being identified and current streams maximised<br>• Identification of new traded services<br>• Review of charging policy<br>• Spend analysis of current contracts to ascertain value for money<br><br>**Taxation & Grants**<br>• Seek to increase tax base<br>• Working in partnership with district councils to maximise collection rates<br>• Work with partners to secure grants for growth<br>• Consider opportunities for involvement in future business rate retention pilots<br>• Seek to influence new local government funding formula methodology<br>• Horizon and current scanning to identify additional sources of funding<br><br>**Staff Productivity**<br>• Undertake external benchmarking<br>• Maintain health & wellbeing of workforce<br>• Focus resources on delivering priorities<br><br>**Commissioning & Third Sector**<br>• Undertake analysis of current spend with the sector<br>• Develop and implement clear commissioning strategies<br>• Identify services that could be delivered by the sector at either a reduced or no cost | |

| CR2 | Protect and safeguard children | Social | Children are put at risk of harm. | <ul><li>MASH (Multi-Agency Safeguarding Hub) arrangements strengthened to ensure an appropriate multi-agency response where there are safeguarding concerns about a child.</li><li>Serious incident reporting in place with senior management line of sight to front-line practice.</li><li>Quarterly safeguarding meetings including the Chief Executive, Director of Children's Services (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.</li><li>Serious Case Review learning shared to improve safeguarding practice.</li><li>Effective audit framework in use. This has strengthened management grip and the quality assurance of practice.</li><li>External reviews of front-line practice completed including quarterly monitoring visits by Ofsted, the LGA peer review and six monthly DfE reviews.</li><li>Performance monitoring - action taken to address areas of underperformance via Data Quality and Performance Group.</li><li>Locality performance clinics chaired by CSC Heads of Service to address poor performance and reinforce good practice.</li><li>Monthly reports by the DCS to the Improvement Board on the quality of practice.</li><li>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.</li><li>12 Advanced Practitioner posts within the Audit Team provide advice and support to social workers & particularly ASYE's (Assessed & Supported Year in Employment) in respect of practice improvement.</li><li>Monthly compliance reporting of Strategy Discussions.</li></ul> | 25 | <ul><li>Caseloads are mostly in line with Improvement Board targets for "good and outstanding", but slight increase in Assessed and Supported Year in Employment (ASYE) caseloads (now rated Requires Improvement).</li><li>Multi Agency Sharing Hub redesign completed - 3 virtual locality teams now in place and consistent working practices established. Report going to Cabinet on the 14/04/2018 with proposal to make temporary posts permanent.</li><li>DCS "line of sight" to frontline practice to ensure adequate protection and safeguarding of children in place.</li><li>Number of inexperienced workers in post continues to decrease: ASYE - 26.8% -March 2018. (April 2017: over 50%).</li><li>The proportion of social workers with 1-3 years' experience remains rated outstanding, as staff retention improves, with 73.2% of qualified workers being non ASYEs.</li><li>Ofsted Monitoring Visit in Feb 2018 noted improvements in the MASH - all contacts reviewed by a qualified Social Worker, appropriate application of thresholds and good management oversight.</li><li>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 Adolescent Support Unit), and South Avenue (the crisis unit) is not yet complete.</li><li>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. This is also reflected in audit findings.</li></ul> | 16 | Director of Children's Services | The risk is being managed |

| | | | | Social Work Academy established providing robust induction and continuous professional development for social workers.<br>• Heat maps used to monitor performance and report on Annex A requirements in preparation for inspection by Ofsted. | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| CR3 | Complying with statutory requirements and duties relating to children looked after, children in need and children leaving care. | Legal/ Political | Local Authority is legally and possibly financially liable, judicial review. Further OFSTED intervention. | • Corporate legal oversight.<br>• Quarterly Safeguarding Report.<br>• Serious incident reporting to ensure appropriate management oversight.<br>• Serious Case Review learning shared.<br>• Peer Review and Challenge.<br>• Stronger management oversight in Districts.<br>• Advanced Practitioners in post.<br>• Case file audits check compliance and quality of practice.<br>• Multi-agency inspections. Sector led Peer Review.<br>• Performance monitoring - action taken to address areas of underperformance. | 25 | • 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).<br>• 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.<br>• 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.<br><br>• Leaving care performance indicators show improvement. | 16 | Director of Children's Services | The risk is being managed |
| CR4 | Recruit and retain experienced staff within Children's Services | Organisatio nal | Inability to deliver effective services. High caseloads. Lack of management oversight. Increased staff turnover. Increased agency spend. | • Additional funding envelope.<br>• Enhanced recruitment including children's services recruitment evenings and use of social media.<br>• Agency social work team is currently providing additional capacity in the North Locality.<br>• Weekly monitoring of SW workforce position and social work caseloads.<br>• Increased focus on retention and conditions.<br>• Additional temporary capacity provided for MASH.<br>• Workforce Strategy Board established to ensure strong focus on recruitment and retention and workforce development.<br>Leadership Academy in development with a particular focus on skilling up first line managers to strengthen leadership of practice. | 25 | • Number of experienced workers in post continues to increase - there has been a reduction in the proportion of newly qualified (ASYE) Social Workers:<br>  ○ April 18 – 26.8%<br><br>• The proportion of social workers with 1-3 years' experience has increased, as staff retention improves, and experienced workers now account for 73.2% of all qualified social workers. | 16 | Director of Children's Services | The risk is being managed |

| CR5 | Managing our data well and producing effective management information | Organisational | Ineffective collection, collation and input of data

Failure to improve quality of data in council systems including those that have already been implemented and those that are being implemented.

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 demand management e.g. around demographics and ageing population profile

Ineffective reporting arrangements.

Statutory returns will be compromised, so incorrect performance will be reported nationally, with potential for negative financial consequences

OFSTED/CQC/LGA and other external organisations will be using inaccurate information to judge performance.

Service planning and management will be severely compromised.

Potential for incorrect payment of providers, staff etc | • Information Management Strategy.
• Accuracy Steering Group chaired by Director of Adult Services oversees a programme of work to improve data quality within systems used by Adult Services
• Data Quality and Performance Group oversees quality of information in systems for children's services
• Regular provision of management information to staff at all levels across adults and children's services helps to embed ownership of data and improve recording.
• Use of 'exception reports' which proactively highlights data anomalies and inconsistencies.
• Development of a Corporate Performance Dashboard is facilitating a council-wide view of all services, which will improve the quality of reported data as anomalies will be highlighted. | 16 | • 'Project Accuracy' for Adults Services focussing on procedures and data quality is now underway.

• Significant inroads made in improving data accuracy in children's services; this work is ongoing.

• Clear governance structure in place to ensure a continued focus on data quality/accuracy:
    • 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.

Governance Boards established for Early help Module, Education, Health and care Plans module and the Education Management System.

• Draft Digital Strategy – information architecture for the organisation. Clarify roles and responsibilities around data management and storage. Develop a corporate data warehouse.

• Landscape review of business intelligence is currently being undertaken which will highlight opportunities for development and improvement of reporting systems. | 12 | CMT | Level |
|---|---|---|---|---|---|---|---|---|

| CR6 | Implement/maintain core systems that support the organisation, deliver transformational change and deliver efficiencies, cost reductions and produce effective management information that supports management decision making. | Organisational/Reputational | Front line service delivery impeded because new/old systems are not fit for purpose<br><br>Back office unable to function<br><br>Failure to maximise use of new technology, including mobile devices to deliver savings and to operate in a more effective way, including integration with partners.<br><br>New systems are implemented without full transformational and operational processes being defined and tested that impact on service delivery.<br><br>Lack of management buy-in from service areas to drive forward change and ensure services work to new practices in a consistent way so that system implementation is as smooth as possible and the council maximises the benefit from its investment in new technology.<br><br>Service planning and management will be severely compromised.<br><br>Reliance on uninterrupted operation of T101 cannot be over emphasised. Power up following an uncontrolled failure takes 5 times longer than after a controlled shutdown. Impact on service delivery | • Significant number of core systems in place and associated integration technology.<br>• Greater investment in mobile devices to support the property strategy and new ways of working - Social Care/Highways etc.<br>• Monitoring and performance information available.<br>• 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.<br>• Digital Health Board representation and at operational group level.<br>• Integration tools with health developed and others under development.<br>• 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.<br>• New web tools available through the new customer access system being rolled out and once proof of concept tested will be rolled out in a targeted way. | 16 | • 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.<br>• Post system implementation groups in place to identify areas for development/opportunity and then be linked to system roadmaps and transformation change.<br>• Highway Asset Management System - Business Analyst to be assigned to support solution design<br>• Draft Digital strategy<br>• Corporate wide approach implemented for all system changes involving services, L&D, BI etc. on wider impacts and how system changes are managed into the business.<br>• Sign off arrangements for roadmaps, including prioritisation of work, are in place.<br>• Implementations are: Early Help Module, Education, Health and Care Plans Module, On-Line School Admissions, Education Management system. Information management strategy and approached being rolled out with all new systems.<br>• Small transformation team available to support system changes and implementations supplemented by relevant service areas to encourage ownership, super users etc.<br>• Data Quality processes in place and exception reporting produced but local systems are dependent upon processes within individual services. Local Information Systems still exist but are being replaced over time with new core systems and other corporate solutions, i.e new Highways solution has replaced 23 existing systems.<br>• Corporate performance information being developed as part of systems implementations though long term reporting tool needs developing and implementing. JSNA and other needs assessments.<br>• New ICT technology rolled out to staff to support mobile working and integrated working. Mandatory training provided before devices issued and monitoring reports issued on devices used/not used and extent of functionality that is | 12 | Director of Programmes & Project Management | The risk is being managed |
|-----|-----|-----|-----|-----|-----|-----|-----|-----|

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | being utilised.  Discussed with various management teams on a ongoing basis. <br><br>• Weekly provision of information to operational managers for LCS.  Monthly Performance Books or dashboards provided to Start Well Management Team and Adults Leadership Team. <br><br>• T101 data centre has been upgraded t address key risks and improve reliability. Ongoing assessment of remaining and emerging risks carried out - may require further investment subject to the outcome of the review. | | | |
| CR7 | Delivering major projects/schemes on time and within budget | Economic/ Political/So cial/reputat ional | Scheme viability in doubt due to speculative estimating and project management <br><br>Pressure on capital programme | • Capital Board <br>• Capital Programme reports to Cabinet <br>• Active project and programme management | 16 | • Initial review work undertaken of a sample of major capital schemes to improve the estimating and testing of current and future scheme costs. These include: <br>  o Reporting of cost ranges for new schemes <br>  o Routine updating of cost estimates <br>  o Inclusion of contingency at industry standards and benchmarks <br><br>• Governance arrangements improved to provide structured challenge. Capital Board now has oversight of estimates as well as capital budgets so it can manage both through the life cycle of the project | 12 | Exec Director Growth, Transport and communi ty services | Level |
| CR8 | Delivering a statutory service for children and young people with special educational needs and/or disabilities. | Organisatio nal/social | Not providing adequate service which places the LA at risk of appeals to SENDIST Tribunal, increased reputational risk via complaints corporately and to LGO. <br><br>Unmet need will result in CYP failing to meet their potential and therefore not be supported as positively as possible into adulthood. <br><br>The failure to recruit and retain staff. <br><br>Lack of confidence in council services. <br><br>The lack of accessibility and quality of information on the local offer | • Following the SEND Local Area Inspection a WSA has been submitted identify improvements to the service offered by LCC and the Clinical Commissioning Groups. The following areas were identified as requiring action: <br>  o The lack of strategic leadership and vision across the partnership <br>  o Leaders' inaccurate understanding of the local area <br>  o Weak joint commissioning arrangements that are not well developed or evaluated <br>  o The failure to engage effectively with parents and carers <br>  o The confusing, complicated and arbitrary systems and processes of identification <br>  o The endemic weaknesses in the quality of EHC plans <br>  o The absence of effective diagnostic pathways for ASD across the local area, and no | 25 | • Implementation of the early help (IT) module. <br>• Recruitment of qualified staff funded by the SEND reform grant. <br>• Commissioning arrangements with Health being reviewed. <br>• The actions to implement the Written Statement of Action. <br>• Strategic reporting and monitoring of improvement plan at Cabinet and CMT level. <br>• Active leadership of Health and Wellbeing Partnership is leading SEND improvement plan. | 16 | Director of Children's Services | The Local Area SEND Inspection identified serious weakness in delivery of the SEND Reforms. |

| | | | | diagnostic pathway in the north of the area |
| | | | | o No effective strategy to improve the outcomes of children and young people who have SEN and/or disabilities |
| | | | | o Poor transition arrangements in 0–25 healthcare services |
| | | | | o The disconcerting proportion of children and young people who have an EHC plan or statement of SEN who are permanently excluded from school |
| | | | | o The inequalities in provision based on location |
| | | | | • |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| CR9 | Discharge of patients from hospital into their own home or enablement/short term care in a safe and timely manner | 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. Risk that pressure to deliver targets results in expedient decisions which sees individuals discharged but not with the most suitable care package and thus recovery and independence not promoted and risk of readmission Inability to agree or deliver challenging Delayed Transfer of Care (DTOC) national targets. Inability to manage short term | • Regular data set produced and analysed by business information. <br><br> • Cluster boards for P2I for reablement and acute joined to ensure good communications. <br><br> • Focus at Better Care Funds meetings. iBCF spending plan, which is intended to have positive impact on DTOC, agreed by HWBB in August 2017. | 20 | • Commissioned home care framework. <br><br> • Increased capacity of reablement service including development of options to manage short term pressures. <br> • Weekly "winter" ops and commissioning meeting. Implementing of eight High Impact changes using iBCF monies to facilitate. <br> • Roll out of passport to independence in an acute setting. <br> • Development of dashboard to provide better MI within LCC and staff appointed to tracka and grip cases in each of acute settings <br> • Discussions to ensure that activity related to DTOC Dashboards is joined up across the STP. <br> • DTOC Board established. <br> • Programme Office defined future governance and programme management arrangements for BCF/iBCF/DTOC in LCC. <br> • Continued scrutiny by elected members. Mitigating actions above will not enable DTOC targets to be met within agreed timescales. | 20 | Exec Director of Adult, Health and Wellbeing Services | Level |

| ID | Risk | Category | Description | Controls | Score | Mitigating Actions | Score | Owner | Level |
|---|---|---|---|---|---|---|---|---|---|
| | | | pressure for reablement services. | | | | | | |
| CR10 | Adult social care provision is adequate and responsive to meet current and future demand | Organisational/social/economic | People's' needs are not met due to non-availability of care provision. The market is not responsive enough to respond to demand. People living in rural areas or with very complex needs are difficult to find appropriate support for.<br><br>Delays to Hospital discharge, blocking moving on from enablement or Short Term Care, people remain at home without support.<br><br>People with complex health and social care needs cannot be supported appropriately. | • The Homecare Framework has commenced and care provision is tendered in 'lots' covering all areas of the County. Care is sourced and awarded on a rotational basis across all providers for that area to guarantee adequate volumes of work and create sustainability.<br>• Work needs to be undertaken around the residential care market.<br><br>• Through the work of P2I, people are able to optimise their independence, access the right service at the right time, and reduce dependency on formal support as appropriate. This in turn will support the demand on the market. | 15 | • Weekly Homecare mobilisation operational meetings to review progress/raise challenges/agree actions. Board oversight.<br><br>• Weekly domiciliary care delays circulated for information across ops/Commissioning/Contracts | 12 | Director of Adult Services | Level |
| CR11 | Supporting disadvantaged families to fulfil their potential (Troubled Families Programme) | Organisational/economic /social | Failure to achieve Payment by Results targets due to specific requirements of the programme.<br><br>Failure to accrue maximum income from the programme for the authority.<br><br>Failure to meet savings target attributed to the service for current financial year.<br><br>Possible reputational risk as a result of missing a national target.<br><br>Possible reputational risk if progress not made with the TFU Maturity Model and | • Robust tracking processes in place with view to maximising payment by result claim opportunities.<br>• Ongoing data matching to identify new eligible families<br>• The target in the MTFS for TFU Payment by Results (PBR) claims for 2017/18 was for 1,500 PBR claims to be made and this target has been exceeded. The position as at 22/03/2018 is that 22% of the PBR claims available have been claimed with just over 2 years of the programme remaining.<br>• The current positive trajectory is anticipated to continue to improve with the team ensuring that all available data and information systems are fully utilised to maximise PBR claim opportunities | 20 | • Development of reporting processes to ensure monthly progress checks against targets<br><br>• Redesigning of outcomes plan to set more achievable/realistic targets<br>• Review of Governance Arrangements commissioned.<br>• Districts supported to identify families where potential claims can be made<br>• Workforce development complete for shared assessment. Lead Professional and Risk Sensible approach.<br>• Revised assessment CAF documentation, Quality Assurance and processes to assist in meeting requirements.<br>• TFU Maturity Model self-assessment completed and developed action plan to support delivery and improvement. | 16 | Director of Public Health | Level |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | service transformation with partners. Risk of additional scrutiny of programme | | | | | |
| **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 | **Delivering the Operational Plan to ensure a strong and sustainable County Council** Delivering growth and prosperity for the whole of Lancashire | Economic/ Political/or ganisationa l | Self-sustaining organisation Stronger and growing economic base Ability to deliver affordable high quality services with outcomes relevant to the needs of our residents, communities and businesses Improved productivity and earning power of all residents Continued successful delivery of the LEP's current strategic economic growth programmes. Successfully securing 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. | • Lancashire Enterprise Partnership (LEP) 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 ring-fenced 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 the Council, other local authorities, Higher Education Institutes' and Colleges. | 12 | • 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 • 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. • Work with local authority partners and the LEP to agree:    o a Local Industrial Strategy (aim to be an early adopter)    o a new Lancashire Prospectus    o an approach to future growth initiatives and priorities the London School of Economics have been secured as a critical friend • 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 | 16 | CMT | Level |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | early as possible. We are now looking to a further bid which could take the project to 2021.<br><br>• Whilst the opportunity to secure EU funds (underwritten by HMG) looks more positive in the medium term, we are also preparing in the event that EU Structural funds are replaced with completive 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. | | | |
| CO2 | Apprenticeship Levy and Apprentice % in Public Sector | Political<br><br>Economic<br><br>Social<br><br>Reputational<br><br>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 | • 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.<br>• 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.<br>• 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.<br>• 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 |
| CO3 | 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 | • 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 June 2018

**Report of the Chief Executive**

| Part I |
| --- |

| Electoral Division affected: All |
| --- |

**Quarterly Corporate Performance Monitoring Report – Quarter 4 2017/18**
(Appendices 'A', 'B' and 'C' refer)

Contact for further information:
Michael Walder, 01772 533637, Business Intelligence,
Michael.Walder@lancashire.gov.uk

---

**Executive Summary**

This Corporate Performance Monitoring Report provides an overview of performance activity across the Council for 2017/18.

Highlights:
- Retention of staff in children's social care has improved, including both newly qualified staff and experienced staff choosing to remain with Lancashire.
- There are fewer first time entrants to the youth justice system and Lancashire remains lower than all comparator groups.
- Absence levels across all educational settings remains low and Lancashire is in the top quartile nationally.
- Significant progress has been made in reducing the number of delayed discharges from hospital attributable to adult social care.
- The use of reablement for older adults has continued to increase, with both improved take up and effectiveness.
- The proportion of people having health checks continues to increase and is better than the national picture.

However,
- It is taking longer to repair street lights and highways defects.
- Admissions to residential care, whilst improving, are still higher than comparator groups.
- A proportion of children's social care assessments are not completed within recommended timescales.

A Children's Services Ofsted Special Educational Needs and Disabilities inspection update has been attached at Appendix 'A' and this will be complemented by a verbal update at the meeting.

Lancashire
County
Council

**Recommendation**

The Cabinet Committee is asked to comment on the reported performance for quarter 4 and the Ofsted Special Educational Needs and Disabilities inspection update information provided.

**Performance Summary**
**Education and Children's Services**

*Key for performance:*

| On track/good | Slightly below desired level | Requires improvement |
|---|---|---|

| Performance Measure | Good is High or Low | 2016/17 | 2017/18 | England Average |
|---|---|---|---|---|
| **Children's Social Care** | | | | |
| Number of contacts during the year | - | 31,873 | 33,353 | - |
| Percentage of contacts that led to a referral during the year | H | 32.0% | 32.2% | - |
| Number and rate of referrals during the year | L | 9,907/403.9 | 10,337/419.4 | 548.2 |
| Number and percentage of referrals that are re-referrals during the year | L | 1,890/19.0% | 1,937/19.0% | 21.9% |
| Percentage of assessments completed during the year which took over 45 days | L | 26.9% | 25.0% | 17.1% |
| Number and rate of children with a Children in Need Plan (snapshot as at 31 March) | L | 1,825/74.3 | 1,660/67.2 | - |
| Number and rate of children with a child protection plan (snapshot as at 31 March) | L | 1,412/57.5 | 1,243/50.4 | 43.3 |
| Percentage of children with a repeat child protection plan over last 12 months (snapshot as at 31 March) | L | 5.5% | 6.2% | - |
| Rate of Children Looked After (CLA) number/per 10,000 (snapshot as at 31 March) | L | 1,842/75.0 | 1,968/79.7 | 62.0 |
| Percentage of CLA in 3 or more placement over last 12 months | L | 7.7% | 7.9% | 10% |
| Percentage of staff on Assessed and Supported Year in Employment (ASYE) (snapshot as at 31 March) | L | 44.9% | 27.2% | - |
| Percentage of staff who are experienced social workers (3+ years) (snapshot as at 31 March) | H | New measure | 26.0% | - |
| Average caseload per social worker (snapshot as at 31 March) | L | New measure | 22.0 | - |

*Note: The figures for 2017/18 are not the final, published figures and should be treated as estimates.*

*Children's Social Care*

There has been a 5% increase in contacts received with a corresponding increase in referrals. Around a third of all contacts are from the police, and closer working between the authority and the police will improve the level of appropriate contacts being made. The rate of re-referrals has remained stable at 19%.

Twenty five percent of assessments completed during the year took over 45 days to complete which is higher than all comparator averages.

The number of children looked after has continued to increase which is in line with the position across the region, however the number of children in need and the number of children with child protection plans are both reducing, and the latest figures show that this trend is continuing.

The proportion of newly qualified social workers (Assessed and Supported Year in Employment) within Lancashire has continued to reduce which indicates that retention of newly qualified staff is improving with people staying with us as they gain experience.  This reflects the support that is now provided to Assessed and Supported Year in Employment Social Workers, by Advanced Practitioners and the Social Work Academy.  The proportion of social workers with over three years' experience has improved indicating that experienced staff are also being retained.  The average caseload for all social workers remains comparatively good.

| Performance Measure | Good is High or Low | 2016/17 | 2017/18 | England Average |
|---|---|---|---|---|
| **Adoptions** | | | | |
| Average time between a child entering care and moving in with their adoptive family, for children who have been adopted (days) | L | 489 | 426 | 520 (2014-17) |
| 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 | 236 | 156 | 220 (2014-17) |

*Adoptions*

The average time between a child entering care and moving in with their adoptive family has improved and 67% of children waited less than 14 months between entering care and moving in with their adoptive family during quarter four.  There were 87 adoptions in 2017/18 with no adoption breakdowns.  At the end of March 2018, 97 children were awaiting adoption.  21.1% of the children coming out of care during quarter four were adopted.

| Performance Measure | Good is High or Low | Previous Period | Latest Available | England Average |
|---|---|---|---|---|
| Rate per 100,000 of first time entrants to youth justice system | L | 204 (Jul 16 - Jun 17) | 188 (Oct 16 - Sept 17) | 304 |
| % of YP reoffending | L | 43.0% (Oct 15 - Dec 15) | 43.1% (Jan 16 - Mar 16) | 42.1% |
| Rolling average Special Educational Needs statements transferred to Education and Health Care plan | H | 293 (Sept 14 - Jan 18) | 339 (Sept 14 - April 18) | - |

*Youth Offending Team*

There were fewer first time entrants to the youth justice system and Lancashire remains lower than the national (304.0), regional (262.0) and statistical neighbour rates (305.0).  Published data from the Ministry of Justice suggests that the percentage of Lancashire youth re-offending was slightly higher than the national (42.1%) but lower than the regional (44.6%) proportions.

*Special Educational Needs & Disabilities*

There were only 10 pupils remaining with a Special Educational Need statement in Lancashire towards the end of March 2018.  Each of these 10 cases have a draft

Education, Health and Care plan which was issued by the 31 March deadline but the parents/carers had requested not to finalise the plans. The vast majority of Special Education Needs statements have now been transferred to Education Health and Care Plans. As a result, the number of Education Health and Care Plans in place (6,391) had increased at the end of March when compared to January 2018 (5,556).

| Performance Measure | Good is High or Low | Previous Period | Latest Available | England Average |
|---|---|---|---|---|
| **School Improvement** | | | | |
| % Absence levels in primary, secondary, and special schools | L | 4.3% (2015/16) | 4.3% (2016/17) | 4.7% (2016/17) |
| % Education settings rated Good/Outstanding | H | 91.1% (March 17) | 90.0% (March 18) | 89% |

*School Improvement*

Finalised data published by the Department for Education suggests that during 2016/17, the proportion of overall absence from school (4.3%) had remained stable when compared to the previous year (4.3%) and was lower than the national (4.7%), regional (4.7%), and statistical neighbour (4.7%) percentages. Lancashire remains in the upper quartile national for this indicator. The level of persistent absenteeism in Lancashire schools (9.6%), under the new definition which includes pupils having an overall absence rate of 10% or above, was also lower than the national (10.8%), regional (11.1%) and the statistical neighbour (10.8%) proportions. Attendance at primary, secondary and special school level suggests that the Lancashire performance is better than that of comparators.

**Growth, Environment and Community Services**

| Performance Measure | Good is High or Low | 2016/17 | 2017/18 |
|---|---|---|---|
| **Street lighting and highways** | | | |
| Average number of working days to repair a LCC street lighting fault | L | 4.6 | 7 |
| Highway Safety Carriageway Defects repaired within 20 working days. | H | 97% | 64% |
| **Waste management** | | | |
| % of recycling, re-use and composting | H | 46% | 43% 17/18 forecast |
| % diversion of municipal waste away from landfill (including recovery) | H | 49% | 51% 17/18 forecast |
| **Libraries and museums** | | | |
| Number of visits to libraries each quarter | H | 4,007,475 | 3,573,465 |
| Number of visits to museums each month | H | 256,318 | 244,365 |
| Number of E-Book downloads each month | H | 162,384 | 212,925 |
| Number of library real issues each month | H | 4,170,173 | 3,622,043 |
| **Planning applications** | | | |
| % of minerals and waste planning applications determined within 13 weeks | H | 50% (Q4) | 67% |
| % of Regulation 3 planning applications determined within 8 weeks | H | 56% (Q4) | 78% |

| Fault Category | 2016/17 | 2017/18 |
|---|---|---|
| All Faults | 4.6 days | 7.0 days |
| Traffic Management Faults | 10.8 days | 13.6 days |
| Non-Traffic Management Faults | 2.4 days | 6.0 days |

*Street lighting and highways*

The directorate has a mixed bag of performance returns for this year. The drop in performance around carriageway defects and street lighting is due, in the main, to a mixture of improved reporting processes that are now capturing our position more accurately and, in the case of highway defects, the impact of a long, cold, wet winter.

*Waste management*

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 and museums*

Nationally, the volume of loans from libraries is decreasing.  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 offers which feature in the library strategy.

*Planning*

9 County Matter minerals and waste (i.e. major) applications were determined within quarter 4, of which 6 (67%) received a decision within the 13 week decision period.  The other 3 applications were determined within an agreed time extension.
3 applications for Lancashire County Council's own Regulation 3 development were determined in quarter 4.  2 (67%) 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).

## Adult Services and Public Health

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

| Performance Indicator | Good is: H/L | 2016/17 | 2017/18 | England Average |
|---|---|---|---|---|
| **Adult social care - personalisation** | | | | |
| Adults aged over 18 receiving self-directed support (personal budgets) (ASCOF) snapshot as at 31 March | H | 77.8% | 77.4% | 89.4% |
| Adults receiving direct payments (ASCOF) snapshot as at 31 March | H | 23.9% | 25.1% | 28.3% |
| **Support for carers** | | | | |
| Carers receiving direct payments for support direct to carer (ASCOF) during the year | H | 98.3% | 98.6% | 74.3% |
| **Support for people with learning disabilities** | | | | |
| Proportion of adults with learning disabilities who live in their own home or with their family (ASCOF) during the year | H | 85.5% | 85.3% | 76.2% |
| **Support for people to remain independent** | | | | |
| Permanent admissions to residential and nursing care homes per 100,000 pop aged 18-64 (ASCOF) during the year | L | 17 | 19 | 12.8 |
| Permanent admissions to residential and nursing care homes per 100,000 pop aged 65+ (ASCOF) during the year | L | 742.3 | 728.3 | 610.7 |
| Number of permanent admissions to residential and nursing care homes pop aged 65+ during the year | L | 1,795 | 1,761 | - |
| Number of reablement referrals during the year | H | 3,642 | 7,392 | - |
| Number of completed reablement support plans during the year | H | 3,207 | 6,657 | - |
| Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services (ASCOF) from 1 October to 31 December each year | H | 83.8% | 88.1% | 82.0% |
| **Timeliness of assessment and support** | | | | |
| Assessments completed within 7 days during the year | H | 82.6% | 85.1% | - |
| Assessments completed within 28 days during the year | H | 94.6% | 95.6% | - |
| Delayed Transfers of care from hospital – total delayed days due to social care in the month of March each year | L | 2,167 | 1,232 | - |
| **Quality of services** | | | | |
| Care Quality Commission – Care Home ratings good/outstanding snapshot as at 31 March | H | 70.0% | 75.9% | 79.2% |
| CQC Community Care Service ratings snapshot as at 31 March | H | 80.1% | 91.0% | 84.8% |

*Note: The figures for 2017/18 are not the final, published figures and should be treated as estimates.*

The proportion of people with personal budgets is below the national average, but has improved in recent years and is expected to improve further through targeted reviews. The proportion of people receiving direct payments is improving steadily.

The number of people admitted to residential care for both adults and older people has reduced in line with the Passport to Independence work, though both performance indicators are still significantly higher than the national average. Admissions to residential care for older people have reduced to 1761 and so have achieved the Q4 Better Care Fund target of 1795.

Greater numbers of people are being offered reablement in accordance with the aims of the Passport to Independence programme. The number of reablement referrals doubled in 2017/18 when compared to 2016/17 with the number of completed

reablement support plans also more than doubling, demonstrating that the referrals were appropriate.

Almost 96% of social work assessments were completed within 4 weeks. However, there are around 1700 people currently waiting for a social work assessment and plans are being made to reduce this backlog.

The monthly total for delayed transfer of care from hospital (delayed days) continues to improve and when March 2017 is compared to March 2018 there is a 43% decrease.

The Lancashire figure of 75.9% of care home ratings being good or outstanding is now within the third quartile of North West authorities (4th quartile is best) the second quartile of all English authorities when ranked by percentage of overall rating of good or outstanding. Standards are rising nationally and Lancashire has exceeded the above-average threshold for the North West (73.9%), but remains short of the above-average threshold for England (79.2%).

Of the 419 care homes inspected, 17 are in-house residential services for older people and 82.4% (14) of these are rated good or outstanding 8 are in-house disability short break services and 87.5% (7) of these are rated good or outstanding.

The Lancashire figure of 91.0% of community care services rated good or outstanding continues to improve and performance is significantly above the national average of 84.8%.

Of the total 199 community care services inspected, 9 services are in-house disability services (8 domiciliary services and 1 shared lives service) and all of these were rated good or outstanding.

| Performance Measure | Good is High or Low | 2016/17 | 2017/18 | England Average |
|---|---|---|---|---|
| **Public Health** | | | | |
| The proportion of babies (at 12 months age)  immunised with the DTaP/IPV/Hib vaccine – latest rolling year up to 31 December 2017 | H | 89.4% | 85.1% | 93.1% |
| **Health Checks** | | | | |
| Number of NHS Health Checks offered to eligible population | H | 75,892 | 96,920 | - |
| Number of NHS Health Checks completed | H | 47,107 | 51,486 | - |
| % completed of NHS Health Checks offered (Cumulative) | H | 62.1% | 53.1% | 47.9% |
| **Substance Misuse** | | | | |
| Percentage of women who smoke at time of delivery /prevalence of smoking – latest rolling year up to 31 December 2017 | L | 14.7% | 13.8% | 10.7% |
| People self-reporting to have successfully quit smoking as a percentage of all those setting a quit date. | H | 47.4% | 51.0% | 50.7% |
| **Troubled Families Unit** | | | | |
| | Good is High or Low | 2016/17 | 17/18 year to date | England Average |
| - Number of families attached to the programme | H | 4,305 (Q4, 2016/17) | 8,647 | n/a |
| - Payment by results claims (submitted to the DCLG) | H | 841 (2017) | 2,097 (rolling figure) | n/a |

*Health Checks*

This is a 5 year programme (2013/14 – 2017/18).  As of March 2018, 97.6% of the eligible population (aged 40 – 74) have been offered a Health Check (the target is for all eligible people 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 (current uptake across the programme is 57.7%).

*Troubled Families Unit*

There have been strong efforts to recover performance which was lagging behind target at December 2017 for 'payment by results' claims.  These claims are made when there is evidence of significant and sustained improvement in a family's circumstances and so it is pleasing to report that at the end of 17/18, the target was exceeded with 2,097 payment by results claims achieved.

Payment by results quarterly targets to 31 March 2019 have been established allowing an action plan to be devised which will focus efforts throughout the year and ensure that the positive momentum is maintained.  The aim is to achieve as close as possible to 2,500 payment by results claims by 30 June 2018.

**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 - Verbal Update**

**Post Ofsted Inspection Update**

In February, we had our final monitoring inspection of children's services by Ofsted. On the 4 June 2018, we were notified of the inspection of Children's Services in Lancashire, which we have been anticipating. The inspection is to evaluate the effectiveness of services for children in need of help and protection, children looked after and care leavers. It also includes evaluating the effectiveness of our services and arrangements to help these children, including adoption and fostering. The Inspection Team will be working in Lancashire for a 4 week period, until 29 June 2018. The Cabinet Committee on Performance Improvement will be provided with an update on progress and the key emerging issues at the meeting on 27 June.

**Special Educational Needs and Disability Inspection Update**

The main findings and areas for development following the OFSTED/Care Quality Commission inspection of Special Educational Needs and Disabilities services in November 2017 have been accepted and partnership action has been taken to respond to the twelve significant concerns that were identified. A formal Written Statement of Action was submitted to Ofsted on 17 April, setting out the collective response and agreed actions to secure long term change. A governance structure for the delivery of Special Educational Needs and Disabilities services in the area has been agreed; with accountability to the Health and Wellbeing Board through an Executive Director for Lancashire County Council and Accountable Officer on behalf of the six Clinical Commissioning Groups.

A Special Educational Needs and Disabilities Partnership Board is in place, with five thematic working groups established to implement the Written Statement of Action through more detailed action plans. The Board includes representation from parents/carers, young people and professionals from health, education and Special Educational Needs and Disabilities services and action to ensure wider engagement is also taking place. Meetings have been held with education leaders from all sectors; an open feedback survey and an instant feedback option as part of the Local Offer have been provided, in addition to the Annual Survey for parents/carers/young people which has received over a thousand responses to date.

The Education, Health and Care Plan conversions have all been completed, and a detailed audit of plans for vulnerable groups including Children Looked After, Children in Need and Child Protection cases undertaken. The outcomes from the audit are being used to ensure compliance, improve individual case planning and inform staff development requirements.

Draft feedback from the first monitoring visit states that: 'significant progress has been made in establishing new frameworks and agreements between the relevant Clinical Commissioning Groups and the two unitary Clinical Commissioning Groups have been included in all discussions. The profile of Special Educational Needs and Disabilities work across the county council has been significantly raised. Commitment from

**Lancashire**
County
Council

partners is recognised in the significant level of resources both have committed to the improvement process.

The published Written Statement of Action and Ofsted/Care Quality Commission letter of response are included as Appendix B and C respectively.

# Lancashire Special Educational Needs and Disability

# Written Statement of Action

# (May 2018)



- Senior Leadership Owners: Angie Ridgewell (LCC Chief Executive) & Mark Youlton (CCG Chief Officer with responsibility for SEND)
- Senior Officer Support Owners: Amanda Hatton (Director of Children's Services) / John Readman (Executive Director for Children's Services) & Hilary Fordham (Chief Operating Officer MBCCG)

**Contents**

**Introduction**

The Lancashire local area is committed to a process of continuous improvement as a partnership of statutory agencies, parents and community groups. We are committed to ensuring that we maximise opportunities for children and young people with special educational needs and/or disabilities (SEND) enabling them to benefit from high quality services which are developed in partnership.

This Written Statement of Action (WSoA) has been produced as a response to Lancashire's local area SEND inspection undertaken by Ofsted and Care Quality Commission (CQC) between the 13th and 17th of November 2017. Lancashire accepts the findings of the inspection report and is committed to ensuring the areas of concern are addressed to regain the trust of the local population. It is a response from Lancashire County Council (LCC), Morecambe Bay CCG, Greater Preston CCG, Chorley & South Ribble CCG, West Lancashire CCG, East Lancashire CCG and Fylde & Wyre CCG. We recognise that there are cross boundary flows between neighbouring CCGs and therefore have included Blackburn CCG and Blackpool CCG within the governance structure to ensure any resulting issues are addressed.

The WSoA addresses the 12 areas of significant concern identified during the inspection. It concentrates on these 12 areas and clearly defines the high level actions the partners need to address. There are additional development activities within the local area that are not referenced here, but which will ensure a golden thread throughout services for children and young people with SEND.

The WSoA sets out plans to address the inspection's 12 areas of significant concern:

1. The lack of strategic leadership and vision across the partnership.
2. Leaders' inaccurate understanding of the local area.
3. Weak joint commissioning arrangements that are not well developed or evaluated.
4. The failure to engage effectively with parents and carers.
5. The confusing, complicated and arbitrary systems and processes of identification.
6. The endemic weakness in the quality of EHC plans.
7. The absence of effective diagnostic pathways for ASD across the local area, and no diagnostic pathway in the north of the area.
8. No effective strategy to improve the outcomes of children and young people who have SEND and / or disabilities.
9. Poor transition arrangements in 0-25 healthcare services.
10. The disconcerting number of children and young people who have an EHC plan or statement of SEN who are permanently excluded from school.
11. The inequalities in provision based on location.
12. The lack of accessibility and quality of information on the local offer.

As a partnership, we want to create a shared vision and clear strategy for the development and implementation of SEND services in Lancashire, in doing so our aim is to improve the equality of access to provision, work with children, and young people and their parents /carers along with other stakeholders to develop systems and processes which impact on the outcomes and ensure children and young people's needs are met through effective delivery of EHC plans. The overall aim is to improve outcomes for children and young people with SEND.

This WSoA describes the high-level actions that will be taken to address the significant areas of concerns about SEND services in Lancashire. These actions have been grouped into 5 themes which will be taken forward by a dedicated working group:

- ➢ Strategy
- ➢ Commissioning and Access to Provision
- ➢ Engagement
- ➢ Identifying and Meeting Need
- ➢ Improving Outcomes

Membership of each working group will be agreed and published. Each of the working groups has a lead and includes representation from a range of partners including parents, carers and children and young people, key strategic leads, commissioners, providers and the voluntary, community and faith sector. Each working group will co-produce a more detailed action plan by June 2018 to support delivery of this WSoA, including specific actions, owners, dates for completion and success measures.  Each group will report monthly progress to the SEND Partnership Board on the tasks outlined in pages 9 – 16.

Commitment to co-production is central to the delivery of the WSoA and to the longer-term delivery of SEND provision across Lancashire.  Whilst the high-level actions have been produced by key partners and time has allowed some discussion with wider stakeholders, further development will take place in the individual working groups.

Service provision across the pan-Lancashire area is shared across a number of commissioning bodies including LCC, 12 district councils, 6 Lancashire CCGs, plus 2 CCGs associated with unitary authorities and NHS England.  NHS services are delivered by 6 hospital trusts, 2 community health trusts and 1 mental health trust that deliver services across CCG boundaries. Each working group will be required to take account of this complexity to ensure that the intended improvements are driven forward and there is clear accountability throughout the whole programme of work. The WSoA refers to actions being carried out within a number of geographical area footprints, these are explained in the 'Key Terms' table below.

Strategic planning and decision-making responsibility for the implementation and monitoring of this WSoA will be held by the SEND Partnership Board reporting to the Lancashire Health and Well-Being Board (see governance structure on page 6 below).  In addition, the Joint Committee of the CCGs and the LCC Cabinet include lay and elected members respectively, to act as advocates for the public interest.

The plan will be in place until Ofsted and CQC are satisfied that sufficient progress has been made in relation to improving outcomes for children, young people and their families.

**Key Terms**

|  | **Definitions** |
|---|---|
| **Lancashire / local area** | The twelve districts in the Lancashire County Council (LCC) area: Burnley, Chorley, Fylde, Hyndburn, Lancaster, Pendle, Preston, Ribble Valley, Rossendale, South Ribble, West Lancashire and Wyre.<br><br>Six NHS Clinical Commissioning Groups (CCGs): Chorley and South Ribble, Fylde and Wyre, East Lancashire, Greater Preston, Morecambe Bay (the North Lancashire area) and West Lancashire |
| **Pan-Lancashire** | The area described above plus the two unitary authorities of Blackburn with Darwen Council and Blackpool Council, and Blackburn with Darwen CCG and Blackpool CCG |
| **Integrated Care Systems- (ICS)** | The Pan-Lancashire area plus south Cumbria (part of Morecambe Bay CCG's area) |
| **Joint Commissioning Framework** | The existing Joint Commissioning Framework (2017) found here applies to the local area. This framework is currently being developed to apply across the ICS. |
| **Health and Wellbeing Board** | The Lancashire Health and Wellbeing Board is a forum for key leaders from the health and care system in Lancashire to work together to improve the health and wellbeing of the local population and reduce health inequalities, further information and membership found here<br>The SEND Partnership Board is accountable to this board |
| **Joint Committee of the CCGs** | Joint committees are a statutory mechanism enabling CCGs to undertake collective strategic decision making, encouraging the development of strong collaborative and integrated relationships and decision-making between partners, further information and membership found here<br>There will be regular reporting on progress to this committee. |
| **Lancashire County Council Cabinet** | Within the budgetary and policy frameworks set by the Full Council, the Cabinet is responsible for carrying out almost all of the Council's functions in delivering services to the community, including Children and Young People Services and Adult and Community Services, further information and membership found here<br>There will be regular reporting on progress to the Cabinet. |
| **SEND Partnership Board** | The purpose of the SEND Partnership Board is to ensure Lancashire thoroughly fulfils its SEND code of practice duties, and in doing so, provides the best possible outcomes for all its children and young people with SEND. The Board also has the strategic leadership for the WSoA. |

**Lancashire SEND Governance and Accountability Structure**
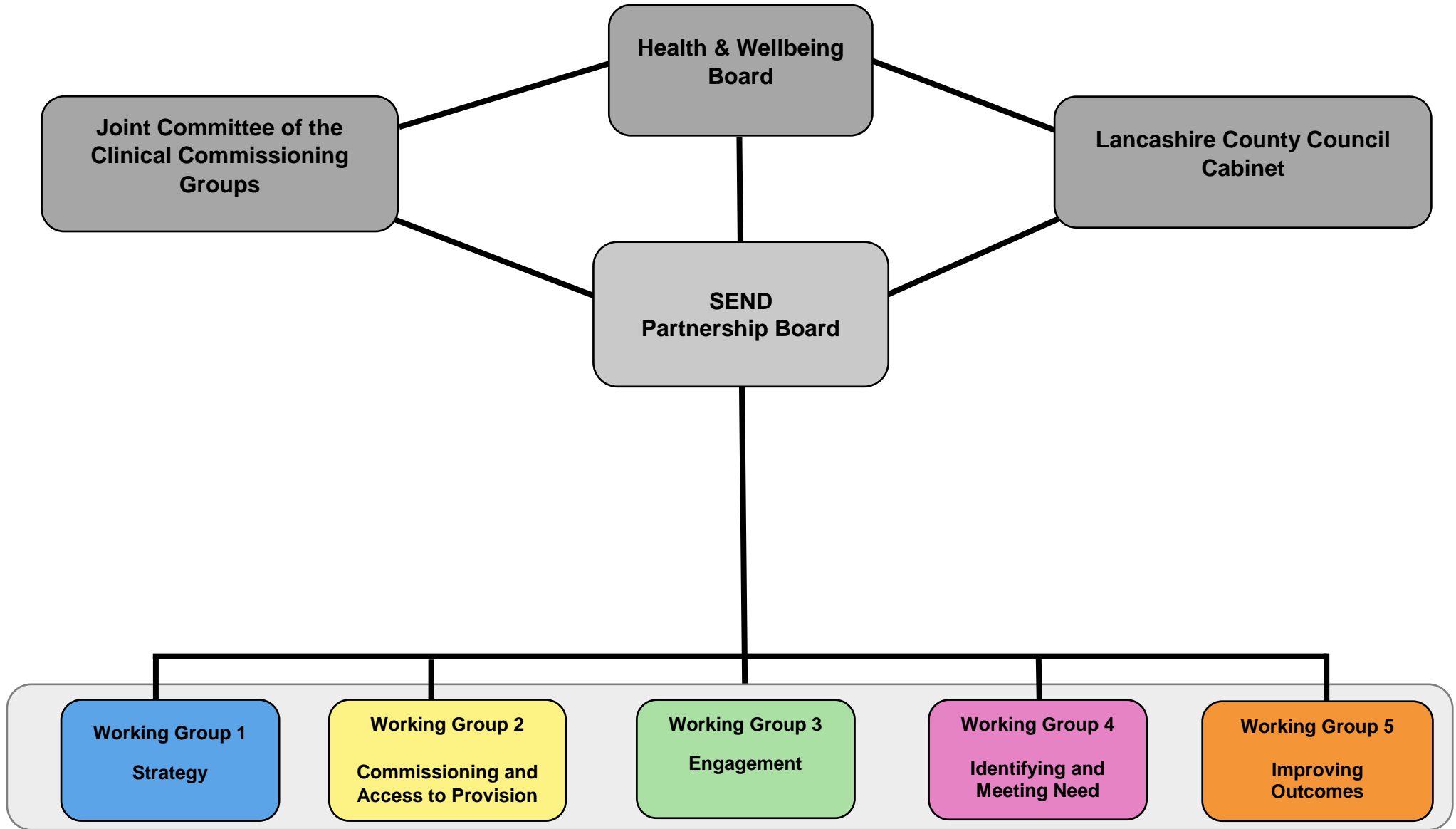
# Working Group Actions

## Working Group 1 – Strategy

**Lead**: David Graham (Head of Service - SEND)

- Area of Concern **1**    Action **A:** To develop strategic leadership and vision for SEND across the partnership
- Area of Concern **2**    Action **B:** To develop an accurate understanding of SEND across the local area, to support leadership and strategic decision making
- Area of Concern **8**    Action **C:** To develop an effective strategy to improve the outcomes for children and young people with SEND

## Working Group 2 - Commissioning and Access to Provision

**Lead:** Hilary Fordham (Chief Operating Officer - Morecambe Bay CCG)

- Area of Concern **3**    Action **D:** To develop robust joint commissioning arrangements, which are regularly monitored and evaluated
- Area of Concern **7**    Action **E:** To develop effective, evidence-based diagnostic pathways for Autism across the local area
- Area of Concern **9**    Action **F:** To develop arrangements to support good transitions in health care services 0-25
- Area of Concern **11**    Action **G:** To ensure that all children in Lancashire have equal access to provision regardless of location

## Working Group 3 – Engagement

**Lead:** Sophie Valinakis (SEND Reforms Manager)

- Area of Concern **4**    Action **H:** To ensure that parents and carers are fully engaged in decision making
- Area of Concern **12**    Action **I:** To provide a local offer that is clear and accessible, and which provides high quality information

## Working Group 4 – Identifying and Meeting Need

**Lead:** Janette Hastings (Integrated Assessment Manager - SEND)

- Area of Concern **5**    Action **J:** To develop and implement simple, transparent and consistent procedures for identifying and meeting need
- Area of Concern **6**    Action **K:** To develop systems to ensure the quality of EHC Plans

## Working Group 5 – Improving Outcomes

**Lead:** Steve Belbin (Principal Advisor for School Improvement- LCC)

- Area of Concern **8**    Action **C:** To improve the outcomes of CYP with SEND towards the national average and statistical neighbours
- Area of Concern **10**    Action **L:** To reduce the number of permanent school exclusions for CYP with an EHC Plan to below the national average and statistical neighbours

The partnership is committed to ensuring that this programme provides for greater joint working and co-production going forward. We acknowledge that some of the arrangements in place are interim and may evolve as the work progresses.  The tables below outline the priorities and associated high level actions for each working group.  Success measures and the more detailed actions required to achieve these will be agreed as part of the working group delivery plans. Some significant issues required immediate action and have either been completed or are underway.

## Working Group 1: Strategy

| Action A | Develop strategic leadership and vision for SEND across the partnership |
|---|---|
| Action B | Develop an accurate understanding of SEND across the local area, to support leadership & strategic decision making |
| Action C | Develop an effective strategy to improve the outcomes for children and young people with SEND |

| | Key tasks to address actions A - C | Date to Complete | Expected Outcome | Progress |
|---|---|---|---|---|
| A1 | Agree the governance structure for SEND across the local area | July 2018 | The line of accountability is clear to families and practitioners. The governance structure is agreed and published. Regular reporting takes place to the Health and Wellbeing Board and JCCCG and is scrutinised by the Children's and Education scrutiny committee | Action Underway |
| A2 | Each partner organisation must agree a senior accountable officer to support regular and consistent communication of the SEND agenda across the local area | May 2018 | Families and practitioners are informed of the identified senior officers via the Local Offer | Action Underway |
| A3 | Senior accountable officers work together to create the SEND partnership vision across the local area in collaboration with CYP, Parent/Carers & Stakeholder's | July 2018 | Families, practitioners and partners are clear about the SEND vision, through the Local Offer, as a driver for improvement | Action Planned |
| A4 | CCGs to pool funding and recruit a single joint commissioning post for Health across pan-Lancashire. | April 2018 | Funding agreed to support increased consistency pan- Lancashire | Action Complete |
| A5 | Establishment of the Designated Clinical Officer (DCO) service across the area | May 2018 | Families benefit from greater equity in access to provision and a timely response to requests for assessments in line with statutory timescales | Action Underway |
| A6 | CCGs and LCC to include a contract variation with all their provider organisations to ensure that all provider senior management teams and staff receive appropriate training and information with regards to the ethos and the implications of the SEND reforms. | Sept 2018 | Contract variations produced, training and information regularly shared. Provider services receive regular training which impacts positively on their professional practice | Action Underway |

| | | | | | |
|---|---|---|---|---|---|
| **B1** | Complete and publish a Joint Strategic Needs Analysis (JSNA) to support understanding of health, social care and education need across the local area ensuring CYP and Parent/Carers voice is clearly communicated. | Jan 2019 | JSNA produced which provides clarity for all partners about the ongoing needs of the community | Action Planned |
| **B2** | Develop a data dashboard to share SEND performance outcomes including health and education, to inform CYP, parent/carers and stakeholders of progress. | Sept 2018 | All stakeholders, including CYP and parent/carers, can assess progress across the performance measures | Action Underway |
| **C1** | Develop a Strategy for improving outcomes for CYP with SEND across the local area through co-production with stakeholders across the partnership | Oct 2018 | The SEND Strategy will result in improved outcomes for children and young people

More children, young people and families will to be involved in the co-production of the assessment and EHCP, resulting in greater satisfaction | Action Planned |
| **C2** | SEND partnership agree shared measures to monitor the Improvement Strategy | Oct 2018 | The Partnership will be able to evaluate progress and develop or amend actions, according to outcomes achieved | Action Planned |
| **C3** | Establish and implement with CYP and parents/carers an agreed set of strategic principles to ensure that co-production is at the heart of strategic decision making and service delivery (see H2) | Oct 2018 | Decisions taken by the local area partners are co-produced with parents/carers and lead to services which meet their needs | Action Planned |

| | Working Group 2: Commissioning and Access to Provision | | | |
|---|---|---|---|---|
| **Action D** | To develop robust joint commissioning arrangements which are regularly monitored and evaluated | | | |
| **Action E** | To develop effective, evidence-based diagnostic pathways for Autism across the local area | | | |
| **Action F** | To develop arrangements to support good transitions in health care services 0-25 | | | |
| **Action G** | To ensure that all children in Lancashire have equal access to provision, regardless of location | | | |
| | **Key tasks to address actions D - G** | **Date to Complete** | **Expected Outcome** | **Progress** |
| **D1** | Use the existing Joint Commissioning Framework (2017) to identify the appropriate level of commissioning for each service or function | April 2019 | Levels of commissioning are clearly mapped | Action Underway |
| **D2** | Building on the work already being undertaken develop a commissioning plan based on JSNA including the joint commissioning strategy. | April 2019 | Commissioning Plan sets out services across the geographical area which meet the needs of individual areas | Action Planned |
| **D3** | For those services to be commissioned at an ICS level agree joint commissioning function | Sept 2019 | Families benefit from having easier access to services through joint commissioning agreements. | Action Planned |
| **D4** | Develop evaluation and monitoring system for jointly commissioned services at ICS level | Sept 2019 | Services can demonstrate ongoing improvement, benefitting their users | Action Planned |
| **E1** | Implement an ASD diagnostic pathway for Morecambe Bay CCG (Lancs North) | Mar 2018 | Families and practitioners have clear information about the pathway and how to access services | Action Complete |
| **E2** | Agree a pan-Lancashire NICE compliant diagnostic pathway for ASD as part of a neurodevelopmental diagnostic pathway | Dec 2018 | Families benefit from a compliant pathway, which meets local need and supports consistent agreed outcomes pan Lancashire | Action Underway |
| **E3** | Implementation of NICE compliant diagnostic pathway across ICS as part of a neurodevelopmental diagnostic pathway | Dec 2019 | Pathway implemented. Commissioners use the performance data collated in the dashboard to ensure families access high quality services Regular reviews ensure quality assurance | Action Planned |

| F1 | Review and strengthen transition arrangements and ensure a 0-25 transition protocol is included as part of the joint commissioning plan | April 2019 | All CYP passing through transition points have a quality service which supports a positive transition. | Action Planned |
|----|----|----|----|----|
| F2 | Agree monitoring mechanism for transition processes | Oct 2018 | Partners are able to see the impact of arrangements and make changes if required. | Action Planned |
| G1 | Review and strengthen the health, social and education offer to ensure that services meet the needs identified in the JSNA to deliver consistent outcomes across the local area | April 2019 | CYP and their families pan Lancashire increasingly have more equitable outcomes. | Action Planned |
| G2 | Develop the healthcare offer to ensure that vulnerable groups have their healthcare needs identified, assessed and met, and that there is oversight across the local area. | Dec 2018 | Vulnerable groups protocol published. Vulnerable groups are able to access services appropriate to their needs. | Action Planned |

| Working Group 3: Engagement | | | | |
|---|---|---|---|---|
| **Action H** | Ensure that parents and carers are fully engaged in decision making at a strategic and **individual** level | | | |
| **Action I** | Provide a local offer that is clear and accessible, and which provides high quality information | | | |
| **Key tasks to address actions H & I** | | **Date to Complete** | **Expected Outcome** | **Progress** |
| **H1** | Ensure that CYP & parents / carers are fully represented throughout the SEND governance structure | July 2018 | It is evident that SEND strategic decision making is influenced by CYP, Parent/Carers | Action Underway |
| **H2** | Inform and implement an agreed set of principles with CYP, Parent/Carers for co-production across the SEND Partnership (see C3) | Oct 2018 | The principles are evident in the way parents, carers and CYP through increased co-production | Action Planned |
| **H3** | Embed and ensure Section 19 principles (found here) underpin a culture of co-production at an individual level | Sept 2018 | CYP and their families/carers can recognise their views in co-produced plans | Action Planned |
| **H4** | Co-ordinate the delivery of an annual survey for CYP, Parents/Carers, and professionals and communicate findings of Personal Outcomes Evaluation Tool (POET found here) | June 2018 | The outcomes of the annual POET survey drive improvements informed by parent views | Action Underway |
| **H5** | Develop a viable and robust two-way communication system to rebuild trust and regain positive relationships to facilitate wider participation and engagement with CYP & Parent/Carers | Dec 2018 | CYP, Parents/Carers feel their feedback is reflected in service plans, delivery and ways of working | Action Underway |
| **I1** | Work with CYP, Parents/Carers and stakeholders to review the Local Offer and ensure the Local Offer is accessible and provides comprehensive high-quality information | Sept 2018 | CYP, Parents/Carers are aware of the Local Offer web pages and find the information accessible and high-quality | Action Planned |
| **I2** | Develop mechanisms to collect and respond to Local Offer feedback | July 2018 | CYP, Parent/Carer are clear that their views influence services through the 'You Said, We Did' report | Action Underway |

13

## Working Group 4: Identifying and Meeting Need

| Action J | Develop and implement simple, transparent and consistent procedures for identifying and meeting need | | | |
|---|---|---|---|---|
| Action K | To develop systems to ensure the quality of EHC Plans | | | |

| | Key tasks to address actions J & K | Date to Complete | Expected Outcome | Progress |
|---|---|---|---|---|
| J1 | Implementation and integration of a transparent and consistent DCO service across the local area | Sept 2018 | CYP & families have their needs assessed and met in a timely and consistent manner | Action Underway |
| J2 | Co-produce, publish and implement a clear pathway for identifying and meeting need for CYP 0-25 across the local area | Oct 2018 | CYP & families pan-Lancashire have information about and benefit from a clear pathway to services | Action Planned |
| K1 | To review the current EHC Plan process to ensure the agreed pathway is fully embedded across all organisations including co-production and particularly from social care and health professionals | Oct 2018 | CYP benefit from high quality EHC Plans, produced pan- Lancashire, which reflect co-production across all partners | Action Underway |
| K2 | Define Lancashire quality standards for EHC Plan | Sept 2018 | All partners understand what quality plans look like and the quality assurance processes reflect ongoing improvements | Action Planned |
| K3 | To develop and implement an EHC Plan content audit process across the local area and participate in regional audit and training opportunities | Jan 2019 | CYP benefit from high quality EHC Plans produced pan Lancashire. Plans demonstrate continuous improvement through analysis of audit outcomes | Action Underway |
| K4 | Commence using the results of audit to inform the professional development of plan writers, advice givers and those supporting the delivery of the plans | Dec 2018 | Outcomes for CYP are improved through the performance management and training of plan writers | Action Underway |
| K5 | To develop planning and recording systems to support joint working and the improvement process of producing quality EHC plans | Jan 2019 | Improved joint working ensures the needs of CYP and their families are assessed and responded to with improved timeliness and efficacy | Action Underway |

14

| | Working Group 5 – Improving Outcomes | | | |
|---|---|---|---|---|
| **Action C** | To improve the outcomes of CYP with SEND towards the national average and statistical neighbours | | | |
| **Action L** | To reduce the number of permanent school exclusions for CYP with an EHC Plan to below the national average and statistical neighbours. | | | |
| | **Key tasks to address action C& L** | **Date to Complete** | **Expected Outcome** | **Progress** |
| **C4** | Analyse the outcomes for CYP with SEND and agree targets for improvement | June 2018 | Key themes for improvement, including a reduction in exclusions and raising attainment, are identified | Action Planned |
| **C5** | Implement a programme of action with schools to achieve the agreed targets with and Primary Heads in Lancashire (PHIL), Lancashire Association of Secondary Heads (LASH) and Lancashire Special School Head teacher Association (LASSHTA) | July 2019 | CYP benefit from improved outcomes in line with agreed targets | Action Planned |
| **L1** | The newly established SEND Improvement Partnership Team will support the development of SEND Inclusion policy | July 2019 | Increasing numbers of CYP will benefit from inclusive practice, by a reduction in exclusions, an increase in attendance and improvement in attainment | Action Underway |
| **L2** | Training package will be produced and delivered for the school workforce to promote inclusive practice | Jan 2019 | Teachers will have increased skills and confidence to support inclusive practice | Action Planned |
| **L3** | Deliver a series of briefings to SEND Leaders, school governors and workforce to promote inclusive practice | Nov 2018 | Governors and School leaders will support a reduction in permanent exclusions for CYP with an EHC Plan | Action Underway |
| **L4** | Review guidance for Lancashire's school behaviour policies to ensure reasonable adjustments for SEND needs are appropriately identified and managed | Dec 2018 | Guidance published and issued to all governing bodies. CYP have increased access to education through reasonable adjustments. | Action Planned |

| | | | | |
|---|---|---|---|---|
| **L5** | LCC Governors Service to provide training on the role school governing bodies have in avoiding the needs for permanent exclusion of pupils with EHC Plans (Equality Act for CYP with SEND found here) | July 2018 | Inclusion of young people with SEND increases; exclusion from school is a standing item on governor training | Action Underway |
| **L6** | Support and intervention to be made available by LCC Educational Psychologist (EP) and Specialist Teachers Service for pupils with an EHC Plan identified as being at risk of permanent exclusion | Sept 2018 | CYP benefit from support in school resulting in fewer exclusions | Action Underway |
| **L7** | SEND Exclusions will be a regular standing item on the School Improvement termly visits to schools and the Schools Service Guarantee meetings | Sept 2018 | Reduction in exclusions and targeted action agreed where required. | Action Underway |
| **L8** | SEND Service champion will attend the Partnership Development Group termly meetings and contribute to the schools Governors newsletter | July 2018 | Improved communication of local areas SEND development | Action Underway |
| **L9** | LCC will establish a new Lancashire Education Pledge for 'Inclusive Practice of SEND' | July 2019 | More CYP benefit from an inclusive approach with increasing number of Lancashire schools recognised as having inclusive practice | Action Planned |

25 April 2018

Ms Amanda Hatton
Director of Children's Services
Lancashire County Council
County Hall
Fishergate
Preston
Lancashire
PR1 5BY

Mr Mark Youlton, CCG Chief Officer, East Lancashire
Mr Denis Gizzi, CCG Chief Officer, Chorley, Greater Preston and South Ribble
Ms Hilary Fordham, CCG Chief Operating Officer, Morecambe Bay
Mr Peter Tinson, CCG Chief Officer, Fylde and Wyre
Mr Mike Maguire, CCG Chief Officer, West Lancashire
Mr David Bonson, CCG Chief Officer, Blackpool
Mr Roger Parr, CCG Chief Officer, Blackburn with Darwen
Mr Stephen Martin, Local Area Nominated Officer

Dear Amanda

This letter is written in accordance with The Children Act 2004 (Joint Area Reviews) Regulations 2015[1] to inform Lancashire County Council and the various Commissioning Groups, as principal authorities, that Ofsted and the Care Quality Commission have jointly evaluated the written statement of action submitted to us on 17 April 2018.

The statement of action is deemed to be fit for purpose with the amends outlined below in setting out how the local area will tackle the significant areas of weakness identified in the published report letter.

I note that that the CCGs have considered cross boundary issues as part of the response. It also encouraging to see the development of individual working groups to support and monitor the delivery of action plans to implement the five strands of the

---

[1] The Children Act 2004 (Joint Area Reviews) Regulations 2015
www.legislation.gov.uk/uksi/2015/1972/regulation/4/made.

INVESTORS IN PEOPLE | Silver

overarching written statement of action. Similarly, accountability for delivery of the plan through the SEND partnership board to the health & wellbeing board is appropriate. This is further strengthened by having a joint committee of the CCGs and the LCC cabinet including lay and elected members respectively.

The statement of action should be further improved by:

- having clearer outcomes. For example, the objective of an EHC plan is not to 'write standards to specific components of a high quality plan' but to ensure that plans are of a high quality that meet the needs of families and support children and young people to achieve in their education, health and care
- including health and care indicators in the SEND data dashboard (part B2 of the statement of action)
- broadening the mechanisms to identify need beyond the joint strategic needs assessment (JSNA) to include other NHS and social care initiatives.

The written statement of action must be published on local websites[2], so that parents, carers, children and young people can understand the actions you are taking to improve the effectiveness of the local area in identifying and meeting needs, and improving outcomes for children and young people who have special educational needs (SEN) and/or disabilities.

Yours sincerely,

Andrew Cook HMI
Regional Director, North West

---

[2] Regulation 4 (5); www.legislation.gov.uk/uksi/2015/1792/regulation/4/made

**Cabinet Committee on Performance Improvement**
Meeting to be held on Wednesday, 27th June 2018

**Report of the Head of Schools Improvement**

| Electoral Division affected: |
| --- |
| All |

**Lancashire Key Stage 4 Recovery Plan**

Contact for further information:
Stephen Belbin, Head of Service, School Improvement
Stephen.belbin@lancashire.gov.uk

---

**Executive Summary**

Whilst standards of attainment at the end of Key Stage 4 in Lancashire are in line or above the national average in the basic Grade 4 and above in English and mathematics, performance in Attainment 8 is below the national average. Progress measures, whilst above the north-west average, are significantly below the national average.

**Recommendation**

The Cabinet Committee is asked to note the content of the report.

---

**Background and Advice**

**Key Stage 4**

Overall attainment in Lancashire is mostly in line with the national average, but Progress 8 scores are low.

Attainment against the English & Maths "Basics" measure at A*C/Grade 4+ has remained **above** the national average over time and equalled the national average at the new Grade 5+ in 2017. This was true for both genders. Attainment in both English and in Maths was above the national average at Grade 4+, also above in Maths at Grade 5+. In English, this was below the national average at Grade 5+ because of relatively lower Literature scores. English Language remained above the national average. Because of relatively low entry rates for the full range of English Baccalaureate (EBacc) subjects, attainment in this measure at Grade 4+ has remained low over time (also now at Grade 5+). This does not reflect low expectations on behalf of Lancashire schools, as entry for GCSEs is higher than the national average, with lower entry for "alternative" qualifications. The Attainment 8 score was below the national average in 2017, reflecting low attainment in the EBacc and Open subjects (again reflecting curriculum decisions as above). Attainment 8 scores in English and Maths equalled the national average, as did the GCSE-only Open score.

Lancashire
County
Council

2017 Progress 8 scores were below the national average and low in English, Maths, EBacc and Open subjects. However, Lancashire scored better than the north-west average for English and Maths, equalling the north-westW average for EBacc subjects, but below the north west for Open subjects.

In 2017, Progress 8 scores were positive for girls, the main ethnic minority groups, pupils who are not 'disadvantaged' and for pupils with English as a second language. Progress 8 scores were mostly negative for disadvantaged pupils, those with Special Educational Needs support, boys and the least able. The curriculum offer and exam entry once again are a key factor, as these groups have higher entry rates for GCSE subjects than nationally, with lower use of "alternative" qualifications.

Issues

The progress of pupils as measured by Progress 8 is below the national average, raising questions about curriculum access and particularly for boys, the least able, and those with Special Educational Needs.

Because of low Progress 8 scores, too many schools are below the Progress 8 Floor Standard and too many meet the coasting threshold, a measure which is soon to be discontinued.

The performance of disadvantaged pupils remains a key priority for development, as it is consistently well below average and is not improving significantly. The progress made by pupils with an Education Health Care plan (or Statement) is in the lowest quartile nationally.

There are some significant district variations (in particular, low attainment in Burnley and Pendle, low progress in Burnley), with low attainment by some groups of Black and Minority Ethnic pupils, although their progress is strong.

## Secondary Advisers: Key Strategic Priorities 2017/2018

Service plans have been written to address the following priorities:-

1. The attainment and progress of pupils at Key Stage 4 is in line with or above the average for statistical neighbours
2. Reduce the proportion of secondary schools below the floor standard
3. Reduce the proportion of coasting secondary schools
4. Improve the attainment & progress of underperforming groups in Key Stage 4
5. Improve the attainment and progress in disadvantaged areas at all Key Stages [Burnley, Fleetwood, Hyndburn, Pendle, Preston]
6. Increase the proportion of schools and settings judged good or better in Ofsted inspections and the proportion of children attending a good or better school in Lancashire
7. The proportion of schools judged good or better following Ofsted inspection in disadvantaged areas at all Key Stages rises: Burnley, Fleetwood, Hyndburn, Pendle, Preston
8. Reduce the proportion of schools judged as Requires Improvement more than once
9. Reduce the proportion of schools/settings in an Ofsted category of concern

## Identified Areas of Focus

a)  Reading: improve achievement and enjoyment of reading across all phases.
b)  Increasing progress in Maths (from 2016)
c)  Improving outcomes in the English Baccalaureate and Progress 8, including through improved KS4 curriculum alignment
d)  Increasing Attainment 8 in coasting secondary schools and those below floor
e)  Improving Progress 8 for Disadvantaged pupils, Children Looked After, boys and the least able (including increasing access to EBacc subjects); schools in Burnley and Pendle
f)  Supporting more schools Requiring Improvement to move to good; increasing the number of outstanding schools
g)  Reduce rates of exclusions, both fixed term and permanent, including Special Educational Needs and Disabilities and Children Looked After

## Secondary Team Plan: Actions
## School Service Guarantee Support

a) Maintain a focus through School Service Guarantee support  visits (including discussion of specific targets and tracking) on reducing in-school variation for identified subjects and key pupil groups, exploring associated data to unpick key issues (including pupil 'outliers', impact of curriculum offer and group attendance); use self-audit tools to support schools. **On-going**
b) Ensure focus on new accountability measures under reformed GCSEs (Attainment 8, Progress 8, Basics, EBac), including across wider subjects and using previous measures to identify trends. **On-going**
c) Support and challenge schools in meaningful target-setting, ensuring challenge in lessons, effective assessment, demonstrating progress and reporting to parents and governors. **Completed.**
d) Identify the most vulnerable schools and maintain half-termly contact. **Completed.**
e) Support governors to ensure headteacher appraisal targets reflect key school priorities. **Completed.**
f) Share examples of effective practice with advisers through team meetings (formal meeting agenda item termly) and with schools through the Senior Leader Network. **Completed.**
g) Team meeting time to carry out analysis of Fischer Family Trust data/Ofsted priorities for low-performing districts and liaise with District headteacher groups/district councils as appropriate. October round-table adviser meeting to discuss Pendle. **Completed.**

## Disadvantaged Pupils

a) Review Pupil Premium risk ratings for schools based on 2016 Education Endowment Fund data and performance in 2017. **Completed.**
b) Ensure thorough analysis of 2017 progress and attainment for the disadvantaged group in each school (data analysis in advance), seek to confirm underlying issues/effective actions and ensure explicit challenge. **Completed.**
c) Ensure discussion & analysis includes consideration of more able pupil premium (with the highest scores from the end of primary school) – generate data centrally for advisers to identify relative strengths/weaknesses across schools. **On-going**

d) Ensure ongoing discussion of "disadvantaged vs non-disadvantaged" tracking**,** along with progress of Children Looked After. **On-going**

e) Ensure vulnerable schools have engaged with external Pupil Premium Review, including subsequent follow-up. **On-going**

f) Identify any examples of particularly effective practice (meeting time to discuss School Service Guarantee support findings) and disseminate. **On-going**

g) Review unsuccessful bid for Strategic School Improvement Fund project with a view to resubmission. **Completed (bid unsuccessful)**

## Progress 8

a) Continue focus through the School Service Guarantee support on performance against the Progress 8 value-added measure; identifying, exploring and addressing sources of variation at subject and group level (challenging provision for 'outliers'). **Completed.**

b) Support school leaders & governors to engage with Analysing School Performance. **Completed**.

c) Maintain strong focus on school curriculum models, exploring variation in entry/access for disadvantaged and different ability groups, sharing best practice. Analyse data across all schools to identify strengths and explore reasons. Deliver governor 'curriculum' training module for Governor Services. **Completed**.

## Floor Standards

a) Continue to review and develop the links between Early Warning Group and individual school reviews. **On-going**

b) Ensure escalation flowchart/process is used to ensure prompt, robust action where schools do not promptly engage/where progress is behind milestones; gain first-hand adviser evidence. **Completed.**

c) Explore sharper process for tackling weak governance where this is undermining an effective headteacher. **On-going**

d) Continue to strengthen links with Lancashire Association of Secondary School Headteachers Strategic Overview Group/Teaching Schools/National Leaders in Education to support the brokerage of support. **On-going**

e) Treat schools below new Progress 8 floor as if in an Ofsted category of concern, with full Monitoring and Intervention Team support and links with strong similar schools; use protective pre-Warning Notices unless strong case against this. **Completed.**

f) Maintain use of 'vulnerable schools' prompts to work with schools at risk of intervention. **On-going**

g) Ensure that concerns identified for academies and schools outside of the School Service Guarantee are communicated to School Improvement Challenge Board for follow-up; develop 'standard letters' to support this. **Completed.**

## Potential Coasting Schools

a) Update list of schools at risk of coasting as soon as 2017 Progress 8 checking data available and ensure prompt and explicit communication with schools to ensure urgency. **Completed.**
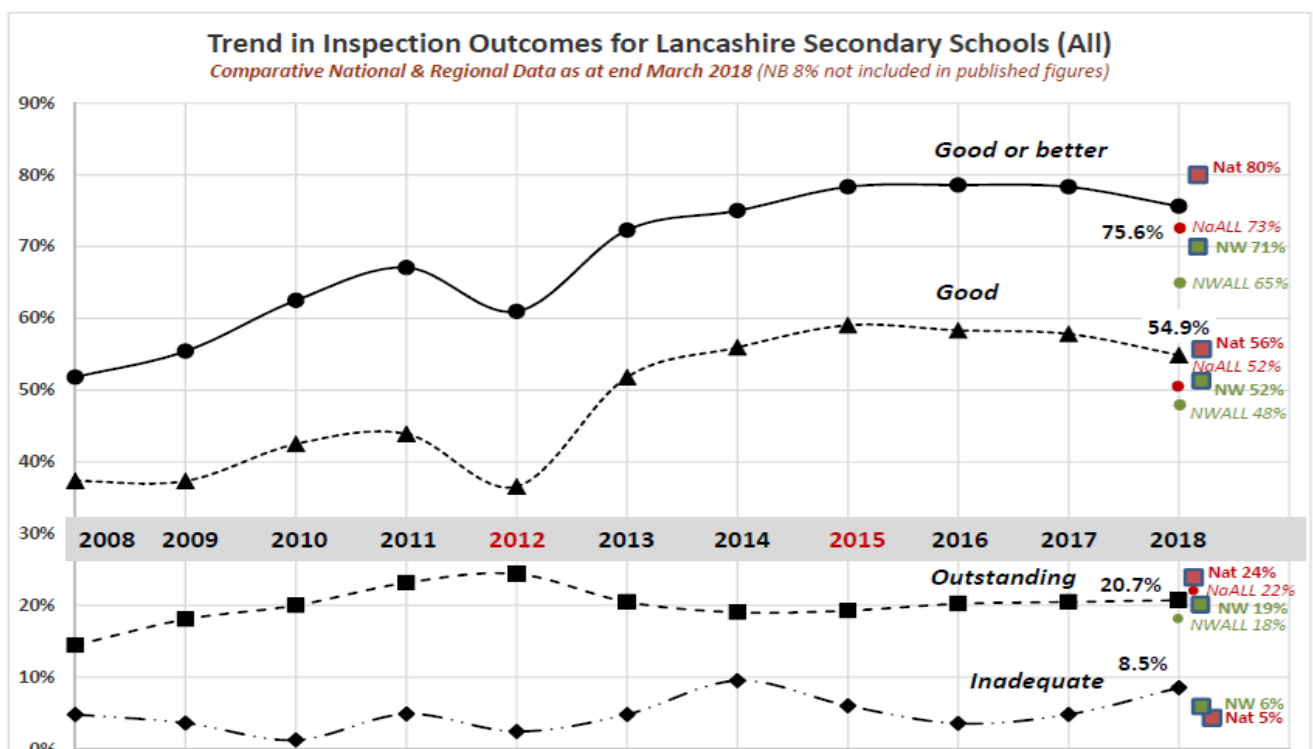
b) Approach as if in a category of concern, reviewing school priorities and improvement plans, exploring curriculum/exam alignment with Progress 8, consider Monitoring and Intervention Team support contracts, broker formal school-to-school support links. **On-going**

c) Encourage more schools to join Similar Schools Networks and engage with Teaching School Alliances. **On-going**

## Schools Requiring Improvement

a) Continue to support Requiring Improvement schools as if in a category of concern, focusing strongly on leadership - particularly where requiring improvement more than once or where Leadership is not judged good; full MIT support and formal school to school links. **On-going**

b) Ensure good quality improvement plans and robust Self Evaluation summaries. **On-going**

c) Confirm effective line management and quality assurance processes, including effective governance. **Completed**

d) Ensure prompt and robust application of the escalation flowchart, increasing urgency where schools do not promptly engage or progress is limited; ensure first-hand adviser evidence is gained. **On-going**

## OFSTED

Currently, 77% of Lancashire secondary schools are judged to be good or better. This is below the national average (80%) but above the North West (71%) average. Over the last five years, the number of secondary schools judged to be good or better has ranged from 75% to 79%. In contrast, in 2012, 61% were judged to be good.



**Trend in Inspection Outcomes for Lancashire Secondary Schools (All)**
*Comparative National & Regional Data as at end March 2018 (NB 8% not included in published figures)*

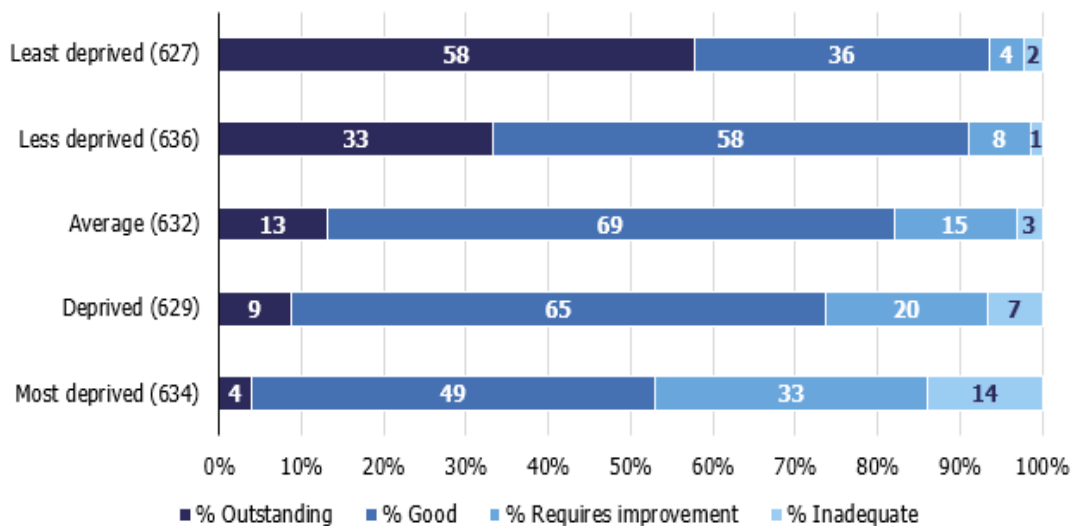So far this academic year, there have been 18 inspections where the Local Authority knows the outcome.

Of these, none have been judged outstanding, eleven have been judged good (61%), four to require improvement (22%) and three inadequate (17%). Five of the schools that declined a grade were coasting schools.

Performance around the districts varies.



**Overall Effectiveness by District**
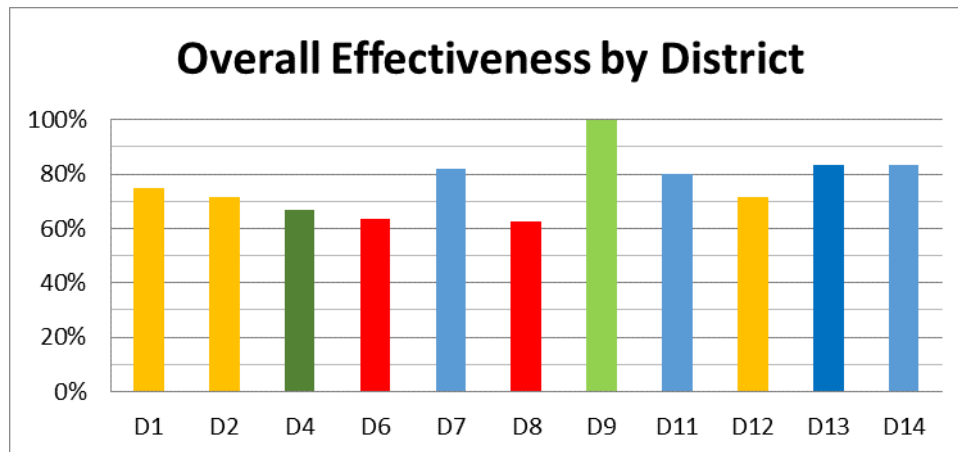
Three of the highest performing districts are in the East. Our lowest performing districts are Preston and West Lancashire.



**Most recent overall effectiveness grades of secondary schools, by level of deprivation[1] and ethnicity, 30 April 2018. White british only.**

| | % Outstanding | % Good | % Requires improvement | % Inadequate |
|---|---|---|---|---|
| Least deprived (627) | 58 | 36 | 4 | 2 |
| Less deprived (636) | 33 | 58 | 8 | 1 |
| Average (632) | 13 | 69 | 15 | 3 |
| Deprived (629) | 9 | 65 | 20 | 7 |
| Most deprived (634) | 4 | 49 | 33 | 14 |

*Source: Ofsted inspection data as at 30 April 2018*

*Source: Schools, pupils and their characteristics: January 2017*

1. The indicator of deprivation used in this analysis is 'Eligible for free school meals on any census day in the last six years'.
2. Percentages are rounded and may not add to 100.

**Glossary**

**Basics:** English literature or Language, with mathematics. New grade 1 – 9 introduced last summer. Grade 4 seen as a 'standard' pass.

**Attainment 8:** the eight highest scoring subjects within the four groups: English, mathematics, the English Baccalaureate and any three 'other' subjects

**English Baccalaureate (EBacc):** all 5 "pillars" of English, mathematics, sciences (including computer science), geography or history, a language

**Progress 8:** the progress from Key Stage 2 (end of primary) to Key Stage 4 (using the A8 score)

**New assessment measures**

These 'more ambitious' accountability measures were introduced in 2017. The previous A*C grades were replaced by Grades 1 – 9 in English and mathematics, widened to include most other subjects from this summer. Attainment as a result fell across all schools nationally.


**Consultations**

N/A


**Implications**:

N/A


**Risk management**

N/A

Reason for inclusion in Part II, if appropriate

N/A