

## **Lancashire County Council**

### **Cabinet Committee on Performance Improvement**

**Thursday, 25th November, 2021 at 2.00 pm in Committee Room 'A' - The Tudor Room, County Hall, Preston**

#### **Agenda**

##### **Part I (Open to Press and Public)**

<b>No.</b>	<b>Item</b>
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<b>1.</b>	<b>Apologies for Absence</b>
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<b>2.</b>	<b>Disclosure of Pecuniary and Non-Pecuniary Interests</b>
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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.

<b>3.</b>	<b>Minutes of the Meeting held on 9 September 2021</b>	(Pages 1 - 12)
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<b>4.</b>	<b>Corporate Strategy Monitoring report – Quarter 2 2021/22 performance update</b>	(Pages 13 - 38)
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<b>5.</b>	<b>Corporate Risk &amp; Opportunity Register Quarter 3 2021/22</b>	(Pages 39 - 78)
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<b>6.</b>	<b>Statutory Social Care Annual Report - Complaints and Customer Feedback 2020/21</b>	(Pages 79 - 102)
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<b>7.</b>	<b>Urgent Business</b>
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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.

<b>8.</b>	<b>Date of Next Meeting</b>
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The next meeting of the Cabinet Committee on Performance Improvement will be held on Thursday 10 March 2022 at 2.00pm.

County Hall  
Preston

L Sales  
Director of Corporate Services

## Lancashire County Council

### Cabinet Committee on Performance Improvement

**Minutes of the Meeting held on Thursday, 9th September, 2021 at 2.00 pm in Committee Room 'A' - The Tudor Room, County Hall, Preston**

#### **Present:**

County Councillor Phillippa Williamson (Chair)

#### **County Councillors**

A Vincent	M Green
G Gooch	A Riggott
A Ali OBE	C Towneley
H Khan	S Turner
P Buckley	M Goulthorp
C Edwards	

#### **1. Apologies for Absence**

##### **Temporary change**

County Councillor Mike Goulthorp replaced County Councillor Jayne Rear at this meeting.

#### **2. Disclosure of Pecuniary and Non-Pecuniary Interests**

No pecuniary or non-pecuniary interests were disclosed.

#### **3. Minutes of the Meeting held on 1st July 2021**

**Resolved:** That the minutes of the meeting held on 1st July 2021 be confirmed and signed by the Chair.

#### **4. Corporate Strategy Monitoring report – Quarter 1 2021/22 performance update**

A report was presented by Donna Talbot, Head of Business Intelligence, on the performance update for Quarter 1 2021/22.

Appendix 'A' provided the latest performance updates available against the agreed Corporate Strategy indicators. In addition, it provided the latest available Quarter 1 2021/22 performance information and associated commentary on the current position of each indicator, including any related issues and required actions.

The Cabinet Committee noted the highlights of good performance and those indicators performing below the desired level and/or those that were due to the impact of the Covid 19 pandemic, as detailed in the report.

The following officers attended the meeting and provided details and updates on their respective service areas:

- Mike Kirby – Director of Strategy and Performance
- Dave Carr – Director of Policy, Commissioning and Children's Health
- Ian Crabtree – Director of Adults Disability and Care Services
- Steve Scott – Head of Waste Management
- Ridwan Musa – Highways Manager – Operations

Specific areas were discussed as follows:

### **Lancashire will be the place to live**

**Safety carriageway defects** – it was reported that the number of reported defects had continued to rise in Quarter 1, as the winter season extended into April with prolonged cold surface temperatures continuing to increase the formation of potholes. It had been a challenge to repair many of these defects within required timescales despite additional resources through the Dayworks contract and the Jet Patching contract being fully utilised. Emergency, urgent and non-urgent (5 working days) repairs had therefore not met the targets this Quarter although the Team had been working very hard on these repairs, with many staff working extra hours. However, safety carriageway defects repaired within 20 working days was above target and it was noted that there were the highest number of defects in this particular category.

**Street lighting fault repair** – both non-traffic management and traffic management lamp-out faults had met the targets, reporting 97% and 100% respectively.

CC Edwards thanked the Highways Team staff for all their hard work.

**Children and Families Wellbeing Service** – performance in Quarter 1 had exceeded the target with a continued reduction in families withdrawing or becoming disengaged from the service and fewer families being referred to children's social care. A remodelled Children and Families Wellbeing Service had been introduced in Quarter 1, demonstrating that the service had implemented the model, without impacting on frontline services and that it had quickly adapted to the new model.

**Looked after children who are actually living in Lancashire** – performance in Quarter 1 had exceeded the target. Lots of commissioning activity was taking place to try to shape the market to encourage providers to work collaboratively with the service. Increased investment was being put into our in-house Residential provision to ensure that wherever possible, young people were

placed appropriately in their community. The Cabinet Committee noted however that, for some young people, it was appropriate that they should not live in Lancashire.

### **Educational attainment**

**Key Stage 4** – it was noted that figures for this would be available in November 2021.

**Early Years Foundation Stage and Key Stage 2** – it was noted that performance updates for these were not available, due to assessments not taking place in 2019/20 and 2020/21.

**School placements** – Lancashire's performance had improved and remained on target in relation to pupils being offered one of their top three preferences at both primary and secondary level, with both indicators maintaining quartile two positioning nationally.

CC Williamson wished to pass on a thank you on behalf of Cabinet, recognising all the hard work that was done on school placement offers.

**Adult safeguarding outcomes** – although this figure was still below target, an improved position had been seen in people indicating their safeguarding outcomes had been fully met. It was reported that 97% of people had indicated their desired safeguarding outcomes had been either partially or fully achieved. However, it was important to note that changes may be seen in these figures in the next Quarter, due to limited access of professionals and families going into care settings during the pandemic.

**Quality of care homes & Community providers** – 12 of the 16 county council run care homes were currently rated good or outstanding. An action plan had been put in place to deal with the 4 care homes currently rated as requiring improvement.

Two of the 8 county council run residential short break services were rated as outstanding and 6 as good. The county council ran 9 community care providers, 8 of which were supported living services and all were rated as good. The Shared Lives Service in Lancashire was the largest in the country and was rated as outstanding in all key lines of enquiry.

CC Gooch paid tribute to domiciliary workers and all staff working in county council and private care homes for all their efforts and hard work.

CC Vincent raised a query about face to face GP appointments. This matter would be dealt with during consideration of the Public Health Outcomes in Lancashire report.

## **Lancashire will be the place to work**

**Use of Libraries** – although all libraries opened on 12<sup>th</sup> April, it was important to note that they had not been fully open on this date. However, there were still over a quarter of a million visitors in Quarter 1. Although PNET sessions had been available during Quarter 1, these were still subject to Covid safety regulations, with fewer terminals available to ensure distancing and shorter sessions to allow for cleaning between each use. It was expected that this figure would increase over time.

CC Buckley stated that it would be interesting to see how the number of e-downloads would be affected as more people started visiting libraries.

CC Towneley pointed out that figures would need to be looked at again, once smaller satellite libraries were up and running and face to face events were taking place.

**Employment, Education or Training** – the Quarter 1 position showed a notable improvement for all young people in employment, education or training, due to a continued focus on this area of work and the excellent partnerships with secondary schools and post-16 providers. The improvement demonstrated the collective effort to support young people to make positive and sustained transitions to post-16 education, employment or training.

CC Williamson recognised the amount of work that had been done to achieve this significant turnaround within a relatively short space of time which was to be commended.

CC Towneley, on behalf of CC Rear, thanked all the staff involved in supporting young people into employment, education or training, given the continuing challenging circumstances faced by the education sector and children and young people throughout the pandemic.

**Proportion of children excluded from school** – although this figure had decreased significantly for 2019/20, the effects of the first national lockdown should be taken into account, in addition to schools not being fully open to all children having had an effect on the number of permanent exclusions and suspensions. Lots of work was ongoing in partnership with schools to avoid exclusions as far as possible and addressing exclusions was one of the priority work areas in the Education Strategy being presented to Cabinet in December.

CC Towneley wished to thank all the staff involved for their hard work in this area.

**Adults with learning disabilities in employment** – this figure continued to be low due to the pandemic reducing employment prospects, impeding those with learning disabilities to be introduced to a working environment. The Employment Team who had been redeployed to lead on other areas during Covid had now been re-established and it was hoped to see an improvement on figures. CC Gooch pointed out that adults with learning disabilities tended to work in the

catering/hospitality sector which had been greatly impacted throughout the pandemic.

### **Lancashire will be the place to prosper**

**Rosebud loans** – whilst performance for the quarter was encouraging, it was due to deals taking longer to be completed and off the back of 2020/21 Quarter 4 being a zero-investment period when these enquiries had originally been initiated. Whilst there was a pipeline of approximately £900,000, it was noted that trading conditions were anticipated to be tougher this coming year and therefore the forecast was currently being adjusted to reflect this.

CC Riggott reported that the team had adapted services as needed throughout the pandemic and that if it was more appropriate for businesses to be supported through the government schemes then business had been directed to that. It was hoped that once the county council was the most appropriate provider for these services then figures would improve.

**Boost European Regional Development Fund** – decrease in outputs was attributed to businesses responding to the pandemic with focus moving from growth to survival. The Committee noted that, for April to June 2021, outputs had started to recover to pre-pandemic levels, with outputs focussing on business growth including jobs and new businesses.

**Boost Recovery Grants** – the Business Growth and Innovation Service had established and implemented a small capital grants programme to support Lancashire small and medium enterprises in their response to the impact of the pandemic. As at the end of June, the service had defrayed £1,108,645.80 to 347 businesses.

CC Vincent was pleased to see that the figures showed how the economy was recovering with 40 new businesses established against a target of 10 in Quarter 4 (January to March) and 54 new businesses established against a target of 5 in Quarter 1 (April to June).

**Lancashire will be the place to visit** – it was noted that these targets were being reviewed as part of a new tourism growth strategy for the numbers of visitors to Lancashire, the economic impact of visitors to Lancashire, and full time equivalent jobs supported by the visitor economy.

### **Lancashire will be the place where everyone acts responsibly**

**Percentage of older people who were still at home 91 days after discharge from hospital into reablement/rehabilitation services** – although this figure was below the county council's target, it was still performing above regional and national averages. The Committee noted the challenge of keeping people in their own homes although rehabilitation services were performing well. The county council worked with a significant number of hospitals and were working on

improvements for information sharing. CC Gooch reported that this figure only needed increasing by 5 people, in order for the target to be met.

**Proportion of adults with learning disabilities who live in their own home** – although this was below target, performance was above the national average. The North West was a Centre for Excellence in this area and the county council had a strong history of supporting people with learning disabilities to live in their own homes wherever possible. Some new schemes were also coming to fruition providing good quality accommodation for these people although building work and planning processes had been slowed down due to the pandemic.

**Proportion of adults and older people receiving long term services who are supported in the community** – the pandemic had affected this target due to people not wanting to call on care services, although improvements were now being seen in requests for home care support.

**Permanent admissions to residential and nursing care homes per 100,000 population aged 18-64 during the year** – although slightly below target, this continued to be monitored to understand the impact of the pandemic on this performance measure. Progress had been made, in particular for people with mental health problems who had traditionally been reliant on residential services, who were being supported more in the community.

**Permanent admissions to residential and nursing care homes per 100,000 population aged 65+ during the year** – this was in line with the national average. People had been very hesitant to go into residential care throughout the pandemic. Numbers were now beginning to rise although the focus remained on supporting people in their communities, wherever possible.

**Number of working days per full time equivalent lost to sickness absence** – a slight increase had been observed in May and June 2021, which had also been seen across the country. Although improvements had been seen during Covid and this had partly been due to new ways of working, people isolating and improved hygiene, it was important to recognise that many staff working in front line services had continued working face to face. A programme of activity was being developed to reduce sickness levels, to make the county council as flexible, efficient and responsive as possible, focussing on customer need, staff and service delivery need. The county council was also working with other councils to share best practice and it was hoped that absence levels would continue on a positive trajectory.

**Revenue forecast outturn % variance to budget** – the Quarter 1 forecast was an underspend of £5.219m, due to a combination of variances including underspends on Treasury Management and Children's Social Care offset by overspends on Adult Services and Highways and Transport. It was noted that, as this was the first forecast of the financial year, assumptions had been made based on expenditure and income to date, and knowledge of future activity from Budget Holders. The impact of the Covid pandemic would be closely monitored as restrictions were lifted, as the impact of pent up demand was still awaited.



Volatility in actual demand could lead to a significant variance from the current forecast at a later date.

CC Williamson asked that the Corporate Risk Register be brought to the next meeting to enable the Cabinet Committee to look at the risks and issues faced by the county council together with the performance outcomes.

**Resolved:** The Cabinet Committee on Performance Improvement noted the Quarter 1 performance update against the agreed Corporate Strategy indicators.

## **5. Public Health Outcomes in Lancashire**

A report was presented by Sakthi Karunanithi, Director of Public Health, on the key public health outcomes indicators for Lancashire, benchmarked against England and the North West Region, along with a breakdown by district level where data was available. It was noted that the indicators highlighted worse outcomes in Lancashire compared to the national average.

Service level key performance indicators that the county council's public health team were responsible for were provided. The report also outlined the steps being taken to recover from the Covid pandemic and restore and reform our public health services.

It was reported that individual Public Health services would be highlighted in future reports to the Cabinet Committee.

The globally agreed meaning of health was complete physical, mental, social and spiritual wellbeing. Only approximately 20% of health was determined by access to good quality clinical and care services with the rest determined by behaviours, education, income, jobs, family support, community safety, housing, transport, environment, access to green space and how we are able to live a healthy lifestyle.

The steps taken to improve our health and wellbeing would, in turn, improve our planet's health and the county council had a huge opportunity to make a difference to the wellbeing of the residents of Lancashire.

In relation to key outcomes – how long someone was expected to live and how well they live - there were a number of determinants for this. In Lancashire, although there is a wider variation within the county, it was reported that as an average we had more access to woodland than the national average, in addition to less overcrowding, less unemployment and less homelessness. In Lancashire, we supported people with learning disabilities very well and we had a good youth justice system and pupil absence service reflecting better outcomes that determined overall health.

Both male and female healthy life expectancy in Lancashire had been decreasing since 2009-2011 and figures were significantly worse than the England average,

although the decreases were not statistically significant. It was expected that males would spend 17.9 years in poor health and females 20.3 years in poor health which were long periods of time to live with disabilities or health conditions. There was therefore lots of opportunity in Lancashire to add years to life, in addition to life to years.

In order to influence positive health and wellbeing for the residents of Lancashire, the county council needed to:

- provide services to people on an individual level;
- improve community level wellbeing by promoting community groups/assets including natural assets;
- embed wellbeing into all the policies the county council establishes.

The Public Health Team had core expectations in terms of delivering statutory services. The team worked with experts within the county council to improve wellbeing, in addition to partners. There was an opportunity to add £10bn to the economy if health issues could be mitigated. It was noted that the essential mandatory services expected to be delivered included health visiting, school nursing services, health checks, contraception and sexual health services and alcohol and substance misuse services. The pandemic had impacted all these services differently. For example, support to mothers and babies and people dependant on alcohol or drugs had either been maintained or had improved through either virtual or face to face support. The Committee noted that the county council's alcohol and drugs misuse service was regarded as one of the best in the country.

For sexual health and stopping smoking services, the percentage of people supported in order to deliver a successful outcome had continued to improve, although the numbers of people going through public health services had declined over the past year.

The aim of the NHS health checks were to diagnose high blood pressure, chronic kidney disease, diabetes and early signs of dementia in apparently healthy individuals, and any issues detected would be referred onto the NHS. As the main providers of this service were general practices and surgeries had not been open, figures for health checks had declined significantly to around 200 in the past year which was a concern. Due to other pressures in the NHS, prevention services were not seen as a priority at the moment. However, whilst adhering to infection control standards, anyone with urgent care needs or suspicions of cancer had either been fast-tracked or had received online consultations. The county council was currently exploring options, continuing to work closely with GPs and looking at carrying out health checks in the community e.g. in libraries, leisure centres and workplaces.

Due to Covid having a big impact on the Public Health Team, the public health transformation programme had had to be paused. However, this was now in the process of being re-established with a refreshed 10 year mission to support Lancashire as a thriving place enabling residents to lead safer, fairer and

healthier lives. There were 3 main strands for the programme - '**Respond**', '**Recover**' and '**Reform**', the details of which were outlined in the report. The Public Health Team were also starting to recover services lost during the pandemic and continued to prioritise young babies and children and maintain performance for health visiting and school nursing services. The Team had prioritised health checks and healthy weight and obesity as the next services to look into improving, whilst trying to identify different ways of improving wellbeing. In addition, work with partners, District Councils and the NHS was underway looking at community wellbeing through various initiatives.

As it was some time since an overview of public health had been provided to Committee, the Committee's support had been requested to improve public health services and, more importantly, to embed improving the public health agenda as part of the Corporate Strategy and how this is monitored going forward.

CC Buckley queried why mental health was not included under the mandatory public health services listed in the report given that the Covid pandemic had put a great strain on people's mental health and the fact that mental health remained the main reason for sickness absence. CC Buckley raised concern about the mental health of young people leaving school and universities and how this would be addressed. It was reported that, although the services listed were those which had been identified nationally as part of the statutory delivery of services, the county council recognised that mental health was of paramount importance and offered a range of mental health and wellbeing services including supporting young people's mental health and wellbeing, suicide prevention and an alcohol and substance misuse service. Members were reassured that the county council invested a huge amount of resources into supporting people's mental health, including having a specific wellbeing at work programme.

Looking at economy and health and how these services could connect, it was reported that wellbeing at work had a lot of impact on this. The Public Health Team were looking to meet with Cabinet Members and Service Leads to discuss this issue.

CC Green pointed out that there were various links to public health issues across different service areas and portfolios that needed to be made or strengthened and that there was a lot of work to do collectively. He agreed that health checks needed to be taken out into communities, as those who were reluctant to visit GPs surgeries were more likely to engage with a community based service. CC Green stated the importance of 'achieving the best start in life' and 'community wellbeing' being among the immediate priorities.

CC Ali paid tribute to the tremendous work done by the Public Health Team, particularly during the Covid pandemic. CC Ali stated that, with children now returning to school, the Healthy Child Programme needed to be a priority and that, going forward, it was crucial for mental health services to also be given priority. In relation to the issue around face to face GP appointments, CC Ali appreciated that there were some GP practices who were keen to get back to

normal but that many other practices very rarely offered face to face appointments. This was a major problem, especially for elderly people who may not be able to use or have access to technology for virtual appointments. We needed to move forward with the prevention agenda and to reduce the number of hospital admissions. CC Ali considered that a strong, clear message needed to be sent to GP surgeries asking that patients be seen face to face, wherever possible.

CC Gooch emphasised the importance of community health and hoped that a substantial percentage of money the Government was raising from the National Insurance levy would be passed onto local authorities to take forward the prevention agenda and avoid people having to access NHS acute services. CC Towneley stated that the public health of Lancashire residents was fundamental and that she was particularly interested in encouraging and supporting young people to become more active which could, in some cases, avoid the need for them to access NHS services.

CC Vincent agreed that the lack of face to face GP appointments needed to be addressed, particularly in relation to elderly residents who may not be able to access technology for virtual appointments.

CC Williamson emphasised that although the county council could embed these public health issues, we needed partners to do the same.

The Committee's concerns in relation to the lack of face to face appointments at GP surgeries would be referred onto the NHS and their response provided to the Cabinet Committee.

**Resolved:** The Cabinet Committee agreed to:

- (i) Support the steps being taken to improve the performance of public health services.
- (ii) Include public health outcomes in monitoring the impact of the corporate strategy and wider council's service delivery on improving health and wellbeing and reducing health inequalities across Lancashire.

## **6. Urgent Business**

There were no items of Urgent Business.

## **7. Date of Next Meeting**

The next meeting of the Cabinet Committee on Performance Improvement would be held at 2.00pm on Thursday 25<sup>th</sup> November 2021.

## **8. Notice of Intention to Conduct Business in Private**

**Resolved:** That the Notice of Intention to Conduct Business in Private be noted.

## **9. Exclusion of the Press and Public**

**Resolved:** That under Section 100A(4) of the Local Government Act 1972, the press and public be excluded from the meeting during consideration of the following item of business on the grounds that there would be a likely disclosure of exempt information as defined in the appropriate paragraph of Part I of Schedule 12A to the Local Government Act 1972 as indicated against the heading to the item.

## **10. Appendix B to Item 5 - Public Health Outcomes in Lancashire**

All issues in relation to Public Health Outcomes in Lancashire had been discussed under Item 5.

## **11. Update Report on the Performance of Lancashire County Council's Waste Processing Facilities**

Steve Scott, Head of Service – Waste Management presented an update report on the performance of Lancashire County Council's waste processing facilities.

Information was provided to the Cabinet Committee on the following:

- Residual waste – production of refuse derived fuel;
- Residual waste – mass loss operations;
- Residual waste performance summary;
- Recyclables – Materials Recovery Facility;
- Transport contract;
- Financial summary;
- Coronavirus Pandemic; and
- Governance.

**Resolved:** That the report and the information provided at Appendix 'A' be noted.

L Sales  
Director of Corporate Services

County Hall  
Preston



## Cabinet Committee on Performance Improvement

Meeting to be held on Thursday 25 November 2021

### Part I

Electoral Division affected:  
(All Divisions);

#### **Corporate Priorities:**

Delivering better services;  
Protecting our environment;  
Supporting economic  
growth;  
Caring for the vulnerable;

### **Corporate Strategy Monitoring report – Quarter 2 2021/22 performance update** (Appendices 'A & B' refer)

Contact for further information:

Michael Walder, Tel: 01772 533637, Senior Business Intelligence Manager,  
michael.walder@lancashire.gov.uk

#### **Brief Summary**

Corporate Strategy monitoring reports against the indicators agreed to monitor the 5 objectives of the current Corporate Strategy have been regularly presented to the Cabinet Committee on Performance Improvement since 19 February 2020.

Following Cabinet's agreement of the new corporate priorities for 2021-2024 at on 7 October 2021, the report has now been reformatted and updated to monitor performance against each of the new corporate priorities (delivering better services; protecting our environment; supporting economic growth and caring for the vulnerable).

Existing key performance indicators (KPIs) are now reported under each new corporate priority, along with service developments which contribute to the delivery of those priorities. Additional metrics and targets will be developed for potential inclusion in future reports. Appendix 'A' provides the latest performance updates.

In addition to supplement this performance information and to give an overview of other recent work and notable achievements, Appendix 'B' sets out a list of national award nominations that the county council has been shortlisted for since June 2020.

#### **Recommendation**

The Cabinet Committee on Performance Improvement is asked to note and comment on:

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| <ul style="list-style-type: none"><li>(i) The performance and additional information set out at Appendix 'A'.</li><li>(ii) The information set out at Appendix 'B'.</li></ul> |
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## **Detail**

Key Performance Indicators, associated targets and other relevant annual performance reports were agreed by Cabinet on 6 February 2020 against the 5 objectives of the Corporate Strategy.

Monitoring against these indicators, was agreed to form the content of quarterly corporate performance monitoring reports to the Cabinet Committee on Performance Improvement and these have been regularly presented to the Committee since 19 February 2020.

Following the agreement of the new corporate priorities at Cabinet on 7 October 2021 the report has now been reformatted and updated to monitor performance against each of the new corporate priorities (delivering better services; protecting our environment; supporting economic growth and caring for the vulnerable).

The previously established indicators are now reported under each of the new corporate priorities, along with the highlighting of other service developments which are contributing to the delivery of the new priorities and for which additional metrics and targets can be developed for potential inclusion in future reports.

The report at Appendix 'A' provides the latest available quarter 2 2021/22 performance information and associated commentary on the current position against each indicator including any related issues and required actions, along with information on some additional development areas supporting the delivering of the corporate priorities.

Attention is drawn to the following key areas of performance against the KPIs in the report.

Highlights of good performance includes:

### **Delivering Better Services**

- Safety carriageway defects repaired within 20 working days (non-urgent)
- Percentage of Non-Traffic Management (NTM) lamp-out faults repaired within 5 working days
- Percentage of Traffic Management (TM) lamp-out faults repaired within 20 working days
- Revenue forecast outturn % variance to budget

### **Supporting Economic Growth**

- New businesses established by Boost



- Number of visits to libraries
- Number of People's network (PNET) sessions in libraries
- Number of e-downloads (via libraries)

#### Caring for the Vulnerable

- Percentage of children and young people who received targeted early help support from Children and Families Wellbeing service which successfully met their identified needs
- Percentage of children looked after who are actually living in Lancashire
- Quality of community service providers
- Proportion of adults with learning disabilities who live in their own home
- Proportion of adults and older people receiving long term services who are supported in the community.
- Permanent admissions to residential and nursing care homes per 100,000 population during the year.

Indicators performing below the desired level and/or due to the impact of the COVID-19 pandemic which have had a detrimental effect on performance include:

#### Delivering Better Services

- Safety carriageway defects repaired within 4 hours & 2 days (emergency & urgent)
- Safety carriageway defects repaired within 5 working days (non-urgent)

#### Supporting Economic Growth

- Number of Rosebud loans provided to new or existing businesses
- Number of jobs created by Boost

#### Caring for the Vulnerable

- Percentage of adults with learning disabilities in employment

In addition, to supplement this performance information, and to give an overview of other recent work and the many notable achievements, Appendix 'B' sets out a list of national award nominations that the county council has been shortlisted for since June 2020.

#### **Consultations**

N/A

#### **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**

Paper	Date	Contact/Tel
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N/A		
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Reason for inclusion in Part II, if appropriate

## Delivering Better Services

Key for performance:

On track/good	Slightly below desired level	Requires improvement
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Performance Indicator	Frequency	Directorate	Good is	2019/20 Outturn	2020/21 Outturn	Quarter 1 (April- June) 2021/22	Quarter 2 (July – Sep) 2021/22	2021/22 Target
Safety carriageway defects repaired within 4 hours (emergency)	Quarterly	Growth, Environment & Transport	High	92.63%	91.95%	88.10%	88.71%	95%
Safety carriageway defects repaired within 2 working days (urgent)	Quarterly	Growth, Environment & Transport	High	92.02%	86.79%	82.29%	85.42%	95%
Safety carriageway defects repaired within 5 working days (non-urgent)	Quarterly	Growth, Environment & Transport	High	86.06%	85.28%	79.2%	87.29%	90%
Safety carriageway defects repaired within 20 working days (non-urgent)	Quarterly	Growth, Environment & Transport	High	94.29%	90.14%	95.42%	94.53%	90%
Percentage of Non-Traffic Management (NTM) lamp-out faults repaired within 5 working days	Quarterly	Growth, Environment & Transport	High	New quarterly measures starting from Q1 2020/21	91%	97%	97%	90% within 5 working days
Percentage of Traffic Management <sup>TM</sup> lamp-out faults repaired within 20 working days	Quarterly	Growth, Environment & Transport	High	New quarterly measures starting from Q1 2020/21	89%	100%	98%	90% within 20 working days

**Safety carriageway defects.** Quarter 2 (Q2) 2021/22 has seen a continuation of the increase in defects reported both by Highways Service Inspection (HSI) and the public. To date, compared to 2019 data, there has been a 32% increase in HSI reported defects and a 58% increase in public reported defects. Increased numbers of defects have been found predominantly in the 10 and 20-day category for both HSI and public reports. These relate to secondary distributor/ B&C class roads and link roads (10 day 3 and 6 monthly inspections) and local access roads/ unclassified roads (20-day 12 monthly inspections).

September figures show improved performance as increased resources were deployed to respond to the increased demand.

**Street lighting fault repair.** Performance in Quarter 2 is broadly in line with that of Quarter 1 (2021/22) but is significantly improved from this time last year for both Traffic Management (TM), 87% Q2 2020/21, and non-TM (NTM) faults, 92% Q2 2020/21. Our overall performance that measures both TM & non-TM performance combined has also improved and is at 97% compared to 92% for Q2 2020/21.

There are still problems accessing some columns due to increased parked cars due to people continuing to be working from home and other Covid-19 issues, the return of staff who were shielding and the continued hard work of the Street Lighting Team has seen an improvement in the percentage of columns repaired within the specified timescale.

Performance Indicator	Frequency	Directorate	Good is	2019/20 Outturn	2020/21 Outturn	2021/22 Quarter 1 (April –June)	2021/22 Quarter 2 (July –Sep)	2021/22 Target
Number of working days per full time equivalent lost to sickness absence	Quarterly	Chief Executive and Director of Resources	Low	Apr 2019 to March 2019 12.39 days per FTE	Apr 2020 to March 2021 10.76 days per FTE	July 2020 to June 2021 10.98 days per FTE	October 2020 to September 2021 11.77 days per FTE	9.83 days per FTE (target pending review)
Revenue forecast outturn % variance to budget	Quarterly	Chief Executive and Director of Resources	Low	0.22%	-2.28%	-0.59%	-1.87%	0%

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Proportion of budget supported by reserves	Annual	Chief Executive and Director of Resource	Annual Statement – schedule to be confirmed
Audit report	Annual	Chief Executive and Director of Resources	Annual Statement – schedule to be confirmed
Progress on organisational development	Annual	Chief Executive and Director of Resources	Annual Report – schedule to be confirmed

**Sickness absence.** There is a steady rise in the sickness absence rate per FTE which has increased each month since May 21, following the lowest figures in April 21 (10.64). Recent month-by-month analysis comparing the number of absences over the last three years, indicated a similar trend for the June to September period, with 2021 figures being slightly below 2019. During this quarter, the number of new long-term absence cases has slowly declined from 183 to 114.

The top reasons for absence continue to be mental and behavioural disorders which account for 36.43% of days lost, a reduction since the last quarter (37.93%). Musculoskeletal related absences are second with 12.81%, followed by Covid-19, accounting for 10.02% of days lost. There has been a steady increase in the average number of days lost per Covid absence, from an average of 3.8 days in April to 6.3 days in September. The number of Long-Covid absences continue to be closely monitored with HR resources directed to provide support and guidance to services for these cases.

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**Revenue forecast outturn % variance to budget.** The Q2 forecast is an underspend of £16.441m, which is 1.87% of the county council's net budget. The underspend is due to a combination of variances across services including underspends on Treasury Management and Children's Social Care offset by overspends on Adult Services and Highways and Transport. This is the second forecast of the financial year. A number of assumptions are made based on expenditure and income to date and knowledge of future activity from budget holders. The impact of the pandemic is being closely monitored as restrictions are now lifted, and demand returns to a pre pandemic level. There may be significant variances as the backlog of issues pertaining to the pandemic are dealt with.

**Additional service developments.** In addition to the above established key performance indicators many other service developments, projects and achievements are ongoing which support the Delivering Better Services corporate priority. Performance metrics are being developed for these areas, along with associated targets where appropriate, for inclusion in future reports. These service development areas include:

- Initiating a transformation programme (Our Improvement Journey) in the first quarter of 2020 which has been reshaped during the pandemic.
- Rolling out additional technology during the early stages of the pandemic to support new ways of working with an ambitious programme of digital change. The first step is the replacement of the core Enterprise Resource Planning system which is underway. This will support delivery of better services in a number of ways including the provision of improved data and analysis across key areas such as HR, procurement and finance, to support improved decision making and resource decisions.
- Major changes are already underway in Education & Children's services, with large scale transformation of key parts of the workforce to establish the Family Safeguarding Model, which is already showing a reduction in the number of children being taken into care, which will improve the quality of life for young people and have the added advantage that it will improve the budget profile.
- A programme of change is underway within Adult Services to initiate widespread improvement using the '3 conversations model'.
- A review of the HR & Skills, Learning and Development service to ensure that the skills and capacity required to support delivery of the Improvement Journey and service improvement are understood and that we have the right resources allocated to priorities.
- Refreshed staff survey beginning in Nov 21, which will provide additional data and metrics on staff engagement – providing key indicators of improvement including the Employee Engagement Index and a Net Promoter Score, which will underpin targeted work to measurably 'drive-up' engagement.

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- A refreshed performance framework underpinning the Improvement Journey (IJ), providing evidence of improvement against the 4 cornerstones (our culture, our talent, our ways of working and our organisation).
- Developing the programme level reporting required to monitor the performance of the IJ programme (through the development of key indicators, reporting and activity dashboards).
- Further development of the performance engagement to increase usage and uptake, providing staff and managers with an improved understanding of individual and team performance.

## Protecting our environment

Performance Indicator	Frequency	Directorate	Good is	2019/20 Outturn	2020/21 Outturn	2021/22 Quarter 1 (April-June)	2021/22 Quarter 2 (July – Sep)	2021/22 Target
Percentage of recycling, reuse and composted	Quarterly	Growth, Environment & Transport	High	45%	44.4%	45%	43%*	50% (current national target)

*\*The recycling % reported each quarter is based on forecast for full year*

**Recycling.** The forecast for this year has dropped by two percentage points and is mainly due to continued high volumes of doorstep collected residual waste. The out-turn tonnage level is expected to be similar to 2020/21 around 418,000 tonnes (Q1 out-turn estimate 407,000t). Current levels of kerbside collected recyclables are slightly lower than the tonnes reported in Q1, with increased recyclables at recycling centres which could be a contributing factor of this reduction at kerbside. Although not at similar levels to two years ago, pre-pandemic (2019/20), recycling centres are seeing signs of returning to normal levels, over the last few months throughput is back up at 80%.

In terms of the processing of residual waste at Thornton and Leyland Waste Treatment Facilities, the plants continue to operate at full capacity, with anticipated output tonnes consistent with last year. Towards the end of last year, early this, Thornton Waste Treatment Facility made changes to their operations to allow them to manage these continued high volumes of kerbside residual waste. Over the last few months, equipment (known as star screen) has been introduced at Thornton and is now operational hence more Compost Like Output (CLO) being recovered now rather than Refuse Derived Fuel (RDF) resulting in much improved mass loss performance.

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Performance Indicator	Frequency	Directorate	Current Performance
Sustainable transport and travel	Annual	Growth, Environment & Transport	Annual Report – schedule to be confirmed

**Additional service developments.** In addition to the above established key performance indicators many other service developments, projects and achievements are ongoing supporting and delivering the Protecting our Environment corporate priority. Performance metrics are being developed for these areas, along with associated targets where appropriate, for inclusion in future reports.

These development areas include:

- An ambitious carbon reduction and nature recovery resolution that seeks to 'transition the Lancashire economy away from carbon by 2030 and address the biodiversity crisis'. A new Carbon Strategy Team is being created with responsibility for the development of mitigation and adaptation measures across the asset portfolio.
- Nearing completion of an ambitious programme of LED street lighting conversion for all 152k streetlights - reducing carbon emissions by 84,400 tonnes (equivalent to driving over 3 billion miles in a diesel car) and saving £40 million in energy costs by March 2022.
- Developing two submissions for the Local Government Association's Pass the Planet campaign. The low carbon schemes will be showcased by the LGA in the autumn and the team have produced two short videos to show the work done and the impacts achieved.
- Recycling and CO<sub>2</sub> reduction in carriageway resurfacing - new process being used to recycle materials saving bitumen and reducing carbon emissions by 40%.
- An additional focus on recycling and working to become a single use plastic free organisation.
- Upgrading and installing far more energy efficient boilers in a number of Lancashire County Council properties including care homes.
- Implementing a project to install solar arrays and source heat pumps on three libraries, projected financial savings are £36,371 per annum with combined carbon emission reductions of 21.6 tonnes per annum. The works will also improve the internal comfort of the libraries.
- Working with partners on the installation of electric car charging points on the highway network and at 150 locations

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## Supporting Economic Growth

Performance Indicator	Frequency	Directorate	Good is	2019/20 Outturn	2020/21 Quarter 3 (October - December)	2020/21 Quarter 4 (January - March)	2021/22 Quarter 1 (April –June)	2021/22 Quarter 2 (July – Sep)	Project Targets
Number of Rosebud loans provided to new or existing businesses	Quarterly	Growth, Environment & Transport	On target	£1,581,000-9 investments	£300,000 1 investment	0	£569,000 3 investments	£75,000 1 investment	5-year target is £11.25m covering 150 investments (July 2019 - June 2024)
Number of jobs created by Boost	Quarterly	Growth, Environment & Transport	On target	242.22 Target 110	80.93 Target 100	42.05 Target 100	128.33 Target 100	50.83 Target 100	1,000 jobs target (Jan 2019 - Dec 2022)
New businesses established by Boost	Quarterly	Growth, Environment & Transport	On target	25 new businesses Target 25	26 new businesses Target 20	40 new businesses Target 10	54 new businesses Target 5	38 new businesses Target 5	200 new businesses Jan 2019 - Dec 2022

**Rosebud.** Appetite for term debt products remains low with businesses still sitting on healthy cash balances following government backed Covid loans schemes. Pipeline is low as expected and deal flow is harder to gather. This will be another challenging quarter but hopefully some positive developments in the marketplace will come in early 2022.

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**Boost ERDF Support.** The Boost European Regional Development Fund (ERDF) core programme is targeted at supporting high growth businesses to achieve their potential. The decrease in outputs over the past year can be attributed to businesses responding to the pandemic, with their focus moving from growth to survival. Boost adapted their service offer to support those businesses through enquiry and advisor provision

- Enquiries for the 2020/21 financial year were 2,494 compared with enquiries for 2019/20 1,883. An increase of 611 enquiries received by the Boost Team.
- Boost advisors have given over 2,000 hours of business support to over 1,600 businesses needing Covid advice and guidance.

For July-September 21, the outputs have started to recover to pre-pandemic levels however new jobs created is still a challenging area, as it is nationally.

**Boost Recovery Grants** - Under the umbrella of the Boost ERDF project the Business Growth and Innovation service set up from scratch and implemented a small capital grants programme to support Lancashire SMEs in their response to the impact of the pandemic. This involved the review of over 1,000 Expressions of Interest and the issuing of 500+ Application Forms to eligible businesses in the county council, Blackburn with Darwen, and Blackpool areas. This was in addition to the planned work priorities of the service.

Most of the grant defrayal was completed before the end of March 2021 with many staff across the team working hard to distribute the money to grateful businesses. The Recovery Grants programme has now completed delivery and distributed all relevant funds so there is no change to the figures. To the end of June 2021, the service has defrayed £1,108,645.80 to 347 business.

Performance Indicator	Frequency	Directorate	Current Performance
Number of visitors to Lancashire	Annual	Growth, Environment and Transport	Annual Report – schedule to be confirmed.
The economic impact of visitors to Lancashire	Annual	Growth, Environment and Transport	
Full Time Equivalent jobs supported by the visitor economy	Annual	Growth, Environment and Transport	

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Progress on the apprenticeship levy	Annual	Chief Executive and Director of Resources	Annual Report – schedule to be confirmed
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## Educational attainment

**Key Stage 4 (KS4).** 2020/21 figures are due in late November 2021 and available to report soon thereafter.

**Early years Foundation Stage and Key Stage 2.** Assessments did not take place for the period 2019/20 and 2020/21 (EYFS not mandatory during this period) hence the omission of performance updates under these areas.

Performance Indicator	Frequency	Directorate	Good is	2018/19	2019-20	2020-21	2021-22	2021/22 Target
Percentage primary pupils offered one of top three preferences	Annual	Education and Children's Services	High	97.9% (April 19)	97.1% (April 20)	97.1% (April 21)	98.6% (April 21)	Maintain Quartile 2
Percentage secondary pupils offered one of top three preferences	Annual	Education and Children's Services	High	95.3% (March 19)	95.3% (March 20)	95.3% (March 21)	96.3% (March 21)	Maintain Quartile 2

**School placements.** Above on target figures previously report to the Committee. 2022/23 admissions figures will be published mid-2022.

Please note all data was correct at the time of publication, however they may change due to validation processes including for statutory reporting.

Performance Indicator	Frequency	Directorate	Good is	2017/18 Performance	2018/19 Performance	Latest Performance	2021/22 Target
Proportion of children excluded from school	Quarterly	Education and Children's Services	Low	0.18% (2017/18)	0.19% (2018/19)	0.09% (2019/20)	0.09%

**Exclusions.** Above on target figures previously report to the Committee. 2020/21 exclusion figures will be published July 2022.

Performance Indicator	Frequency	Directorate	Good is	2019/20 Outturn	2020/21 Outturn	2020/21 Quarter 1 (April –June)	2021/22 Quarter 1 (April –June)	2021/22 Target
Percentage of young people in employment education or training (EET)	Quarterly	Education and Children's Services	High	93% (Dec 2019 – Feb 20 average)	93.8% (Dec 2020 – Feb 2021 average)	93.2% (June 2020)	95.1% (June 2021)	94.7% (Dec 2020-Feb 2021 average)
Percentage of young people in education or training (EET) SEND pupils	Annual	Education and Children's Services	High	88.9% (Dec 2019 – Feb 20 average)	90.3% (Dec 2020-Feb 2021 average)	89.1% (June 2020)	89.9 % (June 2021)	86% (Dec 2020-Feb 2021 average)

**16/17 year olds in Employment Education or Training (EET).** Above on target figures previously reported to the Committee. Finalised Q2 figures are due in late November 2021 and will be available to report thereafter.

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Performance Indicator	Frequency	Directorate	Good is	2019/20 Outturn	2020/21 Outturn	2021/22 Quarter 1 (April –June)	2021/22 Quarter 2 (July – Sep)	2021/22 Target
Number of visits to libraries (annual cumulative indicator)	Quarterly	Education and Children's Services	High	3,486,877 (2019/20)	477,981 (2020/21)	265,139	393,140 658,279 (cumulative total)	1,400,000  (Target reviewed: See Notes) Previously 4,000,000
Performance Indicator	Frequency	Directorate	Good is	2019/20 Outturn	2020/21 Outturn	2021/22 Quarter 1 (April –June)	2021/22 Quarter 2 (July – Sep)	2021/22 Target
Number of PNET sessions (annual cumulative indicator)	Quarterly	Education and Children's Services	High	504,007 (2019/20)	55,646 (2020/21)	28,639	39,605 68,244 (cumulative total)	150,000 (Target reviewed: See Notes) Target previously 621,000
Number of library events organised (annual cumulative indicator)	Quarterly	Education and Children's Services	High	11,718 (2019/20)	205 (2020/21)	48	103 151 (cumulative total)	1,000 (Target reviewed: See Notes) Target previously 8,400

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Number of e-downloads (annual cumulative indicator)	Quarterly	Education and Children's Services	High	353,007 (2019/20)	930,301 (2020/21)	242,993	228,301  471,294 (cumulative total)	800,000 (Target reviewed: See Notes) Target previously 293,908
Number of volunteers in libraries	Quarterly	Education and Children's Services	High	677 (2019/20)	167 (2020/21)	143	78	250 (Target reviewed: See Notes) Target previously 600

**Use of Libraries.** Q2 2021/22 shows steady recovery of visitor numbers, though there are still some Covid safety precautions in place within the buildings leading to some opening hours being lost and restrictions on capacity. New target has been set taking these limitations into account.

**People's network (PNET) sessions.** Sessions during Q2 have increased despite still being subject to Covid safety regulations, meaning significantly fewer terminals were available to ensure distancing and shorter sessions, as cleaning time was required between customers. It is hoped usage will increase as more terminals are made available, but no dates for this have been confirmed as yet. New target has been set taking these limitations into account.

**Library events.** During Q2 online events have continued to remain popular, including adult's and children's book clubs, author interviews, activities etc. With some 730 individuals "attending" virtually. However, a significant number of events, particularly for children, re-started in library buildings, including many connected with the Summer Reading Challenge for young library users. However, capacity restrictions are thought likely to continue, which is reflected in the new target set.

**e-downloads.** The eBook service has seen significant increase in registered members and usage throughout the pandemic restrictions - with new formats - eMagazines, eNewspapers and eComics - being made available, although currently some issues with obtaining data from a new supplier has proved a limiting factor affecting some figures. Whilst Q2 has seen some levelling off in usage, it appears those who have moved to the electronic formats are staying with them, which is reflected in the new target set.

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**Volunteers in libraries.** Figures for this measure are not cumulative as month on month it is likely many of the same individuals will make up much of the total. Q2 again saw only limited volunteer operated services running, with 68 volunteers on Home Library Service deliveries. Also 10 Culture Hack volunteers attended a session in-library, but other volunteers will not be able to return to libraries until restrictions are lifted (hopefully in the next Quarter) and will depend on the rollout of in-library events and willingness of individuals to resume volunteer duties.

The Library service view that although most of the figures are rated Green due to the new more realistic targets set but this is conditional on the continued impact of the relaxation of restrictions. However, the Events and Volunteers metrics are still lagging somewhat the new targets setup at the end of Q2 as the relaxation of restrictions factor had not started to take effect yet on these areas. Therefore it was agreed they should receive an Amber rating for Q2, as the expectations is they will catch up once restrictions are further and/or fully lifted.

**Additional service developments.** In addition to the above established key performance indicators many other service developments, projects and achievements are ongoing helping deliver the Supporting Economic Growth corporate priority. Performance metrics are being developed for these areas, along with associated targets where appropriate, for inclusion in future reports.

These service development areas include:

- £15bn opportunities to invest in major development and infrastructure across the county.
- A £1.75bn Lancashire County Council Development Pipeline.
- Delivery of the £256m South Lancaster Growth Catalyst including major road, bus, cycling and walking investment supported by Housing Infrastructure Fund, unlocking delivery of over 9000 houses and employment land.
- A £12.8m Growth and Recovery Programme for Redefining Lancashire.
- The Eden North project, which is an exciting landmark opportunity with £125m investment creating around 2,000 construction jobs with an anticipated 1m visitors. This is a key driver for post-Covid green recovery in the North West.
- The Preston Western Distributor which provides direct access to new housing developments and an alternative to rush hour traffic in the city centre and improves access to the motorway from Warton Enterprise Zone. It also supports the delivery of a new parkway rail station.

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- Lancashire Central and Samlesbury Enterprise Zone which is a 3 million sq. ft of commercial floorspace including high tech industrial and research, advanced manufacturing, engineering and logistics. This is a £500m investment including major infrastructure and transport improvements.

## Caring for the vulnerable

Performance Indicator	Frequency	Directorate	Good is	2019/20 Outturn	2020/21 Outturn	2021/22 Quarter 1 (April-June)	2021/22 Quarter 2 (July – Sep)	2021/22 Target
Percentage of children and young people who received targeted early help support from Children and Families Wellbeing service which successfully met their identified needs	Quarterly	Education and Children's Services	High	65.5%	64%	70%	69%	66%
Percentage of children looked after who are actually living in Lancashire	Quarterly	Education and Children's Services	High	79.9% March 2020	80.0% March 2021	81.2% June 21	81.7% September 2021	80%

**Children and Families Wellbeing Service.** Overall performance in Q2 dipped slightly caused by the usual (seasonal) increase in families becoming disengaged or withdrawing consent during August. Encouragingly, during July 71% of families receiving targeted support had their needs fully met, and in September this rose to 74%, demonstrating the positive impact of the practice development workshops being delivered across the service. More in-depth analysis is being undertaken on families who become disengaged in order to fully understand these cases.

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**Looked after children actually living in Lancashire.** This indicator remained above target at the end of Q 2 2021/22 (81.7%). Social care teams, including fostering and residential teams have worked with commissioning colleagues and with independent fostering and residential providers to ensure children and young people can remain within their communities, where possible, enabling them to continue to access their educational establishments and be close to family and friends where it is safe to do so.

Performance Indicator	Frequency	Directorate	Good is	2019/20 Outturn	2020/21 Outturn	2021/22 Quarter 1 (April- June)	2021/22 Quarter 2 (July – Sep)	2021/22 Target
Percentage of adults and older people whose desired safeguarding outcomes are fully met	Quarterly	Adults Services and Health and Wellbeing	High	63.0%	65.4%	65.9%	66.9%	70.0%
Percentage of Care Homes in Lancashire rated as Good or Outstanding – all Care Home provision (LCC and non-LCC maintained)	Quarterly	Adults Services and Health and Wellbeing	High	84.8%	83.9%	81.8%	80.1%	83.5%
Percentage of care providers in the community rated as Good or Outstanding - all Community Based provision (LCC and non-LCC maintained)	Quarterly	Adults Services and Health and Wellbeing	High	94.2%	95.6%	95.3%	96.0%	96.0%

**Safeguarding outcomes.** There has been a slightly improved position in the proportion of people who have indicated that their safeguarding outcomes were fully met, with performance rising to 66.9% within Quarter 2 of 2020/21. 97% of people indicated that their desired safeguarding outcomes were partially or fully achieved. However, it continues to be monitored closely, as the detrimental

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impact resulting from the pandemic in relation to quality of care provided within the care settings has increased the number of referrals in relation to Neglect and Acts of Omission.

**Quality of care homes.** Throughout Lancashire there has been a further drop to 80% of care homes being rated good or outstanding by the Care Quality Commission (CQC), which puts Lancashire slightly under the national performance of 82%. This is largely due to the number of inspections increasing within the second quarter of 2021/22 with 32 taking place compared to 5 in the same time period in 2020/21. Of the 32, 10 of these have moved down in grade from previously being 'good' to now 'requiring improvement' and 1 from 'requiring improvement' to 'inadequate'.

Only 1 LCC maintained care home was inspected in this period which was Thornton House Home for Older People which rated as requires improvement (previously rated as good).

Lancashire County Council maintains 16 care homes for older people, 11 of which are currently rated good or outstanding (68.75%) with five care homes requiring improvement. The homes currently rated as requiring improvement are Castleford, Clitheroe; Dolphinlee, Lancaster; Woodlands, Clayton-le-Moors; Grove House, Adlington and Thornton House, Thornton Cleveleys. Three of these inspections took place in 2019 and the themes across the homes identified issues with record keeping, responsiveness to call bells, staff skill mix, staff shortages, quality assurance processes, handling of medicines and service management and leadership. Actions have been put in place to address these issues and resolve any behaviours identified.

Lancashire County Council also maintains 8 residential short break services for people with disabilities, two are currently rated as outstanding and six as good.

**Quality of community service providers.** Community care providers help people to live independently by offering care and support for people with learning disabilities, acute or chronic conditions, mental health needs or substance misuse problems. Across Lancashire, 96% of community care providers were rated as good or outstanding by the CQC, which is better than national performance (88%). LCC maintains 9 community care providers, 8 of which are supported living services and are all rated as good. The 'Shared Lives' service matches adults with learning disabilities, physical disabilities, older people and/or mental health needs with carers and their families, to live within their home, and become part of their family. The people living in Shared Lives continue to see their own family and friends as much as they want. This service is the largest in the country and is rated outstanding by CQC.

Inspections of community providers has also started to increase following the pandemic, with 7 inspections being published throughout Lancashire in the second quarter of 2021/22 (compared to 1 in the same period in 2020/21)

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Performance Indicator	Frequency	Directorate	Good is	2019/20 Outturn	2020/21 Outturn	2021/22 Quarter 1 (April- June)	2021/22 Quarter 2 (July – Sep)	2021/22 Target
Percentage of adults with learning disabilities in employment	Quarterly	Adults Services and Health and Wellbeing	High	2.02%	2.3%	1.9%	2.1%	3.1%

**Adults with learning disabilities in employment.** The number of Adults with learning disabilities in employment continues to be low and under target (as the national benchmark is 5.6%). The pandemic reduced some employment prospects impeding the opportunity for people with learning disabilities to be introduced to a working environment.

The response to the pandemic reorganised priorities internally and resulted in some of the staff within the adult disability employment support service being re-deployed into other business critical roles. This resulted in the reduction of some of the support and monitoring. Work has now started to resume in this area to review how more adults with learning disabilities can be supported into employment in the 2021/22 year, by both the role of the specialist support team and also providers of care and support services.

Performance Indicator	Frequency	Directorate	Current Performance
Public Health Outcomes in Lancashire	Annual	Adults Services and Health and Wellbeing	Report presented to 01/07/21 CCPI meeting. Additional metrics now being considered for inclusion in future reports.

Please note all data was correct at the time of publication, however they may change due to validation processes including for statutory reporting.

Performance Indicator	Frequency	Directorate	Good is	2019/20 Outturn	2020/21 Outturn	2021/22 Quarter 1 (April –June)	2021/22 Quarter 2 (July – Sep)	2021/22 Target
Percentage of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services	Quarterly	Adults Services and Health and Wellbeing	High	84.3%	81.6%	86.7%	85.2%	87.4%
Proportion of adults with learning disabilities who live in their own home	Quarterly	Adults Services and Health and Wellbeing	High	82.1%	83.0%	81.1%	90.9%	86%
Proportion of adults and older people receiving long term services who are supported in the community	Quarterly	Adults Services and Health and Wellbeing	High	69.7%	72.3%	71.5%	71.7%	72%
Permanent admissions to residential and nursing care homes per 100,000 population aged 18-64 during the year	Quarterly	Adults Services and Health and Wellbeing	Low	15.2	12.2	13.3	13.3	13.6
Permanent admissions to residential and nursing care homes per 100,000 population aged 65+ during the year	Quarterly	Adults Services and Health and Wellbeing	Low	672.6	482.2	589.6	662.2	600-680

**Percentage of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services.** The number of older people who are still at home 91 days after discharge (85.2%) is above the national average of 82.0% and the regional average of 82.2%. This indicator varies throughout the year, with seasonal issues impacting on the overall success rate.

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The council has significant working relationships with 5 main hospital trusts spread over 8 sites and those arrangements continued throughout the last year including the hospital discharge arrangements during the pandemic. Ease and timeliness of data capture varied between hospitals and there were often considerable time lags between discharges organised by the NHS occurring and the data being shared with the council to enable assessments to occur.

### **Proportion of adults with learning disabilities who live in their own home**

Current performance is above target for the year and significantly above the national average of 77.3%. The reported reduction in performance for quarter 1 initiated a deep dive of the quality of our data recorded in our client database, as the trend did not appear to be representative of what was happening in Lancashire. This data cleansing exercise revealed a significant number of service users where the required information had not been recorded. Performance reflects Lancashire County Council's commitment to ensuring that people who have a learning disability and/or autism are supported to live as independently as possible. Work has been undertaken to offer people a supported living option where possible and placement in residential care is not the preferred model of support.

**Proportion of adults and older people receiving long term services who are supported in the community.** The proportion of people receiving long term services supported in the community is just under target at Q2. The pandemic reduced the number of people admitted to residential care, but as measures have relaxed this is impacting those supported in the community, hence more are returning to a residential setting to meet their needs.

**Permanent admissions to residential and nursing care homes per 100,000 population aged 18-64 during the year.** Admission rates for people aged 18-64 remain lower than the England average of 14.6, and within target.

**Permanent admissions to residential and nursing care homes per 100,000 population aged 65+ during the year.** The number of older adults being admitted to a residential /nursing setting has increased significantly over the 2<sup>nd</sup> quarter; this is coupled with the number of people being discharged from hospital being very high. The rise in admissions has been directly affected by the increase in Discharge to Assess (D2A) activity and lack of home care capacity, which directly impacts short-term and long-term residential care

Admissions to residential and nursing homes across all age groups will continue to be monitored, as the impact of the pandemic on admissions is quantified. Many families have not considered care or residential homes for loved ones due to the significant restrictions on family contact. The increase in admissions demonstrates that more are returning to residential settings. There is potential for the number to continue to rise in Q3 as the NHS block book more care home beds and as the home care pressures increase further.

Please note all data was correct at the time of publication, however they may change due to validation processes including for statutory reporting.

**Health Checks.** Health checks are mainly delivered through GP practices in primary care, with a small amount of provision from other commissioned services in workplaces and in community settings. The programme was suspended during the pandemic, and Public Health England directed that no results were to be reported.

The health check has to be delivered in a face-to-face situation, and as such has been adversely affected by the pandemic. GP surgeries generally prioritised other activity and it became very difficult to deliver health checks in a pandemic-safe way. Similarly, the general population tended to avoid GP surgeries for all but essential visits. More recently the availability of test tubes for phlebotomy blood tests has further impacted on GP delivery. With the continued working from home arrangements many workplaces have not returned to previous capacity levels significantly affecting the availability of people eligible for a Health Check.

The restart of the NHS Health Check programme is a Public Health priority within the Healthy Hearts agenda and a series of mobilisation activities are already underway across Lancashire with support from CCG colleagues, community providers, Lancashire County Council Corporate Communications and the Programme Office.

**Additional service developments.** In addition to the above established key performance indicators many other service developments, projects and achievements are ongoing supporting and delivering the Caring for the Vulnerable corporate priority. Performance metrics are being developed for these areas, along with associated targets where appropriate, for inclusion in future reports.

These service development areas include:

- An extra £10m has been secured to extend support for SEND pupils.
- A clear ambition to innovate, modernise and provide flexible, responsive and person-centred adult social care services through embracing new technology, new housing models and adopting new ways of working.
- Further developing relationships with care providers who are keen to continue a dialogue about working together to develop new and innovative services based on people's choices.
- A clear ambition to ensure at least one extra care housing scheme in each district.

Please note all data was correct at the time of publication, however they may change due to validation processes including for statutory reporting.

### **July 2020**

- Business support officer was shortlisted for the Charity, Voluntary and Public Services category at the BAME Apprenticeship Awards 2020

### **August 2020**

- Lancashire County Council has been awarded the Defence Employer Recognition Scheme's (ERS) Gold Award for its support for the Armed Forces community.

### **October 2020**

- The Lancashire Digital Skills Partnership has been announced as Winner of the Digital Leaders 100 Award 2020. The Partnership has been named as winner of the DL100 Digital Skills or Inclusion Initiative of the Year Award beating off fierce competition from organisations around the country.

### **November 2020**

- Electrical apprentice with the Burnley street lighting team, who reached the finals of the Association for Public Service Excellence (ASPE) street lighting apprentice of the year award.

### **December 2020**

- Lancashire's local government pension scheme was named Local Government Pension Scheme Fund of the Year at a prestigious awards ceremony. The scheme won the award at the prestigious Local Authority Pension Forum Investment Awards, which were held online earlier this week.

### **May 2021**

- The work of staff supporting the Lancashire care market throughout the Covid-19 pandemic was recognised with the council being presented with a Collaboration Award by the Institute for Improvement in Public Services (ICiPS).

### **July 2021**

- The Burnley based Project Search won the national Project Search Spotlight Community Influence Award for the positive impact it has had on the local community and an Award for 100%+ Programme Employment Outcomes. One of the graduates was also shortlisted for the Graduate Keyworker Award.
- Children's Services residential and outreach worker team winner in the "Best Council Services Team" category in the MJ Awards.

- Adults Services have also been shortlisted in the LGC Awards "Partnerships" category for the ground-breaking care capacity tracker.
- The communications team was nominated for "Best Covid Response" in the Chartered Institute of Public Relations North West Awards for our Lancashire Temporary Staffing Agency recruitment campaign.

### **August 2021**

- Lancashire Trading Standards were doubly rewarded at The Anti-Counterfeiting Group (ACG) 2021 ACG Awards for Excellence in Anti-Counterfeiting Enforcement at a virtual event. The Team and a Senior Officer both received 'highly commended' at the event.
- Lancashire Volunteer Partnership was shortlisted for an APSE award in the category best collaborative working. The submission included a telephone befriending service and providing marshals at vaccination centres.

### **September 2021**

- Officer in our Education Improvement team was awarded a 'Kit' award for excellence when working with and supporting families who have elected to home educate. Awards are based on nominations from home educating families who have direct experience of their own education officer's work practice.
- Public Sector Catering Awards - Schools and Residential Care Catering team, service being shortlisted in the Marketing Award category.
- Care capacity tracker won Bronze in the Transformation in Health and Social Care category of the iESE Public Sector Transformation Awards.
- Association for Public Service Excellence (ASPE) awards 2021:
  - Winner – Best Health and Wellbeing Initiative (inc. Social Care) for the development of the care capacity tracker;
  - Shortlist – Best Collaborative Working Initiative (with other public sector or third sector) for the Lancashire Volunteer partnership (work providing volunteers during the COVID-19 pandemic);
  - Shortlist – Best Service Team of the Year: Catering service.



## Cabinet Committee on Performance Improvement

Meeting to be held on Thursday, 25 November 2021

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

#### Part I

Electoral Division affected:  
(All Divisions);

**Corporate Priorities:**  
Delivering better services;  
Protecting our environment;  
Supporting economic  
growth;  
Caring for the vulnerable;

### Corporate Risk & Opportunity Register Quarter 3 2021/22

(Appendices 'A' and 'B' refer)

Contact for further information:

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#### Brief Summary

This report provides an updated (Quarter 3) Corporate Risk and Opportunity Register and Summary Risk profile for the Cabinet Committee to consider and comment upon.

#### Recommendation

The Cabinet Committee on Performance Improvement is asked to note:

- (i) The Corporate Risk and Opportunity Register as set out at Appendix 'A'.
- (ii) The Corporate Summary Risk Profile as set out at Appendix 'B'.

#### Detail

This is the first time the Cabinet Committee has reviewed the Corporate Risk and Opportunity Register, following its suspension as a result of the pandemic. Therefore, the current risk entries in the corporate register reflect the governance issues for 2021/22, as set out in the Annual Governance Statement 2020/21. The Corporate Risk and Opportunity Register is used to monitor progress against those governance issues, and quarterly progress reports are also presented to Corporate Management Team (CMT) and the Audit, Risk & Governance Committee.

Following a review of directorate risk registers, CMT have included an additional risk on the corporate register that focuses on demand for client led services, together with some opportunities.

The updated Corporate Risk and Opportunity Register is attached at Appendix 'A'.

### **Review of the Risk Management Process**

Prior to lockdown, CMT had agreed that the way risk information was presented did not necessarily lend itself to decision making, as the information was difficult to digest and suggested that a review be undertaken.

As a result of the review, the following recommendations were implemented:

- Directorate level risk registers were introduced that would be updated quarterly and presented to directorate senior management team meetings for monitoring and discussion. Directorate risks and opportunities would continue to be assessed quarterly and any having a residual (target) risk (this is the score after mitigation actions have been put in place) or opportunity score of 12 or above would be presented to CMT for consideration and possible inclusion on the corporate register.
- The risk registers have been reformatted so that they are easier to digest. Additional information has been included such as target (residual) scores and target dates together with control and mitigation owners to improve transparency and accountability.
- The introduction of a Summary Risk Profile. This document shows:
  - target dates by which the risk rating would become acceptable
  - Allow progress monitoring on a quarterly basis (using RAG rating). This will highlight and provide the information on which management decisions can be made
  - Provide clearer accountability for actions

The Summary Risk Profile is attached at Appendix 'B'.

A summary of the key risks and opportunities is as follows:

### ***Corporate Risks***

#### **CORP1 Reshaping the County Council**

This risk remains on the register but has been updated to reflect the current position. Whilst this risk still focuses on ensuring we have the capacity and skills to ensure we are sufficiently innovative/radical to transform services at the required pace in order to achieve the scale of change needed to deliver a balanced budget, the focus is now on:

- The change programme including capacity to deliver
- Our ways of working

- Improved partnership working
- A new County Council
- Financial Sustainability

### **CORP2 – Family Safeguarding Model**

Work continues to implement the new Family Safeguarding model to ensure children and families receive timely and effective support. This is making good progress against the implementation plan.

### **CORP3 – Special Educational Needs & Disability Improvement Plan**

Continued positive progress in delivery of the Improvement Plan with accelerated improvement plans agreed and the risks being managed.

### **CORP4 – Integration & Innovation**

Responding to the Government legislative proposals for greater collaboration across the health and social care sector. Adult Social Care and Health Partnership Board has agreed a joint work programme. Engagement with members and senior officers is taking place.

### **CORP5 – ICT Provision**

This risk focuses on the transition from Oracle R12 to Oracle Fusion, the use of data to plan and improve service provision and improving the councils core systems to promote innovation and implement best practice.

### **CORP6 – Covid 19 Impact on Services & Communities**

This risk focuses on the council's response to the pandemic and the demand the response has put on both staff and service delivery. Parts of the organisation are still responding to the crisis whilst others have returned to business as usual as part of the recovery. A phased return to the office is underway.

### **CORP7 – Impact on Community & Services**

The demand for client-based services continues to increase so there is a risk that this may result in increased budget pressures and poor outcomes for those people in receipt of our services.

### ***Opportunities***

#### **CO1 – Strengths Based Working**

New ways of working in Adult Social Care as a result of covid being a catalyst for change - The 'lessons learned' have provided a platform for future ways of working. We have made a significant number of changes that we will endeavour to maintain.

## **CO2 – Environmental Improvements**

Reduce the Authorities Carbon Footprint/Reduce impact on air quality from operations especially in urban areas to improve health outcomes.

### **Audit, Risk & Governance Committee**

The Corporate Risk and Opportunity Register was presented to Audit, Risk and Governance Committee on 18<sup>th</sup> October 2021. The Committee noted the register and discussed the issue of county councillor safety, following the tragic event that had just taken place in Leigh-on-Sea. It was explained that such a risk would be captured as part of Corp 1 – Reshaping the County Council under the subheading 'A New County Council'. Here the risk consequence relates to County Councillors not having the support they need to fulfil their duties within the County Council and their communities. At the meeting, Members were informed that steps were already being put in place to help mitigate the risk. Subsequently, members have received:

- Guidance on personal safety
- An invite to an online Personal Safety training session run by the LGIU (28<sup>th</sup> October 2021)

Further to this, security arrangements have been reviewed on the committee floor and discussions with the Lancashire constabulary are on-going. Discussions are also taking place with the LGA about delivering a bespoke training session for county councillors. An evaluation of the suitability of the Lone Worker System for use by county councillors is also being undertaken. A report is being presented to the next Member Development Working Group for consideration.

### **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.

## **Local Government (Access to Information) Act 1985** **List of Background Papers**

Paper

Date

Contact/Tel

None

Reason for inclusion in Part II, if appropriate

N/A



## Lancashire County Council Corporate Risk & Opportunity Register 2021/22 Q3

Risk ID Corp 1 – Reshaping the County Council: Our Improvement Journey		Current risk score: 16		Target Risk Score: 9
Risk Description	Risk Consequences	Risk Owner	Current Likelihood	Current Impact
<ul style="list-style-type: none"> <li>That the council will not be sufficiently radical or innovative to transform services at the required pace to achieve the scale of change needed over the next 12 months and beyond</li> <li>Inability to secure sufficient resource (capacity) across the organisation to deliver on some areas of the Improvement Journey due to competing priorities and the need to prioritise capacity towards ongoing COVID-19 response and recovery.</li> <li>Risk of not having a joined up, cohesive, corporate wide LCC change programme with CMT oversight and appropriately allocated resources.</li> <li>Risk of multiple front doors with multiple gatekeepers to initiate change – Digital Services,</li> </ul>	<p><b>Capacity</b></p> <ul style="list-style-type: none"> <li>Inability to deliver full programme of staff and customer experience improvement</li> <li>Inability to identify improvement opportunities that could contribute to service efficiencies / improved outcomes</li> </ul> <p><b>Change programme</b></p> <ul style="list-style-type: none"> <li>Priority change activities are not happening as quickly as they could/should, and as a consequence, the benefits for citizens/staff are not being realised as soon as they could be.</li> <li>Resources are not focused on the priority change activities; and the competing demands on resource time results in focus being across too many initiatives and therefore the delivery is not as effective or efficient as needed.</li> <li>There are financial costs for LCC, either for additional resources or delayed benefit realisation, as a consequence of the current approach, with the potential to failure to deliver key programmes.</li> </ul> <p><b>Our ways of working</b></p> <ul style="list-style-type: none"> <li>Our future workplace model does not optimise the performance of our people, places, processes and technology. We are unable to leverage the best of</li> </ul>	<p>Corporate Management Team (CMT)/Director of OD &amp; Change</p> <p><b>Target date</b> March 2022/Ongoing</p>	<p>Major (4)</p> <p><b>Target Likelihood</b> Possible</p> <p><b>Target Risk Confidence</b></p> <div style="background-color: orange; width: 100px; height: 20px; margin-top: 5px;"></div>	<p>Major (4)</p> <p><b>Target Impact</b> Moderate</p>

<p>Customer Access, operational services etc. This leads to:</p> <ul style="list-style-type: none"> <li>• A lack of strategic prioritisation, sequencing and link to organisational objectives</li> <li>• Too many competing asks</li> <li>• Silo working approach</li> <li>• Inconsistent approach to prioritisation and delivery of change projects</li> </ul> <ul style="list-style-type: none"> <li>• Inability to deliver a balanced budget post 2023/24</li> </ul>	<p>what is possible today and continuously improve &amp; adapt in response to future challenges.</p> <ul style="list-style-type: none"> <li>• Inability to deliver full programme of staff and customer experience improvement</li> <li>• Inability to identify improvement opportunities that could contribute to service efficiencies / improved outcomes</li> </ul> <p><b>Improved Partnership working</b></p> <ul style="list-style-type: none"> <li>• Unable to build on the improved partnership working that has been a key feature of our response to the pandemic. The inability to build better alliances with our partners may have a detrimental impact on the outcomes for the people of Lancashire.</li> </ul> <p><b>A New County Council</b></p> <ul style="list-style-type: none"> <li>• County Councillors do not have the support they need to fulfil their roles within both the County Council and their communities.</li> </ul> <p><b>Financial Sustainability</b></p> <ul style="list-style-type: none"> <li>• Change opportunities may be missed that result in the council not meeting the needs of service users</li> <li>• Services become unsustainable and we cannot fulfil our statutory duties</li> <li>• Insufficient reserves</li> <li>• Unable to meet savings targets</li> <li>• External intervention if the council is unable to deliver a balanced budget in future years</li> <li>• Due to the pandemic there have been significant delays in the delivery of savings</li> </ul>			
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<b>Current Controls</b> <b>Capacity</b> <ul style="list-style-type: none"> <li>• "Front Door to Change" designed and implemented to support prioritisation &amp; allocation of resource for change across organisation.</li> <li>• Core roles appointed to lead on the major elements (Staff Experience Lead, Customer Experience Lead, Analysis &amp; Design Lead &amp; PM Lead) who will drive and monitor progress against critical elements.</li> </ul> <b>Change Programme</b> <ul style="list-style-type: none"> <li>• Detailed PMO roadmaps developed with Adults, ECS and PH, and resourcing issues resolved.</li> <li>• Director of OD &amp; Change involvement in LCC change programme.</li> </ul> <b>Our ways of working</b> <ul style="list-style-type: none"> <li>• Improvement Journey priorities aligned with corporate priorities, subject to regular review by Strategic Improvement Board</li> <li>• Staff Experience <ul style="list-style-type: none"> <li>○ Staff Experience Board established, with plan in place for priority outcomes &amp; deliverables for the next 12 months</li> </ul> </li> <li>• Values &amp; Behaviours developed and disseminated</li> <li>• Customer Experience: <ul style="list-style-type: none"> <li>○ Customer Experience SRO appointed and funding in place to recruit customer experience lead</li> </ul> </li> <li>• Programme governance: <ul style="list-style-type: none"> <li>○ Head of Improvement appointed to drive Improvement Journey programme</li> <li>○ Corporate Programme Office transferred to Director of OD &amp; Change to support alignment of capacity &amp; focus with agreed strategic &amp; Improvement Journey priorities</li> </ul> </li> <li>• Data &amp; Insight: <ul style="list-style-type: none"> <li>○ Adoption of Power Business Intelligence and agreement that it will become our core business analytics tool</li> </ul> </li> </ul>		<b>Control Owner</b> Director of OD & Change		

<ul style="list-style-type: none"> <li>• M365 landed – new tools and tech allowing flexible working</li> <li>• Significant programme of review of HR policy and procedure underway influencing flexible working and supporting desired new ways of working</li> <li>• Leadership and management development offer in place and evolving to meet needs of new ways of working</li> <li>• Budget allocation agreed for recruitment of core team to develop &amp; monitor IJ programme</li> <li>• Development of framework to create "Front Door to Change" in order to agree priorities, allocate appropriate resources</li> <li>• The council has a number of work streams that support the corporate strategy and our ways of working e.g. digital connectivity: inequalities workshops etc</li> </ul> <p><b>Improved Partnership Working</b></p> <ul style="list-style-type: none"> <li>• Through the refreshed corporate strategy, we will set out the county council's vision and approach, but we will also acknowledge that we cannot achieve this on our own. We will adopt a flexible approach to partnerships that will allow us and the people and businesses of Lancashire to respond to the needs of the county, in a way that benefits everyone.</li> <li>• We are maintaining a number of the joint/strategic decision-making groups e.g. Adult Social care and Health Partnership (Formerly ASC cell), OOH cell to build on the collaborative ways of working</li> <li>• These joint boards have decision making ability and will feed into the new Strategic Commissioning Board</li> </ul> <p><b>A New County Council</b></p> <ul style="list-style-type: none"> <li>• All administrative procedures relating to county councillor appointments completed.</li> <li>• Induction programme completed</li> <li>• All councillors supplied with appropriate IT/telephony equipment</li> </ul> <p><b>Financial Sustainability</b></p> <ul style="list-style-type: none"> <li>• Updates provided to Cabinet through the money matters reports covering in-year financial position and medium-term financial strategy on a quarterly basis</li> <li>• Directorate Leadership Teams (DLT's) meet regularly and have a monthly focus on financial position and savings delivery chaired by the relevant Executive Director</li> </ul>	<p>CMT</p> <p>Director of Corporate services</p> <p>Chief Executive &amp; S151 Officer/Director of Finance</p>
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<ul style="list-style-type: none"> <li>• Programme Office is supporting the overall programme of savings activity</li> <li>• Financial Benchmarking information (with other County Councils) produced and reviewed annually as a basis for identifying those service areas with most scope for further efficiencies</li> <li>• Continue to monitor the impacts of price changes via our regular monitoring activity updating our forecast outturn and the MTFS</li> <li>• Continue to work with staff to develop new options savings options and revisit options</li> <li>• Continue to seek out, learn from and adapt services to follow best practice</li> </ul>	
<p><b>Mitigating Actions</b></p> <p><b>Capacity</b></p> <ul style="list-style-type: none"> <li>• Agree core team roles and requirements and recruited to agreed positions. Will continue to recruit to remaining positions and key matrix roles</li> <li>• Regular engagement with CMT to understand capacity challenges and prioritisation requirements</li> <li>• Identify opportunities for realignment of roles / activities in complementary areas to support IJ delivery, including Directorate change hubs which will help to identify, prioritise &amp; deliver priorities using the full range of available resources.</li> <li>• Develop resource profile for activity in scope of IJ and identify any potential shortfalls with associated options / costings for filling gaps</li> <li>• Implement "Front Door to Change" framework and recommended actions including mapping of change capacity &amp; demand, and prioritisation across directorates.</li> </ul> <p><b>Change Programme</b></p> <ul style="list-style-type: none"> <li>• Develop a joined up, cohesive view of all change activity.</li> <li>• Support CMT to have greater visibility and discussion on the entire change programme.</li> <li>• Agree governance which will allow effective prioritisation and sequencing of change activity at a corporate level.</li> </ul> <p><b>Our Ways of Working</b></p> <ul style="list-style-type: none"> <li>• Link values &amp; behaviours to performance &amp; development discussions</li> <li>• Recruit Staff Experience Lead to lead implementation of staff experience programme deliverables</li> </ul>	<p><b>Mitigation Owner</b> Director of OD &amp; Change</p>

<ul style="list-style-type: none"> <li>• Introduce new staff survey / engagement approaches to improve data, insight and understanding of staff experience</li> <li>• Establish Customer Experience board to co-ordinate and deliver customer service improvement programme</li> <li>• Align programme office skills and capacity to agreed priorities</li> <li>• Implement upgraded programme management system and embed adoption within all core projects and programmes</li> <li>• Establish corporate Data and Insight Board with remit to identify priority requirements and develop solutions</li> <li>• Determine which premises offer strategic fit</li> <li>• Identify where flexible use of space can support collaboration and front-facing delivery</li> <li>• Prototype in early adopter location, iterative approach to deliver some quick wins</li> <li>• Alternate use or disposal of premises no longer required for operational delivery</li> <li>• Transform main offices into collaborative space</li> <li>• Agree core team roles and requirements and recruit to agreed positions</li> <li>• Regular engagement with CMT to understand capacity challenges and prioritisation requirements</li> <li>• Identify opportunities for realignment of roles / activities in complementary areas to support IJ delivery</li> <li>• Develop resource profile for activity in scope of IJ and identify any potential shortfalls with associated options / costings for filling gaps</li> <li>• Implement "Front Door to Change" framework and recommended actions</li> </ul> <p><b>Improved Partnership Working</b></p> <ul style="list-style-type: none"> <li>• Improved Partnership working is an explicit cross cutting theme within the Corporate Strategy</li> <li>• Adult Social Care is continuing to feed into the county council's position on the levelling up agenda</li> <li>• Exec Director and Unitary Directors of Adult Services continue to highlight the importance of Adult Social Care at strategic health led discussions</li> </ul>	<p>CMT</p>
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<p><b>A New County Council</b></p> <ul style="list-style-type: none"> <li>• Member development programme in place</li> <li>• Overview &amp; Scrutiny work programme developed</li> <li>• AGM &amp; appointments to Cabinet &amp; all committees</li> <li>• Review of constitution</li> </ul>	Director of Corporate Services	
<p><b>Financial Sustainability</b></p> <ul style="list-style-type: none"> <li>• DLT's review progress and are each chaired by the relevant Executive Director</li> <li>• Revenue position includes a planned contribution from reserves to support savings delivery and the 2021/22 funding gap</li> <li>• Savings plans have been subject to review as part of the budget monitoring process</li> </ul>	Chief Executive & S151 Officer/Director of Finance	
<p><b>Progress:</b></p> <p><b>Capacity</b></p> <ul style="list-style-type: none"> <li>• Recruitment to core team underway. "Front Door to Change" design work &amp; key engagement completed.</li> </ul> <p><b>Change Programme</b></p> <ul style="list-style-type: none"> <li>• AMEO consultants' recommendations for single front door and Gateway approval process endorsed by CMT.</li> <li>• High level action plan to implement the single front door and gateway approval process has been developed.</li> <li>• Additional resource identified to help plan and deliver is due to start Sept 2021.</li> <li>• Rapid progress will be made once the additional resource starts.</li> </ul> <p><b>Our ways of working</b></p> <ul style="list-style-type: none"> <li>• Supporting a return to offices in the autumn</li> <li>• Key office sites to reopen late summer/early Autumn 2021 (Public Health will guide on timescale) – County Hall Complex – CCP and Lancashire Point only (CHOB offices to remain closed with access only for meetings and exceptional circumstances) – White Cross Neighbourhood Centre, Lancaster</li> </ul>		

<ul style="list-style-type: none"> <li>• Reopening for single agile work style with enhanced sharing of facilities and desk booking pilot</li> <li>• Work ongoing to prioritise individual services return to offices and appropriate timelines</li> <li>• District office sites that remained open during lockdown to remain open for essential users</li> <li>• Return to office planning - design principles developed to implement a future workplace model</li> <li>• Communications plan to start to share high level information</li> <li>• 'Working From home' survey completed</li> <li>• Engage with key Equality &amp; Diversity groups re: emerging proposals</li> <li>• Virtual focus groups with staff undertaken to ensure engagement with groups not subject of formal meeting structures e.g. working parents, younger colleagues, first line managers</li> <li>• Comprehensive proposals presented to CMT and shared with SLT</li> <li>• Recruitment to core team underway. "Front Door to Change" work nearing completion including mapping of change capacity &amp; demand, and proposals for prioritisation across directorates.</li> </ul> <p><b>A New County Council</b></p> <ul style="list-style-type: none"> <li>• Political Governance Working Group to convene to consider aspects of the constitution</li> <li>• Independent Remuneration Panel have reviewed member allowance scheme and have reported recommendations to Full Council</li> <li>• Discussions taking place with political groups to improve communications with members on key issues</li> <li>• Member development programme in place with all core and committee training delivered. Programme of bite sized briefings in place together with Vodcasts</li> <li>• Member Development Working Group convening shortly</li> </ul> <p><b>Improved partnership working</b></p> <ul style="list-style-type: none"> <li>• Discussions with partners continue to focus on more joined up approaches and opportunities to improve outcomes and save money</li> <li>• Adult Social Care and Health Partnership Board continues to build on benefits of joint working</li> </ul>		
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<p><b>Financial Sustainability</b></p> <ul style="list-style-type: none"> <li>• Further savings to be identified to reduce the future requirement from reserves. This will be achieved ideally through a combination of efficiencies, more effective demand management and income generation but may also involve a reduction in some services.</li> <li>• Detailed work will be undertaken to determine the extent to which any of the underspending areas represent structural underspends not yet fully adjusted for within the MTFS for future years</li> <li>• Overspending areas are also being reviewed to determine the extent that it is recurrent and not reflected in the MTFS</li> <li>• Prepare for the introduction of a new fair funding formula and 75% business rates retention</li> <li>• Impact of the recent Government 'Build Back Better' on health and social care being assessed</li> </ul>		
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Risk ID Corp 2		Title: Family Safeguarding Model		Current risk score: 12		Target Risk Score: 8			
Risk Description		Risk Consequences		Risk Owner		Current Likelihood		Current Impact	
The Hertfordshire Family safeguarding approach does not deliver the expected outcomes		<ul style="list-style-type: none"><li>Children and families do not receive timely and effective support</li><li>Needs of children and families escalate, resulting in children coming into the care of the local authority when this could have been appropriately and safely avoided</li></ul>		Director of Education and Children's Services		Possible (3)		Major (4)	
				Target date March 2022		Target Likelihood		Target Impact	
						Unlikely (2)		Major (4)	
						Target Risk Confidence			
						<div></div>			
Current Controls				Control Owner					
<ul style="list-style-type: none"><li>Bid successful</li><li>Diagnostic undertaken by Herts team</li><li>High level implementation plan developed</li><li>Appointed to Head of Service lead and practice/systems roles</li><li>Family safeguarding Group provides oversight, reporting to Keeping Children Safe Board</li></ul>				Director of Children's Social Care					
Mitigating Actions				Mitigation Owner					
<ul style="list-style-type: none"><li>Delivery of implementation plan</li></ul>				Director of Children's Social Care					
Progress:									
<ul style="list-style-type: none"><li>Family safeguarding teams in place</li><li>Launch events complete</li><li>Mechanism to secure adult workers agreed</li><li>Recruitment to adult workers in progress and good oversight of recruitment</li></ul>									



Risk ID Corp 3		Title: SEND Partnership Improvement Plan		Current risk score: 12		Target Risk Score: 8	
<b>Risk Description</b>  Insufficient progress in delivering against the targeted action plan to address the five areas which continue to require improvement leading to ongoing intervention.		<b>Risk Consequences</b> <ul style="list-style-type: none"><li>Children and families do not receive timely and effective support</li><li>DfE Challenge/Support</li><li>Loss of confidence of children, young people, parents and carers</li></ul>		<b>Risk Owner</b>  Director of Education and Children's Services  Target date March 2022		<b>Current Likelihood</b>  Possible (3)  <b>Target Likelihood</b>  Unlikely (2)  <b>Target Risk Confidence</b> <div></div>	
<b>Current Controls</b> <ul style="list-style-type: none"><li>Accelerated improvement plans agreed by DfE/NHSE</li><li>Regular reports to Scrutiny Committee and Health and Wellbeing Board</li><li>Governance through SEND Partnership Board</li></ul>				<b>Control Owner</b>  Director of Education and Skills			
<b>Mitigating Actions</b> <ul style="list-style-type: none"><li>Ongoing delivery of plan and oversight of Partnership Board and Health and Wellbeing Board / Subgroup</li></ul>				<b>Mitigation Owner</b>  Director of Education and Skills			
<b>Progress:</b> <ul style="list-style-type: none"><li>Accelerated Improvement Plans agreed and monitoring arrangements in place</li><li>Sighted on risks including local offer service directory, transitions in health care and ASD pathways</li></ul>							

- |   |  |
|---|--|
| <ul style="list-style-type: none"><li>• Significant investment needed to strengthen specialist nursing services which is being considered alongside other NHS investment bids through ICS governance arrangements</li></ul> |  |
|---|--|

Risk ID Corp 4		Title: Integration & Innovation		Current risk score: 6		Target Risk Score:20	
Risk Description		Risk consequences		Risk Owner		Current Likelihood	Current Impact
<p>Earlier this year, the Department of Health and Social Care published the legislative proposals for a Health and Care Bill. The proposals contained within the white paper '<b>Integration and innovation: working together to improve health and social care for all</b>' sets out a range of reforms due to take effect from April 2022. These include:</p> <ul style="list-style-type: none"> <li>• Making Integrated Care Systems (ICS) statutory bodies</li> <li>• Transferring the functions of Clinical Commissioning Groups to the ICS</li> <li>• Removing competition and changing procurement rules</li> <li>• Seeking to strengthen the voice/influence of local government</li> <li>• Introducing measures to enhance assurance of social care by CQC</li> <li>• Creating a standalone power for Better Care Fund</li> <li>• Encouraging joint appointments of executive directors to support integrated care/working</li> <li>• Strengthening the role of Health and Wellbeing Boards</li> </ul> <p>As mentioned above, several themes are particularly relevant to the future</p>		<p>Lack of clarity on governance during and following the White Paper reforms</p> <p>Uncertainty of health workforce during reforms leading to joint working on programmes / projects not moving forward at the pace needed so as not to lose the excellent progress made during the pandemic in relation to integration, decision making etc.</p> <p>Possible issues relating to finances, particularly if Covid temporary funding is ending as well as current NHS deficit</p> <p>Concerns from social care staff on future assurance inspections by CQC</p>		<p><b>Adult Social Care in conjunction with CMT and partners</b></p> <p><b>Target date</b> March 2022</p>		Possible	Minor
						<p><b>Target Likelihood</b> Certain</p> <p><b>Target Risk Confidence</b></p> <div></div>	<p><b>Target Impact</b> Major</p>

<p>working relationship between health and local government, and we will be looking to develop these through 21/22.</p> <p>The government has also said that reforms to social care and public health will be dealt with later in 2021 outside the Health and Care Bill addressed in the white paper, with some minor exceptions. In readiness for this, the County Councils Network simultaneously launched 'The Future of Adult Social Care- Optimised Delivery.</p>				
<p><b>Current Controls</b></p> <ul style="list-style-type: none"> <li>We are maintaining a number of the joint/strategic decision-making groups e.g. Adult Social Care &amp; Health Partnership, OOH cell, to build on the collaborative ways of working</li> </ul>	<p><b>Control Owner</b> Directors &amp; HoS</p>			
<p><b>Mitigating Actions</b></p> <ul style="list-style-type: none"> <li>Joint work programmes agreed between Adult Social Care and Health</li> </ul>	<p><b>Mitigation Owner</b> Directors &amp; HoS</p>			
<p><b>Progress:</b></p> <ul style="list-style-type: none"> <li>Adult Social Care and Health Partnership Board has agreed a joint work programme and work is progressing</li> <li>At a senior level the County Council is involved in the ICP Development Advisory Group (Exec Director) and at the ICS Development Oversight Group (Chief Executive). This is pivotal to ensuing local government context and opportunity is understood and reflected in all plans and priorities</li> <li>Regular Internal health integration meetings (cross directorate) chaired by the Chief Executive to ensure clear and consistent approach to all meetings with NHS</li> <li>Briefings for county councillors involved in NHS meetings is being reinstated. Weekly meetings with lead cabinet members are taking place.</li> </ul>				

Risk ID	Corp 5	Title:	ICT Provision	Current risk score:	16	Target Risk Score:	8
<b>Risk Description</b>		<b>Risk Consequences</b>		<b>Risk Owner</b>		<b>Current Likelihood</b>	<b>Current Impact</b>
<p><b>Oracle R12 to Fusion</b> Oracle vR12 supports the heart of the council's people and financial resources. R12 is now end of life and is approaching the end of the final extended support period. LCC have embarked on a programme to replace R12 with Oracle Fusion and associated new processes for managing our money and our people information for 45,000 users.</p> <p>Further risk of challenge to implement Fusion exists when contract novation from BTLS to LCC is executed.</p> <p>Failure to assign resources to the Oracle Fusion Programme will leave LCC without the ability to complete the project on time</p>		<p>Should the Fusion Programme fail, major disruption can be expected in the management of the Council's money, suppliers, customers, debtors, creditors, current workforce, retired workforce and impact for other beneficiaries of the system outside of LCC specifically with payroll services.</p> <p>Contract award to Oracle has been made via BTLS and novation challenge could halt project progress without the ability to extend the programme end date past March 2022</p>		<p>Director of Strategy &amp; Performance/ Director of Finance</p>		4	4
						<b>Target Likelihood</b>	<b>Target Impact</b>
						2	4
						<b>Target Risk Confidence</b>	
				<b>Target date</b> March 2022			
<b>Data</b>							
<p>The organisation fails to use its data resource to good effect for the benefit of Lancashire residents</p>		<p>Un-optimised service provision with failure to plan service intervention and service delivery at appropriate times.</p>					
<b>Core Systems</b>							
<p>Lancashire has built up a 'technology debt' with regards to its major</p>		<p>These line of business (LOB) systems restrict the council from operating efficiently and hamper teams from innovation, automation and modern best practice.</p>					

systems which help the organisation function in a modern, efficient, effective way.				
<b>Current Controls</b> <b>Oracle Fusion</b> Fusion Project Board established, SRO identified, programme under active management of the Chief Digital Officer.  <b>Data</b> Some management information is provided through appropriate Service Management Line of Business Systems. These systems are supported through best practice reporting and through the contribution of the Business Intelligence Team. This team are a stretched resource and cannot cover all data for the County Council.  <b>Core Systems</b> Controls for this are informal and exist on a basis of replacing the systems at the very end of their life as they are about to, or following, the data they go out of support by their vendor.		Chief Digital Officer   Director of Strategy and Performance   Director of Strategy and Performance		
<b>Mitigating Actions</b> <b>Oracle Fusion</b> <ul style="list-style-type: none"> <li>• Replace R12 with Oracle Fusion</li> <li>• Let contract with Oracle</li> <li>• Appoint Systems Integrator and deliver technical implementation</li> <li>• Appoint Change Partner and with them adopt new processes for all Fusion capabilities</li> <li>• Appoint Data migration partner and secure LCC resource to ensure data is R12 is cleaned and migrated in a timely manner to Fusion</li> </ul> <b>Data</b> <ul style="list-style-type: none"> <li>• New head of data has been recruited and is in post. The post supports the needs of the organisations data requirements and to ensure they are designed and architected in optimal ways to support service delivery and customer experience.</li> </ul>		<b>Mitigation Owner</b> Oracle Fusion Programme Manager          Chief Digital Officer		

<p><b>Core Systems</b></p> <ul style="list-style-type: none"> <li>The appointment of the Chief Digital Officer, the insourcing of the IT function and the creation of a Head of Architecture are helping to support the development of improved ways of working. The Head of Architecture is responsible for having agreed roadmaps for maintain products either via a SaaS (Software as a Service) route or regular updates products to enable business department to have LOB systems that provide the support for their respective function. The top SaaS product is the migration to Oracle Fusion which is the subject of a separate risk. A Head of Digital Business Engagement post has also been created and filled to ensure that digital services understand and help to deliver service needs.</li> </ul>	<p>Chief Digital Officer</p>
<p><b>Progress:</b></p> <p><b>Oracle Fusion</b></p> <ul style="list-style-type: none"> <li>Reviewed the Fusion Programme delivery plan due to a delay in sign off for HR &amp; Payroll solution design, which would allow us to move into the build then testing phases of the programme.</li> <li>At the same time, we have been assessing options to accommodate historical data in the Fusion system for Lancashire Constabulary (LanCon).</li> <li>This replanning activity has resulted in a delay to the delivery of Fusion, and the target Go Live dates are now June for Finance and Procurement (ERP) and early July for HR &amp; Payroll (HCM).</li> <li>In addition, following a series of discussions with LanCon and LCC senior stakeholders, it has been agreed that LanCon will separate from the Programme. Over the coming weeks, we will focus on working with LanCon to support them in the transition, and on impact assessing the Programme scope change. ICT Digital Services will continue to provide support for LanCon through a transition programme, which is to be initiated.</li> <li>During August, our Change Network were briefed about the replanning and delay to Go Live. Business Readiness Leads have been briefed about the revised Roadmap and target June / July 2022 Go Live, and further 'All Staff' communication has been shared.</li> </ul> <p><b>Data</b></p> <ul style="list-style-type: none"> <li>Head of Data post in place as part of the new Digital Services structure.</li> </ul>	

**Core Systems**

- All senior management posts in the service are appointed with staff in place.



## Appendix A

Risk ID Corp 6		Title: Covid-19 Impact on Services & Communities		Current risk score: 20	Target Risk Score: 12
Risk Description		Risk Consequences	Risk Owner	Current Likelihood	Current Impact
<p>Inability to adequately respond to the demands placed on Services as a consequence of increasing demands, capacity issues, and reduced resilience of staff.</p> <p>Staff across all services have worked in crisis response mode from the outset of the pandemic. Alongside this business as usual work is being undertaken across many services.</p>		Inability to meet service requests as demand outstrips current capacity because staff are dealing with both pandemic and BAU issues	<p><b>Corporate Services leadership in conjunction with CMT and partners</b></p> <p><b>Target date</b> March 2023</p>	Certain	Major
		Staff fatigue - risk of reduced energy levels to meet the constantly evolving demands and pressures. Risk of burnout.		<b>Target Likelihood</b>	<b>Target Impact</b>
		A reduction in staff availability/productivity due to the effects of the pandemic across services eg an increase in infection rates, local restrictions, child care/family/personal issues etc		Likely	Moderate
		Risk to creativity and innovation with regard to developing and maintaining high quality outcomes for service clients		<b>Target Risk Confidence</b>	
		Potential reduction in productivity and throughput will increase pressures			
		Potential to negatively impact on internal and external customer/partner relationships			
		Potential for increasing costs, loss of income and pressure on budgets as some services are having to increase resources.			

<p><b>Current Controls</b></p> <ul style="list-style-type: none"> <li>• Corporate Emergency Response Team (CERT) continues to meet at least fortnightly and considers current situation reports</li> <li>• Contingency plans are available to be activated as needed which would primarily stand down business as usual/non-critical work and where possible, redeploy staff to support priority work areas</li> <li>• Ongoing situation monitored at leadership team meetings</li> <li>• Increase capacity through sourcing additional resource</li> <li>• Ensure all staff take their annual leave entitlements</li> <li>• Team managers keep the focus on staff wellbeing in 1:1s and team meetings</li> <li>• Ensure a sensible and reasonable approach to further changes, to support staff to meet the challenges</li> </ul>	<p><b>Control Owner</b> CMT</p>
<p><b>Mitigating Actions</b></p> <ul style="list-style-type: none"> <li>• Mitigating actions for loss of staff encapsulated for each individual service within the business continuity arrangements found in the Service Resilience Plans (SRPs); this includes identification of critical posts/functions, alternative arrangements for critical posts/functions, critical function analysis, specific responses in relation to Pandemic flu</li> <li>• These arrangements need to be viewed in line with the Corporate Emergency Response Plan (CERP) which provides the incident management and wider support structures in place.</li> <li>• Continue to monitor capacity and demand levels</li> <li>• CEX, ED, Director and HofS to continue to share messages of thanks and appreciation</li> <li>• Raise issues at CERT if corporate guidance/action required</li> <li>• Consider the need to stand down business as usual to focus on the pandemic response or seek financial support to increase resources to maintain overall continuity of services</li> <li>• Covid- 19 incident management</li> <li>• Vaccination programme</li> <li>• Local contact tracing</li> <li>• Community Testing/workplace testing</li> </ul>	<p><b>Mitigation Owner</b> As above</p>

<ul style="list-style-type: none"> <li>• Monthly staff webinars led by Directors to continue to share messages of thanks, appreciation and enable staff to showcase their best practice and fantastic response to the pandemic</li> <li>• Staffing issues and in particular staff welfare is a constant feature in leadership meetings</li> </ul>	
<p><b>Progress:</b></p> <ul style="list-style-type: none"> <li>• Overall, controls are in place and functioning well at this point in time</li> <li>• Lancs-12 testing strategy refreshed to prioritise care homes.</li> <li>• Care sector levels vaccination to be tracked through IMT meetings.</li> <li>• Lancashire now part of a principle trial for anti-viral, via the Oxford group.</li> <li>• Local policy to encourage testing and non-attendance for those who are positive/symptomatic.</li> <li>• Revise 5-step community testing plan</li> <li>• Given escalating situation regarding infection rates consideration being given to re-establish response rather than recovery. This will potentially mean LRF Business Continuity group to stand back up.</li> <li>• Continued support for schools</li> <li>• Vaccination in care settings continues. Using buses as mobile units for targeted areas to promote vaccination campaign, leaflet drops etc. Once resources are identified these will also act as vaccination buses.</li> <li>• Developing a system for members of the public who don't have access to transport to call a designated line through Customer Access Service who can arrange a taxi and will act as a 'drive-thru' vaccination service. Finalising detail with NHS colleagues.</li> <li>• Children's Social Workers are now undertaking twice-weekly tests (with EDT testing three times a week to reflect the vulnerability of the public they come into contact with)</li> <li>• Initial preparations in terms of data collection and archiving in relation to the independent inquiry recently announced by the government</li> <li>• Support vaccination programme – HR protocol to be published/SMART team continuing to support community engagement awareness raising</li> <li>• Testing programme:</li> </ul>	

<ul style="list-style-type: none"> <li>▪ Continuing link with Districts regarding local strategies for now until December and then on to March 2022</li> <li>▪ Rolling out testing to Afghan refugee settlement programme</li> <li>▪ District Advice for contain functions (tracing, testing and community engagement) will be going to Health Protection Board this week</li> <li>▪ Continuing to support districts with Out of Hours contact tracing</li> <li>• Support safe return to buildings (in line with Government guidance):             <ul style="list-style-type: none"> <li>○ Phased return/reopening has been taking place over summer 2021- in line with government guidance - relaxations/arrangements have been considered by Safer Working Group, CERT and CMT</li> <li>○ Documents to support on risk assessments</li> <li>○ Key messages being produced on do's and don'ts when returning to office</li> </ul> </li> </ul>	
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## Appendix A

Risk ID Corp 7		Title: Impact on Community & Services		Current risk score: 16		Target Risk Score: 12			
Risk Description		Risk Consequences		Risk Owner		Current Likelihood		Current Impact	
<p>Demand for client-based services continues to increase resulting in increased budget pressures and poor outcomes for those people in receipt of our services</p>		<p><b>Adult Social Care</b></p> <p>Significant risk of provider failure, particularly for residential care and day service providers</p> <p>Further waves of Covid exacerbate these issues</p> <p>Risk of reduction in quality standards/not meeting CQC requirements and potential for an increase in safeguarding issues</p> <p>Potential for increased costs for the county council in maintaining provider income levels in order to 'shore up' the market and protect people's homes</p> <p>Some care home providers taking people for the 6 weeks 'discharge to assess' period at inflated rates. Risk to families if the placement needs to continue or very high 3<sup>rd</sup> party top ups, and to LCC if no other placement available and the top up needs to be absorbed by the council.</p> <p>Providers may increase their fees in order to maintain their ability to operate/generate sufficient returns. Could result in increased costs for the county council and for self-funders</p> <p>Risks for in-house services – ability to continue to operate/compete in the wider market</p>		<p>ASC leadership</p> <p>Target date</p> <p>March 2022</p>		Likely		Major	
						Target Likelihood		Target Impact	
						Possible		Major	
						Target Risk Confidence			

	<p>Potential for increased complaints and less choice. Increase in number of safeguarding alerts</p> <p>People may not be receiving services in a setting assessed as appropriate. Families and care providers are under pressure and are reporting being concerned that they are not able to safely manage risk, leading to increased potential harm or death. Increased risk to others in residential care settings.</p> <p>As yet, the future demand for such services is difficult to quantify. Some aspects of daytime support /accommodation-based services may require complete redesign.</p> <p>People are waiting many days for MH beds that have been recommended by Adults Mental Health Practitioners (AMHPs) and medics, leaving people in the community or in residential care who have been assessed as requiring detention under the Mental Health Act</p> <p>Puts families under more pressure and risks people being admitted to hospital, residential care or being placed out of Lancashire.</p> <p>Puts pressure on the budget as we are not able to fill voids in a timely way, meaning that there are supported living settings with empty rooms rendering the care therein less cost effective.</p>			
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[illegible]


<ul style="list-style-type: none"> <li>MASH / Demand Management group and Permanence and Children in Our Care group providing oversight of service improvements</li> <li>Family Safeguarding Board providing leadership and oversight of Family Safeguarding Programme</li> <li>Range of further activity to manage demand including Family Group Conferencing evaluation funded through pan-Lancs bid, VCFS led model of support pilot in Preston to be extended</li> <li>Where Our Children Live Strategy together with Sufficiency Strategy to ensure most effective use of provision and to help identify and address gaps in service</li> </ul> <p><b>SEND</b></p> <ul style="list-style-type: none"> <li>SEND Sufficiency Strategy agreed by Cabinet January 2020</li> <li>Alternative Provision Strategy agreed by Cabinet October 2021</li> <li>Delivery plans established</li> </ul>	Director of Education and Skills
<p><b>Mitigating Actions</b></p> <p><b>Adult Social Care</b></p> <ul style="list-style-type: none"> <li>Financial support available to residential and day service providers</li> <li>Close monitoring of providers enables pathways to be 'actioned' immediately if issues arise</li> <li>Relationship with CQC maintained/safeguarding assessments being stepped back up (high risk safeguarding issues were monitored/actioned during Covid)</li> <li>Service users and their families are being offered support and alternatives being offered/developed including links to community-based support</li> <li>LRF will 'lean in' if required in event of further spike</li> </ul> <p><b>Children's Social Care</b></p> <ul style="list-style-type: none"> <li>Delivery of Early Help Strategy</li> <li>Delivery of Family Safeguarding</li> <li>Evaluation of targeted interventions including Family Group Conferencing at pre proceedings, and VCFS model</li> <li>Where Our Children Live Strategy and Sufficiency Strategy agreed by Cabinet in January 2021</li> <li>Deep dive on Placement Costs</li> </ul>	<p><b>Mitigation Owner</b></p> <p>All Adult Social Care Directors and Heads of Service</p>       <p>Director of Education and Skills / Director of Children's Social Care / Head of Service Policy, Information and Commissioning</p>



<ul style="list-style-type: none"> <li>• Ongoing consideration of Covid impact</li> <li>• Provide input into the developing NHS operational plan for CAMHS service developments and be sighted on / support ICS discussions on CAMHS related NHS investment proposals</li> </ul> <p><b>SEND</b></p> <ul style="list-style-type: none"> <li>• Delivery of priorities within the SEND sufficiency strategy</li> <li>• Consulted on Strategy</li> <li>• Ongoing consideration of Covid impact</li> </ul>	<p>Director of Education and Skills</p>
<p><b>Progress:</b></p> <p><b>Adult Social Care</b></p> <ul style="list-style-type: none"> <li>• Quality Improvement Strategy in progress CQC resuming targeted inspections on key areas April 21 onwards</li> </ul> <p><b>Children's Social Care</b></p> <ul style="list-style-type: none"> <li>• Early Help Strategy agreed. Delivery is ongoing.</li> <li>• Family Safeguarding launched.</li> <li>• Outreach services expanded.</li> <li>• Family Group Conferencing evaluation planned as part of national programme, with additional national funding provided. Pilot VCFS provision in place supporting referrals from Children's Social Care Teams and funding agreed to extending service for further 12 months.</li> <li>• "Where Our Children Live" project reported to Cabinet January 2021 and delivery plan in development</li> <li>• Shifted block residential provision to establish more for children and young people with most complex needs. Continued focus on step down fostering placements with option to pay retainers to secure provision.</li> <li>• Rates for Child in Need, Child Protection and Children Looked After all reducing but continued oversight in event of surge in Autumn 2021</li> </ul> <p><b>SEND</b></p> <ul style="list-style-type: none"> <li>• SEND Sufficiency Strategy agreed by Cabinet January 2020.</li> </ul>	

<ul style="list-style-type: none"><li>• Increased Government funding provides some mitigation, but substantial pressure remains</li><li>• Additional investment to reduce SENDO caseloads</li><li>• Additional inclusion teachers and support workers provide direct support to enable the full-time attendance and inclusion of pupils with EHC plans who are either experiencing difficulties with their mental health that prevents their attendance at school or who are at risk of exclusion.</li></ul>	
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## Appendix A

Opportunity ID: CO1		Title: Strengths Based Working		Current Opp score: 15	Target Opp Score: 20
Opportunity Description	Opportunity Consequences	Opp Owner	Current Likelihood	Current Impact	
<p>Covid has been a catalyst for a number of positive changes to the way we work.</p> <p>Remote working has enabled people to adopt a more flexible approach to their work/life balance, we have embraced technology as a way of staying in touch with our teams and our service users and providers, we have used people's skills in a more flexible way and have trusted them to get on and do, we have spent far less time in planning and more time in doing, we have maintained 'light touch' governance and stuck to the decisions that we have made, and we have proved to ourselves and our partners that we can continue to provide high levels of customer service and response in a crisis.</p> <p>There are many 'lessons learned' with our partners including our health and district colleagues and we have demonstrated that spending time arguing about 'who pays' is unproductive and unhelpful for our citizens.</p>	<p>The 'lessons learned' have provided a platform for future ways of working. We have made a significant number of changes that we will endeavour to maintain.</p> <p>We will build on the relationships that we have developed with our partners and will continue to take a 'system wide' approach to decision making.</p> <p>We will trust our staff to work at home, but we must be mindful not to disregard the disbenefits of home working and will seek to achieve a more balanced approach when we are able to.</p> <p>We are able to take advantage of technology to improve the way we work and also improve and enhance our service offer.</p> <p>We will pursue the 'joint funding' approach and seek to agree the use of pooled budgets where appropriate.</p> <p>We will maintain the level of engagement that we have achieved with our valued providers. We will move forward at pace our market shaping work and will involve providers and service users at the forefront of our thinking. We have used our staff flexibility. Many of them have stepped forward to take on new roles and have been very successful. We have recognised the huge amount of talent and commitment that we have across all of our teams.</p>	<p>ASC leadership</p> <p>Target date March 2022</p>	<p>Certain</p> <p>Target Likelihood Certain</p> <p>Target Opp Confidence </p>	<p>Moderate</p> <p>Target Impact Major</p>	

## Appendix A

<p><b>Improved Partnership working</b> – responding to the pandemic has highlighted the importance of partnership working and is proof of what can be achieved if we work together. We want to use this as a platform to build better alliances with our partners to deliver improved outcomes for the people of Lancashire.</p>	<p>Many of our lessons learned, new ways of working and innovative approaches to service delivery should enable financial savings to be achieved.</p>			
<p><b>Current Controls</b></p> <ul style="list-style-type: none"> <li>• ASC leadership team continue to seek best practice examples and share learning</li> <li>• Ongoing reviews of services will capture potential financial savings</li> <li>• Discussions with partners continue to focus on more joined up approaches and opportunities to improve outcomes and save money</li> </ul>	<p><b>Control Owner</b> ASC Directors and HoS</p>			
<p><b>Progress:</b></p> <ul style="list-style-type: none"> <li>• ASC themed discussion on lessons learned/new ways of working. Seeking to build on the positives achieved through the pandemic.</li> <li>• Ongoing discussions with partners</li> </ul>	<p><b>Mitigation Owner</b> As above</p>			
<p><b>Actions to realise:</b> Partners4Change project will build on new ways of working Adult Social Care and Health Partnership Board continues to build on benefits of joint working</p>				

Opportunity ID: CO2		Title: Environmental Improvements	Current Opportunity score: 6		Target Opportunity Score: 16
<b>Opportunity Description</b> Environmental Improvements (Air Quality, Noise and Safety) <b>Green Fleet</b> <ul style="list-style-type: none"><li>Electric Vehicles (EV)</li><li>Ultra Low Emission Vehicles (ULEV)</li><li>Alternative Fuels (CNG and Hydrogen)</li><li>Lower Emission combustion engines</li></ul>	<b>Opportunity Consequences</b> <ul style="list-style-type: none"><li>Reduce Authorities Carbon Footprint</li><li>Reduce impact on air quality from LCC operations especially in urban areas by removing or reducing tailpipe emissions of noxious gases and particulates which impact adversely on heath.</li></ul>		<b>Risk Owner</b>  HoS P&IT	<b>Current Likelihood</b> 3	<b>Current Impact</b> 2
			<b>Target date</b> Ongoing	<b>Target Likelihood</b> 4	<b>Target Impact</b> 4
				<b>Target Confidence</b>	
<b>Progress to date</b> <ul style="list-style-type: none"><li>Replacement of older significantly less environmentally friendly vehicles with newer lower emission vehicles and plant as part of Capital Fleet Replacement Programme (Note latest Euro specification vehicles emit exponentially less than earlier Euro standard vehicles).</li><li>Looking at Electric Vehicles (EV's) but ranges and charging remain an issue</li><li>Working group formed with Fleet, Property and D&amp;C and proposals being completed for pilot for single dual point 22 KW charging facilities at Bamber Bridge and N65 to trial EV's in Fleet and inform the working group to enable further roll out of infrastructure and EV's within LCC.</li><li>Three EV mid-sized vans now in Fleet Services (delivered April 21) which will inform further the feasibility and actions that may need to be considered with a larger roll out of EV and ULEV's; one of the vans will initially be used by user departments and teams on extended trials and to inform of possible changes to working practices and infrastructure requirements to achieve zero emission vehicles in practical operational use.</li><li>Investigation and trialling of various EVs (vans and cars) with Parking Services re enabling the use of suitable EV's for the Parking Services operations moving in-house this year.</li></ul>			<b>Control Owner</b>  HoS P&IT Fleet Manager and Property Service		
<b>Actions to realise</b>			<b>Opportunity Owner</b>		

<ul style="list-style-type: none"> <li>Corporate Charging infrastructure for Electric Vehicles</li> </ul>	Director of Highways & Transport
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## 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
<b>IMPACT</b>	MINOR	2	4	6	8	10
	INSIGNIFICANT	1	2	3	4	5
		RARE	UNLIKELY	POSSIBLE	LIKELY	CERTAIN
			<b>LIKELIHOOD</b>			

## Corporate Summary Risk Profile 2021/22

Risk ID	Risk Description	Current Risk Rating	Target Risk Rating	Target Date	Risk Confidence Q1	Risk Confidence Q2	Risk Confidence Q3	Risk Confidence Q4	Direction of travel
Corp1	Reshaping the County Council: Our Improvement Journey	16	9	March 2022/On going					+ve
Corp2	Family Safeguarding Model	12	8	March 2022					+ve
Corp3	SEND Partnership Improvement Plan	12	8	March 2022					+ve
Corp4	Integration & Innovation	20	6	March 2022					+ve
Corp5	ICT Provision	16	8	March 2022					+ve
Corp6	Covid-19 Impact on Services & Communities	20	12	March 2023					+ve
Corp7	Impact on Community & Services	16	12	March 2022					+ve
Opp ID	Opportunity Description	Current rating	Target Rating	Target Date	Opportunity Confidence Q1	Opportunity Confidence Q2	Opportunity Confidence Q3	Opportunity Confidence Q4	Direction of Travel
CO1	Strength Based Working	15	20	March 2022					+ve
CO2	Environmental Improvements	6	16	Ongoing					+ve





## **Cabinet Committee on Performance Improvement**

Meeting to be held on Thursday, 25 November 2021

### **Report of the Head of Legal and Democratic Services**

#### **Part I**

Electoral Division affected:  
(All Divisions);

**Corporate Priorities:**  
Delivering better services;  
Caring for the vulnerable;

### **Statutory Social Care Annual Report - Complaints and Customer Feedback 2020-2021**

(Appendix 'A' refers)

Contact for further information:

Angela Esslinger, Tel: 01772 533950, Complaints and Appeals Manager,  
angela.esslinger@lancashire.gov.uk

#### **Brief Summary**

Lancashire County Council has a legal obligation to publish a complaints and customer feedback report on social care statutory complaints on an annual basis. There are two statutory procedures, both different: one for children and young people's social care complaints and one for adult social care complaints.

The Statutory Social Care Annual Report on Complaints and Customer Feedback is set out at Appendix 'A'. The report is divided into separate sections for both adult and children and young people's services.

#### **Recommendation**

The Cabinet Committee on Performance Improvement is asked to note and comment on the statutory social care complaints annual report for children and young people and adult services for 2020/21, acknowledging the associated learning, so that the county council can meet its legal obligations.

#### **Details**

Complaints are used by the county council as an opportunity to learn and improve. As a direct result of complaints made in 2020-2021, the county council has learnt lessons and improved services as detailed within the annual reports.

Because complaints are an important tool to access customer satisfaction, the complaints team regularly reports on statistics and trends, attends management team meetings and also links in with managers to ensure that complaints which are upheld, result in continuous improvements for the Council. It is, of course, vital to learn the lessons from complaints and spot early trends if service delivery is going wrong. This is particularly important in order to embed learning, if new council processes are being implemented which impact negatively on the public.

## **Statutory Social Care Annual Report on Complaints and Customer Feedback: 2020/21**

The Social Care Annual Complaints and Customer Feedback Report is a legal requirement for both children and young people and adult social care. It is therefore divided into separate sections for both adult and children and young people's services.

Complaints represented just 1% of all active adult social care and children's social care cases throughout Lancashire in 2020/21. This is therefore a very small percentage of overall total of activity. Complaints have mainly reduced, but this reflects a pause in complaints investigations between April 2020 and June 2020, to deal with the COVID-19 pandemic. These reductions also apply to Ombudsman investigations and councils nationally.

The adult social care section in Appendix 'A' is covered on pages 7 to 13. People are more likely to compliment adult social care services rather than to complain and compliments have increased by 8%. When complaints are made, in about 57% of cases, an aspect is found to be justified.

The children and young people's section is covered on pages 14 to 20. There has been an increase in complaints for the inclusion service. However, it is thought that this is due to the new processes that are in place and better recording, reflecting better engagement with customers. The proportion of complaints being resolved early in the complaint journey (52%) is higher than in 2019/20 (45%), which is welcome news. There has been a big decrease in compliments by 44%, which may reflect the changed priorities brought on by the COVID-19 pandemic.

Lessons learnt mainly centre around making improvements to the way we communicate with everyone concerned and are detailed in Appendix 'A'. The statutory report is made publicly available on the council website and shared with other interested agencies such as Ofsted, the Care Quality Commission and Healthwatch Lancashire.

## **Consultations**

Operational social care teams, managers and directors have been consulted on the annual report and the learning from complaints that has been identified.

**Implications:**

This item has the following implications, as indicated:

**Risk management**

If an annual report on social care complaints and customer feedback is not published, the county council would be in breach of its statutory duties.

**Equality and Cohesion and Human Rights**

The extensive lessons learnt sections in Appendix 'A' outline improvements made to services, as a direct result of upheld complaints and listening to feedback from our most vulnerable customers and their representatives.

**List of Background Papers**

Paper	Date	Contact/Tel
None		
Reason for inclusion in Part II, if appropriate		
N/A		



# Statutory Social Care Annual Report

## Complaints and Customer Feedback

For the period 1 April 2020 to 31 March 2021

<b>INTRODUCTION</b>	<b>3</b>
i. Background	3
ii. Purpose	3
iii. Period covered and data	3
<b>SECTION ONE: SUMMARY AND OVERVIEW</b>	
1.1 Executive Summary	4
1.2 Statutory Complaint trends and outcomes	5
1.3 Statutory Local Government Ombudsman (LGSCO) complaints received	6
<b>SECTION TWO: ADULT SOCIAL CARE FEEDBACK</b>	
2.1 Summary of ASC feedback	7
2.2 Breakdown of complaints by stage and outcome	7
2.3 What do people complain about?	8
2.4 Learning for ASC	9
2.5 Services which were the subject of compliments	11
2.6 Joint Complaints	11
2.7 Ombudsman Complaints	11
2.8 Ombudsman identified learning for adult social care complaints	12
<b>SECTION THREE: CHILDREN AND YOUNG PEOPLE FEEDBACK</b>	
3.1 Summary of CYP and CSC feedback	14
3.2 Breakdown of complaints by stage	15
3.3 Breakdown of complaints by outcome	15
3.4 What do people complain about in the statutory process?	16
3.5 Learning	16
3.6 Summary of non-statutory complaints	18
3.7 What are non-statutory CSC complaints about?	18
3.8 Services which were the subject of compliments and comments	18
3.9 Ombudsman Complaints	19
3.10 Ombudsman identified learning for children's complaints	19

## Introduction

### i. Background

Local authorities are legally required to establish complaints procedures to deal with complaints about their social care functions. The complaints procedure for children and young people is covered by the Children Act 1989 and the Department for Skills and Education produced guidance, 'Getting the Best from Complaints' (2006), which outlines the procedures which local authorities must have in place. For adult social care, this report is also produced in accordance with the requirements of the Local Authority Social Services and National Health Service Complaints Regulations (2009).

Lancashire County Council (LCC) is represented on the Committee of the National Complaints Managers Group (England) and the North West Complaints Managers Group, which comprises 23 local authorities. These groups aim to provide a forum where complaints staff can learn and share best practice, develop and implement local practice standards, discuss performance and problem solve. These groups are also consulted on proposed changes to legislation and learning from complaints by the Association of Directors of Adult Social Services and the Association of Directors of Children's Services.

### ii. Purpose

The purpose of the Annual Report is to review the operation of the complaints process over a 12-month period, including statistical data, and to keep the council informed about complaint themes and how effective its current arrangements are for handling customer complaints. It offers an analysis of what the information obtained from the operation of the complaints process means for the council.

This report also includes information on compliments and comments received by the council.

### iii. Period covered and data

The report covers the period 1 April 2020 to the 31 March 2021. The report makes extensive use throughout of data available from the Customer Feedback System which records all statutory social care complaints and feedback for the council. The statistical information presented within this report can be verified by reference to this database and is based on the date feedback is received. All percentages and costs are rounded to the nearest whole number.

Section One	<b>Summary and Overview</b> highlights the key messages from the report and gives the overall picture across the council
Section Two	Statistical data, analysis and learning in relation to <b>Adult Social Care Services</b> .
Section Three	Statistical data and further information and analysis and learning in relation to <b>all Children's Services</b> .

If you require any additional information please contact Lancashire County Council Complaints Team on 01772 539414 or email your request to [complaintsandfeedback@lancashire.gov.uk](mailto:complaintsandfeedback@lancashire.gov.uk)

## Section One: Summary and Overview of all Social Care Complaints and Feedback

### 1.1 Executive Summary

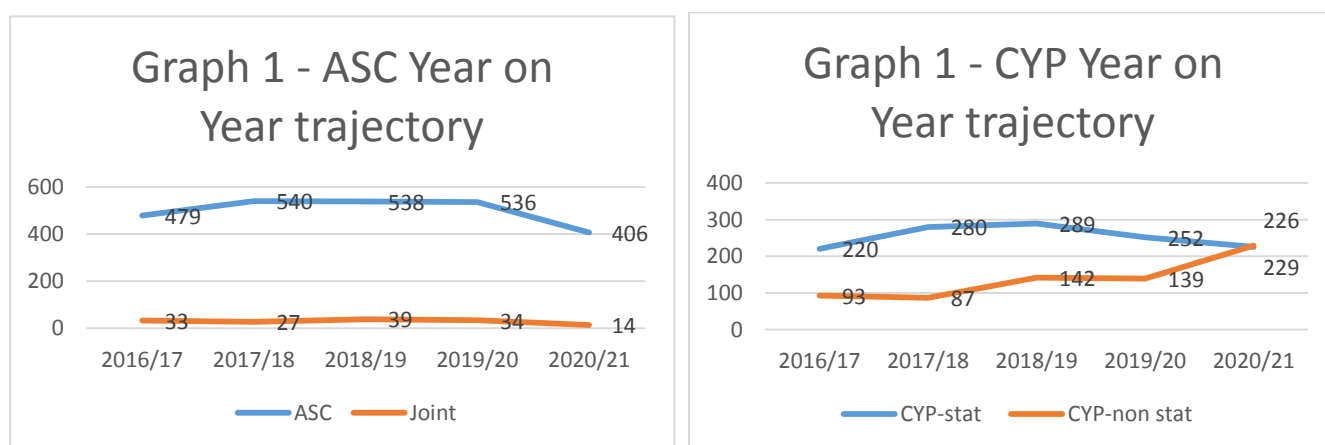
Complaints are used by the council as an opportunity to learn and improve. As a direct result of complaints in 2020/21 we have made improvements to processes and procedures. We have improved communication with customers and their families, made changes to policy and guidance and staff and managers have attended specific training sessions.

Complaints represented just under 1% of all active adult social care and children's social care cases throughout Lancashire in 2020/21. Statutory complaint totals have decreased overall by 18% (646 in 2020/21 from 788 in 2019/20). This reduction is in line with the experience of other councils, in response to the Local Government and Social Care Ombudsman's decision, to stop taking new complaints, or progressing existing cases, for the first three months of the initial wave of the pandemic, to allow councils and providers to focus their resources where they were needed most. The impact of this pause is played out in the statistics published in this report, with the number of received and decided complaints being generally lower than in previous years.

Graph 1 below shows that there were 420 complaints about adult social care (ASC) which is a 22% decrease from 2019/20. Included in this figure were 14 complex joint complaints with the NHS. This is almost half the 2019/20 figure (34).

Graph 1 also shows a decrease in statutory children's social care (CSC) complaints totals by 10% (226 in 2020/21 from 252 in 2019/20). Non statutory children's complaints increased substantially from 139 in 2019/20 to 229 in 2020/21, of which 61% were Inclusion Service complaints. The probable reason for this rise is better recording as there is now an inclusion team which supports customers.

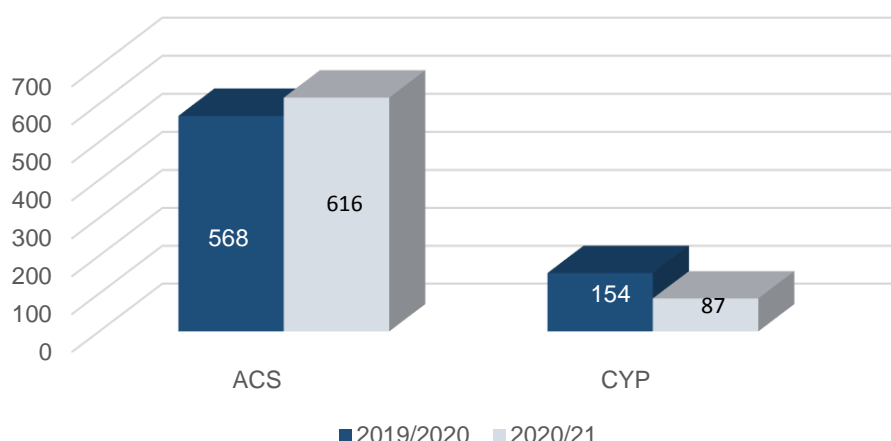
The overall numbers of statutory complaints received by the Ombudsman in relation to LCC has followed the downwards trend as they paused investigations for 3 months in 2020. These figures decreased by 30% from 142 to 99 in 2020/21.



Graph 2 overleaf shows a slight decrease in **compliments** from 722 in 2019/20 to 703 in 2020/21. The totals for CYP positive feedback have decreased more dramatically, from 154 in 2019/20 to 87 in 2020/21 although they have increased for ASC.

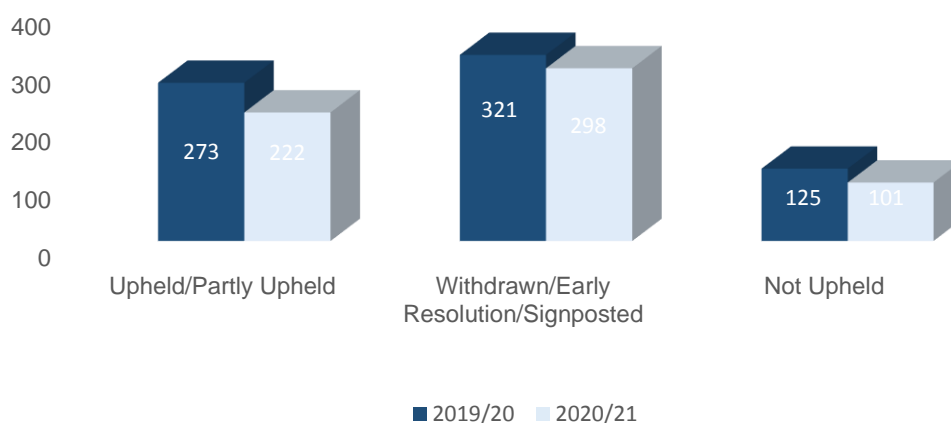


Graph 2 - Compliments



## 1.2 Statutory complaint trends and outcomes

Graph 3 - Statutory Complaints by Final Outcome



The number of complaints as a percentage of total customer feedback has shown a slight reduction to 53%, compared with 57% of all feedback being complaint related in 2019/ 2020.

Graph 3 above shows a breakdown in the number of statutory complaints by final outcome for all 621 closed complaints during 2020/21. 16% of all complaints were not upheld in 2020/21 and this is the same proportion as those not upheld in 2019/20. Over a third (36% of complaints) were justified by being upheld or partly upheld. Around half (48%) of complaints have also been resolved or withdrawn at an early stage in the complaints process. This figure has increased from 40% in 19/20 and is thought to link to an extra administrative post in the complaints team, supporting early resolution in operational services.

In 2020/21 the total amount spent on investigations for statutory adult social care complaints was nil because all complaints in ASC were investigated internally and for children's social care it was £7297.03 which is an increase of over £2000 from the previous year due to the complexity of some investigations.

**1.3 Local Government and Social Care Ombudsman complaints received. (The Ombudsman)**

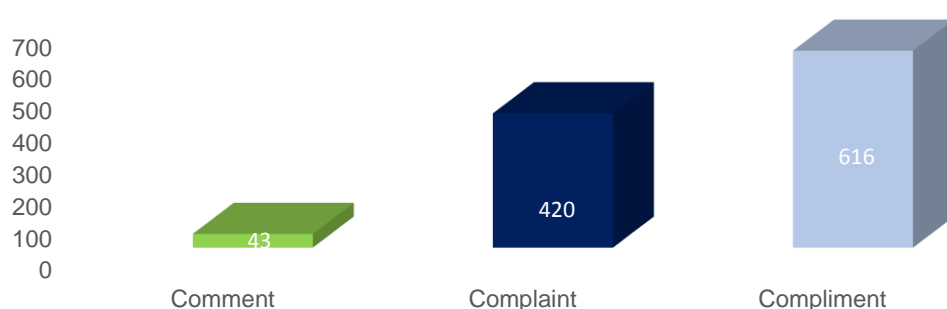
99 Ombudsman social care / education final decisions were received during 2020/21. This is a 30% reduction on the 142 Ombudsman social care and education final decisions which were received during 2019/20. This links to a pause in Ombudsman investigations from March to June 2020 due to the Covid19 pandemic. The amounts paid in social care local settlements as a result of these decisions added up to a total of £19,700. This is less than half the amount paid out in 2019/2020.

## Section Two: Adult Social Care Feedback

### 2.1 Summary of ASC feedback

Graph 4 shows a breakdown of ASC by feedback type. A total of 420 complaints were received in 2020/21 which is a 22% decrease from the previous financial year (536). It should be noted that people are more likely to compliment adult social care rather than to complain. Compliments increased by 8% from 568 in 2019/20 to 616 in 2020/21. Comments reduced from 85 in 2019/20 to 43 in 2020/21.

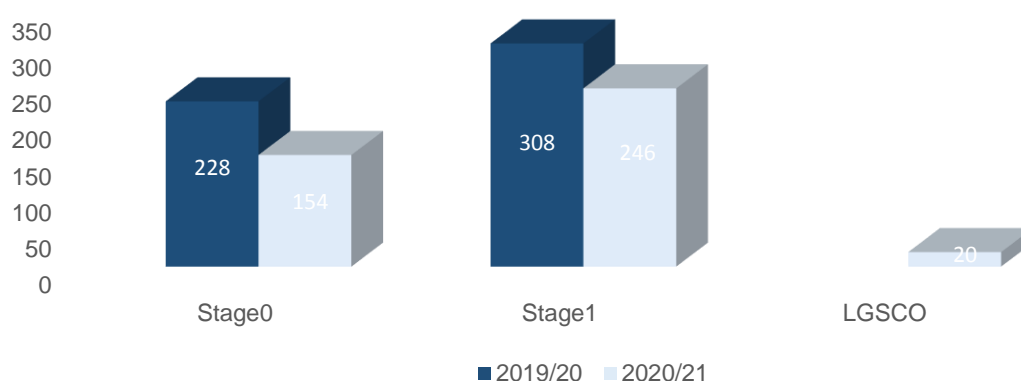
Graph 4 - Feedback Type



### 2.2 Breakdown of complaints by stage

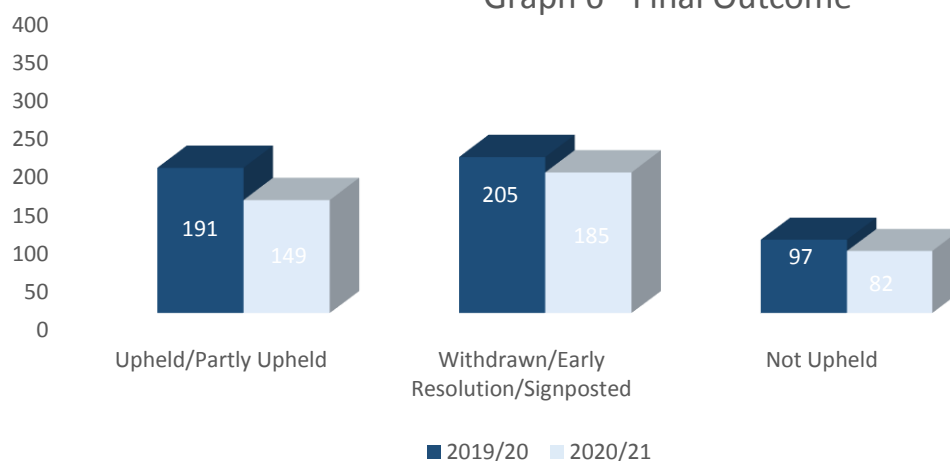
The breakdown of ASC complaints is shown in Graph 5. Stage 0 is the early resolution of complaints, so a significant proportion of complaints (38%) continue to be resolved at the first point of contact with council officers. Most complaints (59%) are resolved locally after further escalation, and a further 5% are resolved by an ombudsman investigation.

Graph 5 - Complaint resolution stage



The outcomes of 416 closed complaints that commenced in this financial year, and had outcomes recorded against them at the year-end, are shown in Graph 6. Of all closed complaints, 185 were either withdrawn or resolved early, 149 had at least one aspect upheld and only 82 were not upheld. These are similar proportions to the figures for 2019/20.

Graph 6 - Final Outcome



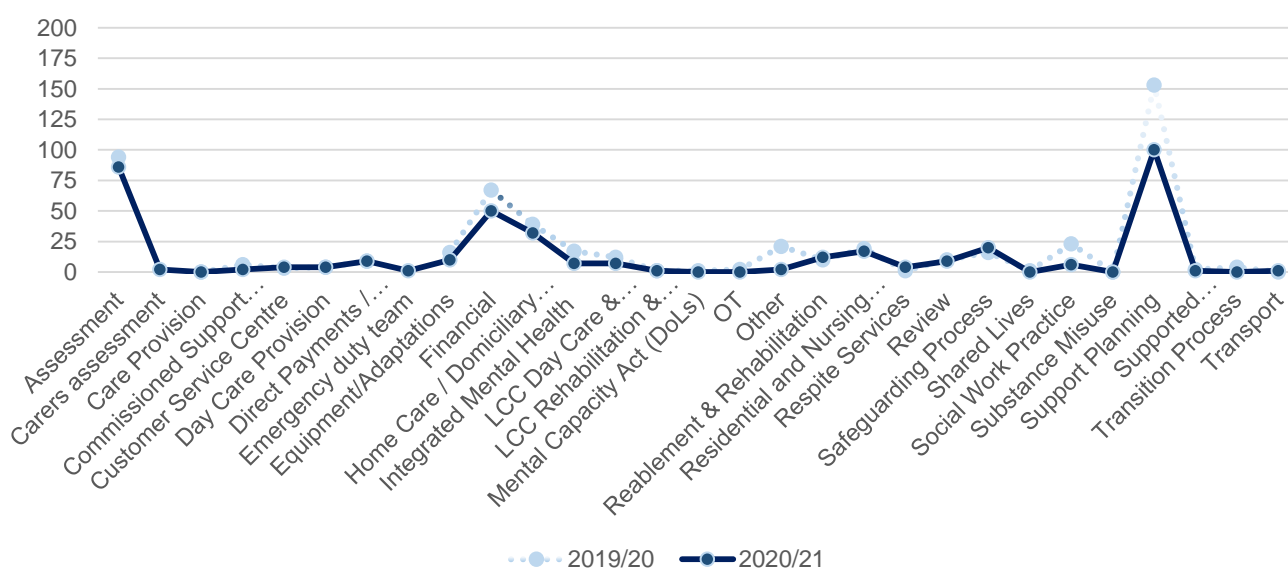
A total of 243 internal complaint investigations were undertaken. The breakdown of these was 57% upheld/partly upheld (139), 11% withdrawn/early resolution/signposted (26) and 32% not upheld (78). So, the upheld and partly upheld figures show that in 57% of all cases, when an investigation is undertaken, an aspect is found to be justified. In 2019/20 this figure was 60%.

70 complaints exceeded the statutory timescales of 6 months (29%). The main reason for this increase, identified by a recent staff survey, is social work staff capacity and the 3 months pause in complaints because of the pandemic, early in the financial year.

### 2.3 What do people complain about?

Graph 7 shows complaints by service type for the last 2 financial years.

Graph 7 - Complaints By Service Type



For 2019/20, the most frequent subject of complaint was Support Planning (153) which received 29% of the total number of complaints. For 2020/21, this dropped to 100, which is 24% of the total number of complaints. The reason for this is probably due to less support planning activity as a direct result of the first lockdown, when many older people did not wish to enter residential care or receive homecare services. Also, the current academy training for new social workers, and complaints training emphasises the importance of social workers taking ownership and dealing with issues immediately, to stop complaints escalating.

## 2.4 Learning for adult social care

Although managers address complaints received with their staff, the learning is not always widely known and there is a risk that other mistakes with similar themes, continue to occur. To remedy this and give feedback from customers the priority that it deserves, a Shared Learning Panel has recently been created, chaired by the Principal Social Worker in order to identify the themes and root causes of complaints and to cascade learning across the council.

The main learning for 2020/2021 is outlined on the next few pages.

Area	Learning point for adult social care
<b>Social Care and Support Planning</b>	<p>In two complaints by relatives stating that they did not know about the costs of care, managers have worked with staff to ensure that the relevant 'financial implications' document is always provided. Staff now allow time for people to read and understand it, before it is signed. Staff document such discussions, which always needs to include any backdating of charges.</p> <p>In a complaint where the person did not know about the support offered by the Lancashire Independent Living Service (LILS), managers worked with LCC and LILS staff, to reduce barriers and ensure that people feel confident to approach them to arrange a personal assistant.</p> <p>In a complaint about the lack of support offered by our transitions service, managers held a team meeting to discuss the prioritisation and allocation of cases and staff were made aware of how the lack of support during transition to adult services can impact young people and families.</p> <p>In several complaints which highlighted the inexperience of newly qualified social work practitioners, they have now been given extra support during their first year of employment through supervision and training. This includes reflective practice and discussion about ongoing professional development.</p> <p>In other complaints specific to social work practice, managers took the following action with the individual workers concerned:</p> <ul style="list-style-type: none"> <li>• Reminding the worker at supervision of the importance of being familiar with the recent case history before contacting the service user or their family.</li> <li>• Giving the worker the link to the council's complaints procedure webpages and attendance at complaints training, to ensure that</li> </ul>

	<p>they understand the part they play in complaints resolution.</p> <ul style="list-style-type: none"> <li>• Auditing information contained within support plans and case notes, to ensure this is accurate and it includes any changes in care provided.</li> <li>• Introducing regular reviews of assessments and tasks to ensure that the correct priorities are given to each case.</li> </ul>
<b>Complaints about communication</b>	<p>In several complaints about staff not returning calls or sharing information in good time, managers reminded social workers at supervision of the importance of returning calls to service users and/ or their families in a timely manner.</p> <p>In several complaints about not discussing all care options, managers reminded social workers of the importance of discussing all care options at the point of review with service users and/or their representatives.</p> <p>In a few complaints about errors in the recording case notes, we rectified the information and added customer comments to the entries.</p> <p>In a few complaints about the content of emails shared with customers, containing unprofessional dialogue between internal departments in the threads, a staff notice has been shared and training has been improved.</p> <p>In a complaint about reablement, managers have set up regular meetings to improve communication between services and providers, across the county, to deliver an effective and quality reablement service.</p>
<b>Personal Budgets</b>	<p>In a complaint about an invoice saying that a relative had misused her daughter's direct payments and payment was due, we have reviewed the direct payment guidance and trained staff on the updated information, to ensure professional communication is always maintained.</p>
<b>Reablement</b>	<p>In three complaints about reablement plans and care providers, involving time of visits being inconsistent, care not being delivered, ineffective communication and allocated workers changing, we have:</p> <ul style="list-style-type: none"> <li>• Identified areas for improvement with providers and worked with them to ensure that improvements are implemented and sustained.</li> <li>• Included more detail to show evidence of improvement in reablement plans</li> <li>• Ensured that allocated workers remain as consistent as possible during a period of reablement.</li> <li>• Discussed with staff the inappropriate use of language and making unsubstantiated statements around the issue of 'capacity'.</li> <li>• Worked with specific staff to ensure that conversations and decisions are recorded accurately after the event, fully involving</li> </ul>

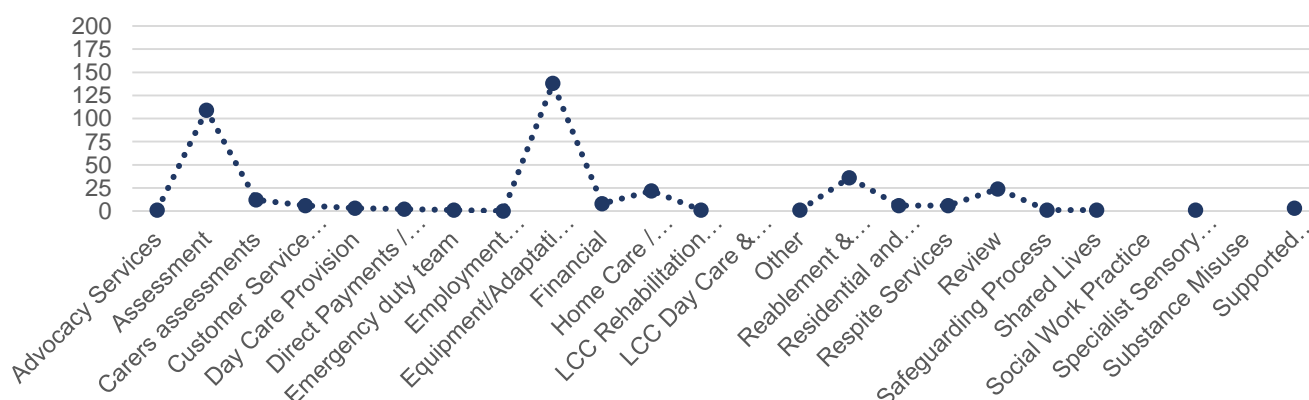
	<p>the family or representative in reviewing decisions when appropriate.</p> <ul style="list-style-type: none"> <li>• Worked with a provider to ensure that their flexibility of service does not compromise individual care and reablement needs.</li> </ul>
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## 2.5 ASC services which were the subject of compliments

Graph 8 shows the number of compliments received by service type for 2020/21 recorded on the Customer Feedback System (CFS) which was 469 in total. Unfortunately, the further 147 compliments captured via other methods cannot be broken down into the same categories to allow an overall breakdown of the 616 compliments.

The number of compliments has increased by 48 from 568 in 2019/20 to 616 in 2020/21. In 2019/20, 32% of all compliments were because of equipment and adaptations received and this has decreased slightly to 29% in 2020/21. This remains the most frequent reason for a compliment followed by Assessment. Compliments for both the safeguarding process and Rehabilitation & Reablement have both decreased for 2020/21.

Graph 8 - Compliments By Service Type



## 2.6 Joint Complaints

A Joint Complaints Protocol is in place with the NHS. Complaints investigations increasingly involve many different parts of the council as well as health services and contracted service providers therefore adding much more complexity which the complaints team coordinates.

There was a decrease in closed joint complaints during 2020/21 to 14 compared with 31 in 2019/2020. These complaints are sometimes complex and take longer to resolve as they involve ASC and the NHS, typically Hospital Trusts and/or Clinical Commissioning Groups. A further 10 joint complaints were still open at the close of 2020/21. Of the closed complaints 1 was not upheld and 13 were partly upheld. Support Planning and Social Work Practice were the biggest themes.

## 2.7 Ombudsman Complaints

The Local Government and Social Care Ombudsman provides the final stage for complaints about local authorities and some other organisations providing local public services. Their service is provided free of charge. Complainants approach the Ombudsman when all other options for pursuing their complaint

are closed by the council, after it is considered that a proportionate response has already been provided. The Ombudsman will only consider complaints that have already been through the council's complaints procedures, although sometimes an early referral will be made to the LGSCO when complainants continue to be dissatisfied and the council considers that it has not done anything wrong or it has done all it can to resolve the matter.

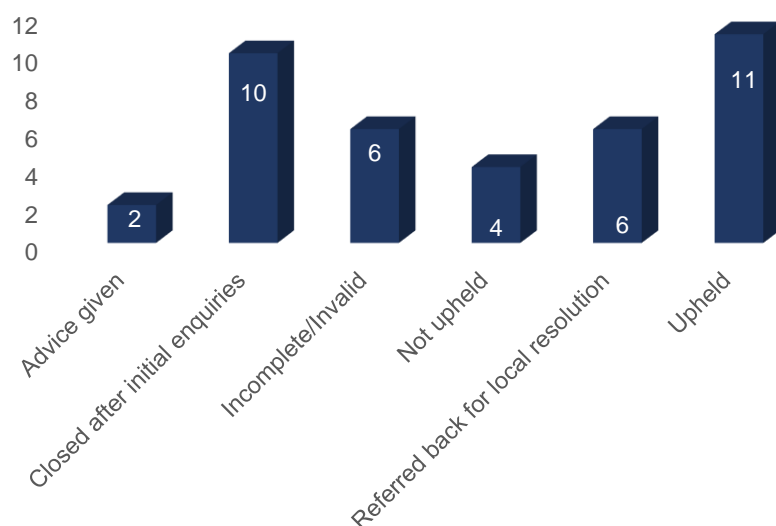
In 2020/21, the Ombudsman received total of 44 separate enquiries in relation to ASC in Lancashire (in 2019/20 it was 62). A total of 39 decisions were made by the Ombudsman in 2020/21 for ASC.

Graph 9 below shows of the 39 Ombudsman ASC decisions received in 2020/21, 10% were not upheld, 62% were not investigated and 28% were upheld.

It should be noted that the Ombudsman will also uphold complaints that the council has already upheld. Of the 11 complaints that were either upheld or partly upheld, 6 were not upheld by ASC originally, **making an actual uphold rate of 15% when all 39 decisions for the year are considered.**

The final decisions resulted in a total of £17850.00 being paid out by the council.

Graph 9 - Final Outcome



There have not been any ASC public reports in 2020/21.

The main learning from the 11 upheld complaints is outlined below.

## 2.8 Ombudsman identified learning for adult social care complaints

Managers have issued guidance to staff about ensuring clarity regarding the basis of care provision being arranged.

Managers have reminded staff that when there is a change of care provider, the new provider is made fully aware of the person's needs, including any previous input from health services such as speech and language therapy.

The council has reviewed arrangements with our provider of carers assessments, to ensure their staff are aware of when to refer cases to ASC for further consideration.



The council has reviewed our processes for matching addresses across service records.

Managers have reminded staff of our policy on sending questions in advance of telephone assessments and the need to check whether service users need reasonable adjustments to be made to council processes. We have also provided training to staff on our obligations under the Equality Act.

The contracts team has reminded a contracted provider that homecare staff must properly record their arrival and departure from visits and that staff need to be reminded of their complaint policy. In addition, a council a monitoring visit will check that all records are kept securely in line with policy / relevant legislation and guidance.

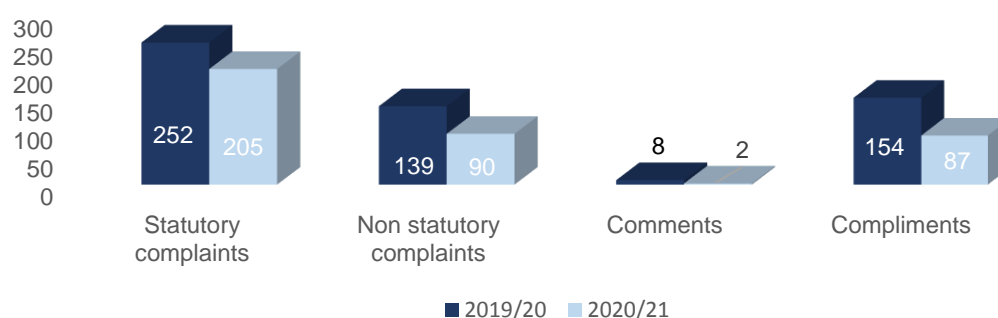
## Section Three: Children and Young People Feedback

### 3.1 Summary of CYP and CSC feedback

There is a statutory and non-statutory process for complaints about CYP services. The statutory process involves three stages for social care complainants, who are eligible to complain. The Stage 1 initial response is always compiled by the service manager involved. If the person complaining is still unhappy, they can request a Stage 2 independent investigation. If the complainant remains unhappy, a Stage 3 review panel, which considers the way the stage 2 was investigated, can be requested. The non-statutory process applies to non-social care complaints (for example education or Special Educational Needs and Disabilities SEND) or for people complaining about CSC who do not have parental responsibility for a child (for example grandparents). In 2019/20 the total amount spent on investigations for children's complaints was £7297.03.

Graph 10 shows a decrease in CSC statutory complaints, comments and compliments. Complaints specifically decreased by just over 18%, to make an overall total of 205 for 2020/21 probably due to the pausing of complaints due to the pandemic. Most CSC complaints are made by parents or guardians. Only 30 complaints were made by children in 2020/21. Complaints made by children are prioritised for immediate attention and advocates are provided to help give children a voice.

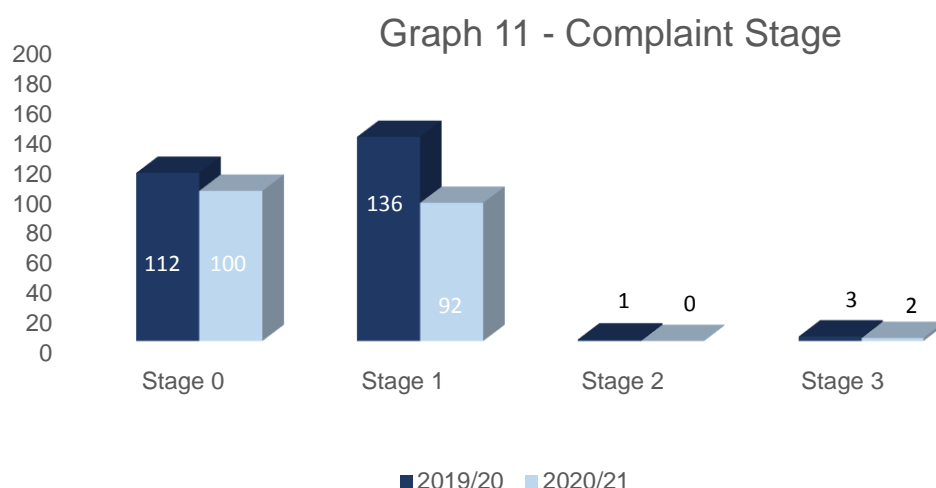
Graph 10 - Feedback Type



### 3.2 Breakdown of complaints by stage

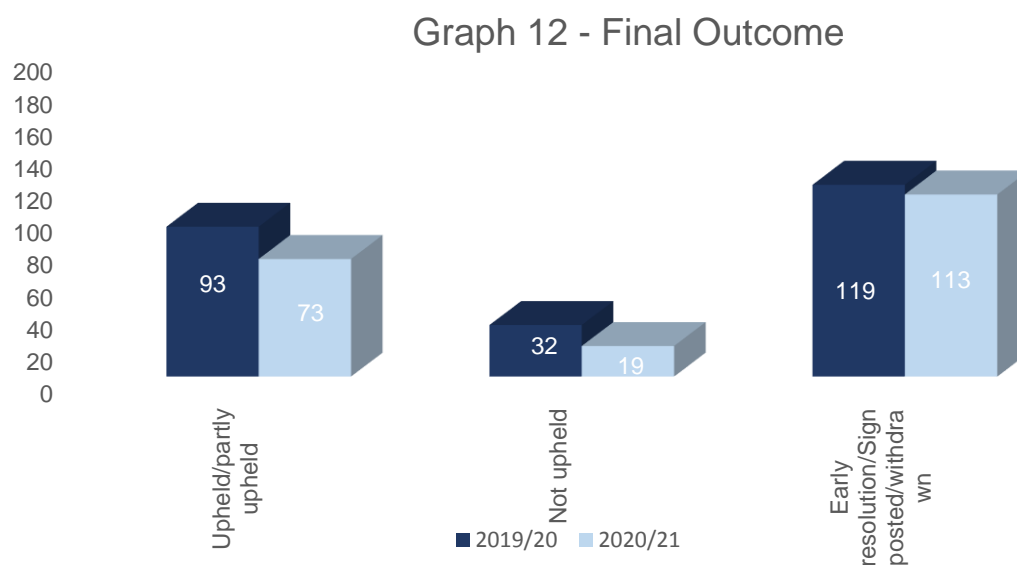
The breakdown of complaints with outcomes recorded against them can be seen in Graph 11. Stage 0 is the early resolution of complaints.

Although the number of complaints resolved locally at an early stage has slightly reduced, the proportion being resolved early in the complaint journey (52%) is higher than in 2019/20 (45%), which is welcome news. Less complaints escalated to Stage 1 than in 2019/20. No complaints were resolved by the two Stage 2 independent investigations which were commissioned, and two Stage 3 panel hearings were therefore also held.



### 3.3 Breakdown of complaints by outcome

Graph 12 shows a breakdown of the 205 closed statutory complaints which had a final outcome recorded at the time of writing this report. Of these 9% were not upheld, 36% were upheld or partly upheld and most complaints (55%) were signposted, resolved early or withdrawn (a similar proportion for the last two financial years). Local and early resolution of complaints is a better outcome for everyone, as escalation is time-consuming and expensive.

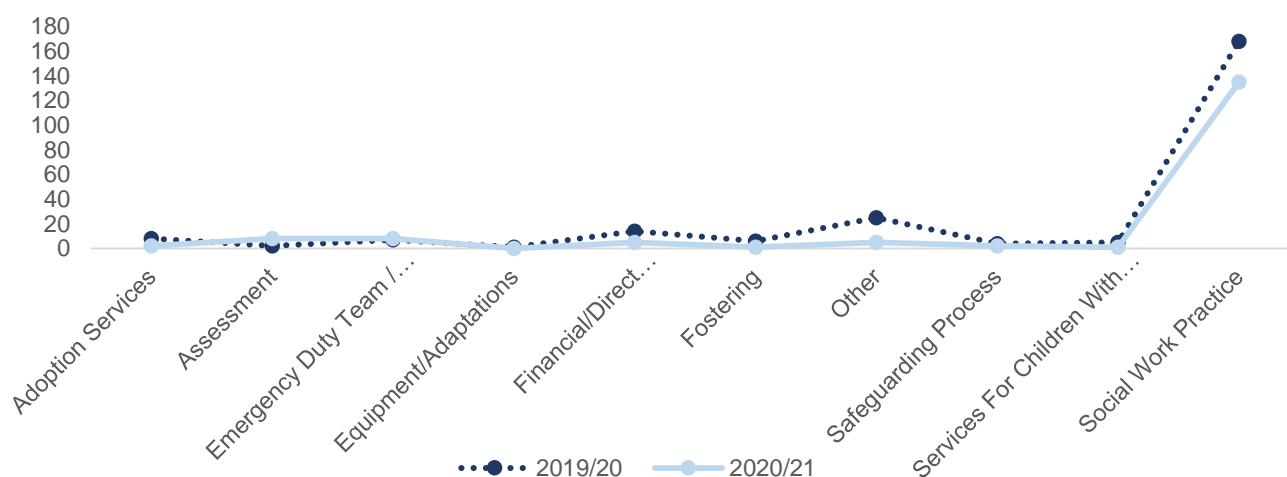


Of the total number of statutory CSC complaints received in this financial year, 68% (140) exceeded the statutory timescale (20 working days). Last year this was a rate of 61%. The main reason for this increase, identified by a recent staff survey, is social work staff capacity and the 3 months pause in complaints because of the pandemic, early in the financial year. Recent changes to social care roles have also impacted on resolution timeframes.

### 3.4 What do people complain about in the statutory process?

Graph 13 below shows a breakdown by service type for the last 2 financial years. The proportions are similar and social work practice continues to be the most frequent subject of complaint covering 66% of all statutory CYP complaints.

Graph 13 - Complaints By Service Type



### 3.5 Learning

Area	Internal learning point for children's services
<b>Improving relationships with families</b>	<p>Four complaints focussed on improving the way social workers interact with families.</p> <ul style="list-style-type: none"> <li>In one case the social worker improved their working relationship with the family by increasing contact.</li> <li>In another number of cases, social workers have reflected on complaints findings with their managers in supervision settings, to shape their approach to customers, by considering what they would say and how to conduct themselves more sensitively in the future.</li> </ul>
<b>Reflection, training and improvements to social care provision</b>	<p>Many complaints identified learning and development and training needs for the workers involved. Managers discuss complaint outcomes in supervision with the worker for reflection and improvement and share with the wider team when relevant, to improve practice moving forward. Some complaints have been anonymised and used as an example for staff training.</p> <ul style="list-style-type: none"> <li>Some staff members have attended training regarding information sharing and accuracy principles</li> <li>Learning &amp; development sessions now take place with all social workers as part of their weekly briefing sessions with managers. At the session the importance of working in partnership with parents is emphasised and good practice examples are shared around communication.</li> </ul>

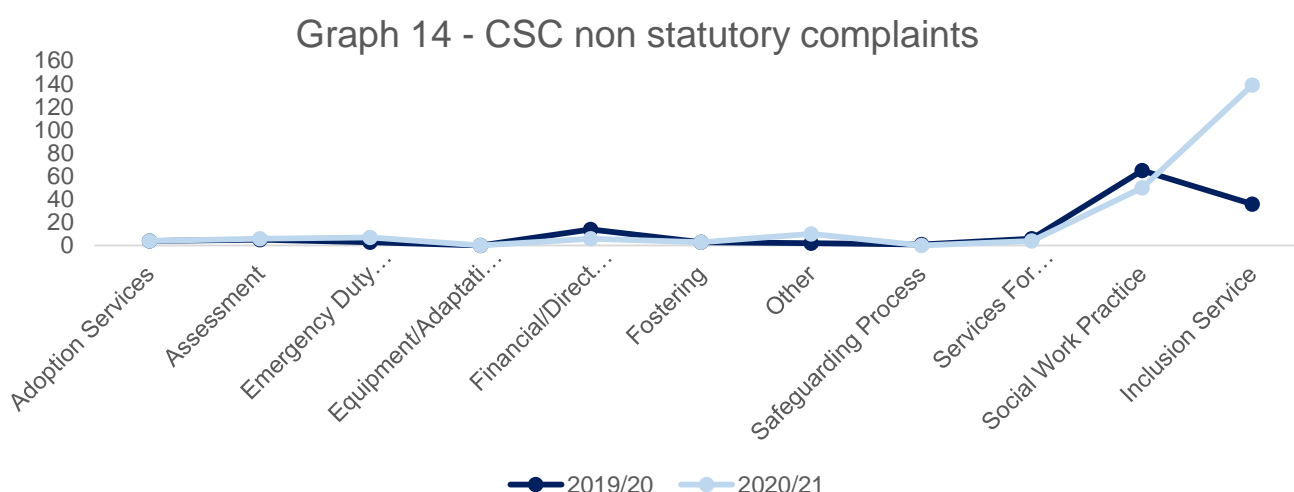
<b>Communication</b>	<p>Many complaints specially highlighted poor communication from workers with other professionals, families and sometimes their support networks.</p> <ul style="list-style-type: none"> <li>• In a complaint highlighting a lack of communication between childcare teams, managers devised a process to prevent similar reoccurrences. In another, highlighting a lack of communication between social workers email correspondence protocols were set up to share decisions. A complaint was used as an example in training, focussing on how communication could have been improved.</li> <li>• In another case a senior manager worked with the social worker and practice manager to improve their communication with families. In another, the assessment planning process was specifically discussed to consider how communication between workers and families could be improved.</li> <li>• In another situation, it was agreed that when the social worker cannot get hold of the complainant, a phone call will be followed by a text, so the complainant is aware that CSC services are trying to get hold of her.</li> </ul>
<b>Reviewing and improving processes, policies and procedures</b>	<ul style="list-style-type: none"> <li>• As a result of one complaint it is now common practice for parents/carers to be written to when council payments are planned to cease.</li> <li>• The process for inputting birth notifications has been reviewed and amended to prevent the same mistake highlighted by the complaint from happening again.</li> <li>• The Family Time Team have now amended their policy in relation to contacting families regarding changes to plans.</li> <li>• The procedures regarding placement freezes have been reviewed and discussed with the relevant workers to increase their understanding of the reasons to adhere to them in future.</li> <li>• One complaint resulted in all workers who are in contact with families to be reminded to take the appropriate precautions in relation to Covid-19 and PPE</li> <li>• In one social care team, an improved and more robust tracking system was put into place to ensure Child Protection documentation is completed in a timely manner. This improvement is already leading to improved timeliness of recordings.</li> </ul>
<b>Fostering Services</b>	<p>Following a complaint highlighting a poor placement decision, all teams were asked to improve their engagement with children when visiting and attending homes during the matching process, taking special care when foster carers are new to the role. Reflective discussions took place with line managers, considering the learning.</p>

<b>Residential Services</b>	One complaint outcome resulted in the matter being fully investigated by an independent officer within the care agency & with the Local Authority Designated Officer. Recommendations were made and implemented.
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### 3.6 Summary of non-statutory CSC complaints

Non CSC statutory complaints are made by a people who are **not** entitled to complain under the Children Act procedures (for example a family friend or a relative without parental responsibility) or if the complaint is about something that cannot be complained about under the Children Act (for example adoption or fostering matters/complaints by members of the public: please see further categories below). Complaints about the Inclusion Service are also non-statutory, if CSC is not involved.

### 3.7 What are CSC non-statutory complaints about?



Graph 14 above shows that non statutory complaints have increased overall, but particularly for the Inclusion Service (36 in 2019/20 to 139 in 2020/21). As highlighted earlier in this report, this may be due to better reporting.

Identifying themes and learning from all complaints is essential. Senior managers are informed of the themes on a regular basis through quarterly reporting and regular attendance at team meetings or senior management meetings.

### 3.8 Services which were the subject of compliments and comments

Due to the nature of CSC, not many compliments are received (51). With the addition of compliments for the Inclusion Service, a total of 87 compliments were received for 2020/21, which is a decrease of 44%, from 154 for the previous year.

### 3.9 Ombudsman Complaints

The Local Government and Social Care Ombudsman acts as the regulator and provides the final stage for

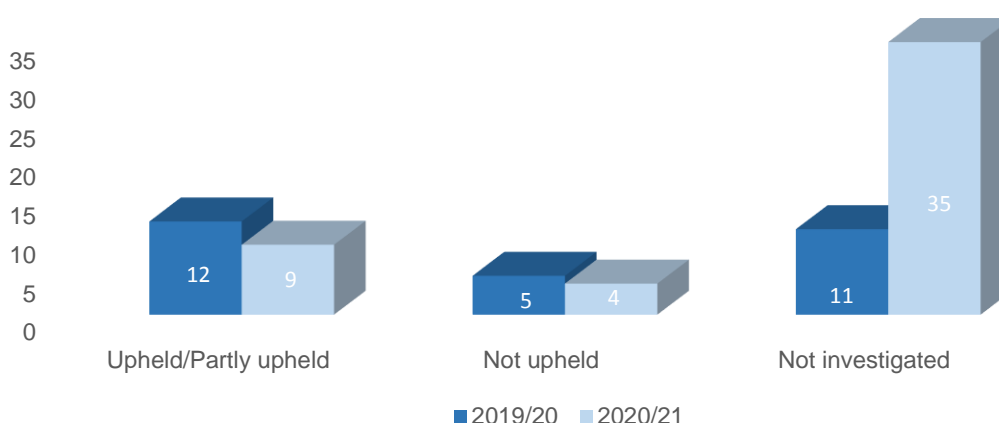
complaints about local authorities and some other organisations providing local public services. Their service is provided free of charge. Complainants approach the Ombudsman when all other options for pursuing their complaint are closed, after a proportionate response has been provided. The Ombudsman will only consider complaints that have already been through the council complaints procedures. Sometimes the council will make early referrals to the Ombudsman when complainants continue to be dissatisfied and the council considers that it has not done anything wrong or it has done all it can to resolve the matter.

In 2020/21, the Ombudsman received total of 55 separate enquiries in relation to CSC, Inclusion and Education Services in Lancashire (in 2019/20 it was 74). Of these, a total of 48 decisions were made by the Ombudsman in 2020/21 for CSC.

Graph 15 below shows of the 48 Ombudsman CSC decisions received in 2020/21, 56% were either not upheld or closed after initial enquiries. The number of enquiries referred back to the council for local resolution represent 25%. Only 19% of decisions were upheld.

As the Ombudsman will also uphold complaints that the council has already upheld and of the 9 complaints, 4 had already been upheld or partly upheld, **this makes an actual uphold rate of 10% for the 48 decisions made.** A total of £1850.00 was paid out in final decisions for 2020/21. For 2019/20, this was a total of £33,709.36 (mainly due to the remedy in one complaint).

Graph 15 - Final Outcome



### 3.10 Ombudsman identified learning for Children's Complaints

The identified learning from the upheld social care and education complaints is as follows:

Managers have reviewed council procedures and duties under Section 19 of the Education Act 1996 to ensure compliance with the law. Staff have been reminded of those duties, including the need to chase responses from professionals who do not respond within the statutory timescales for Education, Health and Care Plans.

Managers have issued guidance to relevant staff to ensure they understand that it is important to take a holistic approach to complaints which span different council services. Managers have provided guidance, and additional training, to staff about when and how to use the statutory complaint procedure for Children's Services complaints. We have also reviewed our complaints procedure and training to ensure the above two points are clear for all staff.

Managers have reminded staff of our power to provide funding support when a child is not on a school roll, and the need to document decision-making to evidence the exercise of discretion where appropriate.

We have improved our Covid19 temporary school appeals process to ensure that we clearly document the reasons taken by panel members for holding a panel in a certain way (e.g. written and not verbal). Further training and oversight has been offered to a casual clerk to ensure clear recording of who was present during the panel's consideration of appeals and that this is set out in the decision letter.