Lancashire County Council

**Cabinet Committee on Performance Improvement** 

Monday, 7th March, 2016 at 2.00 pm in Cabinet Room 'B' - The Diamond Jubilee Room, County Hall, Preston

# Agenda

Part I (Open to Press and Public)

# No. Item

# 1. Apologies for Absence

# 2. Disclosure of Pecuniary and Non-Pecuniary Interests

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

3.	Minutes of the Meeting held on 10 December 2015	(Pages 1 - 8)

- 4. Quarterly Corporate Performance Monitoring Report (Pages 9 22) - Quarter 3 2015/16
- 5. Risk and Opportunity Register(Pages 23 38)
- 6. A Summary of the Provisional Results at the end of (Pages 39 44) Key Stage 2 and Key Stage 4 at Lancashire and District Level

# 7. Urgent Business

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

# 8. Date of Next Meeting

The next meeting of the Cabinet Committee on Performance Improvement will be held on Tuesday 12 April 2016 at 10 am, in Cabinet Room 'B', the Diamond Jubilee Room, County Hall, Preston.



I Young Director of Governance, Finance and Public Services

County Hall Preston

# Lancashire County Council

# Cabinet Committee on Performance Improvement

# Minutes of the Meeting held on Thursday, 10th December, 2015 at 10.00 am in Cabinet Room 'B' - The Diamond Jubilee Room, County Hall, Preston

# Present:

# **County Councillors**

D Borrow B Winlow G Driver M Tomlinson T Martin

#### 1. Apologies for Absence

Apologies for absence were received from County Councillor Mein.

# 2. Disclosure of Pecuniary and Non-Pecuniary Interests

None

# 3. Minutes of the Meeting held on 5 October 2015

Resolved: - That the minutes of the meeting held on 5<sup>th</sup> October 2015 be agreed as a true and accurate record and be signed by the Chair.

# 4. Report on the 2015 Ofsted Inspection of Services for Children in Need of Help and Protection, Children Looked After and Care Leavers

Bob Stott, Director of Children's Services attended and presented a report on the outcomes of the Ofsted inspection of Children's Services that took place between 14 September and 8 October 2015 and the actions that have been taken in the immediate period following the inadequate inspection judgement.

It was reported that Ofsted published its report on 27<sup>th</sup> November 2015 rating the overall effectiveness of the Children's Services as inadequate. The overall judgement was an amalgamated judgement resulting from the following:

•	Children who need help and protection	inadequate
•	Children looked after and achieving permanence	requires improvement
•	Adoption performance	requires improvement
•	Experiences and progress of care leavers	inadequate
٠	Leadership, management and governance	inadequate
•	Adoption performance Experiences and progress of care leavers	requires improvemer inadequat

Ofsted also carried out a review of the effectiveness of the Lancashire Safeguarding Children Board at the same time and the judgement was good.

It was reported that four major factors had led to the judgement:

- Performance management and data
- Aspects of social work practice
- Children in Need (CiN)
- Care leavers

During the inspection, there were also three child deaths, all CiN cases.

The actions taken since the inspection were outlined.

It was noted that:

- A Post Inspection Improvement Board (PIIB) had been established in shadow, prior to the appointment of an independent Chair by the Department for Education (DfE). The Board along with the DfE will have oversight of the actions that will be taken to make the improvements required to services following the inspection outcomes. It is intended that the PIIB will report into Cabinet Committee on a regular basis. An improvement plan will be developed with and formally approved by the PIIB and the DfE.
- An additional £5m investment in children's services has been approved by the Cabinet. This will allow increased staffing levels at the frontline.
- Improvements to the way the electronic records system is used as an effective tool to provide timely and accurate information.
- Initial work to address variations in the consistency of social work practice, clarifying practice standards and expectations.
- Weekly reporting arrangements have been introduced to reinforce monitoring of activity and compliance.
- Strategic responsibility for the team that looks after children awaiting adoption has been transferred to the adoption service.
- Improving services for care leavers.
- Review of the approach to the audit grading system to reflect the Ofsted grading judgement.

It was reported that the operation of children's services was being reviewed by a company called Newton who are Local Government Association accredited. Newton will shadow frontline workers to gain an understanding of how much time is spent with families day-to-day and how cases are managed. They will be reviewing cases to understand how practices, processes, systems and structures can best support and improve end-to-end pathways.

It was noted that management capacity had been increased in the three district areas, North, East and Central Lancashire, with two additional senior managers from County Hall working with the district managers in each of the three districts, to allow increased oversight of social work practice. Members noted that the report was critical of the management oversight of Children in Need (CiN) and that a review of the current model used was to be undertaken. A review of the current 2,300 CiN cases had begun, to provide assurance that cases are being managed at the correct level, focussing on the highest priority cases. This review using the County Council's own resources and an external social work agency will be complete by the end of March 2016.

The positive findings of the Inspector, were shared with members, including a recognition at all levels that there is a commitment to succeed in delivering the best outcomes for children and young people.

It was agreed that a standard report would be presented to every meeting of the Committee.

# Resolved: - That:

- (i) the report now presented and the actions taken following the inspection be received,
- (ii) the Cabinet Committee will receive further reports on the development of actions taken to address the findings of the inspection and to improve Children's Services in Lancashire.

(Following the establishment of the PIIB, regular updates regarding the implementation of the Post Inspection Improvement Plan will be provided to the Cabinet Committee as part of the Corporate Performance Report)

# 5. Update on a Finding of the Local Government Ombudsman - August 2015

Bob Stott, Director of Children's Services attended and presented a report on an update on a finding of the Local Government Ombudsman (LGO).

It was reported that on 5 August 2015, following an investigation, the LGO published a report, attached at Appendix 'A', which found fault causing injustice and made a number of recommendations, three relating to the specific case and five intended to prevent injustice to other members of the public.

It was noted that the findings of the LGO report involved concern about a case where it was necessary to place a young person in bed and breakfast accommodation. Systems were in place to minimise the risk of using bed and breakfast accommodation as this is not considered to be a suitable option for young people presenting as homeless. Statutory guidance relating to the provision of accommodation for 16 and 17 year old young people who may be homeless and/or require accommodation makes it clear that the use of bed and breakfast accommodation is unsuitable even in an emergency.

However this exceptional step has only been used in a small number of cases and in 2014/15 it was used on only 6 occasions for no more than 4 nights. The issue in all cases has been a lack of suitable provision to meet the needs of vulnerable16 and 17 year old young people who present high risk behaviours. As a result of the LGO findings, the Cabinet Member for Children, Young People and Schools recommended Full Council to agree to actions addressing its recommendations and these were approved on 22 October 2015.

Members noted the actions taken in response to these recommendations set out at Appendix 'B'.

It was reported that further steps will now be taken to avoid the need to use bed and breakfast accommodation, including discussions with housing and residential providers, and foster carers around emergency "crash bed" facilities.

It was noted that bed and breakfast will only be considered as a last resort subject to the agreement of the Director of Children's Services and in his absence the Corporate Director, Operations and Delivery.

Further steps will be taken to develop data collection systems to satisfy ourselves that the County Council is able to identify need and plan sufficiency accordingly. Since the publication of the LGO report a similar case involving the need to place a young person in suitable accommodation involved arranging an emergency placement with a neighbouring local authority and further work will also explore the development of such arrangements as an alternative option. This process will inform the production of a revised Policy for homeless 16 and 17 year olds which will be submitted to the Cabinet Member for Children, Young People and Schools for approval in due course.

Resolved: - That the report now presented be noted.

# 6. Quarterly Corporate Performance Monitoring Report - Quarter 2 2015/16

Michael Walder, Senior Policy and Performance Officer attended and presented a report setting out details of corporate performance monitoring for 2<sup>nd</sup> quarter of 2015/16 (July – September).

It was reported that a robust performance management framework will underpin the delivery of the new Corporate Strategy from 2016, with a suite of key performance indicators established to monitor and manage the delivery of strategic outcomes.

Members noted that the key performance indicators would be available from 1st April 2016. Service plans will also include service standards and planned outcomes, reported as metrics with targets.

Quarterly Quality of Service reports against the themes of Start well, Live well and Age well have been produced for quarter 2 2015/16, giving an overview of performance, along with Highlight reports for other areas of the organisation. The Quality of Service and Highlight report gives details of performance against Performance Indicators for that quarter. An overview of the Quarter 2 budget position was provided at Appendix 'A' so performance could be viewed within the associated financial context.

**Resolved:** - That the report now presented be noted and further reports be requested at future meetings of the Cabinet Committee.

# 7. Customer Access Performance Report

Phyl Chapman, Head of Customer Access Service attended and presented an update on the operation of the Customer Access Service (CAS).

It was reported that CAS is the first point of contact for 60% of all incoming telephony and email enquiries to the County Council. CAS was established in 2005, initially delivering only four services. The strategic plan was to migrate additional services into CAS, whilst improving costs and efficiency. CAS currently delivers 24 County Council services and two West Lancashire Borough Council services, including Highways, Libraries, NowCard, Registrars, Certificates, Waste, Welfare Rights, Ask HR and Ask Pensions helpdesk and the Blue Badge Service. Staff are required to deliver both detailed transactional services and validated signposting to agencies across the public sector.

It was noted that within the dedicated Social Care Centre, a specialised and sensitive service is delivered offering information, advice and assistance on all matters relating to Adult and Children's social care.

Members noted that in Quarter 2 CAS Social Care and Contact Centre contractual targets were exceeded

**Resolved:** - That the report now presented be noted.

# 8. BTLS Lancashire Services Limited Service Governance and Performance Monitoring Report

Lisa Kitto, Director of Corporate Services and Mark Mayer, Chief Operating Officer, BT Lancashire Services Ltd (BTLS) attended and presented a report providing an update on the Service Governance and Performance Monitoring of the County Council's strategic partnership with BT, covering the first two quarters of 2015/16.

Further information providing a more comprehensive measurement of service delivery was provided at Appendix 'A', including the key performance indicators against which BTLS are monitored.

The achievement of key performance measures were reported as follows:

• ICT Services: all contractual performance targets were met in Q1 and Q2, except the Priority 2 target in Q1, of resolving Priority 2 issues in 8 hours.

• Payroll and Recruitment Services: all contractual and non-contractual performance targets were met within Q1 and Q2.

Members noted that revised contract monitoring and governance arrangements in place since December 2014, continue to be developed and provide a clearer framework within which to manage all aspects of work being commissioned from BTLS. The new approach has resulted in the savings target of £1m in 2015/16 on the BTLS contract, achieved both this year and in future years.

An update on Core Systems was given and the main points were:

- The Asset Management Programme was progressing well and blueprints have been created that set out a vision for the solution across the four service areas affected: highways, property management, capital project management and finance.
- The Customer Access Service systems were at the end of their life and will be replaced, with the implementation of the new system to start in January 2016.
- With the support of BTLS, Startwell has completed a review of their systems which are coming to the end of life as they are no longer supported. Appropriate solutions are being sought for their replacement.
- The current Library Management System is coming to end of life and the service is in receipt of a proposal that will enable the upgrades of both hardware and software. This is currently being negotiated.

Members noted the new arrangements for operation following BTLS taking direct accountability for the Schools CLEO/ICT service.

Members were provided with a BTLS staffing update. Periodic staff surveys were being undertaken, with the response rate increasing from 45% to 65% of BTLS staff, resulting in a greater representative base of staff feedback to learn from and act upon. BTLS had increased investment in training, including its leadership training programme for managers, and would be extended to more staff.

**Resolved:** - That the report now presented be noted.

# 9. Corporate Human Resources - Health Check Report

Deborah Barrow, Head of Service Human Resources attended and presented a report setting out details of the County Council's performance against key metrics regarding workforce information for the 2<sup>nd</sup> quarter in 2015/16.

It was reported that the Corporate Human Resources key metrics regularly monitor and report against workforce data including: sickness absence, the numbers of starters and leavers, reasons for leaving, redeployment activity, vacancy numbers and recruitment costs. This detailed information was included as Appendix 'A'.

Highlights reported for the 2<sup>nd</sup> quarter of 2015/16 included:

- The number of FTE days lost per employee due to sickness absence was 2.47.
- The number of starters decreased by 17.4% in Q2 of 2015/16 compared with Q2 of 2014/15.
- The numbers of leavers was up by 33% in Q2 of 2015/16 compared with Q2 of 2014/15.
- Turnover increased from 3% in Q2 of 2014/15 to 4% in Q2 of 2015/16.
- The number of recruitment adverts decreased by 23.93% in Q2 of 2015/16 compared with Q2 of 2014/15.

It was reported that the top reason for absence due to sickness was Mental Health which accounted for 29% of all absence. The top reason for absence in the same period 2014/15 was also Mental Health (27%).

**Resolved:** - That the report now presented be noted.

# 10. Urgent Business

There was no urgent business to be considered.

# 11. Date of Next Meeting

The Cabinet Committee noted that the next meeting would be held on Monday 1 February 2016 at 2.00pm, in Cabinet Room 'B', the Diamond Jubilee Room, County Hall, Preston.

I Young Director of Governance, Finance and Public Services

County Hall Preston

# **Cabinet Committee on Performance Improvement**

Meeting to be held on 7 March 2016

Electoral Division affected: All

# **Quarterly Corporate Performance Monitoring Report – Quarter 3 2015/16**

(Appendices 'A' and 'B' refer)

Contact for further information:

Michael Walder, 01772 533637, Corporate Policy and Performance Team, <u>Michael.Walder@lancashire.gov.uk</u>

# **Executive Summary**

A robust performance management framework will underpin the delivery of the new corporate strategy from 2016/17. A suite of key performance indicators will be established to monitor and manage the delivery of strategic outcomes. Additionally, service plans will include service standards and planned outcomes, reported as metrics with targets.

For the interim period, regular corporate monitoring of performance across the authority as a whole continues, with the production of quarterly reports and analysis of corporate performance. Quarterly Quality of Service reports against the themes of Start Well, Live Well and Age Well are being produced giving an overview of performance, along with Highlight reports for other areas of the organisation

In addition to monitoring and providing progress updates against budgets, projects and other future developments, each Quality of Service and Highlight report gives details of performance against Performance Indicators for that quarter. Monitoring across these quarter 3 indicators has been used to provide this corporate - overview of – performance report, with a performance summary set out on the following pages.

An overview of the Quarter 3 budget position is also provided at Appendix 'A' so performance can be viewed within the associated financial context.

In addition as part of this quarterly Corporate Performance Monitoring report, a latest post (safeguarding) Children's Service Ofsted inspection update has been attached at Appendix 'B' and updates will continue to feature in these reports going forward.

# Recommendation

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



# Background and Advice

Our new Corporate Strategy is being finalised for implementation from April 2016 which sets out the future direction for the County Council, covering a timeframe to 2021 and beyond. It will form a framework which sets out:

- our vision, values, high level priorities and overall approach
- our evidence base
- thematic strategies, such as our financial strategy
- our risk, quality and performance framework
- service delivery plans
- annual budgets

The Strategy details the core purpose, vision, values, approach and evidence base which we will use to inform and guide what we do, playing a key role in shaping the future pattern of the Council's services.

A robust performance management framework will underpin the delivery of the corporate strategy. A suite of key performance indicators will be established to monitor and manage the delivery of strategic outcomes. Additionally, service plans will include service standards and planned outcomes, reported as metrics with targets.

Performance dashboards will be created to monitor Corporate Strategy Key Performance Indicators (KPIs) and service plan metrics to ensure that service plans are achieving their objectives, and the overall aims of the Corporate Strategy are being met. The plans will be subject to review periodically to ensure that they remain focussed and relevant.

The consultation on the County Council's Draft Corporate Strategy ended in October 2015. The Draft Strategy was subsequently presented to Cabinet on 26 November 2015 and Full Council on 17 December 2015. Key aspects of the Strategy such as the vision, values and overarching priorities were well received. However, Council asked that we reconsider our approach to meeting the needs of communities across Lancashire. That work is now being taken forward, aligned to consideration of our Property Strategy and the setting of the budget in February 2016, and will subsequently be reconsidered by Cabinet.

For the interim period, regular corporate monitoring of performance across the authority as a whole continues, with the production of quarterly reports and analysis of corporate performance. Quarterly Quality of Service reports against the themes of Start Well, Live Well and Age Well have been produced for quarter 3 2015/16, giving an overview of performance against agreed headings and parameters.

In addition Highlight reports have been produced for Development & Corporate services and Commissioning, Governance, Finance & Public Services.

Along with monitoring and providing progress updates against budgets, projects and other future developments, each Quality of Service and Highlight report gives details of performance against key indicators for that quarter.

Monitoring across these Quarter 3 indicators has been used to provide this corporate - overview of – performance report.

# Performance Summary

# Start Well

- The number and rate of Lancashire children on Child Protection Plans (CPP) has been steadily increasing since March 2015. At the end of Quarter (Q) 3, there were 1,217 children with a CPP an increase of 261 on 31 March 2015. This is 153 more than Q2 (this increase in CPP plans may be linked to the recent Ofsted inspection and lowering of thresholds further analysis is taking place). Nb Higher numbers are not deemed as worsening performance.
- The proportion of children looked after with a Personal Education Plan (PEP) either on LCS (Liquidlogic Children's System) or in other formats/systems was 89% (1052) which equates to 128 still outstanding from those who should have a PEP.
- There were more care leavers aged 19-21 in education, employment and training during Q3 (43.5%; or 37 care leavers) when compared to Q2 (36.6%; or 26 care leavers). The Lancashire percentage is similar to the recently published 2014/15 national (48%) and regional rates (47.9%).
- The under-18 conception rate (25.4 per 1,000) has reduced from the previous quarter (31.3) and is closer to the regional (24.8) and national (21.9) rates.
- The Lancashire infant mortality rate (5.1 per 1,000 live births) is still significantly higher than the national (4.0) and regional rate (4.2).
- Revised data from the DfE suggests that the performance of Lancashire pupils at Key Stage (KS) 2 (82% achieving level 4 or above in reading, writing and maths) and Key Stage 4 (58.8% 5 GCSEs A\* C including English and maths) continues to improve and performance is still higher than the national average in both areas. However, there are variations across Lancashire. Against the KS4 measure lower levels of performance were seen amongst pupils attending schools in some of our more deprived communities Burnley (44.4%), Pendle (46.8%) and Hyndburn (51.1%).

A detailed Educational attainment report is a separate item on this agenda.

# Live Well

- An increase in the percentage of all reported carriageway and footway defects repaired within 20 working days. Up from 97% in Q1 2015/16 to 99% for both Q2 and Q3 2015/16.
- Street lighting fault repair times for Q1 Q3 of 2015/16 are within the 5 day target for those excluding traffic management (2.23 days)
- The diversion of municipal waste away from landfill to recycling, reuse and composting (excluding rubble and hard-core). Performance has improved to 71% in Q3 2015/16 from a rate of 69% in Q2 and 68% in Q1 (the diversion figures quoted include recovery).
- Comparing January September 2014 to the same period in 2015, the total number of all killed or seriously injured on Lancashire roads are down from

554 to 502. The numbers of children killed or seriously injured has increased from 52 to 68, there has been 1 child fatality in Rossendale.

- The number of visitors to Libraries went down in Q3 of 2015/16 (1,167,296) from Q2 (1,254,376) and this was lower than for Q3 in 2014/15 (1,184,720). The number of Library E-Book loans (downloads) has gone up from last year being 25,416 in Q3 of 2015/16 (and 27,932 Q2 2015/16) from 18,714 in Q3 of 2014/15 and 22,287 at Q4 of 2014/15.
- The number of visits to Museums is down from 73,165 visitors in Q2 15/16 to 41,109 in Q3 15/16 and this is down on the Q3 2014/15 numbers of 51,574. Museums have been subject to seasonal variations / closing.
- Thus far in 2015/16 30,499 NHS Health Checks have been completed which is an increase of 4,800 health checks in comparison to this time last year. In Q3 2015/16, 14,931 health checks were offered to members of the eligible population and of those 9,481 were completed within quarter 3. This is an increase from 7,660 completed in Q3 in 2014/15.
- The number of successful completions of drug treatment for Opiate use latest figure reported of 10.9% (year to end of December 2015) continues the upward performance trend (8.4% in 2013 to 10.7% in 2014).
- Lancashire's proportion of successful completions of drug treatment for non-Opiate use latest figure of 43.5% (year to end of December 2015) is higher than the England Benchmark (37.6%) for the same period.

# Age Well

- Delayed Transfers of Care Lancashire's total delayed days (NHS & Social Care, the vast majority – about 90% - being NHS attributed) showed a 13.9% decrease from the 3823 Oct-15 figure to 3293 Nov-15, which is better than the overall 4.3% decrease recorded for England.
- Admissions of older people to residential and nursing care Q3 performance improvement is estimated at 729.8 per 100,000 population which meets the Better Care Fund target of 733.7, but still some way off the national year end average of 668.8.
- Reablement Current estimates for Q3 indicate 860 people were offered these services compared with 945 in Q2. However referrals also dropped to 1173 in Q3 from 1253 in Q2.
- Proportion of adults with learning disabilities in employment Q3 estimates remain the same as for Q2 and suggest 2.7% of adults with learning disabilities are in employment compared with 3.0% at the 2014/15 year end. Performance has worsened generally across the country, though more so in Lancashire than the national average (6%).
- Personal Budgets and Direct Payments Q3 performance is improving, however reported performance is still lower than the actual situation but this will improve still further with the recalibration of the 'Resource Allocation Scoring' (RAS) project in Spring 2016.

# **Highlight Reports**

- The percentage of Facility Management work requests processed within 72 hours increased to 92% and like the two previous quarters, exceeded the quarterly target of 85% (Q1 86%; Q2 87%).
- 3 properties including Hampson Green and Palatine Hall, both in Lancaster, were closed by the required target date.
- Rosebud investment loans totalling £150,000 were completed, ensuring that LCC remained on target to secure 8 loans totalling £1.8m for 2015/16. A further 3 loans amounting to £750,000 were approved by Lancashire County Developments Limited.
- The Commercial Property Portfolio cumulative rental income at the end of Q3 was £2.34m, exceeding the cumulative year to date target of £2.1m.
- All 5 county matter planning applications received for minerals and waste development were determined within the statutory 13 week decision period.
- There was a slight reduction in the number of New Starters onto Employment Programmes (188) compared to the previous two quarters (Q1 – 290 and Q2 -252), however it is still expected that the annual target of 1,000 will be achieved.
- Outstanding debts owed to the County Council over 6 months old totalled £16.8m at the end of Q3. This has increased steadily over 2015/16 (£14.4m – March 2015), but is slightly down on the Q2 figure of £16.9m. As part of a wider Debt Management Project, a new accounts receivable IT system was implemented. Following the implementation of the new system we are now carrying out a full evaluation and review.

# Consultations

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

# Implications:

This item has the following implications, as indicated:

# **Risk management**

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

# List of Background Papers

Paper	Date	Contact/Directorate/Tel
Report to the Cabinet Committee on Performance Improvement – Quarterly Corporate Performance - Quarter 2 2015/16 Report	10 December 2015	Michael Walder, Business Intelligence Team, 01772 533637

# **Financial Summary**

The table below gives the County Council's financial position for 2015/16 as of the end of Quarter 3.

Note: This is based largely on financial data at the end of November 2015.

Ref	Service Grouping	Revised Annual Budget	Previous CABINET Forecast Variance QTR 2	Current CABINET Forecast QTR 3	Current Period Forecast Variance QTR 3	Current Period Forecast Variance
		£m	£m	£m	£m	%
3.1	ADULTS SERVICES	292.148	19.274	311.292	19.144	7%
3.2	<b>CHILDRENS SERVICES</b>	103.618	5.010	106.428	2.810	3%
3.3	COMMUNITY SERVICES	168.535	-0.753	164.213	-4.322	-3%
3.4	PUBLIC HEALTH & WELLBEING	29.559	2.880	31.297	1.738	6%
3.5	LANCASHIRE PENSION FUND	-1.842	0.029	-1.792	0.050	-3%
3.6	COMMISSIONING	37.700	0.820	36.077	-1.623	-4%
3.7	DEVELOPMENT AND CORPORATE SERVICES	35.393	3.472	40.142	4.749	13%
3.8	CHIEF EXECUTIVE	61.564	-11.066	48.609	-12.955	-21%
	LCC (ALL) NARRATIVE TOTAL	726.675	19.666	736.266	9.591	1%

An overspend is forecast on the revenue budget of £9.591m in 2015/16 against the budget of £726.675m which will be an in-year call on reserves. This represents a reduction of £10.075m from the forecast overspend position reported to Cabinet in November, which reflected the position at the end of quarter 2. The significant improvement reflects positive actions taken to stop all non-essential expenditure, tight management of vacancies and management actions to control and reduce where possible all other areas of expenditure and results in a reduced impact on reserves.

In addition, the Money Matters report which was agreed at Cabinet in November included a budget saving for 2016/17 onwards relating to Capital Financing Charges. This is to be delivered via a revised Minimum Revenue Provision Policy being agreed at Full Council in February 2016. On the basis of further work undertaken, this could be retrospectively implemented from April 2015 with an estimated impact of a reduced charge to the revenue account of c£10m this year. This would, as the forecast currently stands, result in almost a balanced budgetary position for 2015/16.



The forecast includes the application of earmarked reserves of £17.495m utilised to support base budget pressure which have been built into the Medium Term Financial Strategy (MTFS) going forward from 2016/17. A further £24.758m of reserves has been highlighted which support one-off in year project work and invest to save schemes which have a net nil effect to the overall revenue forecast and have not been included in the MTFS.

# OFSTED POST INSPECTION UPDATE

# **Background and Advice**

Ofsted carried out an unannounced inspection of Children's Services which commenced on 14 September 2015 and which lasted for four weeks.

The inspection focused on the experiences and progress of children in need of help and protection, children looked after and care leavers. It also included looking at the effectiveness of our services and arrangements to help these children, including adoption and fostering. Ofsted also carried out a review of the effectiveness of the Lancashire Safeguarding Children Board (LCSB) at the same time.

Ofsted published its report on Friday 27 November 2015 rating the overall effectiveness of the Children's Services as inadequate. The judgement for the LSCB was good.

# Actions taken since the last CCPI

A number of actions have been put in place and developed since the last report to CCPI on 10 December 2015:

# **Director of Children's Services**

Agreement has been reached between the County Council and Blackburn with Darwen Borough Council for Linda Clegg to fulfil the position of Director of Children's Services for both authorities. Linda will bring additional leadership capacity and extensive expertise around children's social care and will lead the improvement agenda.

# Child in Need Reviews

A concern raised by Ofsted was whether there was sufficient social work oversight over Child in Need cases and therefore a clear understanding of the levels of risk to children. In response, all Child in Need cases are being reviewed and appropriate levels of intervention are being put in place to ensure children are safe. It has been identified that 2,345 child in need cases need reviewing and by 31 January a review has taken place for 1,150. All 2,345 will be completed by the end of February. Work is also underway to ensure that in future there is an effective social care model that provides sufficient oversight to manage risk in child in need cases. An outline for this model will be presented to February's Improvement Board. Plans to revise the approach and structure of the Early Help and Wellbeing Service will also strengthen and support this new model for Child in Need.

# Improvement Seminar

Ofsted facilitated an improvement seminar on the 13 January which was attended by senior colleagues from the County Council, representatives from partner organisations and also social care managers and frontline social workers.



The purpose of the seminar was to provide a comprehensive understanding of the inspection judgements and this is being used to help shape and inform the improvement plan. Whilst the focus of the seminar was the areas of improvement that need to be made, a key message from the inspectors was that 'it is not all broken'. Children Services Scrutiny will have a role in ensuring that the other areas of children's services do not drift or deteriorate particularly given that inspections of Youth Offending and Special Educational Needs and Disabilities services are expected in the near future.

# Lancashire Children's Services Improvement Board

The Improvement Board has been established, which is usual practice following an 'inadequate' inspection judgement. The Board will be responsible for closely monitoring the development and delivery of an improvement plan which will be critical to achieving a much improved outcome when Ofsted carries out a further inspection in due course.

The independent chair of the Improvement Board has been appointed. Tony Crane is a specialist children's services improvement advisor for the Department for Education (DfE). He was previously the Director of Children's Services at Cheshire East Council and has more recently been working with Leicester City Council through their improvement journey as chair of their Improvement Board. Tony will be responsible for reporting improvement progress to the Secretary of State.

The first board meeting took place on 20 January, with monthly meetings thereafter. A summary of the Board meeting discussions, term of reference and other information can be found <u>here</u>

#### Improvement Notice

Tony Crane is currently undertaking a diagnostic which will establish a detailed understanding of the capacity and capability of Lancashire's ability to improve children's services. The diagnostic is being informed through interviews with managers and partners, focus groups with staff and analysis of performance information and existing policy, plans and strategy.

The diagnostic will be reported in early March directly to Edward Timpson, the Minister of State for Children and Families and will determine the approach taken by the DfE. This could either be in the form of an improvement notice to Lancashire County Council which will specify the areas of concern, the level of improvement required and how progress will be assessed and reported. Or it could be in the form of more direct intervention which in some instances has meant parts of children's services being run by an external organisation or Trust.

#### Improvement Plan

An Improvement Plan is currently being developed and will outline in detail the activity and action that will be developed to make the improvements to children's services that are needed at the scale and pace that is required. The Improvement

Plan will respond to all the concerns that have been raised by Ofsted in their inspection report and will be submitted to the DfE for approval on 5 March 2016. The Improvement Board is responsible for the development of this Plan and for overseeing its implementation and impact.

# Ofsted Improvement Offer

Ofsted have agreed for two inspectors to spend two days a month in Lancashire. They will undertake further scrutiny and analysis of areas of social care that align with areas identified within the Improvement Plan. This work will continue for 12 months and feedback will be provided to the Director of Children's Services after each visit. In addition, Ofsted will produce a quarterly report of this work and findings which will be presented to the Improvement Board.

The first visit took place in early February and six cases from Burnley have been audited. Initial feedback form Ofsted highlighted that the cases audited demonstrated a mix in quality from inadequate to good. Ofsted also voiced criticism of the audit tool being used. The audit tool and its use will be reviewed.

# Children's Services Pathway Review

The team from Newton has completed its work in developing an understanding of the effectiveness of the process, systems, structure and approach within children's services. Although the Newton work is not as a result of the Ofsted inspection, it will complement and inform the post inspection improvement plan and help to define and deliver changes over the coming months.

Staff have fully engaged with the Newton team and provided a very high level of response around their working practices. The initial Newton findings indicate that there are opportunities to improve the effectiveness of social care practice and increase the amount of time that Social Workers spend in direct contact with families.

A final report from Newton outlining their findings and recommendations will be presented to cabinet and management team by the end of February.

# What does good look like?

Independent consultant, Stephen Hart, has been commissioned to help frontline staff and managers understand what 'good' social work practice looks like and what more is needed to 'get to good'. So far Steve has worked in detail through over 30 cases with staff to form a shared understanding of what is and isn't good social care practice.

Stephen is a former Ofsted inspector who was instrumental in the design of the Ofsted improvement programme and he is working with staff to identify the steps we need to take to change the culture of our approach and the processes that underpin this.

# New Children's Services Scrutiny Committee

Full Council recently approved the establishment of a new scrutiny committee. The Children's Services Scrutiny Committee will operate in addition to existing committees and its remit will cover all issues relating to children and young people's services. Education matters will still be reserved for the Education Scrutiny Committee. Representatives, including five lay members, one from each of the local Children's Partnership Boards, have now been agreed. The committee has already met informally for a half day briefing so that members could better understand the key issues across children's services and begin to define their role in addressing these issues. The committee will meet for the first time in March and every six weeks thereafter.

# Increasing Capacity

Additional management capacity has been redirected from existing resources into the districts to allow increased oversight of social work practice. There are two additional senior managers in North, East and Central Lancashire working with social care district managers.

A social work agency called Skylakes has also started work to help review the child and family assessments of 720 child in need cases, an area of concern specifically identified by the inspectors.

There has been a focus on recruitment to fill vacancies in children's social care and in most areas these are now filled and at establishment levels. In addition, management team have agreed to further social care capacity that is currently being recruited to.

There is weekly reporting and monitoring of children's social care vacancies and recruitment. A refresh of the recruitment and retention strategy is also being developed to enable a renewed and sustainable approach to ensuring appropriate staffing of children's social care both in terms of numbers but also in terms of experience and skills. This is in the context of a national shortage of trained social work staff which is reflected at a regional level.

# Communication and engagement

As we move forward to deliver improvements and changes in response to the Ofsted report, there is a need to ensure that staff and partners are fully engaged and able to inform, understand and support improvement plans. A communications strategy and action plan will be developed to support the improvement process and activity.

As part of this approach a staff briefing was held on the 4 February with over 60 managers from across children's services receiving information about improvement development and spending some time discussing their ideas for improvement. This work will be fed into the improvement plan.

# Care Leavers

Guidance has been issued to all workers to raise awareness and understanding of the Leaving Care Regulations. Care Leavers have also received an information pack

which details and explains their full entitlements. In addition, a full review of all Pathway Plans has commenced so that we can ensure that all Care Leavers are receiving support that is appropriate, effective and based on their needs.

# Performance Management

Weekly reporting arrangements have been established and continue to focus on children's services staffing vacancies, the audits of all Child in Need, the timelessness and multi-agency engagement in section 47 strategy discussions and social worker caseload levels. This is further supported by a weekly assurance conference call with the three children's services area managers. Work is also underway to streamline our performance reporting approach and ensure that key measures have clear and robust targets set against them. This will include the development of a performance dashboard that will be used by the Improvement Board to monitor and challenge the progress being made in delivering help and protection to children and young people.

External expertise is also currently being agreed through the region and Ofsted to support the development of improvement performance reporting.

# LiquidLogic Children's System (LCS)

A key area of concern raised by Ofsted was the ability to access timely and accurate information and data from LCS. Work is underway to understand these issues and develop solutions that address this concern. This has included a health check where colleagues from LiquidLogic worked with practitioners and have produced a report that outlines amendments to the system that will streamline processes. Support is also being drawn from Blackburn with Darwen and Bolton, learning from how they have implemented and use the LiquidLogic system. In addition, Newton have been asked to build on the above analysis and develop a clear plan for improvements to the LCS system so that it can be an effective tool moving forward.

# **Peer Challenge**

A programme of peer challenge and review is being discussed with colleagues from across the region and will be firmed up in the coming weeks. The agreement of this periodic external scrutiny will be provide a level assurance that improvement progress is being made.

# Report to the Cabinet Committee on Performance Improvement

Meeting to be held on 7 March 2016

Electoral Division affected: None

# **Risk and Opportunity Register**

(Appendices 'A' and 'B refer)

Contact for further information: Ian Young, 01772 533531, Director of Governance, Finance and Public Services <u>ian.young@lancashire.gov.uk</u> Paul Bond, 01772 534676, Head of Legal and Democratic Services, <u>Paul.bond@lancashire.gov.uk</u>

# **Executive Summary**

At its meeting held on 28 September 2015 the Audit & Governance Committee received a report providing an update in relation to a number of key issues that had started to emerge in 2014/15 which were also relevant to the External Auditor's Value for Money conclusion.

It was reported in relation to risk management that whilst risk management happens "in practice" there was a need for the County Council to embed a systematic approach to identifying strategic risks and opportunities. It was therefore reported that a proposed corporate approach to reporting in relation to these issues was being developed and would be provided to the Committee for consultation. The draft register and proposed approach were presented to the Audit & Governance Committee on 25 January 2016. The Committee endorsed the approach and draft register.

This report sets out the proposed approach and presents a draft Risk and Opportunity Register at Appendix 'A' for the Cabinet Committee to consider and comment upon.

# Recommendation

The Cabinet Committee on Performance Improvement is asked to comment upon:

- (i) the draft Risk and Opportunity Register set out at Appendix' A'; and
- (ii) the proposed approach to reporting on risk and opportunities set out in Appendix 'B'.

# Background and Advice

At its meeting held on 30 June 2015 the Audit & Governance Committee approved the Council's Annual Governance Statement (AGS) for 2014/15. The AGS noted a



number of emerging governance issues including the need to embed a systemic approach to identifying and managing strategic risks and opportunities.

In this regard Management Team engaged Grant Thornton to facilitate a workshop for the purposes of identifying strengths and weaknesses in current practice; consider the trend and current pitfalls across the sector; identify the key strategic risks facing the County Council and consider the mitigation measures already in place or which should be introduced; and consider the practical next steps to formalise arrangements.

The workshop identified that whilst risk management happens "in practice" and that all major decisions are based on an appropriate analysis of risks and opportunities, effectively protecting the public, the lack of a clear and systematic corporate approach is a weakness. It also identified that Elected Members do not receive appropriate risk management information and training, that risks relating to key partnerships are not fully understood or managed, and that a risk register should be regularly reviewed and communicated to all relevant parties.

It was reported that a Risk and Opportunity map was therefore in draft and work in hand to set the right governance structures, assign clear responsibilities and roles, agree the corporate approach and provide appropriate training.

It was proposed to classify risks and opportunities on a "PESTLEDO" basis:

- **P**olitical government or local policy commitments
- Economic meeting financial commitments, budgetary pressures etc
- Social Changes in socio-economic trends
- Technological the capacity to deal with the pace of technological change, the use of technology to manage demand
- Legislative changes in the law
- Environmental Environmental consequences of progressing the Council's objectives
- **D**emographic demographic changes in the locality
- **O**rganisational internal risks not imposed by the external environment

A draft Risk and Opportunity Register based on these principles is at Appendix 'A'. The draft Register has been developed by Management Team and relevant directors/heads of service, providing a brief, high level description of risks and opportunities along with the current controls and further proposed mitigating actions. The Register also includes "risk scores" for both before and after the application of mitigating actions based on the scoring matrix contained in Appendix 'B'.

At its meeting held on 28 September 2015, it was reported to the Audit & Governance Committee that a Risk Management intranet site was under development and it was proposed that the corporate approach to reporting on risk and opportunity should be on the basis that Risk and Opportunity reports would be provided to Management Team on a quarterly basis, following which the reports would then go to the Cabinet Committee for Performance Improvement and then to the Audit and Governance Committee.

An indicative timetable for the proposed reporting framework during 2016/17 is contained in Appendix 'B'.

At it's meeting on 25 January 2016, members of the Audit and Governance Committee received training on risk management and a programme of training is being developed for Risk Champions within service areas.

Risks and opportunities will also be incorporated into Quality of Service and Highlight reports.

At its meeting on 25 January 2016, the Audit and Governance Committee, approved an Internal Audit Plan for 2016/17. The report noted that the processes supporting the Risk and Opportunity Register are still being developed to ensure that the register is robust and sustainable and to ensure that the register is an adequate reflection of the County Council's most significant risks being addressed at a given point in time. In due course this will serve as an active log of the most significant matters requiring management attention because the risks recorded are deemed not to be sufficiently mitigated and therefore not yet under effective control. The Internal Audit Plan itself includes the preparation and use of the Risk and Opportunity Register as a key component of an overall assurance opinion.

The report also noted that the Risk and Opportunity Register is relevant to the draft Audit Plan in recording areas where the Internal Audit Service should assess the adequacy and effectiveness of the actions proposed to mitigate the County Council's most significant risks and the progress being made in their implementation. Where risks have been mitigated, or are believed to have been so, they may not then be recorded in the Risk and Opportunity Register and must then be identified through other means.

Where management understands controls to be in place around significant risks, particularly those over the greatest risks or operating in a large number of individual instances, the Internal Audit Service should provide assurance that these controls are adequately designed and operating effectively.

Having regard to the risk scoring principles set out in Appendix 'B' the Committee is asked to comment on the draft Risk and Opportunity Register set out at Appendix 'A'.

# Implications:

This item has the following implications, as indicated:

# Financial

As set out in the report.

#### Risk management

As set out in the report.

# List of Background Papers

Paper

Date

Contact/Tel

None

Reason for inclusion in Part II, if appropriate

N/A

Corpo	orate Risk & Opportunity Regi	ster Q3 20	15						Appendix A
Risk Identifica tion Number	Risk Description	Risk Type	Possible Consequences	Current Controls	Risk Score	Mitigating Actions	Residual Score	Risk Owner	Direction of Travel
	Failure to implement fully the council's medium term financial strategy including the delivery of planned budget reductions	Economic	Financial Savings not achieved resulting in in-year overspends with pressure on following year budget and reserves depleted more quickly than planned. Reductions in service and/or drop in quality of delivery leading to JR and damage to Council's reputation. New legislative requirements not being met and uncertainty over being able to deliver and/or implement future large projects. Potential for infrastructure to deteriorate.	Monthly budget monitoring processes for Heads of Service and Directors with particular focus on agreed savings delivery. Ensure key programmes of activity (particularly linked to savings / downsizing) are adequately resourced. Quarterly Money Matters budget monitoring reports, MTFS, reserves and Treasury Management reports presented to members (includes capital). Management Team actions to monitor key areas of expenditure and consider remedial courses of action to address budgetary pressures. Robust Medium Term Financial Strategy and Plan, updated to reflect variations to resource and demand assumptions. Reserves regularly monitored and reviewed. Resources allocated to Base Budget Review. Rebalance budget savings via an ongoing risk assessment.	25	<ul> <li>Development of recommendations (Base Budget Savings Options and from scheduled Zero Based Review activity) from the Base Budget Service Review to be considered by members.</li> <li>Appropriate consultation to take place.</li> <li>Improve commercial and financial acumen.</li> <li>Continuously revalidate budget assumptions.</li> </ul>	16	Section 151 Officer	As time progresses the risk to some extent reduces. However, the risk cannot be fully mitigated until all the necessary enabling decisions have been taken and the relevant budget options have been realised.
CR2	Risk to the ongoing longer-term Financial Viability of the County Council	Economic/ Political/Social	Problems stored up for the future as a combination of delivery isues in CR1 and further national funding reductions causing minimum reserve position not to be maintained with the risk of not being able to set a balanced legal budget in future years.	Base Budget Review has identified the risk of the County Council not being able to meet statutory obligations by 2018/19. The actual timing of when this situation may occur will be identified from the various monitoring and review process outlined in CR1 above	25	<ul> <li>Zero Based Review activity will determine the scope for additional savings in all remaining services within the County Council (ongoing).</li> <li>Links to Combined Authority work including Healthier Lancashire programme with the NHS as to any opportunities / additional pressures (ongoing).</li> <li>Lobbying – Treasury and DCLG by utilising ongoing existing networks MP's / Members , LGA, CCN, SCT (ongoing)</li> <li>Funding Model – Review of borrowing Strategy &amp; Treasury Management Strategy (Q1 2016)</li> </ul>	25	MT	Level
	Failure to deliver joint service between Lancashire Pensions and LPFA, due to inability to agree terms resulting in some abortive costs, and the non delivery of a flagship project within the LGPS reform agenda.		Reputational damage as a result of the failure of a major pathfinder project. Need to find another like minded partner, or partners to work with as part of the requirement to submit pooling proposals for pension fund assets to the Government. This would be a very time pressured exercise, and limited or no choices may be available. Potential for reduced investment returns could occur, certainty of a reduction in the potential investment universe of illiquid assets, negatively impacting on the ability to deliver the investment strategy.	Programme in place. Meetings taking place covering each project plan. Appropriate legal and technical advice for all parties has been secured. Regular programmes of information briefings are in place for elected members. Additional project management resource put in place within the Partnership. A proposed VPN connection between the offices with relevant firewalling has been ordered.	12	<ul> <li>Additional legal resource allocated internally.</li> <li>Early establishment of 'client side' role to provide clear leadership for the council's input and provide additional technical expertise</li> </ul>	6	Director of Governance, Finance and Public Services	↓ Downwards. As time progresses the risk to some extent reduces. However, the risk cannot be fully mitigated until all the necessary enabling decisions have been taken and the relevant legal agreements put in place.
CR4	Delivering organisational transformation including capacity and resilience	Organisational	The failure to clearly implement the new corporate strategy that sets out our vision, aims and priorities could result in a lack of purpose, direction and have an impact on service delivery and produce an adverse external audit report. The new structure that seeks to provide the ability to join up our services in a new way may not be fit for purpose. Ineffective employee engagement and buy in. A fall in staff morale could increase sickness absence and stress. Loss of knowledge and skills due to turnover puts demand on remaining staff which can expose the council to key person dependency and the risk of poor resilience.	A new corporate strategy has been developed based on need (New Service Planning Areas have been identified) and has been consulted upon. Phase 2 of the transformation process has been stopped. As part of the base budget review process options for service delivery and redesign have been developed including proposals to stop some services. Management Team approval of all new appointments and cessation of temporary staff contracts. Senior Management Development programme implemented. Positive employee communication and engagement. Wellbeing initiatives and support for managers and employees. Introduced a new scheme of delegation for heads of service.	12	<ul> <li>The corporate strategy is being amended to reflect the consultation outcomes.</li> <li>Interim structures to reflect the base budget review options are being developed.</li> <li>Property strategy and accommodation review being progressed.</li> <li>Independent challenge.</li> </ul>	9	MT	↓ Downwards

Risk Identifica tion Number	Risk Description	Risk Type	Possible Consequences	Current Controls	Risk Score	Mitigating Actions	Residual Score	Risk Owner	Direction of Travel
CR5	Failure to adequately protect and safeguard children	Social	Children are put at risk of harm.	MASH hub. Serious incident reporting. Quarterly safeguarding report. SCR learning shared. Case file audits. Multi Agency inspections. Supervision with HOS.	25	<ul> <li>Post Improvement Inspection Board with Independent Chair appointed.</li> <li>Post Inspection Improvement Plan.</li> <li>Senior management input into each of the 3 Children Social Care Districts.</li> <li>Review of all CiN cases using internal and external capacity.</li> <li>Social Work Recruitment Strategy.</li> <li>Peer Challenge. Stephen Hart audit exercise.</li> <li>Newtons review of pathways.</li> </ul>	16	Director of Children's Services	SW recruitment has improved. CiN case review has begun. Senior managers are now working in districts. Independent Board Chair appointed.
CR6	Failure to comply with statutory requirements and duties relating to children looked after, children in need and children leaving care.	Legal/Political	LA is legally and possibly financially liable, judicial review. Further OFSTED intervention.	Corporate legal oversight. Quarterly safeguarding report. Serious incident reporting. SCR learning. Peer review and challenge. Stronger management oversight in Districts. Risk score. Again given OFSTED this is almost certainly the highest score.	25	<ul> <li>Weekly compliance recording of Strategy Meetings.</li> <li>Enhanced quality assurance reporting.</li> <li>Back to basics SW practice training.</li> <li>Performance clinics.</li> </ul>	16	Director of Children's Services	Compliance reporting shows that multi agency meetings were at 100% in week ending 11 Dec.
CR7	Failure to recruit and retain experienced Social Work staff	Organisational	Inability to deliver effective services. High caseloads. Lack of management oversight. Increased staff turnover. Increased agency spend.	Vacancy monitoring. Recruitment strategy. Quarterly safeguarding report.	20	<ul> <li>Additional funding envelope.</li> <li>Enhanced recruiting.</li> <li>Weekly monitoring of SW workforce position.</li> <li>External agency contract to look at CiN cases and work following MASH.</li> <li>Newtons pathway review.</li> </ul>	16	Director of Children's Services	Improving SW recruitment is now at the levels within the original funding envelope prior to the £5m and recruitment is continuing.
CR8	Reputational damage and risk of Direct Intervention by DFE	Reputational	DFE manages services directly and removes them from the LA. Commission arrangements brought in.	Safeguarding and Audit arrangements. Direct management oversight of services.	20	<ul> <li>Post Improvement Inspection Board with Independent Chair appointed.</li> <li>Post Inspection Improvement Plan.</li> <li>Senior management input into each of the 3 Children Social Care Districts.</li> <li>Review of all CiN cases using internal and external capacity.</li> <li>Social Work Recruitment Strategy. Peer Challenge. Stephen Hart audit exercise. Newtons review of pathways.</li> </ul>	12	Director of Children's Services	Positive given feedback from OFSTED and appointment of Independent a Chair and usage of a Stephen Hart.
CR9	Failure to Respond effectively to a major civil emergency and play our part in the strategic co- ordination	Organisational	Effect on essential services and welfare of the public throughout the County. Through failure to comply with CCA and industrial based regulations leading to a loss of reputation, impacts on community and businesses and subsequent legal challenge. Internally, increased loss of capability for delivery of LCC services.	Emergency Plans. Business Continuity Plans. Rest centres policy and procedures. Regular training and exercises. The Emergency Planning & Resilience Service has conducted an authority wide risk assessment to identify risks and actions that need to be taken to ensure that resources are focussed on those risks which have a high likelihood and a high level of impact. An authority wide plan is in production to detail the co-ordination of the response but there will be occasions when local or small scale incidents affect only a few services/buildings. In these circumstances it will be expected that local management teams will respond accordingly and manage the impacts to local service delivery. To do this, local service level response & resilience plans have and are being developed by Heads of Service which link to the authority wide plan.	4	<ul> <li>Redeveloping corporate and local plans to incorporate current (and future) changes to LCC business model.</li> <li>Move from purely business continuity plans at local level to resilience plans (incorporating business continuity and emergency response as appropriate).</li> <li>Production of specific LCC plans to mitigate identified high risks eg. Pandemic flu, loss of telecoms.</li> </ul>	4	Head of Emergency Planning & Resilience	↓ Downwards. However, the risk can never be fully mitigated.

Risk Identifica tion Number	Risk Description	Risk Type	Possible Consequences	Current Controls	Risk Score	Mitigating Actions	Residual Score	Risk Owner	Direction of Travel
CR10	Manage debt recovery	Economic	Failure to recover debts will have a direct impact on the County Council revenue budget, as income will not have been achieved. This could result in higher levels of written off debts which again will impact on revenue budgets and will not be good for the reputation of the County Council.	The income and debt project (including an improved IT system) aims to introduce a consistent and efficient way of dealing with invoices and debt management across the county council. A new Income and Debt Management Policy has been agreed and implemented from June 2015 onwards. The project is now in it's evaluation stage with further recommendations and controls to be suggested to further improve debt collection levels for the County Council.	6	<ul> <li>Detailed review underway to review each individual long term and high value debtor. Case management report for each debtor. This will include a review of the bad debt provision which currently mitigates the revenue impact of writing off some debt. 31st January 2016.</li> <li>A new charging policy is being developed (social care) This has included some benchmarking to compare the charges LCC makes to it's service users</li> <li>The starting point for creating a debtor is the completion of the financial assessment. A full process review has been completed shortening the time between a care needs assessment and a financial assessment thus reducing complaints etc.</li> <li>Fortnightly Debt "progress" meetings to monitor the ongoing debt levels.</li> <li>Care Debt Board meets quarterly to review the overall care debt position. Our policy does not allow debt management team to engage legal services or our Debt Collection Agency to chase care debt, and we are therefore proposing a revised policy to be considered by Adults Services, Management Team and Members</li> </ul>	4	Section 151 Officer	↓Generally downwards as the new IT system is giving us new information which allows us to target our debt recovery. However, an element that is going in an upwards direction is the increased demand levels for Care Debt which will increase volumes of debts.
	Non-compliance with EU procurement law and the council's procurement rules	Economic	Failure to obtain best value for money in the procurement of goods, works and services, leading to a poor Value for Money opinion from the council's external auditor. Increased risk of legal challenge to the outcome of procurement exercises, and the award of financial damages to claimants who successfully challenge procurement decisions.	The establishment of a Service Improvement Plan (SIP)on the transfer of the service back to the county council in 2014 aimed to develop and improve procurement related activity across the council. The SIP includes the approval of a Procurement Strategy, the establishment of a Procurement Board, and the development of a contracts register for the county council. Progress made against the plan has been monitored through quarterly reports to the Cabinet Committee for Performance Improvement (CCPI).	12	<ul> <li>Taking forward the actions included within the SIP, including:</li> <li>New service management team in place;</li> <li>Re-establishment of the Procurement Board at director level to reflect the current council structure;</li> <li>Procurement training for Heads of Service/Directors;</li> <li>Review and update of the contracts register to highlight any potential gaps in the contract information;</li> <li>Refresh of individual service procurement plans;</li> <li>Reintroduction of more timely management reviews of procurement activity and liaison meetings with operational Heads of service and managers;</li> <li>Closer working relationship with Legal Services, including the introduction of weekly Legal Services Clinics.</li> </ul>	8	Head of Procurement	↓ Downwards.
	Failure to implement/maintain systems that produce effective management information	Organisational	Ineffective collection, collation and input of data Ineffective use of business intelligence, resulting in the inability to identify and respond to changing trends and inform strategic decisions. Impact on strategic planning, understanding and management demand e.g. around demographics and ageing population profile Ineffective reporting arrangements	Information management strategy. Data Quality processes. Oracle. Local Information Systems. Corporate performance information. JSNA and other needs assessments	15	•External support to focus on Childrens Services data issues. Introduction of new governance arrangements for childrens services •Introduce a new performance management framework that is aligned to new corporate strategy •Agree performance, financial data and intelligence required for all levels within the County Council. Agree milestones and metrics.	9	MT	↓ Downwards

Risk Identifica tion Number	Risk Description	Risk Type	Possible Consequences	Current Controls	Risk Score	Mitigating Actions	Residual Score	Risk Owner	Direction of Travel
CR13	Robust Information Governance Arrangements	Organisational	Loss of control of personal data and non compliance with Data Protection Act and other legislation. Potential reputational risk and possible financial impact via financial penalties. Issues arising from data sharing between organisations and employees taking on new roles.	IG and ICT security policies and procedures including assessment and coordination of serious information governance incidents. Robust governance, management and monitoring arrangements. Robust technical system controls and audit mechanisms. Staff training and awareness training. ICO external audit and response to recommendations	15	•IG E-Learning package, realignment of responsibilities in response to ICO audit, training for IG team, CIGG, annual update of policies, SIRO, IG Team and Caldicott Guardian	9	SIRO	↓ Downwards.
CR14	Maintaining effective Corporate Governance arrangements	Organisational	Inability to maintain effective governance arrangements including members standards and the constitution	Reviewing elements of the constitution and governance arrangements and reporting proposals to the Political Governance Working Group, Audit & Governance Committee and Full Council. Member training. Reviewing existing controls. New scheme of delegation. Revised Corporate Governance Framework adopted and reported to members.	12	<ul> <li>Further review of constitution. Improved controls especially around Risk Management.</li> <li>Consideration of Independent members on A&amp;G Committee.</li> <li>New Internal Audit Plan developed and implemented.</li> <li>Review new scheme of delegation.</li> </ul>	8	Director of Governance, Finance and Public Services	↓ Downwards.
CR15	Delivering new waste management arrangements	Environmental	Consequences arising from the Council's decision to terminate the waste PFI contract with Global Renewables Ltd in July 2014. As a result of this decision the Council took ownership of the waste recovery parks and operating company (GRLOL).	Combined LCC/GRLOL management team responsible for governance and decision making of the operating company. Board of directors of GRLOL made up of elected members. Joint monthly Waste Service budget review.	12	<ul> <li>Budget option proposal to reduce complexity and scale of operational processes and downsize company.</li> <li>Development of medium term company transformation strategy.</li> <li>Proposed market testing and procurement activity to determine potential market opportunities for reconfiguring the entirety of the council's waste services.</li> <li>Development of long term waste service strategy.</li> <li>Cabinet member for Environment, Planning &amp; Cultural Services approved a series of recommendations to deliver a budget saving of £8.5M as a result of changes in operations and processes employed at the two recovery parks. One off transformation costs include redundancy costs estimated to be up to £4.5M, some of these costs may however be capitalised.</li> </ul>	9	Head of Waste Management	↓ Generally downwards. Implementation of company transformation strategy will ultimately reduce risk profile significantly, however, it should be noted that the transformation process itself may increase risks in the first instance. Development and implementation of longer term strategy will carry its own inherent risks.
CR16	Management of the County Councils Assets	Organisational	Failure to maintain council owned assets and buildings.	Manage health and safety risks of customers and staff and ensure budgets are managed effectively to maintain assets to a satisfactory standard. Consider and manage risks associated with redundant properties. Planned maintenance approach. Risk assessments and regular H&S inspections. Presently undertaken by various operational service areas	9	•Asset Management Strategy and accommodation review	6	Head of Asset Management	↓ Downwards as long as the, shortly to be formed, Premises Compliance Team is effective in its efforts to improve strategic premises management activities
CR17	Provide customer access to all Council services	Social	Failure to respond to customer contact in respect of 26 plus services (including two WLBC services) resulting in the following:- Increase wait times and abandoned calls, which will in turn result in complaints and the escalation of issues to Members, Police and/or other interested parties; Increase the risk of child protection and/ or adult safeguarding issues being delayed, including emergency calls during evening and at weekends; Affect the delivery of politically sensitive services, including Highways and Blue Badge, resulting in further escalations to Members; Increase the risk of legislative issues being delayed, including West Lancashire Revenues and Benefits and Registration services; Affect the delivery of income generating services, including Pensions and West Lancashire Revenues and Benefits services. This is turn could affect the current negotiation of new external business, which is due to bring in additional income; Increase the amount of repeat calls, placing further pressure on the service and increasing the risks above; Affect our delivery partners, including the Police and NHS, having a negative impact on these relationships.	The Customer Access Service is the first point of contact from citizens , partners and other professionals across Lancashire. Opening times are 8.00 am to 6.00 pm within Customer Contact Centre and 8am – 8pm Mon-Fri and 9am – 7pm Sat & Sun within CAS Social Care Service. We handle one million plus calls and 200 thousand plus emails annually EDT cover social care emergency calls outside CAS SC opening hrs.	12	<ul> <li>We have a robust business continuity plan in place which is regularly tested.</li> <li>We have a separate site with limited seating to accommodate approximately 18 staff, therefore, this is useful during short periods of time, e.g. heavy snowfall, but would be less useful if the main base in Accrington was completely inaccessible as we would be unable to cover full range of services.</li> </ul>	8	Head of Customer Access Service	↓ Downwards. We are in the final stages of procuring a new telephony platform which is web based, meaning our staff would be able to log in from various sites. It is hoped the replacement platform will be fully installed by June 2016.

Risk Identifica tion Number		Risk Type	Possible Consequences	Current Controls	Risk Score	Mitigating Actions	Residual Score	Risk Owner	Direction of Travel
CR18	Non-compliance with statutory responsibilities of safeguarding, resulting in adults with care and support needs being put at risk of abuse or neglect.	Legal	Adults with care and support needs may experience or be at risk of experiencing abuse or neglect and will not be safeguarded or protected, leaving them at risk of significant harm. The risk to the council is that we will not meet our obligations under the Care Act. The Safeguarding adults board with core membership from the Police, NHS and other relevant bodies would not be able to fulfil their duties. Relevant multi agency partners may not share information or corporately work to protect adults at risk of experiencing abuse or neglect. Other statutory stakeholders may not work to prevent people experiencing abuse or neglect. Safeguarding adult's reviews may not be undertaken in order to share the learning about failures to safeguard people who experience abuse or neglect. Multi agencies may not work together. Independent mental capacity advocates to represent and support adults subject to safeguarding enquiries may not be arranged. Adults who have substantial difficulty in being involved and representing their views could be impacted. The local authority would be at risk of legal challenge, media attention, complaint and litigation. Prevention of risk of further harm of individuals and communities may not occur. Sharing information from key organisation to see the holistic picture will be impacted.		15	<ul> <li>Management overview of safeguarding enquiries, spot checks, and auditing around safeguarding decisions.</li> <li>Chairing multi agency safeguarding meetings, and sub groups of the board, for example, area leadership groups, safeguarding training groups.</li> <li>Work with Pan Lancashire Safeguarding which incorporates other local authorities.</li> <li>Raising awareness of safeguarding by attendance at provider forums.</li> <li>Liaising with NHS Trust and CCG Partners. Supporting the quality team around the quality of safeguarding alerts.</li> <li>Attendance at Mappa, Asbrac and Marac steering groups.</li> <li>Joint working with the Police around domestic violence, forced marriage, honour based violence, human trafficking and female genital mutilation. Supervision of staff, CPD and learning sessions. Learning from serious case reviews. Lado and DBS checks. Effective record keeping and the addressing of any issues with staff.</li> </ul>	10	Director of Adult services	↓ Downwards.
CR19	Residential and Nursing Care market in Lancashire	Legal	Failure to comply with the care act regarding appropriate fees for residential and nursing care, ultimately leading to judicial review of our fee setting process.	2015/16 rates were issued to suppliers for consultation during 2014/15. Response was poor but no objections were raised.	12	•A project to investigate the current cost of care in relation to future rate setting in the sector is underway.	<u>م</u>	Director of Commissioning	Neutral due to recent introduction of the Care Act and the market adjusting to new legislation. Continued pressure on fees within the industry could lead legal cases and increased risk of challenge within Lancashire.
CR20	Transforming Care (Winterbourne)- the accelerated discharge of the population of adults with a Learning Disability from secure hospital in-patient beds into community houses	Economic/Politic al/Social	Increased pressure on the adult social care budget. Resettlement from hospital to community health and social care packages shifts the funding responsibility from soley NHS to a shared responsibility between CCG's and LA's to fund these high cost intensive health and social care packages. LCC may not be able to afford these new packages of care in the current financial climate. There is a National Plan to facilitate discharge therefore there is a reputational and political risk in not achieving as Lancashire is identified as a National Fask Track programme for this work due to the high number of Lancashire residents currently in in-patients LD hospitals. The closure of Calderstones hospital is part of this national plan. Failure to agree locally a resonable figure for a dowry thats is planned to follow a person from hospital (NHS) to LA's is a further financial risk.	There is a governance structure for the Fast Track programme through the Fast Track Steering Group with representation from LCC Director Adult Social Care and HoS Commissioning working alongside SRO's from NHS and CCG's in order to achieve agreement on financial issues including the dowry and any future agreement for a pooled budget. There are identified workstreams each with a defined action plan with leads identified from commissioners across Lancs. Workstreams are monitored by the Steering group in addition to oversight by NHS England. The trajectory for possible discharge Sept 15- Mar 19 is to be carefully monitored so appropriate development and procurement of suitable housing and care can be planned for.	16	<ul> <li>Improved engagement with procurement collegues to ensure due process is followed operationally in meeting the needs of this population.</li> <li>Lancashire's Fast track plan identifies the implementaion of a revised model of care for peolpe with LD improving crisis support through multi-disciplinary teams.</li> <li>This approch is aimed at reducing admissions and supporting providers to maintain a persons tenure in their chosen house rather than re-enter hospital.</li> <li>The plan commits to securing improved and alternate care and housing solutions for this population with the aim of creating shared tenancies with back ground support, rather than the current single tenancy model currently used, which will be more cost effective. There are plans to stimulate the provider market to inform inovative solutions to providing for these peoples</li> </ul>	12	Director of Adult Services	↑the direction of travel is increased as these are new service users entering the social care system from the NHS, the risk is constant from a financial perspective as the cost will be high and require providing for life. (although there are plans to mitigate costs through a dowry system and improved commissioning solutions)

Risk Identifica tion Number	Risk Description	Risk Type	Possible Consequences	Current Controls	Risk Score	Mitigating Actions	Residual Score	Risk Owner	Direction of Travel
	Service user/Customer risk associated with the inability to influence behaviour change in demand and expectations continue to rise	Reputational	backdrop of reduced resources, thus leading to service failure and an increase in complaints. Failure to integrate health and social care to reduce pressures on demand and expectations as a result of ageing	Consultation and engagement with service users and customers. Co-ordination of communications. Changes and impacts communicated to stakeholders. Impact assessments. Alternative delivery options being explored as part of base budget review option development. Learning for complaints and oversight at CCPI.	16	•Alternative delivery options being explored as part of base budget review option development	12	MT	↓ Downwards.
CR22	Coroner's Service: Lack of adequate mortuary provision to deal with a mass fatality situation. Increased workload with regards to deaths associated with a DoLS order. Renegotiation of Coroner's terms and conditions of Service. Reduction in the number of Pathologists willing and able to carry out post mortems. Lack of control over expenditure in coronial areas where we are not the relevant Authority but make a significant contribution towards the costs of running the service	Legal	Increased workload due to DoLS may impact on ability to list inquests within the required timescales which	Use of Assistant Coroners to sign off routine paperwork and short inquests helping to reduce back log re listings. Mechanism in place to encourage Funeral Directors to collect bodies of the deceased in a timely manner reducing the strain on the mortuary. Regular reviews in place with other relevant Authorities	16	<ul> <li>Looking at the possibility of introducing CT post mortems to reduce the reliance on pathologists and to help speed up the process.</li> <li>Consideration of a new cold pathology site with the provision of a 200 bay mortuary that could also be used in the event of mass fatalities.</li> <li>Seeking guidance from JNC for Coroners and Chief Coroner in relation to any re negotiation of Coroner's terms and conditions of service.</li> <li>Additional funding secured to help with DoLS process.</li> </ul>	9	Director of Governance, Finance and Public Services	↓ Downwards.
CR23	Failure to maintain adequate financial resources to be able to fund self-insured losses as and when they arise	Economic	Provisions and Reserves to be able to pay claims and fund losses when they fall due to be met.	The level of the financial resources is monitored annually, with consideration being given to both payments out during the year and outstanding liabilities for claims received during the year. Additional funding to be made available as necessary.	12	•A professional actuarial evaluation of the current position has been completed in Summer 2015, and it is recommended that the position should be reviewed periodically by the same actuary to ensure that the funding continues to be adequate.	6	Section 151 Officer	↓Downwards, primarily because the work done by the professional actuary has helped to establish the level of funding required.
Opportu nity Identific ation	Opportunity Description	Opportunity Type	Possible Benefits	Progress to date	Opportu nity Score	Maximising Actions	Residual Opportuni ty Score	Opportunity Owner	Direction of Travel
	Establishing a new model for public service delivery in Lancashire	Political	The establishment of a Lancashire Combined Authority and securing a devolution deal with central government. A Combined Authority is an accountable body in its own right – this means it is a single point of decision making on agreed functions (quicker and simpler decisions); has powers delegated to it from Government and the individual local authorities (subject to local discussion and determination); can hold substantial amounts of Government and European funding. In relation to transport, greater co- operation will allow improvements to the region's public transport network.	Lancashire Leaders to formally take proposals for a new model (in principle) to their authorities. Briefings for County Council members. Progression of work streams.	16	•Work with local authority partners on the establishment of a Combined Authority for Lancashire and in securing a Devolution Deal with Government.	12	Chief Executive	↑ Upwards
CO2	Delivering economic growth	Economic	and business creation, housing growth and the delivery of strategic transport infrastructure linking to drive economic growth and regeneration, linking residents and businesses with economic	Lancashire Enterprise Partnership has secured almost £1 billion of national resources to deliver a transformational programme of economic growth which see the delivery of new jobs, business and housing growth and strategic transport infrastructure. Key programmes/projects secured include the Preston, South Ribble and Lancashire City Deal, Growth Deal, three Enterprise Zones, Growing Places Funding, Boost Business	16	<ul> <li>Work with local authority partners on the establishment of a Combined Authority for Lancashire and in securing a Devolution Deal with Government to ensure national resources to support economic growth and regeneration are secured.</li> <li>Maximise the support from key local and national public and private sector stakeholders outside of the County Council</li> </ul>	12	Director of Economic Development	↑ Upwards

Risk Identifica tion Number		Risk Type	Possible Consequences	Current Controls	Risk Score	Mitigating Actions	Residual Score	Risk Owner	Direction of Travel
0.03	Opportunities through delivering the corporate strategy and property strategy			Draft strategy considered by Cabinet on 26 November and ratified by Full Council on 17th December	16	•Use the strategy and associated evidence base to guide our decision making and as the overarching framework for planning interventions which will meet the needs of communities	12	MT	↑ Upwards
CO4	Health and Social Care Integration	Organisational	The principle of the separate organisations working together to align plans, strategies and budgets will involve the development of new delivery models and ways of working, to avoid duplication and focus activity where it is needed, recognising that current models of service delivery are unsustainable. Integration would provide the best opportunity to minimise the impact of funding reductions as well as providing a better offer for service users.	Participation in the Healthier Lancashire programme building upon the "Alignment of the Plans" work undertaken	12	•Recognise the need for: an ambitious vision, robust partnerships, clear and credible delivery plans, strong leadership and governance arrangements at a pan-Lancashhire level	12	MT	Level

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# Risk Management

# **Risk Register Timetable and Template**

Deadline for new high level risks (scoring 12 and above) to be submitted to <u>riskmanagement@lancashire.gov.uk</u> using the following template, by: • Heads of Service/Risk Champions	Deadline for approval of risk register by: • Service Directors	Deadline for approval of risk register by Management Team	CCPI Dates	Audit and Governance Committee Dates
1st November 2015	1 <sup>st</sup> December 2015	1 <sup>st</sup> January 2016		25th January, 2016
1st January 2016	1 <sup>st</sup> February 2016	1 <sup>st</sup> March 2016	7th March, 2016	
1st April 2016	1 <sup>st</sup> May 2016	1 <sup>st</sup> June 2016	6th June, 2016	27th June, 2016
1st July 2016	1 <sup>st</sup> August 2016	1 <sup>st</sup> September 2016	12th September, 2016	26th September, 2016
1st November 2016	1 <sup>st</sup> December 2016	1 <sup>st</sup> January 2016	5th December, 2016	30th January, 2017

# **Risk Register Template**

Risk Description	A brief description of risk
Risk Type	What type of risk is it:
	Political
	Economic
	Social
	Technological
	Legal
	Environmental

	Organisational									
		Reputational								
Possible Consequences	What could happen if no action was taken to control this risk?									
Current Controls	What controls do you currently have in place?									
Risk Score	What is the risk score (using the scoring matrix below) before taking mitigating actions?									
		CATASTROPHIC	5	10	15	20	25			
		MAJOR	4	8	12	16	20			
		MODERATE	3	6	9	12	15			
	IMPACT	MINOR	2	4	6	8	10			
		INSIGNIFICANT	1	2	3	4	5			
			RARE	UNLIKELY	POSSIBLE	LIKELY	CERTAIN			
	Likel     Impa	<ul> <li>Impact is Insignificant (1), Minor (2), Moderate (3), Major (4) or Catastrophic (5)</li> </ul>								
	Any score above 12 or just under and travelling upwards should be submitted to the corporate risk register at riskmanagement@lancashire.gov.uk									
Mitigating Actions	<ul> <li>What actions are you taking to reduce the risk or maximise the opportunity? For example</li> <li>Avoid the risk by deciding not to start or continue with the activity that gives rise to the risk</li> <li>Accept or increase the risk in order to pursue an opportunity</li> <li>Remove the risk source</li> <li>Change the likelihood</li> <li>Change the consequences</li> <li>Share the risk with another party or parties</li> <li>Retain the risk by informed decision</li> </ul>									
Residual Score	What is the score (using the scoring matrix) taking into account the mitigating or maximising actions?									

		CATASTROPHIC	5	10	15	20	25		
		MAJOR	4	8	12	16	20		
		MODERATE	3	6	9	12	15		
	IMPACT	MINOR	2	4	6	8	10		
		INSIGNIFICANT	1	2	3	4	5		
			RARE	UNLIKELY	POSSIBLE	LIKELY	CERTAIN		
				LIKELIHOOD					
	<ul> <li>Risk/Opportunity Score = likelihood x Impact.</li> <li>Likelihood is Rare (1), Unlikely (2), Possible (3), Likely (4) or Certain (5)</li> <li>Impact is Insignificant (1), Minor (2), Moderate (3), Major (4) or Catastrophic (5)</li> <li>Risk is Low (0-5), Medium (6-14) or High (15-25)</li> </ul> Any score above 12 or just under and travelling upwards should be submitted to the corporate risk register at riskmanagement@lancashire.gov.uk								
Risk Owner	Who owns the	e risk or opportunity?							
Direction of Travel	What is the direction of travel? Upwards or downwards								

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# Agenda Item 6

# **Cabinet Committee for Performance Improvement**

Meeting to be held on 7 March 2016

Electoral Division affected: All

# A Summary of the Provisional Results at the end of Key Stage 2 and Key Stage 4 at Lancashire and District Level

(Appendix "A" refers)

Contact for further information: Bob Stott, 01772 531652, Director of Children's Services Bob.stott@lancashire.gov.uk

# **Executive Summary**

The report sets out the overall attainment in Lancashire schools at the end of Key Stages 2 and 4 in 2015. It is based upon provisional data which has not yet been validated. The results have been analysed at District level (see Appendix 'A') and show progress over the past three years. The report also highlights some of the actions taken to raise attainment where it is lowest.

# Recommendation

The Cabinet Committee on Performance Improvement is asked to consider and comment on the report.

# Background and Advice

# Key Stage 2 performance

The key attainment measure for 11 year olds leaving primary school at the end of Key Stage 2 is the proportion of pupils reaching level 4 or above in reading, writing and mathematics combined. The 2015 data is directly comparable with previous years.

The key features of the 2015 Key Stage 2 results in Lancashire are as follows:

- The overall attainment in Lancashire rose in the end of Key Stage 2 tests when compared with 2014 and, at 82%, was 2% above the national average.
- Attainment in Lancashire was equal first out of eleven statistical neighbours and was 1% above the North West average.
- Attainment in 9 districts was above the national average of 80% of pupils attaining level 4 or above in reading, writing and mathematics.
- Attainment increased in seven and fell in one of the twelve districts in 2015.
- The greatest gains were made in West Lancashire, Burnley, Wyre and Hyndburn.



- The lowest attaining districts were Burnley, Pendle and Hyndburn and they were all below the national average. There is, however, a rising trend in all these districts.
- The proportion of schools where there was low attainment fell when compared with 2014 and was better than the national average. Schools where there were low levels of performance have established detailed action plans to raise attainment.

# Key Stage 4 performance

There have been a number of changes to the reporting arrangements for 16 year old pupils leaving secondary school at the end of Key Stage 4 results over the past two years. Firstly a number of qualifications which were previously counted towards the basic standard of 5 good GCSEs are no longer eligible for this measure. This has adversely affected some schools more than others, depending upon the curriculum they have offered. Secondly, as in 2014, the 2015 results only include the qualifications gained by pupils in their first examination entry. As a consequence, the two years which are directly comparable are 2013/14 and 2014/15 as the 2012/13 data was calculated using the pupils' best GCSE entry (see Appendix 'A'). There have also been changes to the standards expected in the GCSE examinations and this has resulted in a fall nationally in the proportion of pupils gaining 5 or more good grades at GCSE including English and mathematics.

The key features of the provisional Key Stage 4 results in Lancashire are as follows:

- The overall attainment in Lancashire rose compared with 2014 and was around 2% above the national average.
- Attainment in Lancashire was third out of eleven statistical neighbours and was 3% above the North West average.
- Attainment was above the national average in 8 districts in Lancashire.
- In 2015 attainment increased in 8 of the 12 districts with the greatest improvements being made in Hyndburn, Pendle and West Lancashire.
- Attainment fell in Ribble Valley and Rossendale but remained well above the national average in both districts. The greatest fall in attainment was in Rossendale.
- The lowest attaining Districts were Burnley, Pendle and Hyndburn which were well below the Lancashire average. Attainment in all these districts increased when compared with 2014.
- The number of low attaining schools increased slightly in 2015 compared with the previous year, from 10 to 11 schools.
- Detailed action plans are in place for all schools where there were low levels of performance.

# Low attaining schools

Schools which are low attaining are defined as those where standards are below the minimum standards set by the government. In terms of standards of attainment this means primary schools where fewer than 65% of 11 year old pupils reached the expected level in reading, writing and mathematics combined. For secondary schools the minimum standard is 40% of 16 year old pupils gaining 5 or more good GCSEs including English and mathematics.

All these schools are reviewed and unless pupil progress is above the national median they are monitored closely by school advisers and offered support. There is a minimum of a six monthly report to the School Improvement Challenge Board where decisions are taken to provide additional support or to intervene in the school. Detailed action plans are developed with low attaining schools and additional support is provided where appropriate. In the great majority of cases action plans are also monitored by HMI.

A range of support is provided for schools where attainment is low including:

- Brokering leadership and subject expertise from good and outstanding schools to share best practice
- Pairing schools with good and outstanding schools
- Coaching teachers and middle leaders
- Providing training for staff on specific areas such as assessment, monitoring and evaluation
- Carrying out reviews of governance, leadership and the use of the Pupil Premium Grant which aims to help pupils on Free School Meals
- Providing additional governors

# **District issues**

The breakdown of attainment of pupils across Lancashire varies by District as shown in Appendix 'A' and this reflects a range of issues.

- There is a strong correlation between attainment and disadvantage, as there is nationally, and this is broadly reflected in the performance across Lancashire.
- There are some districts where parts of the community does not engage well with education.
- Attainment in some districts is masked by the variation within the district as in Wyre where a large part of the population lives in advantaged areas whilst others live in some of the most deprived areas in the County.
- In the secondary school years' district attainment is also sometimes affected by migration. For example the attainment of pupils resident in Burnley and Pendle is often 2%-3% higher than that of those who attend school in Burnley.

Over the past few years a number of initiatives have been implemented to raise attainment in the more disadvantaged areas. These have included:

- Sharing good practice between schools so that good schools which are successful against the odds can support those where attainment is stubbornly low.
- Challenging schools on their use of the Pupil Premium Grant and sharing good practice from across Lancashire and beyond.
- Working with national agencies such as "Teach First" to improve recruitment of high quality teachers into disadvantaged areas
- Bringing together schools on a locality basis to tackle shared problems through establishing Trusts or other partnerships.
- Supporting families who are disadvantaged through family support,

particularly in the Early Years of education.

- Working with schools in disadvantaged areas to provide support for vulnerable families through initiatives such as "Social workers in schools".
- Identifying specific individuals and communities where there is low aspiration and targeting support to help them engage in education through small scale programmes such "The Extra Mile" programmes.

# Consultations

N/A

# Implications:

N/A

# **Risk management**

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

# List of Background Papers

Paper	Date	Contact/Tel
National curriculum assessments at key stage 2: 2015 (revised)	10 December 2015	Jonathan Hewitt/ 01772 531663
GCSE and equivalent results in England 2014-2015	21 January 2016	Jonathan Hewitt/ 01772 531663

Reason for inclusion in Part II, if appropriate

N/A

#### Appendix A

<u>Revised Key Stage 2 Results, % Reading, Writing and Maths Level 4+</u> The following information is validated and reflects changes made via the Primary School Performance Checking Exercise

				Diff to	Diff to	Diff to	
District	2012/13	2013/14	2014/15	2013/14	LA	Nat	
Lancaster	75	82	81	🦊 -1.C	-1.0	1.0	
Wyre	81	83	85	<b>1</b> 2.0	0 3.0	5.0	
Ribble Valley	84	87	88	1.0	6.0	8.0	
Fylde	82	84	85	1.0	0 3.0	5.0	
Preston	79	82	82	0.0	0.0 🥚	2.0	
South Ribble	78	81	81	0.0	-1.0	1.0	
West Lancs	79	82	85	<b>1</b> 3.0	) 🔵 3.0	5.0	
Chorley	83	85	85	🔶 0.0	) 3.0	5.0	
Hyndburn	74	76	78	<b>1</b> 2.0	) 🔴 -4.0	-2.0	
Burnley	70	74	77	<b>1</b> 3.0	) 🔵 -5.0	-3.0	
Pendle	74	75	76	1.0	) 🔴 -6.0	-4.0	
Rossendale	77	81	81	🔶 0.0	) 🔴 -1.0	1.0	
Lancashire	77	81	82	1.0	)		
England (LA)	76	79	80	1.0	)		

<u>Provisional Key Stage 4 Results, % 5 A\*-C including English and Maths</u> The following information is validated and reflects changes made via the Secondary School Performance Checking Exercise

				Diff to		Diff to		Diff to	
District	2012/13	2013/14	2014/15	2013/14		LA		Nat	
Lancaster	64	64	64	$\uparrow$	0.0		5.0		7.0
Wyre	64	62	62	$\uparrow$	0.0		3.0		5.0
Ribble Valley	70	71	70		-1.0		11.0		13.0
Fylde	65	60	61	¢	1.0		2.0		4.0
Preston	57	57	59		2.0	$\bigcirc$	0.0		2.0
South Ribble	65	58	59	¢	1.0	$\bigcirc$	0.0		2.0
West Lancs	63	56	59		3.0	$\bigcirc$	0.0		2.0
Chorley	69	63	64	$\leftarrow$	1.0		5.0		7.0
Hyndburn	57	46	51	$\leftarrow$	5.0		-8.0		-6.0
Burnley	44	42	44		2.0	$\bigcirc$	-15.0		-13.0
Pendle	51	43	47		4.0	$\bigcirc$	-12.0		-10.0
Rossendale	61	59	57	⇒	-2.0	$\bigcirc$	-2.0	$\bigcirc$	0.0
Lancashire	61	57	59		2.0				
England (LA)	61	57	57		0.0				

Please note, from 2013/14 'First' Entry not 'Best' Entry reported for GCSE