

Lancashire County Council

Cabinet Committee on Performance Improvement

Monday, 5th December, 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 25 October 2016 (Pages 1 - 16)

4. Annual Statutory Report for Social Care Complaints and Customer Feedback (Pages 17 - 34)

5. Child Road Safety in Lancashire (Pages 35 - 48)

6. Risk and Opportunity Register Quarter 3 (Pages 49 - 62)

7. Quarterly Corporate Performance Monitoring Report - Quarter 2 2016/17 (Pages 63 - 74)

8. 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.

9. Date of Next Meeting

Tuesday 7 March 2017 at 9am, Cabinet Room B, County Hall, Preston

County Hall
Preston

I Young
Director of Governance,
Finance and Public Services

Lancashire County Council

Cabinet Committee on Performance Improvement

Minutes of the Meeting held on Tuesday, 25th October, 2016 at 10.00 am in Cabinet Room 'B' - The Diamond Jubilee Room, County Hall, Preston

Present:

County Councillor Jennifer Mein (Chair)

County Councillors

D Borrow
G Driver

M Brindle

1. Apologies for Absence

Apologies were received from County Councillor Winlow.

2. Disclosure of Pecuniary and Non-Pecuniary Interests

None.

3. Minutes of the Meeting held on 25 July 2016

Resolved: - That the minutes of the meeting held on 25th July 2016 be confirmed and signed by the Chair.

4. BTLS Service Governance and Performance Monitoring Report

Lisa Kitto, Director of Corporate Services and Mark Mayer, Chief Operating Officer BT Lancashire Services Ltd attended and presented a report on the Service Governance and Performance Monitoring of the County Council's strategic partnership with BT, covering April to August 2016.

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

Members were advised that the report also included the wider approach adopted to ensure the ICT and Payroll and Recruitment services support the organisation and contribute to the strategic priorities and objectives of the County Council.

The key achievements and areas of focus were noted and included:

- All contractual and non-contractual performance targets for Payroll and Recruitment and ICT services were met between March and August 2016.
- The Disclosure and Barring Service (DBS) was due to introduce an online application process in November 2016, which would allow applicants to apply and submit their application online to Recruitment services, before

being sent to DBS for processing. The project should have significant benefits for the service and applicants.

- The 'Asset Management System' project consists of four interrelated projects delivering market leading solutions for Property Asset Management, Project and Programme Management Systems and Highways Asset Management Systems. The Property Asset Management System and Program and Project Management Systems were made live on 1st July 2016. The Highways Asset Management System was in user acceptance testing and is moving towards go live in February 2017.
- In response to the Ofsted inspection in September 2015 when concerns were raised about the Liquid Logic system and its ability to produce reliable information on which decision making could be based, a working group 'Project Accuracy' was established. Due to the outcome of the work, the recent Ofsted follow-up inspection had noted significant improvements in data quality.
- The roll out of ICT equipment and modern telephony to social work staff had been completed and feedback was good. Training was being provided and monitoring was underway to ensure staff were using the new equipment to its full potential.
- Phase 1 of the new telephony platform for the Customer Access Service went live on 27th September 2016. Phase 2 was underway and would add the functionality.
- The new mobile phone contract had been renegotiated, with an expected saving of around £350,000 per annum.
- Customer feedback for the payroll and recruitment service demonstrated increased satisfaction with the service overall.

A BTLS Staffing update was presented and it was reported that BTLS continually strive to ensure staff feel valued, respected, involved and informed in the direction of the business and various mechanisms have been engaged to assist this, including:

- Annual staff events and an annual staff survey. The staff survey had achieved a 76% response rate (target 75%) and the results were being analysed. Once analysed the detailed results would be presented to the Cabinet Committee in December.
- Both corporate and service specific training was continuing, including training around Oracle, Liquid Logic and the Pioneers leadership training programme for managers.
- Three Manager Bulletins communicated health and safety, resource management and training and development information to staff.
- Various Info Bite sessions had been well attended.

Resolved: - That the report now presented be noted.

5. Risk and Opportunity Register

Paul Bond, Head of Legal and Democratic Services attended and presented an updated (Quarter 2) Risk and Opportunity Register for the committee to consider and comment upon.

The updated Quarter 2 Risk and Opportunity Register was included as Appendix 'A'.

It was explained that due to the last meeting of the Cabinet Committee on Performance Improvement being cancelled, the Risk and Opportunity Register was presented to Audit and Governance Committee on 26th September 2016 and Full Council on 13th October 2016.

There were no deletions or additions to this quarter's register, however it was reported that "The operational failure in the main computer suite" had been added to risk CR12 – Inability to implement/maintain systems that produce effective management information.

Resolved: - That the report now presented be noted.

6. Quarterly Corporate Performance Monitoring Report - Quarter 1 2016/17

Donna Talbot, Head of Business Intelligence and Michael Walder, Information, Intelligence, Quality and Performance Manager, attended and presented a report setting out details of the corporate performance monitoring report for the 1st Quarter (Q1) of 2016/17 (April to June).

It was reported that quarterly Quality of Service reports against the themes of Start Well, Live Well and Age Well, along with Highlight Reports for Development & Corporate Services and Commissioning, Governance, Finance & Public Services have been produced for Q1, giving an overview of performance against agreed headings and parameters.

An overview of the Q1 budget position was provided at Appendix 'A' so that performance could be viewed within the associated financial context.

It was noted that the latest Ofsted Post Inspection update was provided at Appendix 'B' and updates would continue to feature in these reports going forward.

The key highlights were noted and included:

Start Well:

- It is taking less time for children to be matched with an adoptive family following court authority from 272 days (Q4 15/16) to 237 days (Q1 16/17), a decrease in 35 days (year to end of August 217 days).

- It is taking less time between a child entering care and moving in with their adoptive family, from 540 days (Q4 15/16) to 485 days (Q1 16/17), a decrease of 55 days (year to end of August 451 days). During Q1 2016/17, 55% of children waited less than 16 months between entering care and moving in with their adoptive family in Lancashire which was an improvement on the previous quarter (53%). For the year to August this has improved further to 63% and is higher than the 2015 national (47%), regional (45%), and statistical neighbour performance (44.2%).
- Lancashire Youth Offending Team (LYOT) remains in the second quartile for First Time Entrants with a slight decrease in the rate per 100,000 from 307 (Q4 2015/16) to 293 (Q1 2016/17).
- 94.5% of Lancashire primary schools were judged as good or outstanding and this was higher than the national average (88.5%). 24 of 480 were not rated as good or outstanding.

Live Well:

- The number of Libraries' book issues decreased in Q1 2016/17 (1,138,090) and is lower than the same period of 2015/16 (1,192,527). The number of Library E-Book loans has gone up from last year being 34,863 in Q1 of 2016/17, (28,522 in Q4 2015/16) and 23,803 in Q1 of 2015/16.

A detailed road safety report is scheduled for the next meeting in December.

- In Q1, the number of NHS health checks completed dropped (10,969) compared to previous quarters (12,498 in Q4 2015/16 and 11,588 in Q1 2015/16). A more detailed analysis to be included in the next Quarterly Corporate Performance Monitoring Report.

Age Well:

- Reablement work has been undertaken within a team in Burnley to better understand how the service should develop to meet increasing demand and complexity of people using the service, whilst reducing the amount of longer term support people need after a significant event such as a hospital admission. The time to reable was reduced by 43% within this team, whilst the cost of longer term support people needed at the end of the period of reablement decreased on average by £20 per person, and 78% of people needing no formal long term support at the end of the period of reablement. This learning will lead to re-designing the service across Lancashire.
- A new approach to social care assessment waiting times is ongoing with Newton Europe, following development in East Lancashire. In the East from 775 at the beginning of June 2016 to 336 at the end of July – the number of people waiting for assessment has reduced by 439, at the same time as responding to incoming new work.
- Of the 344 Lancashire Care Homes inspected by the Care Quality Commission (CQC), 226 (65.7%) achieved an overall rating of good or outstanding. Overall 110 (32%) were rated as requiring improvement and

8 (2.3%) were rated as inadequate. This compares with a national figure of 62% of care homes rated good or outstanding.

- Of the 106 Lancashire Community Care Services inspected by CQC, 80 (75.5%) achieved an overall rating of good or outstanding. Overall 24 (22.6%) were rated as requiring improvement and 2 (1.9%) were rated as inadequate. This compares with a national figure of 72% of community care services rated as good or outstanding.

Richard Cooke, Health Equity, Welfare and Partnerships attended and presented the Ofsted Post Inspection update presented at Appendix 'B', including the actions put in place and developed since the last report to Cabinet Committee in July 2016.

Members noted the main points:

- To date more than 133 additional permanent posts have been recruited to, including social workers, team managers and independent reviewing officers.
- Work was launched in October, initially in Fylde and Wyre, to focus on how new ways of working and improvement related projects are related are effectively implemented on an area footprint to enable quality and consistency of practice.
- Skylakes would continue to provide additional capacity by taking on new work and assessments for children's social care until January 2017.
- Interviews for the Director of Children's Services will take place in November, with Linda Clegg continuing in the role until the new appointment.
- Ofsted carried out its quarterly monitoring inspection in September 2016 and spent two days assessing the progress the County Council, with its partners, is making in relation to care leavers, children in need cases and those subject to child protection plans. The inspectors recognised the increased "pace of positive change" the County Council is making and that "expected progress" was being made, but that this progress needed to be sustained.
- Feedback of the findings from the Peer Review would be provided on 9th November and it was expected that this would mirror the Ofsted findings.
- The first DfE review has taken place and the outcome would be a formal report to ministers that appraises the progress being made and identifies future focus.
- Project Accuracy was developed to increase the accuracy of the data in management reports. There was growing confidence around data and how it can inform decision making.
- The implementation of the Risk Sensible Model will improve the skills and confidence of staff in identifying risk and making appropriate decisions about how risk is managed. Training on the Model was being rolled out across children's social care. Partner organisations are also interested in understanding and practicing in line with the risk sensible approach and funding has been agreed by the Lancashire Safeguarding Children Board to facilitate this.

Resolved: - That the report now presented be noted.

7. Urgent Business

There was no urgent business.

8. Date of Next Meeting

It was noted that the next meeting of the Committee would be held on Monday 5th December 2016 at 2.00pm in Cabinet Room B – The Diamond Jubilee Room.

I Young
Director of Governance, Finance
and Public Services

County Hall
Preston

In confidence

BT Lancashire Services

Staff Engagement Survey – August/September 2016 Results

Version: Draft v1.0
Date: October 2016
Owner(s): Pauline Redhead

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1 Background

With the aim of improving communication and staff engagement, an initial staff survey was launched in July 2014 in order to promote and encourage open and honest feedback from all members of Staff (except Directors) within BT Lancashire Services. This survey was repeated in December 2014, July 2015 and, more recently, in August 2016. This short report summarises the main points/issues emerging from the July 2016 exercise including response rates, engagement scores, key themes and a detailed action plan.

2 Statements

The short, confidential survey comprises the following statements, with staff given the opportunity to indicate how much they agree or disagree, score against a ten-point-scale or free-type their comments.

- Senior Managers (i.e. Directors and Service Heads) clearly identify and articulate the future direction of the organisation, lead transformational change and inspire others to do so.
- The Senior Leadership Team (i.e. Directors and Senior Managers) are sufficiently visible in BT Lancashire Services.
- I understand how my work contributes to the future of BT Lancashire Services.
- I believe that when change happens it happens for the right business reasons.
- Things are changing for the better in my business unit.
- Working for BT Lancashire Services motivates me to do the best I can.
- I take pride in the service BT Lancashire Services provides to its customers.
- I feel my ideas and opinions count.
- I am empowered to challenge working practices and make improvements.
- I feel well informed of the budget challenges facing our customers and how they impact on BT Lancashire Services.
- My achievements are recognised and celebrated.
- What are your thoughts on the reward and recognition tool (Champions) being a valuable tool to recognise colleagues' achievements and to say thanks for a job well done?
- I have a formal appraisal or performance development review (PDR) with my Line Manager at least once a year.
- I think my performance on the job is evaluated fairly.
- My immediate Line Manager coaches me to give my best performance and gives me regular, useful feedback.
- My immediate Line Manager encourages the development of others.
- I am able to use my skills and abilities.
- I have adequate materials, supplies and equipment to do my work.

- What are your thoughts on your working environment?
- It is easy for me to work with colleagues in other parts of BT Lancashire Services to deliver what the customer needs.
- I have a good relationship with my team and my immediate Line Manager and I feel he/she cares about me as a person.
- I have a good work life balance.
- Do you feel you are encouraged to report errors, accidents or incidents and when errors, near misses or incidents are reported, do you feel action is taken to ensure that they do not happen again?
- My team has a meeting at least every month.
- I feel well informed about BT Lancashire Services.
- On a scale of 1-10 (1 being not satisfied and 10 being very satisfied) how do you feel communication has been improved since the last survey was carried out in July 2015?
- Which communication channels do you feel are most effective?
- On a scale of 1-10 (1 being not satisfied and 10 being very satisfied) how do you feel working within BT Lancashire Services in general has improved since the last survey was carried out in July 2015?
- On a scale of 1-10 (1 being not satisfied and 10 being very satisfied) how satisfied are you working for BT Lancashire Services?
- The space below has been provided for you to feedback any additional comments. This can be further feedback on one of the points above or comments about a topic or area that has not been covered.

Staff were also asked to provide their thoughts on the Reward and Recognition Scheme, their working environment, the methods of communication used within BTLS and any other feedback they wished to divulge.

3 Response Rates

The table below shows the volumes and response rate percentages per service area.

Service Area	Volume of responses received	% response rate
Corporate, Commercial and Financial Services	20	100%
Education Services	40	82%
ICT Services	187	71%
Payroll and Recruitment Services	53	77%
Revenue and Benefits Service	45	79%
BTLS Total	345	75%

4 Corporate Results - Summary

4.1 Corporate Response Rate

The response rate showed a positive increase across the majority of BTLS service areas and the corporate target of 75% was met. The table below shows the increase, year on year.

Response Rate	Jun 2014 Response Rate	Dec 2014 Response Rate	Jun 2015 Response Rate	Aug/Sept 2016 Response Rate
BTLS overall	45%	52%	65%	<u>75%</u>

4.2 Corporate Statements and Responses

The following results have been compiled from responses given to the survey.

Statement	Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree
Senior Managers (i.e. Directors and Service Heads) clearly identify and articulate the future direction of the organisation lead transformational change and inspire others to do so.	3%	19%	23%	45%	11%
I understand how my work contributes to the future of BT Lancashire Services?	1%	8%	14%	55%	22%
I believe that when change happens it happens for the right business reasons.	5%	18%	33%	38%	6%
Things are changing for the better in my business unit.	7%	19%	30%	34%	10%
Working for BT Lancashire Services motivates me to do the best I can.	5%	16%	28%	41%	10%
I take pride in the service BT Lancashire Services provides to its customers.	2%	9%	19%	45%	25%
I feel my ideas and opinions count.	7%	19%	23%	37%	14%
I feel well informed of the budget challenges facing our customers and how they impact on BT Lancashire Services.	1%	9%	17%	55%	18%
Statement	Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree
I am empowered to challenge working practices and make	4%	21%	22%	40%	12%

improvements.					
My achievements are recognised and celebrated.	6%	14%	29%	41%	10%
I think my performance on the job is evaluated fairly.	2%	6%	18%	55%	19%
My immediate Line Manager coaches me to give my best performance and gives me regular useful feedback.	4%	11%	17%	41%	27%
My immediate Line Manager encourages the development of others.	3%	5%	21%	42%	29%
I am able to use my skills and abilities.	3%	12%	11%	51%	23%
I have adequate materials supplies and equipment to do my work.	2%	10%	8%	63%	18%
It is easy for me to work with colleagues in other parts of BT Lancashire Services to deliver what the customer needs.	6%	22%	27%	38%	7%
I have a good work life balance.	2%	11%	10%	58%	19%
I feel well informed about BT Lancashire Services.	1%	7%	28%	52%	12%
I have a good relationship with my team and my immediate Line Manager and I feel he/she cares about me as a person.	1%	6%	8%	46%	39%

Statement	Yes	No
The Senior Leadership Team (i.e. Directors and Senior Managers) are sufficiently visible in BT Lancashire Services.	65%	35%
I have a formal appraisal or performance development review (PDR) with my Line Manager at least once a year.	90%	10%
Do you feel you are encouraged to report errors accidents or incidents and when errors near misses or incidents are reported, do you feel action is taken to ensure that they do not happen again?	81%	19%
My team has a meeting at least every month.	77%	23%

4.3 Corporate Employee Engagement Index (EEI)

The “employee engagement index” provides a collective measure of an employee’s engagement factors.

Scores are measured on a 5 point scale where each “Strongly Disagree” is assigned a value of 1, “Disagree” a value of 2, and so on, up to “Strongly Agree” with a value of 5. The score is the average

of the responses, so the higher the score the better. All questions are phased positively, so a higher score indicates a more positive result.

The EEI score is the average of 5 statements. **The BTLS corporate EEI score is 3.36.**

The statement highlighted in **red** is the **lowest scoring question** and the statement highlighted in **blue** is the **top scoring question**.

Statement	Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree	TOTAL POINTS	EEI SCORE
I believe when change happens it happens for the right business reasons	17	122	339	528	110	1116	3.19
Working for BT Lancashire Services motivates me to do the best I can	16	112	288	572	170	1158	3.31
I feel like my ideas and opinions count	25	128	240	508	240	1141	3.26
I am empowered to challenge working practices and make improvements	15	148	228	552	205	1148	3.28
I am able to use my skills and abilities	9	82	111	708	405	1315	3.76

The EEI scores for each **service area** have been broken down as follows:

Statement	Corporate, Commercial and Financial	Education	ICT	Payroll and Recruitment	Revenue and Benefits
I believe when change happens it happens for the right business reasons	3.90	3.48	3.01	3.28	3.60
Working for BT Lancashire Services motivates me to do the best I can	4.00	3.83	3.14	3.45	3.44
Statement	Corporate, Commercial and Financial	Education	ICT	Payroll and Recruitment	Revenue and Benefits
I feel like my ideas and opinions count	4.00	3.68	3.16	3.34	3.27
I am empowered to challenge working practices and make improvements	4.00	3.68	3.10	3.47	3.49

I am able to use my skills and abilities	4.75	4.28	3.69	3.81	3.80
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4.4 Staff Satisfaction

Staff were asked to state, on a scale of 1-10 (1 being not satisfied and 10 being very satisfied), how satisfied they are working for BT Lancashire Services. The graph below shows the comparison to previous years.



As can be seen from the graph there has been another positive trend in response to this question with, year on year, an increase in staff scoring 7-10.

4.5 Key Themes

The key themes which have emerged from the feedback staff provided to the 'open feedback' questions are summarised below:-

- The working environment, whilst viewed by many in a positive light, fluctuating temperature levels of the air conditioning raised many concerns, as did the hot desking policy.
- In respect of the Reward and Recognition Scheme, whilst viewed positively by 47% of staff, there is valid feedback about the usage and areas of opportunity were suggested
- Of the nine questions used to monitor staff engagement, ICT Services' results improved on seven of them. Payroll and Recruitment Services however, has seen a downturn overall.

4.6 Additional Comments

- Whilst a decrease in staff morale has been highlighted, the restructures within both ICT Services and the Revenue and Benefits Service could potentially have had an impact on people's recent outlook.

- Whilst internal communication remains a regular topic, including inter-team working arrangements, the volume of feedback around this topic is seen to have stemmed since the last survey.
- Whilst there has been a huge improvement in the volume of team meetings and PDRs taking place across the organisation, there remains a small pocket of Managers not meeting the frequency targets.

5 Recommendations following August/September 2016 Staff Survey

The results were outlined during October's BTLS Senior Leadership Team Brief and Managers were notified that an extended Report would be circulated to them in due course. The intention is for Managers then to have a wider discussion in teams with a view to making suggestions for improvements. A detailed plan of actions is being drawn up to address key issues fed back through the Survey and identified and agreed in the team reviews. However, upon first analysis, actions are likely to include:-

- Consider issuing guidance on the usage of the air conditioning system, explore development of corporate office standards (including noise levels and clear desk policy) for Managers to enforce and continue to assess ways to improve inter-team interaction, reviewing those recently implemented
- Re-issue guidance on usage of the Reward and Recognition Scheme (for example Managers converting customer compliments into Champions) and explore options of widening the scope for recognition (for example the creation of a 'behind the scenes' award for those who don't interact with the customer directly)
- Heightened focus within Payroll and Recruitment Services and consider re-issuing the staff survey to staff in this Service in six months' time
- Review the recently implemented change to communication process and continue the review of BTLS intranet and roll-out of 'Manager Portal'
- Work with AMS to resolve current issues with the air conditioning system and consider issuing guidance on the appropriate usage of the system when current problems are resolved.

Cabinet Committee on Performance Improvement

Meeting to be held on Monday, 5 December 2016

Report of the Complaints Manager

Electoral Division affected: (All Divisions);
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Annual Statutory Report for Social Care Complaints and Customer Feedback

Appendix 'A' refers

Contact for further information:

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

Executive Summary

The production of the Annual Complaints and Customer Feedback Report is a longstanding statutory requirement. It contains statistical information, analysis and learning for the organisation in relation to statutory social care complaints and compliments received from 1st April 2015 to 31st March 2016.

Recommendation

The Cabinet Committee on Performance Improvement is recommended to receive the Complaints and Customer Feedback Annual Report 2015/16 and acknowledge the associated learning from customer feedback for the past year.

Background and Advice

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

Last year for the first time ever, a combined County Council complaints report was produced and cleared through Management Team and then presented to Cabinet Committee on Performance Improvement. This year a single social care statutory report has been produced.

It should be noted that there is an established pathway for sharing intelligence from complaints. Every quarter, performance information from customer complaints and feedback is published by the complaints and appeals team and is shared with all County Council heads of service and directors. This information is also used by the Business Intelligence Team and is incorporated into their quarterly Quality of Service Reports under Start Well, Live Well and Age Well along with the two Highlight

Reports. In addition, a summary of the number of complaints for each quarter, along with comparisons to previous quarters is included in the quarterly Corporate Performance Overview report. These reports are also discussed at respective management team meetings across the County Council. Because complaints are an important tool to access customer satisfaction, the complaints team regularly attends management team meetings and links in with principal social workers to ensure that complaints which are upheld, result in continuous improvements for the County Council. It is of course vital to learn the lessons from complaints and spot early trends if service delivery is going wrong. This is particularly important in order to embed learning if new County Council processes are being implemented which impact negatively on the public.

Complaints represented around one percent of active adult social care and children's social care cases with an open referral in 2015/16. Statutory complaint totals have however increased overall by 54% (480 in 2014/15 to 735 in 2015/16). The rise in complaints can be attributed to:

- a rise in overall activity levels
- increased expectations by the public and reduced budgets;
- ongoing financial complaints which have increased year on year as a proportion of complaints since 2013/14;
- it now being 'easier' to complain using the complaints portal on the Lancashire County Council internet; and
- a single complaints team now logs, tracks and supports complaints through to resolution which means that complaints are no longer 'hidden' in different parts of the council.

Complaints in adult social care (ASC) have risen by almost 25% (from 334 complaints in 2014/15 to 417 in 2015/16). There were 21 complex joint complaints with the NHS, which is the same number as in 2014/15.

Children's complaints across all services have increased from 171 to 321 in 2015/16: a rise of 88%. Statutory children's social care complaints increased by 44% (from 146 complaints in 2014/15 to 211 in 2015/16). Complaints about the assessment process formed the subject of just less than half of all statutory complaints.

During 2015/16 the main themes and areas of concern in statutory social care complaints were about:

- Financial issues and services
- Assessments across CYP and adult services
- Internal working and with partners
- Safeguarding and child protection services

Learning from complaints has resulted in improvements being made to:

- Recording
- Policies and procedures
- Assessment processes

- Staff awareness through training
- Support from professionals dealing with cases.
- Contract monitoring of providers
- Embedding themes and learning back to senior managers via senior management teams.

The details are outlined in the appropriate sections of the report.

Consultations

Consultation has taken place with The Senior Management Team, Heads of Service who are Designated Complaints Officers.

Implications:

There are no financial, personnel, Human Rights or data protection issues or legal implications arising from this report.

Risk Management

The contents of the report may be of interest to the press, and the Communications Team should be made aware of its contents.

List of Background Papers

Paper	Date	Contact/	Tel
The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009	2009	Angela Esslinger/ 01772 533950	
http://www.legislation.gov.uk/uk-si/2006/1738/introduction/made	2006	As above	
https://www.gov.uk/government/publications/childrens-social-care-getting-the-best-from-complaints	2006		

Statutory Social Care Annual Report

Complaints and Customer Feedback



For the period 01 April 2015 to 31 March 2016

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Introduction

i. Background

Local Authorities are legally required to establish complaints procedures to deal with complaints about their social care functions since 1991. The complaints procedure for children and young people is covered by The Children Act 1989 and the Department for Skills and Education produced guidance, 'Getting the Best from Complaints' (2006), which outlines the procedures. The Local Authority Social Services and National Health Service Complaints Regulations came into effect on 1 April 2009 and this report is produced in accordance with the requirements of those Regulations.

ii. Purpose

The purpose of the Annual Report is to review the operation of the complaints process over a twelve month period, including statistical data, and to provide the local authority with an instrument to keep informed about complaint themes and how effective its current arrangements are for handling customer complaints. It offers some analysis of what the information from the operation of the process means for the Council.

The report also includes information on, and analysis of, other types of customer feedback such as comments and compliments.

iii. Period Covered

The report covers the period 1 April 2015 to the 31 March 2016 and is in three sections.

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

The report makes extensive use throughout of data available from the Customer Feedback System (CFS) which records all statutory social care complaints and feedback for the Council. The statistical information presented within this report can be verified by reference to this database and is based on data received. All percentages are rounded to the nearest whole number. It should be noted that recording on the CFS commenced half way through 2014/15 and a new Corporate Complaints process was introduced in June 2015.

If you require any additional information please contact the Complaints Team on 01772 539414 or email your request to complaintsandfeedback@lancashire.gov.uk

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

1.1 Executive Summary

Complaints represented around **one percent** of active adult social care and children's social care cases with an open referral in 2015/16. Statutory complaint totals have increased overall by 54% (480 in 2014/15 to 735 in 2015/16). This rise in complaints is also set against a rise in assessment activity across the whole of social care. The rise in complaints can be attributed to:

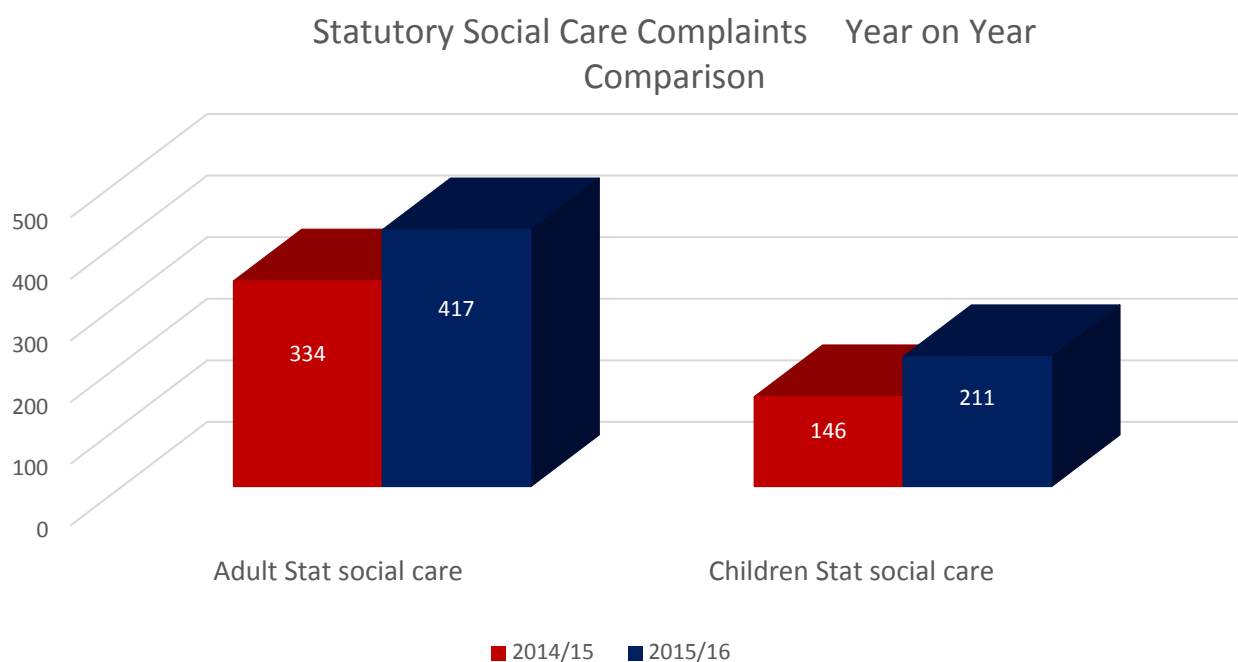
- increased expectations by the public and reduced budgets;
- ongoing financial complaints which have increased year on year as a proportion of complaints since 2013/14;
- it now being 'easier' to complain using the complaints portal on the LCC internet; and
- a single complaints team now logs, tracks and supports complaints through to resolution which means that complaints are no longer 'hidden' in different parts of the council.

Complaints in adult social care (ASC) have risen significantly by almost 25% (from 334 complaints in 2014/15 to 417 in 2015/16). There were 21 complex joint complaints with the NHS, which is the same number as in 2014/15.

Statutory children's social care (CSC) complaints increased by 44% (from 146 complaints in 2014/15 to 211 in 2015/16). Complaints about the assessment process formed the subject of just less than half of all statutory complaints. This is to be expected as it forms such a fundamental part of the process.

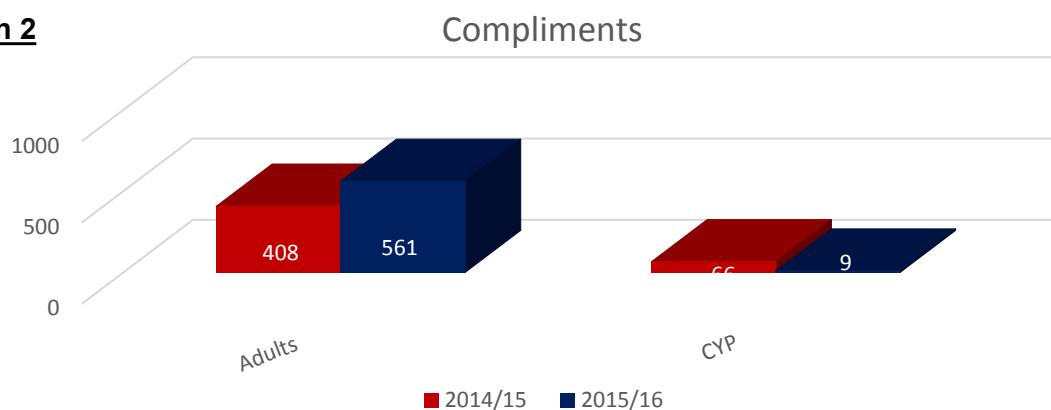
Graph 1 below, shows a comparison of the total number of statutory complaints received for the last two financial years

Graph 1



Graph 2 below shows the number of 'statutory' compliments received. It can be seen that adult social care services have increased the amount of compliments by 38% in 15/16 when compared with the previous year. The equipment and adaptations service receives the greatest amount of positive appreciation by the public. This is as a result of the 'Your Views Count' leaflet that is given out after social care assessments and reviews are undertaken. Positive appreciation for the actions undertaken by children's social care services is always generally low but in 15/16 it decreased by a further 86%. A further 23 compliments were made relating to non-statutory feedback for CYP services.

Graph 2



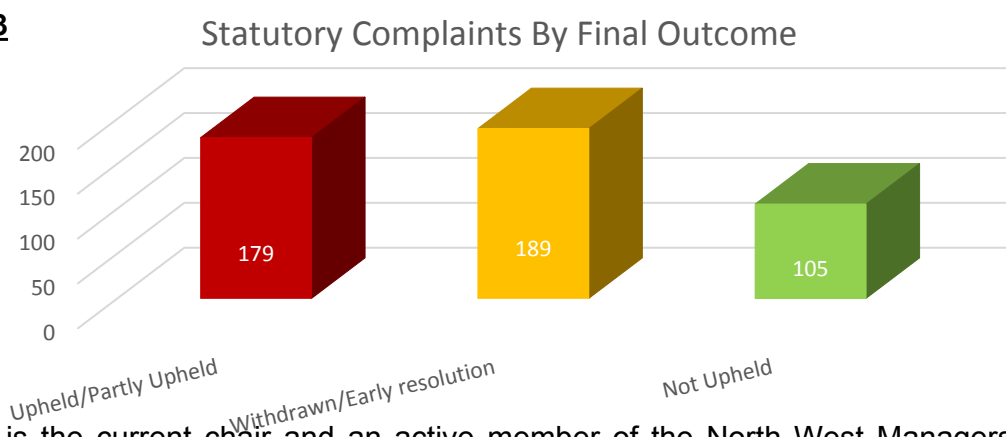
1.2 Statutory complaint trends and outcomes

Complaints have increased to one percent of active cases (1.2% for CYP and 1% for ASC). Complaints however are on an upward year on year trajectory. The number of complaints as a percentage of total customer feedback has been increasing over the past years and complaints represented 44% of all feedback in 2015/16. As the years go on, people are therefore more likely to be contacting the council to complain rather than to compliment staff.

Graph 3 below shows a breakdown in the number of statutory complaints by final outcome for all closed complaints during the period, with most being either withdrawn or resolved early. A further breakdown of these figures can be found later in the relevant sections of this report.

In 2015/16 the total amount spent on investigations for statutory complaints was £18 811.00.

Graph 3

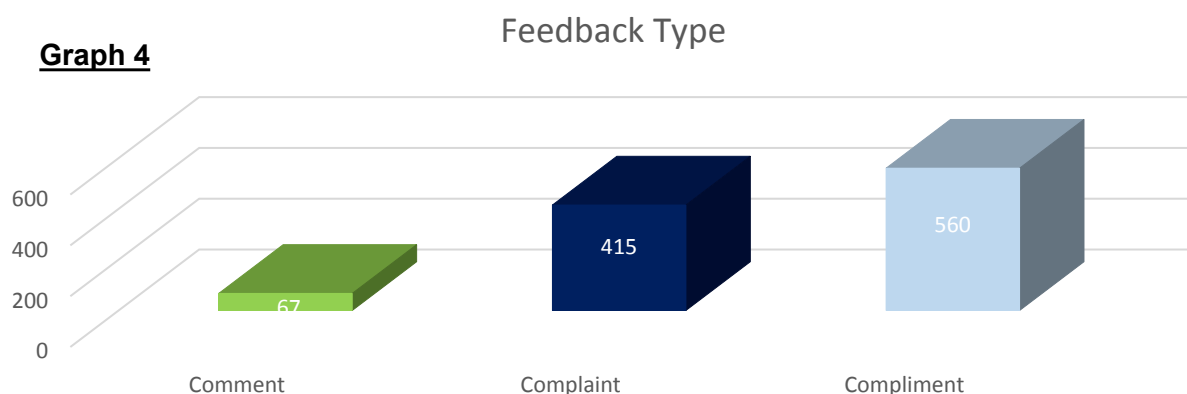


Lancashire is the current chair and an active member of the North West Managers Complaints Group (NWCMG). The group consists of 23 Local Authorities and its aim is to provide a forum where complaints staff can learn and share best practice, develop and implement local practice standards, discuss performance and problem solve. The Group is also consulted on proposed changes to legislation by the Association of Directors of Adult Social Services and the Association of Directors of Children's Services.

Section Two: Adult Social Care Feedback

2.1 Services which were the subject of complaints in 2015/16

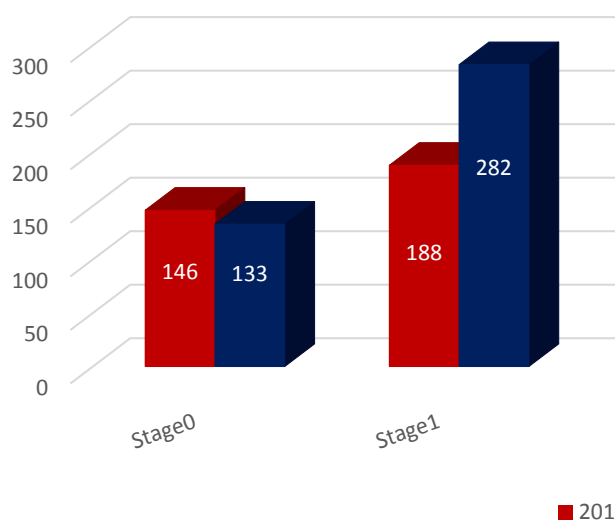
Graph 4 shows a breakdown of Adult Social Care by Feedback Type. A total of 415 complaints were received in 2015/16, of which 133 were resolved early (stage 0) and 282 were resolved with a management and council action at the final outcome (Graph 6). In 2015/16 the total amount spent on independent complaint investigations for adults was £5,395.20.



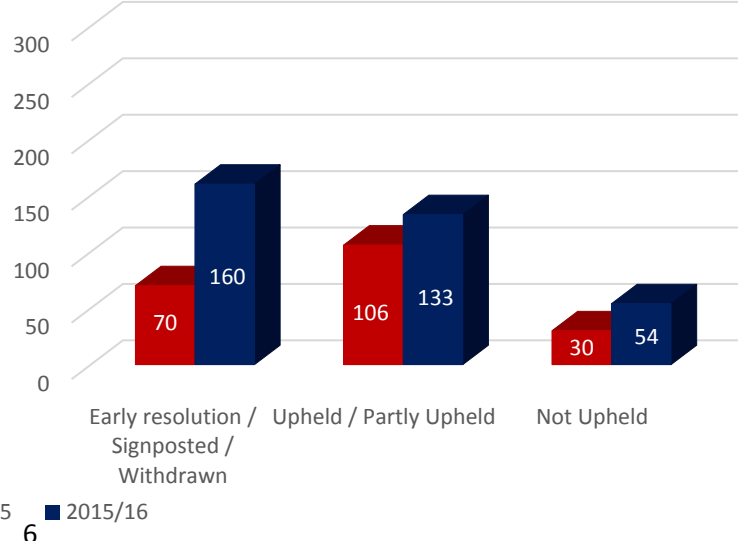
2.2 Breakdown of complaints by stage and outcome

Graph 6 shows that (similar to 2014/15) about one third of complaints were resolved early, the rest entered the formal process. Graph 7 shows the split of 347 closed complaints which commenced in the year and had outcomes recorded against them. (The rest were still open at the year-end). Of these, almost 46% were withdrawn, had an early resolution or were signposted out of the process, (more than double the number in 2014/15), 41% of the total complaints received were upheld or partly upheld and 38% were not upheld. These proportions are similar to the previous year. This shows that when people make complaints, in well over a third of cases, there is an aspect that is justified. Equally in another third of cases, no aspect is found to be justified. Of the total number (415) of complaints received this financial year just under 4% (16) exceeded the 6 month statutory maximum timescale.

Graph 6 Complaint Stage



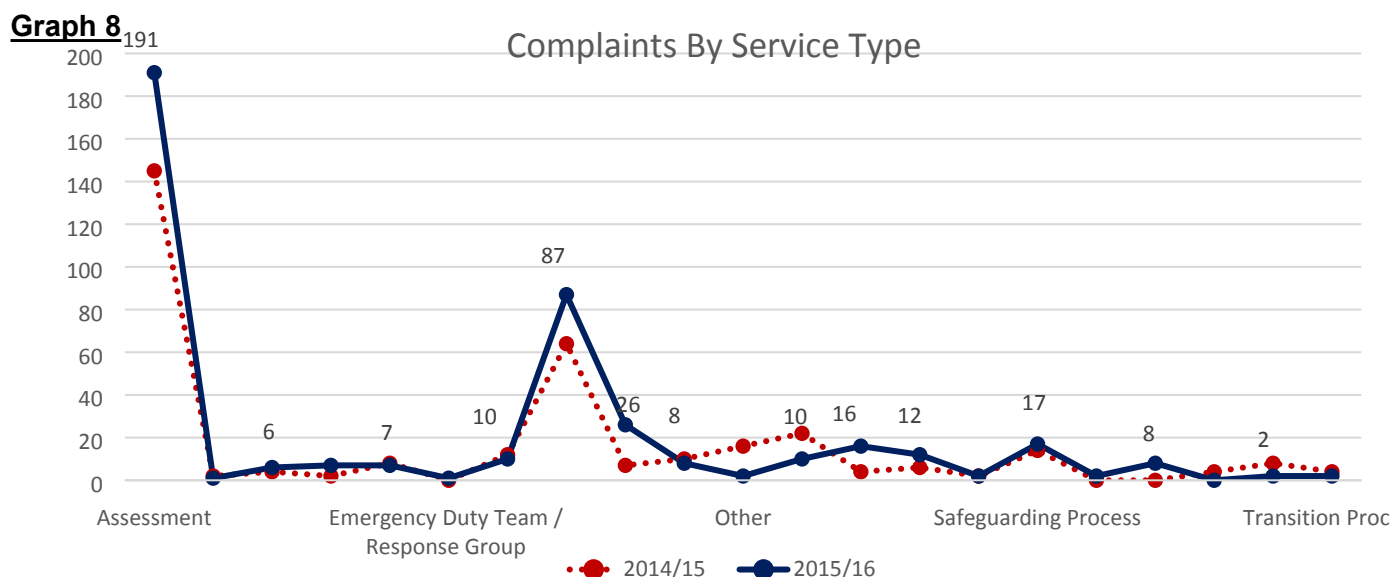
Graph 7 Final Outcome



2.3 What do people complain about?

Graph 8 shows Complaints by service type for the last two financial years. For 2015/16, the most frequent subject of complaint was assessment (191) which received 46% of the total number of complaints (145 in 14/15). The total number of adult assessments undertaken in 14/15 was 41500, rising to 45761 in 15/16. Complaints as a proportion of these totals therefore increased from 0.3% to 0.4% with an overall jump of 30% in complaints about assessment activity. Complaints about care providers dropped from a proportion of 18% of all complaints in 2014/15 (68) to 10% of all complaints in 2015/16 (42%). Financial related complaints are on an upward trend. Financial complaints were 8% of all adult social care complaints in 2013/14. They increased to 17% of all adult social care complaints (54) in 2014/15. In 2015/16 they increased again to 21% of all complaints (87). This may be as a result of new financial systems having been introduced with complaints about duplicate billing, debt recovery and incorrect invoices with insufficient detail.

There has been a decrease in the number of complaints about equipment/adaptations with less than 3% (just 10 complaints) in 2015/16 compared with a proportion of 8% in 2014/15. The relatively new 'equipment prescription' model is therefore working well from this perspective.



2.4 Learning for adult social care

- Review our mental capacity assessment training to ensure that staff appropriately address all concerns raised about mental capacity, including financial capacity.
- Review our systems and processes to ensure staff are aware of the correct commissioning process.
- Have procedures in place to ensure that written assessments and support plans are dated, signed and provided to service users; quality of assessment and support plans must look at meeting needs not just assessing them.
- Improve our communication with our customers who are Deaf and incorporate this into clear outcomes within the support plans and within any written communication in the future.
- Social care workers are reminded about the importance to fully discuss available support options with service users who are not eligible for respite and they self-fund social care.
- Raise awareness of the 'dementia passport' documentation.
- Address the delay in waiting time for assessments.
- In light of financial guidance within the Care Act Care Act 2014 the Council is in the process of identifying learning for staff and ensuring that our information around this issue is clear.

- Two complaints have raised issues around financial implications including advice when assets are not covered by a power of attorney or guardianship and this will be considered as part of our on-going training in this area.
- Training is being targeted at staff re carer assessments, direct payments, reablement and financial implications information.
- Clarify arrangements to access health funding for provision of daily living equipment, identified as a health need.
- Undertake a review of our website to include publishing the adaptation criteria and guideline documents.

Exchequer Service

- Ensure delays around financial assessments are minimised and are taken into account when issuing invoices for large amounts.
- Ensure contact with service users takes into account any specific circumstances which might affect their ability to understand the charging process.
- Undertake careful recording of conversations with the service user on case notifications to provide evidence of any agreed plans/actions.

Mental Health, Learning Disability & Autism Service

- Lancashire Care Foundation NHS Trust has met with Eating Disorder Services (EDS) and better links have been developed and communication has been improved in order to improve partnership working.

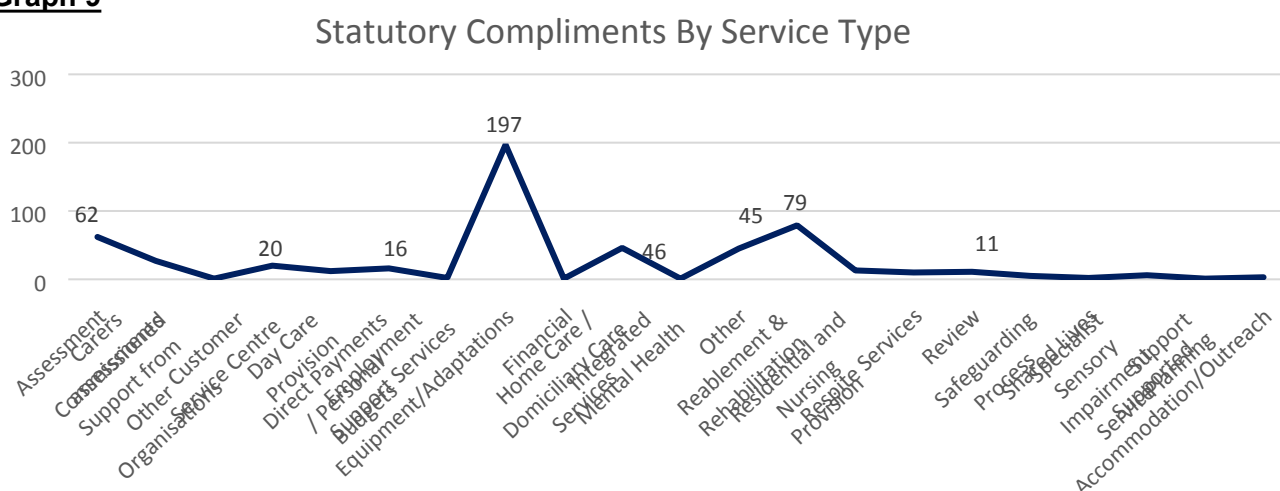
Older People & Disability Service

- Residential care staff have been reminded about the importance of completing incident reports and informing families when incidents occur; considering a person's capacity to consent to representatives acting on their behalf and recording any decisions made and of familiarising themselves with residents' support plans.
- Shared Lives Carers have been reminded of the need to ensure transparent and clear record keeping of financial transactions.

Patient Safety, Quality Improvement and Safeguarding

- Review the robustness of procedures and practice for oversight of safeguarding cases when staff members are unavailable for extended periods and enquiries that have gone on a long time.
- Improve recording of senior management instruction and communication within case notes.
- Provide a provisional list of attendees prior to the safeguarding meeting and record this within case notes, ensure a calm and welcoming environment in safeguarding meetings and review capacity to have good minute taking for timely distribution.
- The outcome of a safeguarding investigation should be put in writing to the individual and/or their relevant family members. It should contain information about how they can make a separate formal complaint to the Council regarding any outstanding concerns or if they are not satisfied with the way the investigation was carried out and the decision making process.
- Staff have been reminded about the policy and guidance on complaints on the intranet.
- In light of the Care Act 2014 and Statutory Guidance to the Act 2015, review arrangements between Safeguarding, Contract Compliance, and Complaints sections/departments, to identify actions that might prevent difficulties occurring for those who make complaints or safeguarding alerts about commissioned providers. .

- ## 2.5 Services which were the subject of compliments in 2015/16

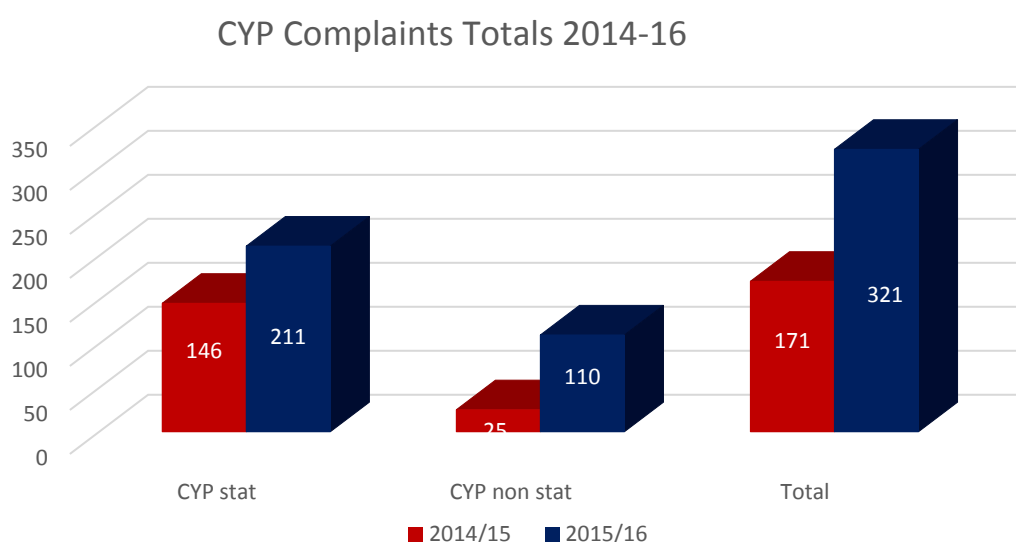


Section Three: Children and Young People Feedback

3.1 Services which were the subject of complaints in 2015/16

The Children's social care complaint procedure involves a statutory three stage process for the child or those who have parental responsibility. The Stage 1 initial response is always by the service manager involved. If the person complaining is still unhappy, they can request a Stage 2 independent investigation. If the complainant remains unhappy, a Stage 3 review panel, which reviews the way the stage 2 was investigated, can be requested. There is a non-statutory process for non-social care complaints (eg education or Special Educational Needs and Disabilities SEND) or for people complaining who do not have parental responsibility for a child (eg grandparents). In 2015/16 the total amount spent on investigations for children's complaints was £13 416.36.

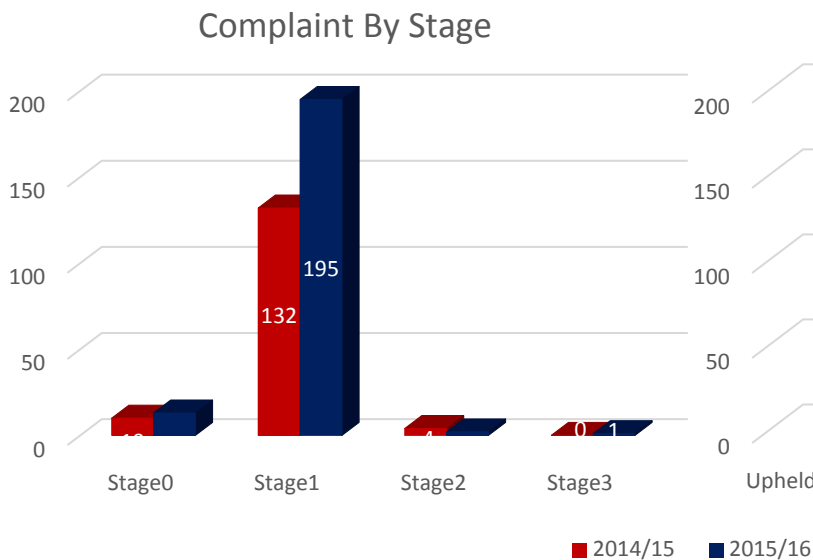
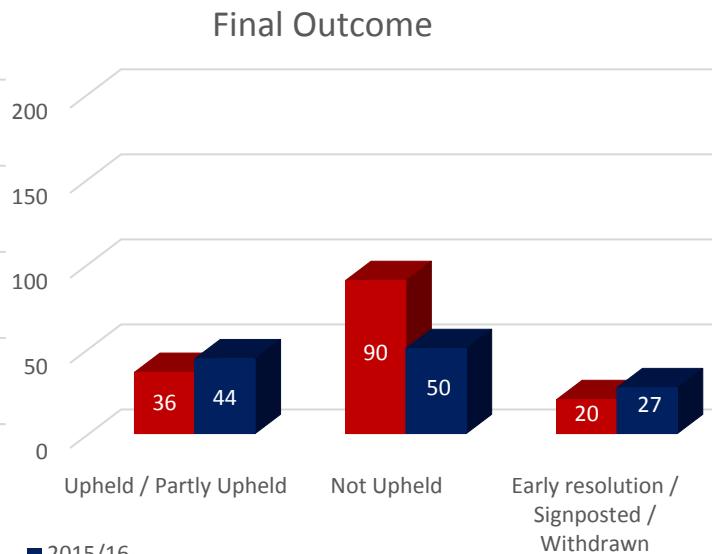
Graph 10



Graph 10 shows the overall rise in Children and Young People's (CYP's) complaints by 88% to make an overall total of 321 for 2015/16. The graph also shows the breakdown between statutory Children Act Complaints and non-statutory complaints involving other CYP services. It can be seen that there has been a large increase in non-statutory CYP complaints in 2015/16. Of the total number of social care (211) complaints received in this financial year, 8% (17) exceeded the statutory timescale.

3.2 Breakdown of complaints by stage and outcome

Graph 11 overleaf shows a breakdown of all statutory CYP social care complaints by stage. Of the 211 statutory CYP complaints received in 2015/16, 13 were recorded as Stage 0 (resolved early), 195 Stage 1, 2 Stage 2 and 1 Stage 3. The fact that 99% of all CYP statutory complaints were resolved early or at Stage 1 in the process is credit to the quality of the response / investigation and resolution offered by managers to the issues highlighted. Local and early resolution of complaints is a better outcome for everyone, as escalation is time-consuming and expensive. Last year, one Stage 3 panel was held and, in other cases, early referral to the Local Government Ombudsman was agreed.

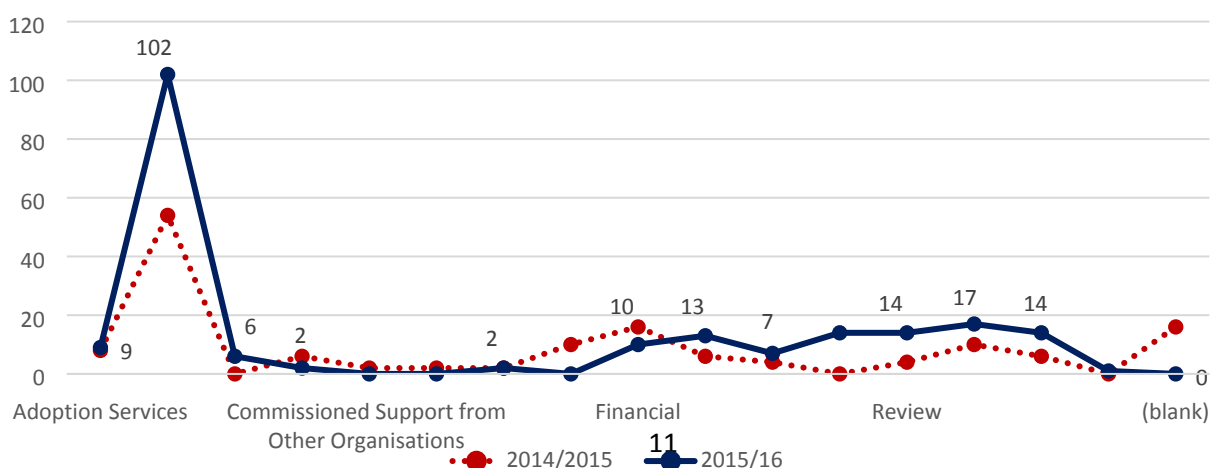
Graph 11**Graph 12**

Graph 12 shows complaints by final outcome for the last two years, split into complaint stage. Of the 211 Children's Social Care enquiries 121 had a final outcome recorded (the rest were still open at the year-end). Of these 42% were not upheld, (almost double the number of unjustified complaints than in 2014/15), 36% of the total complaints received were upheld (a similar proportion to the previous year) or partly upheld and 22% were signposted, resolved early or withdrawn. This demonstrates that in over one third of cases, complaints are justified and, equally, over another third are not.

3.3 What do people complain about in the statutory process?

Graph 13 shows a breakdown by service type for the last two financial years. The proportions are similar, with an increase in complaints in relation to assessments. They have gone up from 36% of all complaints in 2014/15 to 48% (102) in 2015/16. The total number of CYP assessments in 14/15 was 13407 which rose to 14278 in 15/16. Complaints as a proportion of these totals therefore increased from 0.4% to 0.7% with a just under double the number of complaints about assessment activity. These figures demonstrate the pressure the CYP social care service is currently under.

Complaints about financial issues in CYP social care have remained constant with 12 in 2014/15 and 10 in 2015/16. There has been an increase in the number of complaints in relation to the safeguarding process from 12 in 2014/15 to 17 in 2015/16.

Graph 13**Complaints By Service Type**

3.4 Learning for CYP social care services

Better recording throughout this year has enabled the service to capture more learning through complaints which have significantly increased since last year. Clear learning identified for all services is the need for better and more efficient communication skills between our districts and complainants as well as the need to review cases carefully where complaints are the subject of complex matters such as children with disabilities.

There is identified learning for the complaints team in terms of quality assurance and the need to provide a more hands on approach in offering the quality checking of responses that are being sent out to prevent escalation and ensure complaints are being responded to appropriately. Learning is particularly identified through stage 1, 2 and stage 3 complaints as detailed below:-

Stage 1 and 2 Complaints

- The need for better recording of assessments.
- Better and consistent communication between staff members and complainants.
- The need to quality assure complaint responses at all stages.
- Provision of an apology, where warranted.
- Provision of a supporting letter to claim benefits as originally requested by the complainant.
- The offer of re-assessment in relation to the EHCP.
- In one case it was agreed that any future review that a school organises should have a smaller number of participants.
- Ensuring that appropriate staff have a greater understanding of the way Asperger's Syndrome can negatively impact on communication with those living with the condition.
- Ensuring that appropriate staff have a greater understanding of the way Autistic Spectrum Disorders can affect family life and family members.

Stage 3 Complaints

- That a consultation/pre-assessment review is arranged in one case.
- A consideration of a referral to Adult Social Work Services.
- A review of the arrangements for contact.

A clear rationale regarding any disagreement with, divergence from, or departure from, the views of contracted services

3.5 Summary of non-statutory CYP complaints

Non statutory children's social care complaints are complaints made by a person who is not entitled to complain under the Children Act procedures or if the complaint is regarding something that cannot be complained about under that procedure.

CYP non stat complaints increased dramatically from 25 to 110 in 2015/16 mainly as a result of better recording and the introduction of new systems which have enabled the capture of more complaints.

72 complaints were regarding general children's social care services, in relation to:

- Quality/Reliability of service
- Actions of the social worker

- Lack of communication
- Decision to place child in Foster Care/for Adoption
- Unfair treatment by social work staff
- Actions to protect a vulnerable child

33 complaints were regarding the Adoption and Fostering service in relation to:

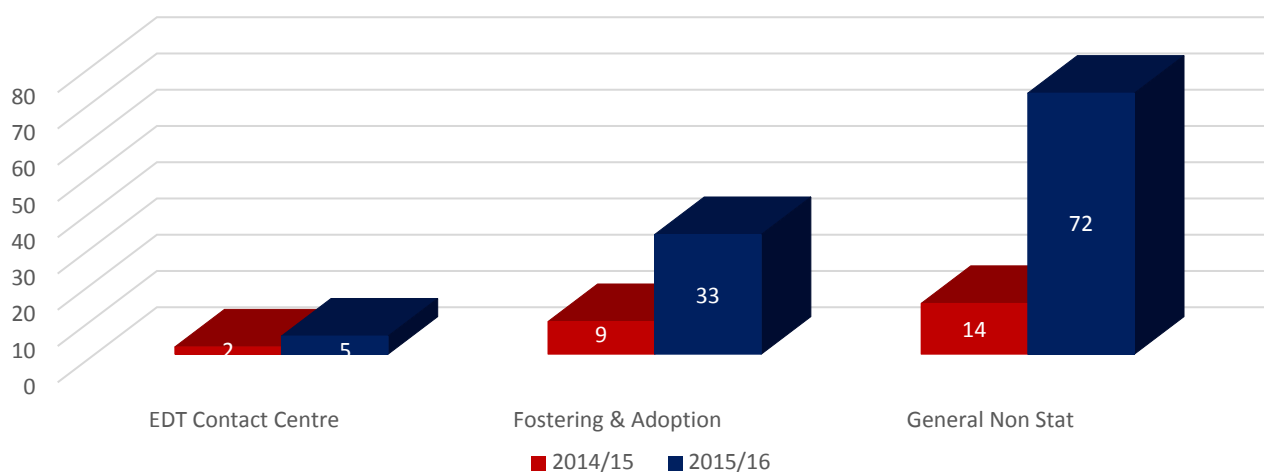
- Adoption allowance policy
- Decision to not approve potential adoptive carers
- Decision to not approve potential foster carers

5 complaints received were in relation to the actions of the emergency duty team/contact centre.

3.6 What are Non-Statutory Children's Complaints about?

Graph 14

Non Statutory Complaints



Graph 14 shows that 30% of non-stat complaints relate to fostering and adoption. There are also many other types of non-stat complaint, all relating to different CYP services and issues.

Identifying themes and learning from all children social care complaints – non statutory or statutory complaint intelligence is valuable. Senior managers are informed of the themes on a regular basis through regular attendance at team meetings or senior management meetings.

3.7 Services which were the subject of compliments and comments in 2015/16

Due to the nature of children's social care, there are fewer compliments received. A total of 9 statutory compliments were received for 2015/16, with the majority being about the assessment process. A further 23 non-statutory compliments were received during 2015/16. Nine comments were made and were passed onto the services concerned to take appropriate action.



Cabinet Committee on Performance Improvement

Meeting to be held on Monday, 5 December 2016

Report of the Director of Public Health and Wellbeing

Electoral Division affected: (All Divisions);
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Child Road Safety in Lancashire

Contact for further information:

Jackie Brindle, Tel: 01772 534616, Safe & Healthy Travel Manager,
jackie.brindle@lancashire.gov.uk

Executive Summary

This report provides an overview of children killed or seriously Injured (KSI) in Lancashire between 1st July 2011 and 30th June 2016 and the actions aimed at reducing child casualties in Lancashire and proposals for future improvement.

Recommendation

The Cabinet Committee on Performance Improvement is asked to note the actions being undertaken as set out in this report to reduce the child casualties on Lancashire roads.

Background and Advice

Lancashire has a high rate of children killed and seriously injured (KSI) in road traffic collisions. This report summarises the actions being undertaken to reduce the number of child KSI on Lancashire roads.

The behaviour most frequently contributing to child KSI collisions is a child stepping, running or cycling out suddenly into the carriageway. A significant proportion are accompanied by an adult family member at the time of the collision.

A new Towards Zero Lancashire Strategy has been developed to be adopted by all partners of the Lancashire Partnership for Road Safety.

Lancashire Partnership for Road Safety have appointed a Co-ordinator and Analyst to support evidence based, co-ordinated delivery of the Towards Zero Strategy.

As a member of the partnership Lancashire County Council (LCC) are deploying evidence based education, engagement, engineering and enforcement response to reduce child KSIs across Lancashire.

All current education interventions to reduce KSIs in children and young people are being evaluated and improved to ensure they remain effective in changing the behaviours resulting in collisions and are targeted in areas of high risk of accidents.

LCC will continue to improve engagement with parents and carers to provide road safety role models able to reinforce safe travel behaviours.

LCC are strengthening our engagement with partners, parents and communities, encouraging all to take responsibility for reducing collisions on Lancashire's roads.

1. National and Local Context

While there is a declining trend of child KSIs nationally, the number of children killed or seriously injured in Lancashire is showing an increasing trend.

Over the 5 calendar years 2011 to 2015, Lancashire had the 10th highest rate of Child KSIs per head of child population (of 204 Highway Authorities) for the 5 year period to December 2015.

Lancashire recorded a higher absolute number of Child KSIs than any other highway authority in Great Britain with 363 casualties during this period, with the highest number recorded in 2015 when 87 children were killed or seriously injured.

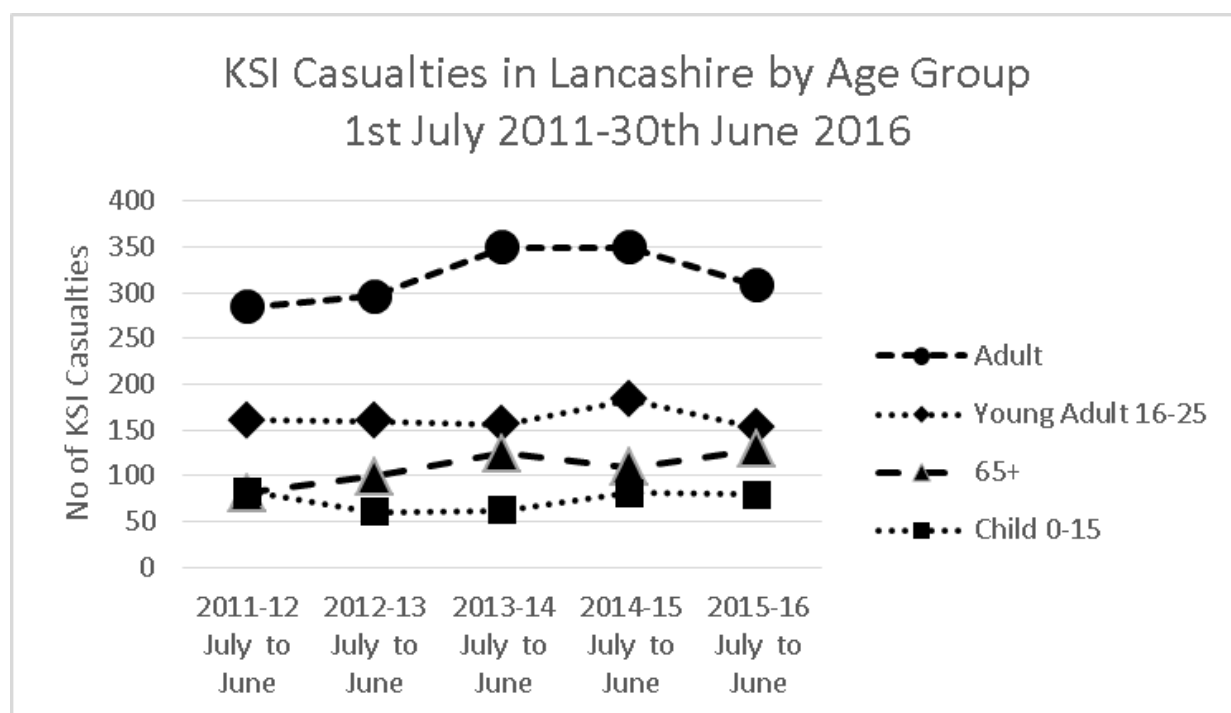


Figure 1. KSI Casualties in Lancashire by Age Group

1.1 Who are the Child KSI Casualties in Lancashire?

Figure 1 shows child casualties in the context of other age groups and the number of casualties recorded on a yearly basis from 1st July 2011. Child KSI casualties comprised 11.8% of all KSI casualties in the year to 30th June 2016. This is a similar proportion to the previous four years.

The trend shown by child KSI casualties broadly reflects that of the other age groups except for the Over 65s group which displays an increasing trend.

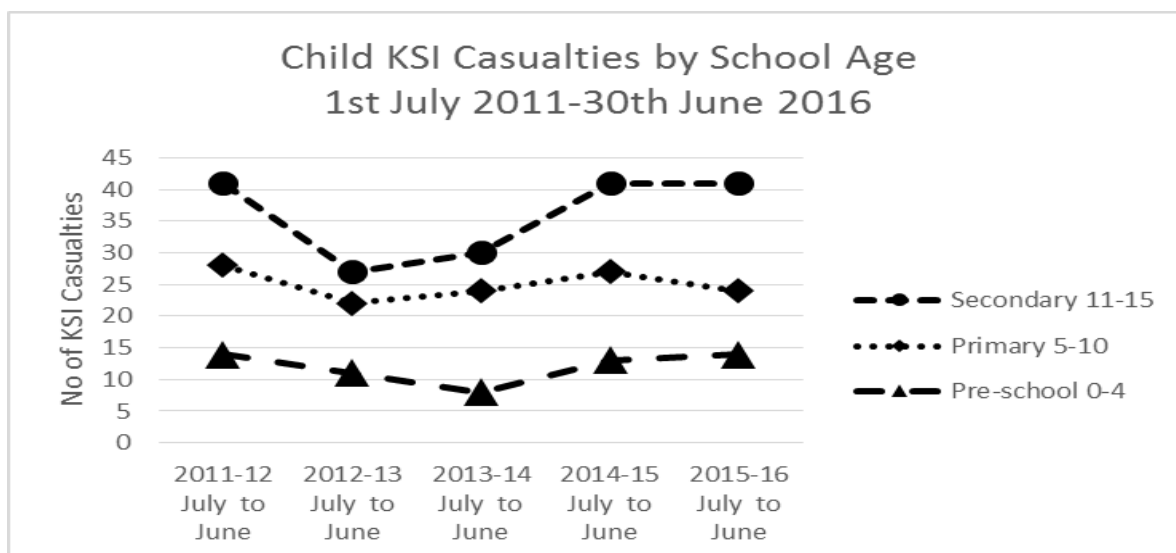


Figure 2. Child KSI Casualties by School Age Group

For the purposes of this report, the 0-15 year old child age group has been divided in to three sections which broadly represent the stages of school life. 0-4 covers pre-school children; 5-10 covers primary school children and 11-15 is equivalent to secondary school age.

Figure 2 shows that just over 50% of child KSI casualties fall within the age grouping 11-15.

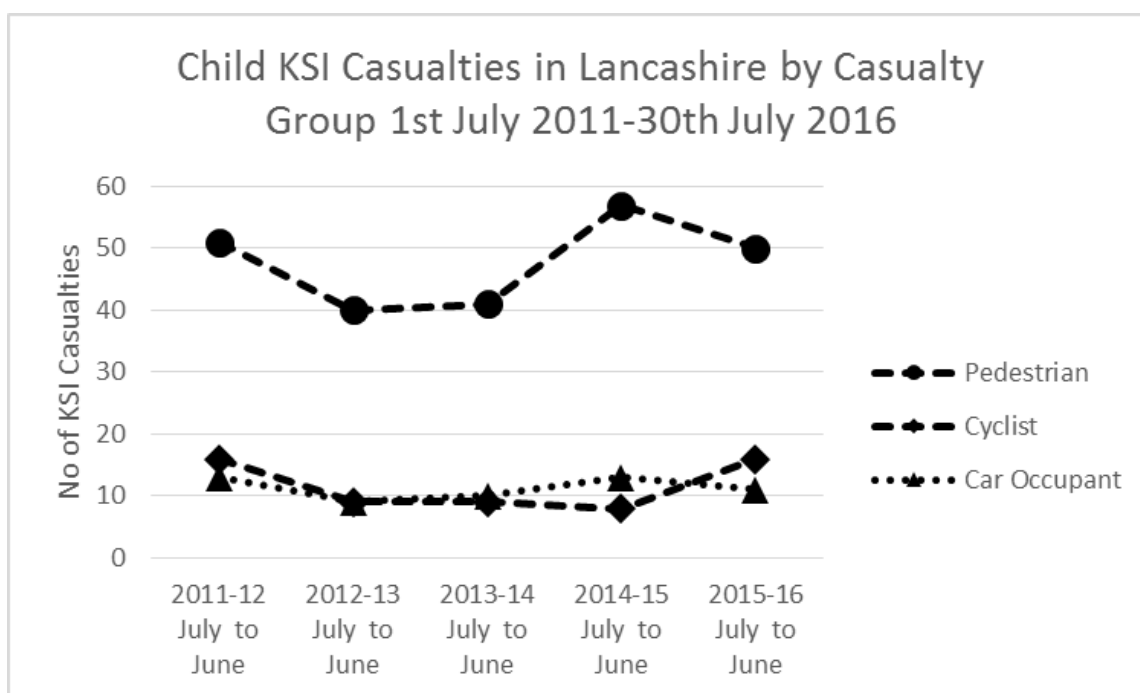


Figure 3. Child KSI Casualties by Casualty Group

Of the 79 child KSI casualties in the year to 30th June 2016 50 were pedestrian casualties, 16 were cyclist casualties and 11 were car occupants.

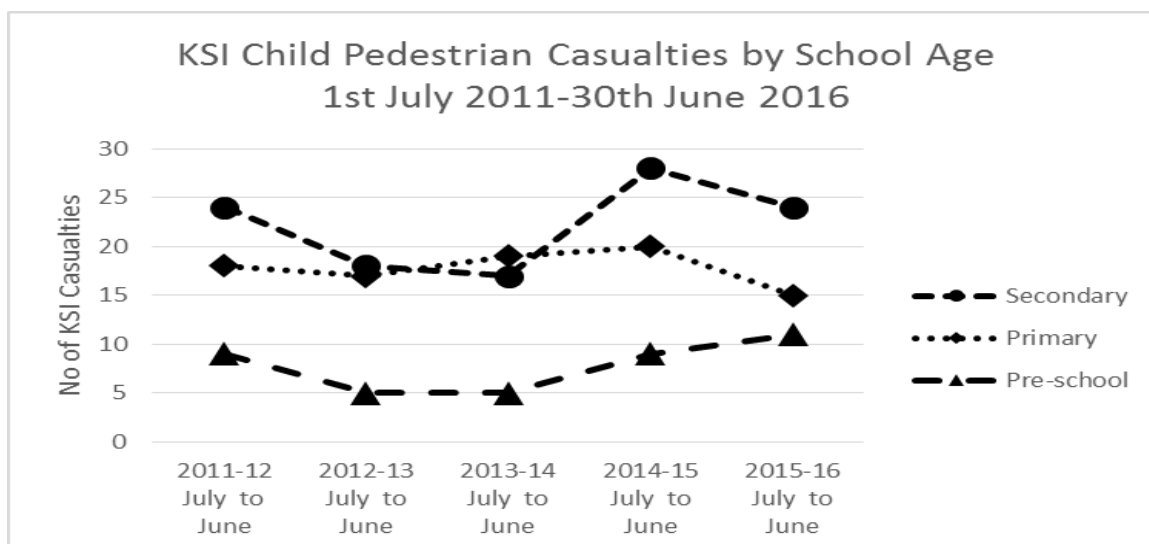


Figure 4. Child KSI Pedestrian Casualties by School Age Group

Investigations into the child KSI pedestrian casualties as the majority casualty group for children show that 48% of the casualties were aged 11-15 years and after a slight reduction year on year to 30th June 2016 they are at the same level as for 2011-12. Pedestrian KSI casualties for the 5-10 year old group have remained broadly constant between July 2011 and June 2016 although there has been a slight decrease during the most recent 12 month period. In the 0-4 year old group these casualties are at a similar level to 2011-12 but after a decreasing trend to 2013-14 there have been two years of increase albeit small increases in terms of absolute numbers.

Analysis of child KSIs by single year groups reveals a small spike in casualties at age 6, and a further more significant spike at ages 11 and 12 following transition to high school when many children begin travelling independently over greater distances.

1.2 Where are the Child KSI Casualties in Lancashire?

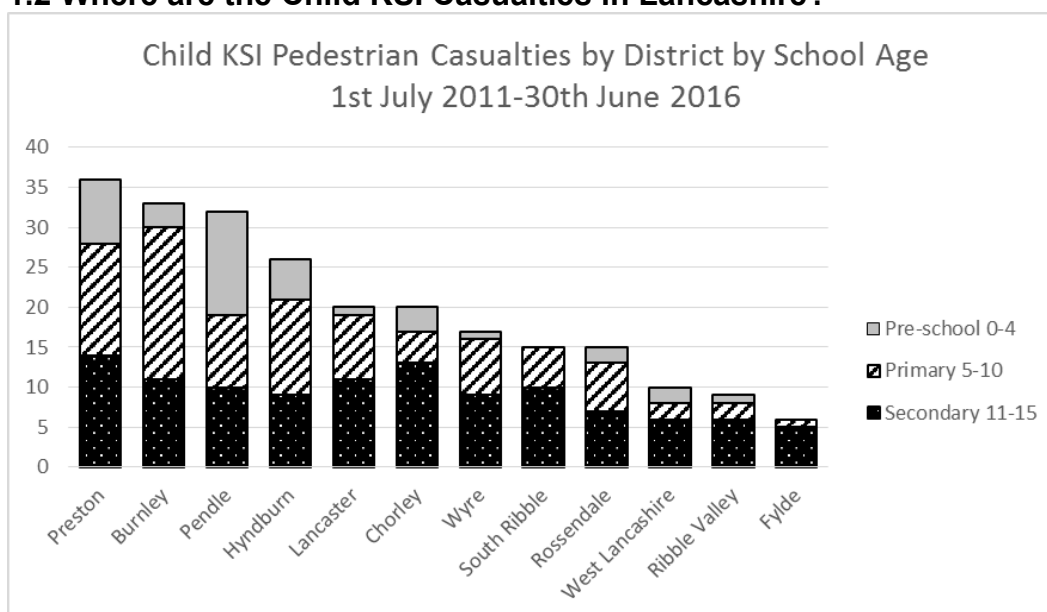


Figure 5. Child KSI Pedestrian Casualties by District by School Age

Figure 5 indicates that the higher numbers of child KSI pedestrian casualties tend to occur in the Districts with more areas of older housing stock i.e. terraced housing set out in grid iron patterns.

Generally across Lancashire, areas with the highest number of residents aged 0-15 and the highest density of housing, have the greatest number of child KSIs. Both numbers of child pedestrian KSIs, and the proportion of casualties in each age group vary widely across districts of Lancashire and individual wards within these districts.

1.3 When are Child KSI Casualties Occurring in Lancashire?

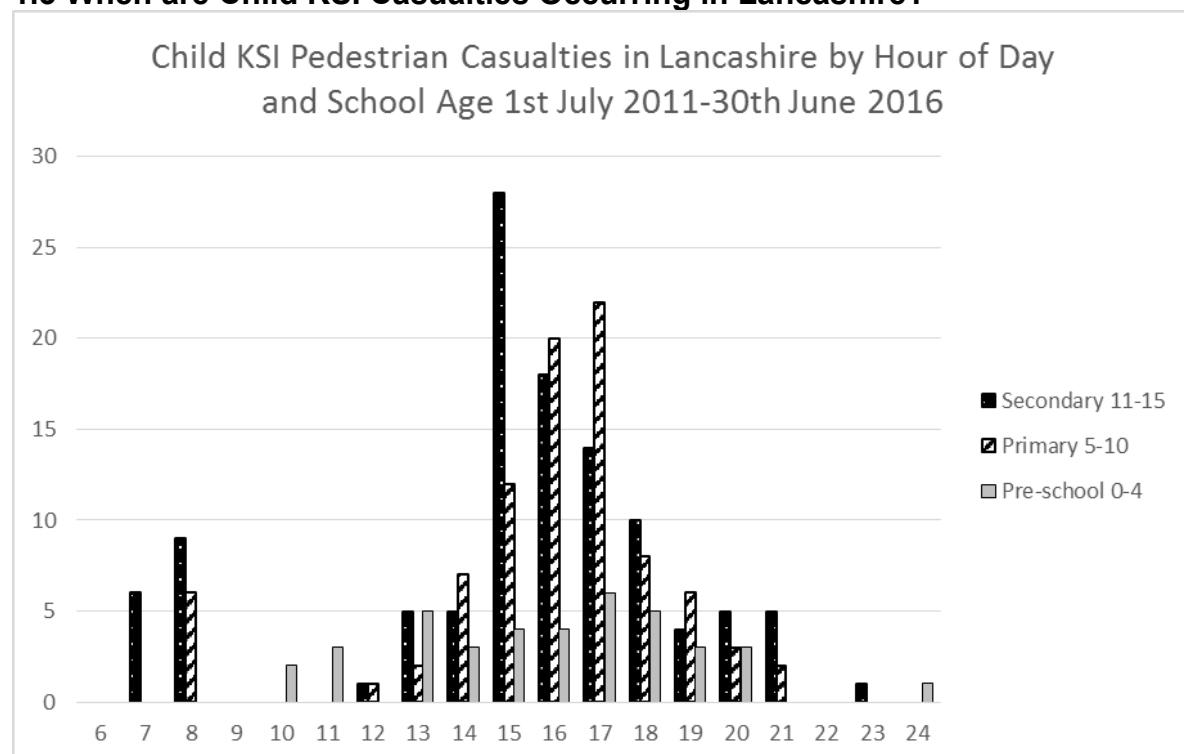


Figure 6. Child KSI Pedestrian Casualties by Hour of Day and School Age

In Figure 6 there is an indication that secondary aged child KSI pedestrian casualties peak in the hour immediately after schools close for the day, and younger aged casualties peak between 4pm and 6pm.

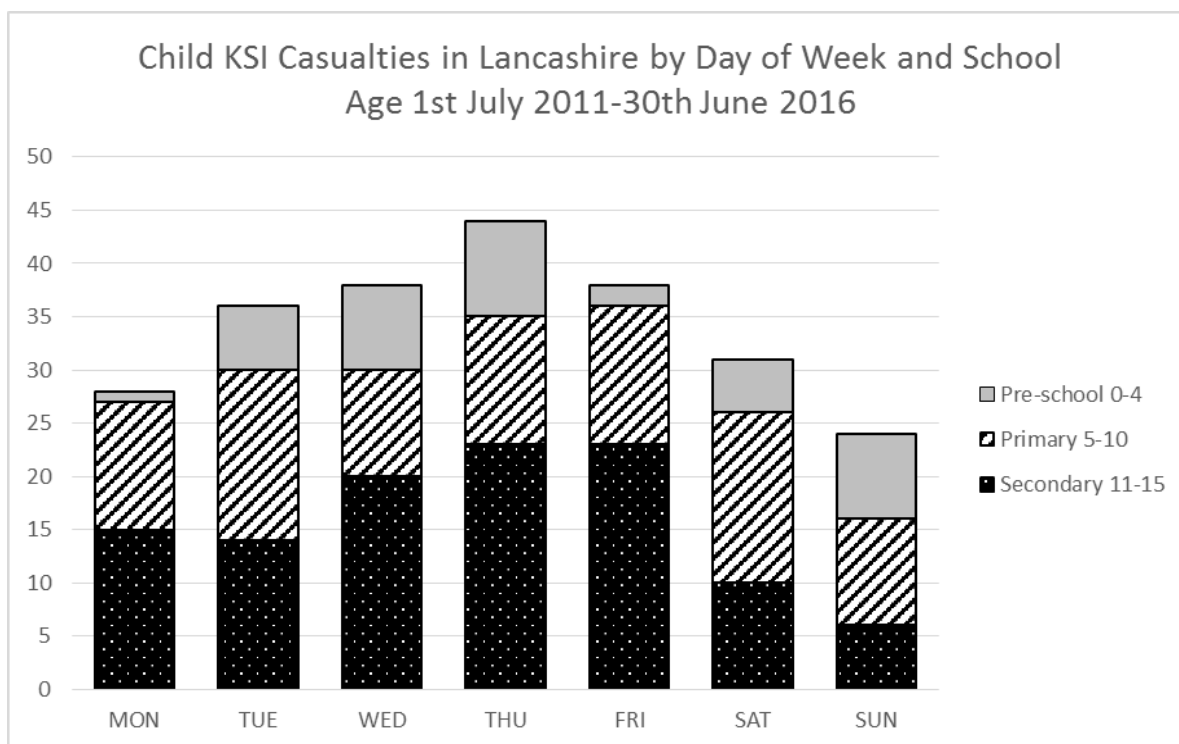


Figure 7. Child KSI Casualties by Day of week and School Age

Secondary aged child pedestrian KSI casualties peak towards Thursday and Friday and are generally lower at weekends. This might indicate that these casualties occur on the journey to and from school. Similar Primary aged casualties do not show much variation by day of week with Tuesday and Saturday having the highest number of casualties. Pre-school aged pedestrian KSI casualties appear to be spread evenly across the week.

1.4 Child KSIs within 20MPH Areas

20mph sign-only areas were introduced across the main residential areas of Lancashire between 2010 and 2014. At the present time we have casualty information of at least one year after implementation for 242 separate 20mph areas.

This is made up as follows:

Number of years for which there is casualty data available for after implementation	No of schemes
At least 1	3
At least 2	43
At least 3 years	196
Total number of schemes in this investigation	242

The individual schemes came into operation on differing dates. Taking three years casualty data before implementation for each scheme an average annual rate of casualties has been calculated for all schemes together as this is a countywide programme. The average annual rate for casualties in the period after implementation for all schemes combined has also been calculated and factored up for the schemes with less than 3 years information available.

The results are as follows:

Casualty Type (KSI = Killed or Seriously Injured) (Child = 0-15 years old)	Annual average casualty rate before implementation	Annual average casualty rate after implementation
Child – All severities	131.7	102.8
Child – KSI	24.3	23.3
Child Pedestrian – KSI	18.7	16.4
Child Cyclist – KSI	5.0	3.9

Emerging findings from further analysis include that from January 2014-December 2015 there were four pre-school aged child KSI casualties, 17 primary aged child KSI casualties and nine secondary aged child KSI casualties in 20mph areas.

1.5 Why are Child Casualties Occurring in Lancashire?

In order to investigate the factors contributing to the child pedestrian casualties the "*Nature of Accident*" field in the police collision records were read for all collisions involving a child pedestrian casualty between 1st January 2014 and 30th June 2016. This is the written description recorded by the reporting officer.

The reports indicate that in the overwhelming majority of cases the child running or stepping suddenly into the carriageway was the main contributing factor for the collision having occurred. There is an indication that the presence of parked or stationary vehicles was a significant factor in these collisions occurring. This was similar for casualties in 20mph speed limits and for those in other higher speed limits. In addition the following reasons were included in a number collision records:

- Children's behaviour at pedestrian crossings appears to be a factor in a number of collisions.
- Parents losing control of younger children whilst crossing the road is a factor in a number of collisions.
- There are a number of casualties which have resulted from children moving in groups.
- Distraction appears to be a contributing factor in a number of KSI collisions, child pedestrians being distracted immediately prior to a collision.

2. Lancashire Partnership for Road Safety

Membership of Lancashire Partnership for Road Safety (LPfRS) comprises Lancashire County Council, Blackpool and Blackburn with Darwen Councils, Lancashire Constabulary, Lancashire Fire & Rescue Service, Highways England and the Office of the Police & Crime Commissioner. The partnership has been reinvigorated by the LPfRS Executive Management Board over the past 12 months with the development of Towards Zero Lancashire: A Road Safety Strategy for Lancashire, and the appointment of a Partnership Co-ordinator and Analyst to support evidence based, co-ordinated delivery of the strategy.

2.1 Towards Zero Lancashire

Towards Zero Lancashire: Road Safety Strategy for Lancashire sets out our joint response to road safety and covers the two unitary and twelve district council areas in Lancashire. The overarching framework was agreed by the Road Safety Partnership Executive in September 2016. It builds upon our successes, strengthens our commitment and elevates our ambitions. The county council's road safety delivery plans are being reviewed against this framework.

The Strategy is built on the principles of the globally-recognised Safe System approach which recognises that we can never entirely eradicate road collisions because there will always be some degree of human error, but we should manage our infrastructure, vehicles and speeds to reduce crash energies to levels that can be tolerated by the human body. At the heart of the Safe System is the belief that no one should be killed or seriously injured as a result of using the road – 'vision zero'. It is our vision that 'people are safe and feel safe on Lancashire's roads' and we are committed to delivering the following four aims:

1. Reduce road traffic fatalities by user group and age
2. Reduce severity and numbers of road traffic injuries by user group and age
3. Improve outcomes for vulnerable road users
4. Improve and change road safety attitudes and behaviours

The partnership have agreed to focus on delivering four key priorities:

1. Coordinated and evidence based response to road safety
2. Enabling, engaging and educating individuals and communities to influence road user attitudes and behaviour
3. Intelligence led enforcement
4. Engineering for safety

3. Current Interventions to reduce Casualties of All Ages

- Safe & Healthy Travel Officers are working with Lancashire Partnership for Road Safety to develop service delivery proposals, and target resources, supporting the new Lancashire: Towards Zero Road Safety Strategy.
- Speed Management: Speed is a factor in many collisions in Lancashire. Working in partnership with Lancashire Constabulary all reports about inappropriate speed are investigated and locations are prioritised for mobile speed enforcement. Where enforcement is not prioritised the County Council works with communities to provide SpIDs (Speed Indicator Devices), Community and School Roadwatch and signs to encourage appropriate speed for the road in question.
- Media & Campaigns: Working with the Lancashire Partnership for Road Safety and LCC Corporate Communications, we aim to maximise opportunities to engage with residents of Lancashire through a range of local and social media, highlighting local issues and supporting national road safety campaigns.

- **Infrastructure Improvements:** We continue to improve the cycle network in Lancashire and identify and implement local safety schemes including pedestrian crossings and signage to protect vulnerable road users.
- **Enforcement:** Lancashire Constabulary enforcement activities address driving offences of all types, improving safety for all road users.

3.1 Current Interventions to reduce Child Casualties in Lancashire

- In districts reporting significant levels of child KSIs the Safe & Healthy Travel Team continue to pro-actively target and engage with schools to encourage participation in road safety education and activities to prevent child casualties.
- **School Crossing Patrols:** We currently have 335 active school crossing points in Lancashire, with 33 mobile relief and 19 casual relief patrols. We are actively recruiting to fill 20 vacancies.
- **Early Years (0-4):** Children's Centres, private nurseries and child minders across Lancashire have received an updated copy of the Little Safety Stars road safety toolkit, enabling partners and professionals to deliver in a structured format against (Early Years Foundation Stage) EYFS guidelines in an Early Years Setting.
- **In-Car Safety Champions** have been trained locally and targeted events delivered in districts with higher numbers of child car occupant casualties. During these events up to 70% of child car seats have been found to be inappropriate or incorrectly fitted.
- **Right Start pedestrian training for Key Stage 1 children:** delivered by trained volunteers to 19,501 pupils in 2015/16, we continue to deliver this practical education package during the current academic year to primary schools across Lancashire, in addition to providing resources to encourage walking and other forms of active travel to school.
- **Bikeability Cycle Training:** We have been successful in obtaining over £1m from the Department for Transport in funding, enabling us to co-ordinate the delivery of Bikeability across Lancashire to April 2020. This practical training is delivered to children in Year 6 prior to transition to high school, when we see the risks to both pedestrians and cyclists increase as they begin to travel independently over greater distances. Around 10,000 children now take part in Bikeability training each year in Lancashire.
- A new Key Stage 2 classroom workbook has been developed to help children learn more about road and cycling safety prior to taking part in Bikeability training. This has been distributed to schools across Lancashire and is also now available on-line.
- **Scooting:** In response to the increasing popularity of scooting among young children, and in anticipation of a possible rise in associated casualties, a Scoot

Safe training package has been developed. The package consists of multiple videos enabling schools to deliver practical training sessions and all necessary documentation to support the planning and safe effective delivery of the training.

- Parking A-Boards are being provided to schools across Lancashire to support schools with illegal and inappropriate parking. To date 308 schools have been provided with A Boards, and a further 47 are due to receive them in coming weeks. A recent evaluation has shown that schools are reporting a 50% improvement in their parking issues since using A-Boards. To support schools with the use of the A-Boards online resources have been created. The website is available to view at: www.saferschools.lancsngfl.ac.uk
- A legacy of the Local Sustainable Transport Fund East funding from 2015/2016 has seen the sustainable delivery of the Tots on Tyres initiative delivered by School Sports Partnerships in Hyndburn and Burnley. A pool of balance bikes were supplied with the funding along with an online training package to enable Tots on Tyres delivery. This initiative is continuing to be delivered and a further 32 schools are due to receive training this academic year.
- The Safer Schools Moodle, an interactive on-line learning platform, has recently undergone further development, and contains a wealth of resources to encourage safe/active travel to school including films, lesson plans, activities and practical training instructions. All schools can access this resource by going to www.saferschools.lancsngfl.ac.uk and logging in using their LCC school number and the allocated password (safertravel).
- Within the Safe & Healthy Travel Team we have two Police Community Support Officers (PCSOs) who work with partners to reduce crime and antisocial behaviour and improve safety on the bus network. In addition to direct interventions with individual pupils, the PCSOs have organised transition events at Longridge High School and Broughton High School in conjunction with bus operators to deliver key bus safety messages to Year 7 pupils during the autumn.
- We continue to deliver the Wasted Lives programme across Lancashire in partnership with the Fire & Rescue Service. These interactive classroom sessions educate young people in high schools to reduce risks associated with young drivers and passengers. During the academic year 2015/16, 12, 000 participants aged 15-24 received Wasted Lives education.
- Lancashire Fire and Rescue Service now deliver Child Safe Plus to Primary School children across Lancashire, Blackpool and Blackburn with Darwen in Year 6, before transition to high school when we know that children experience a significant increase in exposure to road risk. Child Safe Plus is an interactive road safety education intervention which focuses on pedestrian, cyclist and car occupant safety.

3.2 Future Plans to reduce Child KSIs

In addition to the existing initiatives, we are undertaking the following actions to develop our future plans to reduce child KSIs:

- Working with partners and the Lancashire Partnership for Road Safety Analyst to improve the quality of data available, and conduct more detailed analysis. This will include the profiling of high risk demographic groups and behaviours among road users of all ages, travelling by all modes of transport.
- Further in depth analysis to profile the circumstances of child casualties and those involved in collisions resulting in child casualties, to better target interventions.
- In addition to further studies of residential areas with significantly high rates of child casualties, we will also study factors contributing to very low rates of casualties within other areas to promote the protective factors found in these areas.
- An in depth performance analysis to ensure we are deploying the education, engagement, engineering and enforcement response to match areas with higher child KSIs.
- We are identifying other authorities nationwide that have been successful in reducing child KSIs over the past three years.
- Research and implement proven best practice in reducing child casualties, and where new interventions are needed we will seek a consortium approach to development with comparable local authorities.
- Further refine targeted delivery of interventions to focus on those areas of Lancashire, and those age groups with the highest rates and greatest absolute numbers of child KSIs.
- All current education interventions to reduce child KSIs will be evaluated to ensure they are effective in changing the behaviours resulting in collisions.
- A proactive approach to media engagement, recognising problems, showcasing achievements in local communities and raising awareness of road safety issues among the residents of Lancashire.
- Work with Lancashire Highways officers to more closely link education and engagement activities with the provision of road safety infrastructure.
- A suite of e-learning modules is currently under development to engage with the working age population through employers. The e-learning aims to equip

participants to change behaviours frequently contributing to road casualties in Lancashire, such as failing to look properly, driving at inappropriate speed and driving under the influence of drink and/or drugs.

- Improve the use of social media to target specific behaviours resulting in road casualties through a new Lancashire Partnership for Road Safety social media platform.
- A review of all Early Years (ages 0-5) road safety interventions currently in use by partners across Lancashire. We will continue to build on a start well approach to establish lifelong safe road user behaviours.
- Work with partners within Lancashire Partnership for Road Safety to improve child pedestrian training and education from early years through into high school. Safety when playing out near home will be included for younger children, further education will be provided on the dangers of distraction to high school pupils and information on the safe use of pedestrian crossings will be included for all ages.
- Improve parental engagement with assistance from schools, children's centres and healthcare providers. The intention is to better equip parents, carers and child minders to be positive road safety & active travel role models. Safe travel training needs constant reinforcement outside school to ensure risks are reduced. Provision of guidance on safe playing out in residential areas and controlling children near the highway will also be considered.
- Engage directly with high schools to deliver road safety education in areas with a high rate of casualties among ages 11-15.
- While the Safer Schools Moodle has a wealth of excellent road safety education resources and activities for use within schools and communities, the platform relies on self-service for delivery and we have some concerns regarding levels of usage. We will conduct a user consultation to examine how promotion, access pathways and take up of resources can be improved.
- Development of a Community Toolkit and associated campaign will encourage all residents to take responsibility for looking after themselves and each other on the road network.
- We are currently engaging with residents aged 50+ in Lancashire, to develop the Travel4Life programme, the original aim of which has been to reduce older road user casualties. As residents aged 50+ are often carers of young children and/or in a position to influence extended family, we will further develop Travel4Life to include guidance on how to help prevent casualties of all ages.
- The Lancashire Partnership for Road Safety will improve access to information regarding casualties by publishing a pan Lancashire overview, and sufficient detail to enable partners and communities to understand the incidence, locations, types and causes of collisions at a local level.

Consultations

N/A

Implications:

It is anticipated that the current interventions and the future plans will reduce the number of KSIs in Lancashire.

No additional funding required. Actions to be funded from existing Lancashire County Council service budgets, with contributions from partners and Lancashire Partnership for Road Safety where appropriate.

Risk management

N/A

List of Background Papers

Paper	Date	Contact/Tel
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NA

Reason for inclusion in Part II, if appropriate

N/A

Cabinet Committee on Performance Improvement

Meeting to be held on Monday, 5 December 2016

Report of the Head of Legal & Democratic Services

Electoral Division affected:
(All Divisions);

Risk and Opportunity Register Quarter 3

(Appendix 'A' refers)

Contact for further information:

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Executive Summary

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

Recommendation

The Committee are asked to note the updated Risk and Opportunity Register at Appendix A.

Background and Advice

Following the corporate approach to reporting on risk and opportunity the quarter 3 Risk and Opportunity register was recently reported to Management Team. Following this the reports are presented to the Cabinet Committee on Performance Improvement (CCPI) and then to the next Audit and Governance Committee in January 2017. An updated Risk and Opportunity Register is attached at Appendix A and the Committee is asked to comment upon it.

The key highlights in the register include:

- for this quarter there are no additions or deletions to the register;
- allowing for mitigating actions, the residual risk score for the following entries remain 12 or above so the issue remains on the register:

Risk Identification Number (RIN)	Risk Description
CR1	Failure to implement the county council's MTFS. Further mitigating actions added but residual risk score remains unchanged.

CR2	Risk to the on-going financial viability of the county council. Further mitigating actions added but residual risk score remains unchanged.
CR4	Delivering Organisational Transformation. Further mitigating actions added but residual risk score remains unchanged.
CR5	Inability to adequately protect and safeguard children. Further mitigating actions added. Direction of travel updated.
CR6	Failure to comply with statutory requirements and duties relating to CLA, children in need and children leaving care. No change.
CR7	Failure to recruit and retain experienced staff within Children's services. Further mitigating actions added and direction of travel updated.
CR8	Reputational damage and risk of direct intervention by DFE. Direction of travel updated.
CR12	Inability to implement/maintain systems that produce effective management information. Further mitigating actions added but residual score remains the same.
CR15	Delivering new waste management arrangements – direction of travel updated.
CR16	Management of the County Council's assets. Further mitigating actions added but residual score remains the same.
CR20	Transforming care (Winterbourne). Residual score remains at 12.
CR21	Service user/customer risk associated with the inability to influence behaviour change in demand and expectations continue to rise. Residual score remains at 12.
CR24	Failure to achieve targets with National Troubled Families Unit. No change.
CR25	Failure to implement and meet the statutory requirement to children and young people with special educational needs and/or disabilities.
CR26	Proposed museums closures. Further mitigating actions added but residual score remains the same.
CO1	Developing a new model for public service delivery in Lancashire. Further maximising actions added.
CO2	Delivering economic growth. Further maximising actions added.

CO3	Opportunities through delivering the corporate strategy and property strategy. No change.
CO4	Health & Social Care Integration. Further maximising actions added.

Implications:

This item has the following implications, as indicated:

Risk Management

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

List of Background Papers

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

Appendix A: Corporate Risk & Opportunity Register Q3 2016/17

Risk Identification Number (RIN)	Risk Description	Risk Type	Possible Consequences	Current Controls	Risk Score	Mitigating Actions	Residual Score	Risk Owner	Direction of Travel
CR1	Failure to implement fully the councils medium term financial strategy including the delivery of planned budget reductions	Economic	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.	<ul style="list-style-type: none"> Monthly budget monitoring processes for Heads of Service and Directors with particular focus on agreed savings delivery. Ensure key programmes of activity (particularly linked to savings / downsizing) are adequately resourced. Quarterly Money Matters budget monitoring reports, MTFS, reserves and Treasury Management reports presented to members (includes capital). Management Team actions to monitor key areas of expenditure and consider remedial courses of action to address budgetary pressures. Robust Medium Term Financial Strategy and Plan, updated to reflect variations to resource and demand assumptions. Reserves regularly monitored and reviewed. Resources allocated to Base Budget Review. Rebalance budget savings via an ongoing risk assessment. 	25	<ul style="list-style-type: none"> Recommendations from Zero Based Budget Review to be considered by members at Cabinet meeting December 2016 as part of Money matters report. This will also be considered by Budget Scrutiny Working Group Improve commercial and financial acumen. Continuously revalidate budget assumptions. Develop a future public service model for Lancashire in conjunction with partners – stakeholder engagement plan in place - briefings have been delivered by PWC. Outline proposals for council's new delivery model have been presented to the Political Governance Working Group. Report to Cabinet in January 2017. Development of response to the Treasury and DCLG regarding the implementation of business rate retention and future needs assessment/allocation formula. Communicating with stakeholders to ensure an understanding of the councils financial position and need for change Communicating specific proposals and service developments in the context of the financial scenario Programme Office supporting services to deliver savings and bring forward savings wherever possible 	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 issues 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.	<ul style="list-style-type: none"> 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 style="list-style-type: none"> Zero Based Review activity (focus on lower quartile) will determine the scope for additional savings in all remaining services within the County Council (ongoing). Links to Combined Authority work including Healthier Lancashire programme with the NHS as to any opportunities / additional pressures (ongoing). Lobbying – Treasury and DCLG by utilising ongoing existing networks MP's / Members, LGA, CCN, SCT (ongoing) – met with DCLG in July outlining financial position and outlook. Also explained PWC work and will meet again when this is available. Report on the Councils future delivery model will be reported to Cabinet in December 16. Development of response to the Treasury and DCLG of future needs assessment/allocation formula. 	25	MT	Level

						<ul style="list-style-type: none"> Communicating with stakeholders to ensure an understanding of the councils financial position and need for change Communicating specific proposals and service developments in the context of the financial scenario 			
CR4	Delivering organisational transformation including capacity and resilience	Organisational	<p>The failure to clearly implement the draft 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.</p> <p>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.</p>	<ul style="list-style-type: none"> The draft corporate strategy has now been amended to reflect the consultation outcomes and has been to full council. The draft corporate strategy is being used to inform the development of the property review and proposed neighbourhood plans. 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. 	16	<ul style="list-style-type: none"> The draft corporate strategy has been amended to reflect the consultation outcomes and subject to amendment approved by full council. This process is on-going. Interim structures to reflect the base budget review options are being developed and implemented. Property strategy and accommodation review being progressed and approach to neighbourhood plan being developed. Independent challenge See specific actions in relation to other risk entries i.e. Ofsted inspection Use of transformation reserves to fund temporary staffing Property review – preparatory work on planned premises closures Implementation of recruitment and retention strategies Defining new service models across the organisation Adults service transformation – recruitment of temporary staff Children's service transformation – pilot programme in Fylde & Wyre Children's services transformation – implementation of the framework contract and appointment of temporary staff Extensive information is made available through the councils website which is also used by the customer service centre as a core council information resource Promoting recognition and benefits of working at the council 	12	MT	Level
CR5	Failure to adequately protect and safeguard children	Social	Children are put at risk of harm.	<ul style="list-style-type: none"> MASH hub. Serious incident reporting. Quarterly safeguarding report, to include LSCB. SCR learning shared. Case file audits. Multi-agency inspections. Supervision with HOS. Performance Data 	25	<ul style="list-style-type: none"> Post Improvement Inspection Board with Independent Chair appointed. LSCB membership of Improvement Board and acting as critical friend. Post Inspection Improvement Plan. Review of all CiN cases using internal and external capacity. Social Work Recruitment Strategy. Peer Challenge. Newton Europe review of pathways. Established new QA system - developed risk sensible model develop CIN teams. LSCB have established new QA system including multi-agency case file audits. Monthly compliance recording of Strategy Meetings. 	16	Director of Children's Services	SW recruitment has improved. Senior managers are now working in districts. Independent Board Chair appointed. CSC remodelling including new CIN Hubs and PPA teams. 2 qualified social workers now working in

						<ul style="list-style-type: none"> Strengthen quality assurance role of Independent Reviewing Officers. Management Team approval of 15 additional IRO posts and 3.5 additional Quality and Review Manager posts post inspection. IRO completion of mid-point checks on case files. Prepared for and supported Ofsted inspection of children in need and child protection cases that took place early September Serious case review rota in place Lancashire Safeguarding Children's Board to review the referral process Completed diagnostic of MASH & Contact & Contact and Referral assessment Centre New Director of Children's Services appointed Ofsted quarterly monitoring visit scheduled for 11th January 2017 Peer review/challenge scheduled for New Year 			Customer Access Service to ensure appropriate referrals to CSC and timely response to S47 enquiries. Recruited to additional CSE posts to improve identification, assessment and intervention
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.	<ul style="list-style-type: none"> Corporate legal oversight. Quarterly safeguarding report. Serious incident reporting. Serious case review learning. Peer review and challenge. Stronger management oversight in Districts. 	25	<ul style="list-style-type: none"> Monthly compliance recording of Strategy Meetings and S47 Enquiries. LSCB have established new QA system including multi-agency case file audits. Back to basics SW practice training. Locality Practice Improvement Meetings. Develop PPA Teams. 	16	Director of Children's Services	Compliance reporting shows multi-agency Strategy Meetings are taking place in the majority of cases.
CR7	<p>Failure to recruit and retain experienced Social Work staff</p> <p>Failure to recruit and retain Independent Reviewing Officers.</p> <p>Failure to recruit and retain experienced BSO staff.</p>	Organisatio nal	Inability to deliver effective services. High caseloads. Lack of management oversight. Increased staff turnover. Increased agency spend.	<ul style="list-style-type: none"> Vacancy monitoring. Recruitment strategy. Quarterly safeguarding report. Reliance on agency staff risk of high staff turnover and inconsistency of practice. CYP experience frequent changes of IRO. Lack of consistent IRO oversight of Care Plans and CP plans. Impact on the budget - cost of agency staff. Insufficient BSO support resulting in increased administrative tasks for managers and practitioners. 	25	<ul style="list-style-type: none"> Additional funding envelope. Enhanced recruiting – vacancies being filled with a high proportion of newly qualified staff. Newton Europe pathway review. Increased focus on retention. External agency contract to look at CIN cases and work following MASH Increased focus on staff retention 	16	Director of Children's Services	Improving Social Work recruitment is now at the levels within the original funding envelope prior to the £5M and recruitment is continuing
CR8	<p>Reputational damage and risk of Direct Intervention by DFE.</p> <p>Negative media exposure.</p>	Reputation al	<p>DFE manages services directly and removes them from the LA. Commission arrangements brought in.</p> <p>Loss of reputation. Impact on partner agencies.</p>	<ul style="list-style-type: none"> Safeguarding and Audit arrangements. Direct management oversight of services. Media planning around key issues and Serious Case Reviews. Scrutiny of key reports and information. Communication with Comms Team. 	25	<ul style="list-style-type: none"> Post Improvement Inspection Board with Independent Chair appointed. Post Inspection Improvement Plan. Senior management input into each of the 3 Children Social Care Districts. Review of all CiN cases using internal and external capacity. Social Work Recruitment Strategy. Peer Challenge. Newton Europe review of pathways. The council has been issued with an Improvement Notice by DFE which is the lowest level of implementation. 	16	Director of Children's Services	Increased IRO capacity (now fully staffed) and Improved systems in place to quality assure practice.

						<ul style="list-style-type: none"> Communication planning surrounding publication of Serious Case Reviews. Two way communication between LSCB and partner agencies. Additional IRO and Advanced Practitioner posts 			
CR12	<p>Failure to implement/maintain systems that produce effective management information</p> <p>Failure to improve quality of data in Liquid Logic's systems (LCS/LAS)</p> <p>Operational failure in the main IT Computer Suite (T101)</p>	Organisational	<p>Ineffective collection, collation and input of data</p> <p>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</p> <p>Ineffective reporting arrangements.</p> <p>Statutory returns will be compromised, so incorrect performance will be reported nationally. OFSTED/CQC/LGA and other external organisations will be using inaccurate information to judge performance. Service planning and management will be severely compromised.</p> <p>Reliance on uninterrupted operation of T101 cannot be over emphasised. Power up following an uncontrolled failure takes 5 times longer than after a controlled shutdown. Impact on service delivery</p>	<ul style="list-style-type: none"> Information management strategy. Data Quality processes. Oracle. Local Information Systems. Corporate performance information. JSNA and other needs assessments Weekly provision of information to operational managers. Monthly Performance Books or dashboards provided to Start Well Management Team and Adults Leadership Team. Use of exception reports to flag up data quality issues. Over £200k has been invested to improve the back-up services for T101 to improve reliability. However, there are still potential risks regarding A/C cooling, maintenance of UPS units and insurance requirements regarding fire alarm links 	15	<ul style="list-style-type: none"> External support to focus on Children's Services data issues. Introduction of new governance arrangements for children's services. Introduce a new performance management framework that is aligned to draft corporate strategy. Agree performance, financial data and intelligence required for all levels within the County Council. Agree milestones and metrics. Project Accuracy being supported by Newton Europe, SRO and close involvement of Business Intelligence. Developing improvement plan that includes culture and assurance. The plan will include systems such as Controcc and LAS Performance sub-group reporting the Improvement Board Chair Additional temporary resource employed within Business Intelligence to provide reports for Project Accuracy 2. Multimillion pound refurbishment programme including upgrading the electrical infrastructure of county hall complex - to improve the reliability of the IT Suite. Joint working of Children's Services, Business Intelligence, System Control Team and Programme Office to establish an Accuracy Working Group (relating to Children's services). 'Passport to Independence' reporting work stream incorporating exception reporting. 'P2P' project (led by System Control Team) focussing on procedures and data quality. 	12	MT	Level
CR15	<p>Delivering new waste management arrangements</p> <p>Delivery of BOP 046 and GRLOL Transformation</p>	Economic Environmental Reputational Legal	Excessive transitional costs. Excessive operating cost. Operational hazards and liabilities. Health and Safety issues. Permit non-compliance. Increased landfill/reduced recycling. Public disillusionment	<ul style="list-style-type: none"> LCC strategic leadership of waste company. LCC HR, Legal and Financial support. Programme office monitoring of savings targets. Regular liaison with Environment Agency. Cabinet Member briefing. Union consultation. Regular liaison with WCAs and Blackpool Council. 	16	<ul style="list-style-type: none"> Approval of GRLOL structure by Board and Employment Committee. Staff consultation and notice of redundancy. Review and reconsideration of operating proposals. Submission of permit modification Review calculation of waste budget with finance. Development of detailed company operating and 	12	Head of Waste Management	Downwards. Risk from key transformation processes significantly reduced. Operational risks will reduce

	Delivery within 16-17 budget		<p>regarding recycling services. Impacts on WCAs and LWP. Employee and Union claims. Impacts</p> <p>Potential for budget overspend based due to following attributing factors: Initial calculation of waste budget (and MTFS); Increased and uncertain in year company operating costs; One off and uncertain company transitional costs; uncertainty with regards to delivery of operational changes (i.e. odour management systems, insurances)</p>	<p>Communications strategies</p> <ul style="list-style-type: none">Regular budget monitoring and forecasting exercises. Monthly monitoring meetings. Direct financial support to waste service. Dedicated liaison with waste company.		<p>transition costs. Capitalisation where possible of transitional costs. Potential to reduce operational cost over and above GRLOL model. Potential delivery of additional one-off savings</p> <ul style="list-style-type: none">Potential for increased diversion from landfill at reduced costs			<p>once operational changes established. Elements of risk will reduce further as each stage of transformation is completed. Upward. Clear potential exists to reduce various budget costs but realisation of these cannot be assumed to be guaranteed at this stage. Current monitoring identifying potential overspend</p>
CR16	Management of the County Councils Assets	Organisatio nal	<p>Failure to maintain council owned assets and buildings.</p> <p>Inability to deliver in the timescale required and impact on organisational ability to achieve savings</p> <p>Failure to timely deliver a smaller more affordable property portfolio and associated savings. Inability to deliver service plans and savings effectively within required timescales, risks to service delivery across a number of services. Due to the high profile of Property Strategy (Neighbourhood Centres) delayed delivery could have reputational effect. Legal or public challenges.</p>	<ul style="list-style-type: none">Effective planning and programming method of delivery. Management of organisational transition and effective engagement with operational servicesManage 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.Delivery of Property Portfolio Rationalisation Programme (PPRP) is being managed by the programme board. Asset Management Service are working to specific timescales for the public consultation and delivery of recommendations to Cabinet. Office rationalisation is ongoing and is being managed by the PPRP team as a whole. Risks for each part of the project are registered and	16	<ul style="list-style-type: none">Asset Management Strategy and accommodation reviewEstablishment of a Premises Compliance TeamShort-medium term facilities management strategy defined to deliver the spike in resource demand during the organisational transition periodProperty Strategy - Ongoing work to develop initial recommendations and to undertake public consultation continues. Multi-service working ensures the relevant professional input, including communications. Following Cabinet approval delivery of Neighbourhood Centres will be undertaken by the wider PPRP team.Communicating with stakeholders to ensure an understanding of the councils financial position and need for changeCommunicating specific proposals and service developments in the context of the financial scenarioLibraries – public consultation has taken place to help inform service design and future strategy. The service is liaising closely with asset management, commissioning and estates services to ensure that the process of handover to community organisations who wish to provide an independent community library is as smooth as possible.Asset management strategy and implementation of the Property Strategy.	12	Head of Asset Management/ Head of facilities Management	Stable – risks are significant but currently managed

				<p>reviewed by the PPRP team and Board on a regular basis, reporting to Management Team separately.</p> <ul style="list-style-type: none"> Communications strategy for property strategy 		<ul style="list-style-type: none"> Cabinet approval sets out the portfolio of buildings to be retained as Neighbourhood Centres. Ongoing work to develop design briefs for retained buildings requiring works and enable community asset transfer of surplus buildings where appropriate. 			
CR20	Transforming Care (Winterbourne)- the accelerated discharge of the population of adults with a Learning Disability from secure hospital in-patient beds into community houses	Economic/ Political/Social	<p>Increased pressure on the adult social care budget. Resettlement from hospital to community health and social care packages shifts the funding responsibility from solely NHS to a shared responsibility between CCG's and LA's to fund these high cost intensive health and social care packages. LCC may not be able to afford these new packages of care in the current financial climate. There is a National Plan to facilitate discharge therefore there is a reputational and political risk in not achieving as Lancashire is identified as a National Fast Track programme for this work due to the high number of Lancashire residents currently in in-patients LD hospitals. The closure of Calderstones hospital is part of this national plan. Failure to agree locally a reasonable figure for a dowry that is planned to follow a person from hospital (NHS) to LA's is a further financial risk.</p>	<p>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 work streams each with a defined action plan with leads identified from commissioners across Lancs. Work streams 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.</p>	16	<ul style="list-style-type: none"> Improved engagement with procurement colleagues to ensure due process is followed operationally in meeting the needs of this population. Lancashire's Fast track plan identifies the implementation of a revised model of care for people with LD improving crisis support through multi-disciplinary teams. This approach is aimed at reducing admissions and supporting providers to maintain a person's tenure in their chosen house rather than re-enter hospital. The plan commits to securing improved and alternate care and housing solutions for this population with the aim of creating shared tenancies with back ground support, rather than the current single tenancy model currently used, which will be more cost effective. There are plans to stimulate the provider market to inform innovative solutions to providing for these peoples care STP budget considerations Currently the financial risk has been negotiated with the CCG and immediate pressures have been offset whilst negotiations around the pooled budget take place. 	12	Director of Adult Services	<p>↑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 and the decision taken by Management Team re funding discharges and the decision taken by Management Team regarding funding discharges)</p>
CR21	Service user/Customer risk associated with the inability to influence demand whilst expectations continue to rise	Reputation al/social/economic/political	<p>Demand and expectations continue to rise against a backdrop of reduced resources, thus leading to service failure and an increase in complaints. Failure to integrate health and social care to reduce pressures on demand and expectations as a result of ageing population. Unacceptable waiting</p>	<p>Consultation and engagement with service users and customers. Co-ordination of communications. Changes and impacts communicated to stakeholders. Impact assessments. Alternative delivery options being explored as part of base budget review option development. Learning from complaints and oversight at CCPI.</p>	16	<ul style="list-style-type: none"> Alternative delivery options being explored as part of base budget review option development In relation to adult and children's social care Newton's Europe have been partly been engaged in this area of work See opportunities entry on Healthy Lancashire Early help and prevention investment in integrated wellbeing services Children's demand management strategy Additional capacity is being secured in key areas such as social work and occupational therapy Realignment of management capacity in adult 	12	MT	<p>↓ Downwards.</p>

			times for assessment and reviews including occupational therapy, safeguarding and social care reviews.			<p>social care to provide improved focus on operational priorities</p> <ul style="list-style-type: none"> • Clear triaging/prioritisation schemes at Customer Access Centre • Work with Newton Europe is underway to improve productivity • Working with health partners to improve arrangements around discharges from hospital • Communicating with stakeholders to ensure an understanding of the councils financial position and need for change • Communicating specific proposals and service developments in the context of the financial scenario 			
CR24	<p>Failure to achieve targets agreed with National Troubled Families Unit team due to the specific requirements of the programme.</p> <p>Failure to provide robust data to evidence the impact on outcomes for those families engaged with the programme</p>	Economic Political	<p>Failure to accrue maximum income from the programme for the authority</p> <p>Possible reputational risk as a result of failing to meet the national target.</p> <p>Risk of additional scrutiny of Lancashire's response to the programme</p>	<ul style="list-style-type: none"> • Manual tracking processes in development with view to maximising payment by result claim opportunities • Improvement plan with operational staff with implementation to ensure that 'attached' cases meet national TFU principles • Ongoing data matching to identify new eligible families 	16	<ul style="list-style-type: none"> • Development of reporting processes to ensure monthly progress checks against targets • Business case to request additional resources to support tracking and claiming processes • Redesigning of outcomes plan to set more achievable/realistic targets • Establishment of multi-agency CYPTB task and finish group to drive multi-agency partnership working and explore how to embed the TFU principles within partner organisations • Exploration of digital systems that can be used to undertake the necessary analysis for Lancashire's response to the programme. • Workforce development ongoing for CAF and LP working. • Revised CoN thresholds and CAF documentation, Quality Assurance and processes to assist in meeting requirements. 	12	Head of Wellbeing, Prevention and Early Help	Downwards
CR25	Failure to implement and meet the statutory requirement to children and young people with special educational needs and/or disabilities.	Organisational	Not providing adequate service to SEND leading to inspection failure. Lack of appropriate IT platform. Failure to recruit and retain staff. Commissioning arrangements with health not consistent.	<ul style="list-style-type: none"> • Self-assessment completed against new framework • N/W regional peer support group established 	16	<ul style="list-style-type: none"> • Implementation of the early help (IT) module. • Recruitment of qualified staff funded by the SEND reform grant. • Commissioning arrangements with Health being reviewed. 	12	Head of Special Education Needs and Disability	Level
CR26	Proposed museum closures	Organisational/political/reputational/financial/legal	<p>The proposal to close five museums has attracted negative publicity nationally, regionally and locally due to the national importance of the sites and collections</p> <p>Impact on staff leading to sickness absence</p>	<ul style="list-style-type: none"> • Weekly meetings between Museums managers and asset management, equality and diversity, communications and business intelligence to proactively manage the process. • Decisions on process continue to be cleared through legal services and cabinet member as appropriate. • Expressions of interest have been 	16	<ul style="list-style-type: none"> • Public consultation has taken place to inform future service design and strategy of the museum service • EIA detailing the mitigating actions have been completed • A Cabinet Working Group with cross party membership has been established to ensure that any transfer of assets which may take place is transparent, fair and robust. This has met 	12	Head of Libraries, museums, culture & registrars	Level

			The Council could be challenged by Judicial review if the process by which museums are either closed or transferred to a third party cannot be shown to be fair and legally robust	invited for interested parties that can show they have the resources and expertise to continue operating the museum and ensuring the collections continue to be made accessible to the public.		<p>monthly. Cabinet member has agreed recommendations of working group.</p> <ul style="list-style-type: none"> Information has been circulated to all staff to assist them with their health and wellbeing as a result of closures. Senior management update staff on a weekly basis To help develop a revised cultural offer an application for heritage lottery funding submitted 			
Opportunity Identification Number	Opportunity Description	Opportunity Type	Possible Benefits	Progress to date	Opportunity Score	Maximising Actions	Residual Opportunity Score	Opportunity Owner	Direction of Travel
C01	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.	12	<ul style="list-style-type: none"> Work with local authority partners on the establishment of a Combined Authority for Lancashire and in securing a Devolution Deal with Government. The Combined Authority has now been operating in shadow form since September 2016. A "Lancashire Plan" is in development, and progress is regularly reported to the CA. Discussions are underway with government in relation to possible devolution opportunities. Workstreams have been identified, and arrangements established for political leads for each workstream. Consideration is being given to the establishment of a Lancashire Public Services Board reporting to the CA and engaging with key public sector partners One Public Estate submission has been developed and submitted A workshop took place on 5th October 16 facilitated by PWC. This was an information sharing session to identify potential opportunities for a pan Lancashire approach to service delivery. Key public sector partners were invited. 	16	Chief Executive	↑ Upwards
C02	Delivering economic growth	Economic	Continued successful delivery of the LEP's current strategic economic growth programmes. Successfully secured new resources for Lancashire to support job and business creation, housing growth and the delivery of strategic transport infrastructure linking to drive economic growth and regeneration, linking residents and businesses with economic opportunities.	Lancashire Enterprise Partnership has secured almost £1 billion of national resources to deliver a transformational programme of economic growth which see the delivery of new jobs, business and housing growth and strategic transport infrastructure. Key programmes/projects secured include the Preston, South Ribble and Lancashire City Deal, Growth Deal, three Enterprise Zones, Growing Places Funding, Boost Business Lancashire and Superfast Broadband.	12	<ul style="list-style-type: none"> 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. Maximise the support from key local and national public and private sector stakeholders outside of the County Council. Submitted growth deal 3 As part of the City Deal, a planning application is being prepared for submission for a mixed use site at Cuerden. 	16	Director of Economic Development	↑ Upwards

						If successful the proposal will create up to 5000 new jobs. Public consultation on the proposal commenced 17 th November 2016.			
CO3	Opportunities through delivering the draft corporate strategy and property strategy	Economic/Social	This strategy seeks to ensure we continue to meet the immediate needs of our communities while shaping the council into an organisation that is sustainable and able to deliver successfully against its goals for years to come. It sets out what we will be doing to achieve that balance, along with our commitment to securing the best outcome for our citizens, communities and for Lancashire. The strategy will help to ensure that we deliver on the following strategic outcomes: - To live a healthy life - To live in a decent home in a good environment - To have employment that provides an income that allows full participation in society	A draft Corporate Strategy, has been produced and has been subject to Consultation. Cabinet considered the Strategy document and the approach contained within it at its meeting of the 26 November 2015. The Strategy was submitted to full Council on the 17 December 2015. The Strategy was debated and amendments agreed. It was resolved that the Corporate Strategy, as now amended, be approved subject to the section 'Our approach to service delivery' being referred back to Cabinet for further consideration. That review process is ongoing	12	<ul style="list-style-type: none"> • 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 • Digital by design • Embedding evidence based policy/decision making to plan for the future • Aligning with health to meet need • Property strategy consultation presented to cabinet September 16 	16	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 Sustainability and Transformation Plan (STP). <ul style="list-style-type: none"> • Influencing and shaping the process to take account of Combined Authority objectives if and where appropriate. • Aligning, where appropriate with existing work at a pan Lancashire level, and within individual health economies. • Consideration of new models of delivery and potential new funding arrangements, such as pooled budgets where appropriate. 	12	<ul style="list-style-type: none"> • Recognise the need for: an ambitious vision, robust partnerships, clear and credible delivery plans, and strong leadership and governance arrangements at a pan-Lancashire level. • Lead the integration agenda, recognising the need for an ambitious vision, robust partnerships, clear and credible delivery plans. Strong leadership and governance arrangements at a pan-Lancashire level. • Develop a future public service model for Lancashire in conjunction with partners – stakeholder engagement plan in place - briefings have been delivered by PWC. Outline proposals for council's business and operating model has been presented to the Political Governance Working Group. Report to Cabinet in January 2017. Proposed briefing 	16	MT	Level

						for political groups.			
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Key to Scores

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

Cabinet Committee on Performance Improvement

Meeting to be held on Monday, 5 December 2016

Report of the Chief Executive

Part I

Electoral Division affected:
All

Quarterly Corporate Performance Monitoring Report – Quarter 2 2016/17

(Appendix 'A' refers)

Contact for further information:

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Executive Summary

Regular corporate monitoring of performance across the authority as a whole includes 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, along with Highlight Reports for Development & Corporate Services and Commissioning, Governance, Finance & Public Services have been produced for quarter one 2016/17, giving an overview of performance against agreed headings and parameters.

This Corporate Performance Monitoring Report is derived from the in-depth monitoring reports and provides an overview of performance activity across the County Council.

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 A 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 2 and the Ofsted post inspection update information provided.

Background and Advice

Regular corporate monitoring of performance across the authority as a whole includes 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 two 2016/17, 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.

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 key indicators for that quarter.

Monitoring across these Quarter 2 (Q2) indicators has been used to provide this report.

Performance Summary

Start Well

- The number of children looked after (CLA) increased for the fifth consecutive month during September (1,784). The lowest figure over the last 12 months was seen at the end of September 2015 (1,052). As a result, the rate of CLA had increased during September (72.7 per 10,000). The county rate was significantly higher than the recently published 2015/16 national (60.0) and statistical neighbour (63.0) rates, but significantly lower than the regional rate (82.0).
- The number of children and young people on Child Protection Plans (CPP) at the end of quarter two 2016/17 (1,734) decreased slightly on previous quarters although the overall trend continues to be upwards (currently 1759 at October). The rate of CPP (70.6 per 10,000) was significantly higher than the 2015/16 national (43.1), statistical neighbour (43.4) and regional (55.2) averages.
- The proportion of assessments completed within 45 days during September (77.7%) improved significantly and was the highest figure seen for this indicator since monitoring of the improvement board indicators began in January 2016. This will be due to the increased capacity within children's social care; where new cases are being dealt with quickly. However the rate remained Inadequate and below the 2015/16 statistical neighbour average of 88% which is due to the backlog of cases being completed.
- The proportion of (a sample of) Common Assessment Framework (CAF) cases audited rated as Good or Outstanding during the second quarter of 2016/17 (22%) had reduced significantly when compared to the previous quarter (44%) and Lancashire drops to the Inadequate category for this indicator. The service are taking a more robust approach to CAF compliance

and quality of assessment which meant it was inevitable that there would be a short term reduction in performance against this indicator as a result. As part of the transformation of Wellbeing, Prevention and Early Help Service (WPEHS) staff are developing the way in which they complete assessments changing the focus from individuals to a whole family approach.

- There have been improvements in the main care leavers' indicators. These include the percentages of care leavers in education, employment and training (48.2%), in suitable accommodation (87.3%) and contacted in the last three months (91.7%).
- There have been further improvements in the caseload averages for social workers, with the average caseloads for social workers in their assessed and supported year of employment (first year of employment) down by 1.1 cases to 17.8 cases per social worker. Social workers with 1-3 years' experience was also down by 1.1 to on average 22 cases per social worker with those with 3-5 years' experience reducing by 2.1 to 21.9 cases per social worker. The average number of cases for those social workers with 5 years+ experience was slightly up in Q2 (25.4) compared to Q1 (24.5) but was still in the good threshold range of performance.
- As also highlighted in the corporate services highlight report for quarter two, to date 91% of children's social care staff have completed LCS e-learning and 70% have attended classroom training on the system. Training is mandatory and is now being targeted.
- Performance of Lancashire pupils at Early Years Foundation Stage (EYFS) continues to improve. Recent data published by the DfE for the period 2016 suggests 69.2% of Lancashire EYFS pupils achieved a 'Good level of development' at EYFS. This was an improvement over the previous year (67.5%). During 2016, the Lancashire average was similar to the national (69.3%) and statistical neighbour (69.5%) averages and higher than regional (66.7%) average. The Lancashire EYFS performance had improved for the third consecutive year.
- The 2016 key stage 2 (KS2) assessments which take place in year 6, are the first which assess the new, more challenging national curriculum which was introduced in 2014. This indicator replaces the previous main KS2 indicator (Level 4+ in reading, writing and mathematics) and provisional data published by the DfE shows within Lancashire 53% of pupils reached the expected standard in reading, writing and mathematics and this was slightly higher than the national (52%), regional (52%) and statistical neighbour (52.5%) averages. Finalised data is due to be published in December 2016.
- Attainment in the previous headline measure of 5+ A*-C GCSEs including English and maths has also been published. Lancashire (58.0%) dipped slightly from the previous year (58.8%) and performance remained higher than national (52.8), regional (56.0), and statistical neighbours (57.1) averages.

- A new secondary school GCSE accountability system has been implemented in 2016 - new Attainment 8 and Progress 8 measures. Provisional information from the new system was published during October in relation to some of the headline accountability measures for schools. For example during 2015/16, the average Attainment 8 score per pupil for Lancashire (49.6) was higher than national (48.2) and similar to regional (49.2) and statistical neighbours (49.9) averages.

Live Well

Community Services

- Progress on the Pennine Reach major transport scheme to improve transport and highways infrastructure between Accrington, Blackburn and Darwen continues with much of the works completed. Phase 2 works at the Hare and Hounds Junction in Clayton-Le-Moors are set to be undertaken in December 2016. The final highway works that remain is the proposed bus lane on Whalley Road in Clayton-Le-Moors and is subject to a public consultation period to determine its implementation.
- The percentage of all carriageway and footway defects reported which were repaired within 20 working days improved during Q2 (99%), compared to Q1 2016/17 and 2015/16 (both 94%). The Q2 2016/17 proportion is now the same as Q2 2015/16.
- In Q2 Highways received 16,388 Public Enquiry Management System (PEMS) enquiries reporting defects and other requests by members of the public. The service completed 11,799 PEM enquiries within 20 working days (72%) which is higher than the 70% of the previous 2 quarters, however the service target is to respond to all customer enquiries within 20 working days.
- Overall, Q2 performance for all street lighting faults (4.41 days - which is made up of 2.14 days for those excluding traffic management and 10.55 days for those including traffic management) is similar compared to Q1 2016/17 (4.25 days) and within the 5 day target (average repair time).
- The diversion of municipal waste away from landfill by recovery, recycling, reuse and composting is forecast at Q2 for 2016/17 to be 50% with landfill of 50% (Q1 forecast 56% and 44%). This reduction in performance is mostly as a result of reduced waste processing activities at the waste recovery parks, exacerbated by increased landfilling of waste whilst operational changes are implemented. Increased residual waste arisings will also impact on performance. The reported 6% reduction between Q1 and Q2 forecasts is as a result of disappointing processing activity in Q2 due to offtake unavailability.
- The number of Libraries 'issues' has decreased in the first half of 2016/17 (2,321,142) compared to the same period in 2015/16 (2,563,598). The number of E-Book downloads however had increased in the first half of 2016/17 being 63,823 compared to 51,735 in 2015/16.

Public Health

- The most up to date complete killed or seriously injured (KSI) statistics are those up until the end of June 2016. There has been a slight reduction in the number of both KSI and slight casualties in the first six months of 2016 compared to 2014 and 2015. The Safer Travel team provide many interventions to address child casualties and schools in those districts which have shown an increase during 2015 have been proactively targeted for education activities.

A detailed road safety report on child accidents is at item 5 on this agenda.

- The Road Safety team are able to report provisional data on the number of fatalities between 1 January and 20 October 2016. There have been 30 collisions which have resulted in 32 fatalities in the above time period. Two collisions resulted in two deaths in each accident. 2 of the fatalities were aged 15 years old comprising one pedestrian and one cyclist.
- The number of health checks completed during the 5 year programme (2013/14 – 2017/18) has steadily increased, with 12,218 completed in Q2 2016/17 (64.8% of the 18, 841 offered). In Lancashire 340,076 people have been eligible for a health check over the duration of the programme to date, and 62.5% (212,565 people) have been invited to attend. Overall, 55.8% of people offered health checks have taken up the offer (118,671) compared to the local performance target of 60%.
- The DTaP/IPV/Hib vaccine protects babies against five different diseases: diphtheria; tetanus; whooping cough; polio; and Hib. In 2014/15, data quality issues were identified as a problem in Lancashire, with a further decline in uptake figures seen in 2015/16. During 2015-16, the proportion, 85.3%, had decreased on the previous years (91.5% in 2014/15 and 92.7% in 2013/14). Action has been taken by relevant agencies to address these data issues and the local NHS Screening and Immunisation Team is undertaking work to increase uptake rates (latest data encouraging 92.5% at Q1, 2016/17).
- The positive performance trend of successful completions of drug treatment for Opiate use continued with the latest percentage reported for the year to the end of August 2016 (10.9%, having been 8.4% and 10.7% in previous years). This is greater than the England benchmark of 6.6%.

Age Well

- Q2 figures of 1668 admissions of older people (65+ age group) to residential and nursing care for the rolling year are a slight improvement on the Q1 figures of 1677 and the Q4 final 2015/16 figures of 1697 admissions. The Q2 outcome of 702.5 admissions per 100,000 population aged 65 years and over is a further improvement on the Q1 outcome of 720.0 and the Q4 outcome of 728.5. This is a steady improvement on the previous Lancashire year end figure of 774.9, but is still some way off the 2015/16 national year end rate of 628.2.

- The effectiveness of reablement for older people discharged from hospital is improving, as 91.1% of people receiving the service were still at home 91 days after discharge in Q2; the national average is 82.7%. It is also an improvement on the Lancashire outcome figures of 83.2% in 2015/16. The Better Care Fund target is 82%.
- Q2 Lancashire figures show a steadily increasing trend for delayed transfers attributable to social care, though not for those attributable to all causes. Delayed transfers attributable to all causes have fallen from 13.9 per 100,000 of the population aged 18 years and over in Q1 of 2016/17 to 13.5 in Q2 (approx. 127 people), but this is still higher than the latest England average of 12.1. Lancashire currently shows a smaller proportion of delays attributable to social care than the overall national figure, with a Q2 monthly snapshot figure of approx. 38 people (4.0 per 100,000) delayed discharges attributable to social care however this has increased from the 3.3 per 100,000 in Q1 2016/17. These increases are lower than the latest England average of 4.7 per 100,000.

Activity management information data is given for a number of areas of business including:

- The number of completed reablement support plans is up by 9.3% in Q2 compared with Q1. An investigation was conducted for the period July to September 2016 to ascertain what other services, if any, were required after the conclusion of reablement for those clients receiving reablement between July 2015 and June 2016. Overall 3,062 out of 3,764 (81.3%) achieved a successful outcome and were classed as being at home. Of these, 1,360 (44.4%) had received no further services, 700 (22.9%) received some form of home care, 329 (10.7%) received equipment, 306 (10.0%) received telecare and 149 (4.9%) received a further episode of reablement.
- Snapshot figures indicate that the number of carers receiving direct payments has increased by 24% between June and September 2016 (2793 to 3469).
- Of the 359 Lancashire Care Homes inspected by CQC, 240 (66.8%) achieved an overall rating of good or outstanding (compared to 65.7% in Q1). Overall 108 (30.1%) were rated as requiring improvement and 11 (3.1%) were rated as inadequate.
- Of the 118 Lancashire Community Care Services inspected by CQC, 93 (78.8%) achieved an overall rating of good or outstanding (compared to 75.5% in Q1). Overall 23 (19.5%) were rated as requiring improvement and 2 (1.7%) were rated as inadequate.

Highlight Reports – Quarter 2 performance

- 3 Micro Rosebud loans were invested totalling £127,000.
- 38 businesses were supported by Access to Finance.
- With regard to the City Deal, the target of 360 housing units being granted planning permission in the first two quarters of 2016/17 was achieved, however there were 366 housing completions against the trajectory of 399 for the first six months of the current financial year. £17.39m of public sector capital was invested by the end of quarter 2, exceeding the proposed six month trajectory value of £14.18m. In contrast, £124k of private sector capital was invested by the end of quarter 2, which was significantly lower than the proposed six month trajectory value of £2.3m.
- At the end of Q2, the Estates team had achieved £3.9m of capital receipts and the rental income on the commercial property portfolio was £1.53m against annual targets of £5.0m and £3.2m respectively.
- 4 (44%) of the 9 county matter (i.e. major) applications during quarter 2 for minerals and waste development received a decision within the 13 week decision period, and the other 5 were after time extensions had been agreed.
- During Q2, the Disability Support Service supported 37 people with disabilities into paid jobs of over 16 hours per week and therefore met the agreed profiles (of 20 job entries and 17 jobs to have lasted 13 weeks) on our Department for Works and Pensions (DWP) contracts.
- The total number of information governance requests received in 2015 was 3,622, an increase of 38% from 2014. This trend looks to continue as requests from January to September 2016 currently stand at 2,319. These included freedom of information requests; environmental information requests; subject access requests; police, information sharing and disclosure requests; and security incidents, internal reviews and authorisation requests to access employee data.
- The level of care debt over 6 months is running at a stable level for the quarter - just above £10m. The second half of the year is expected to start to feel the benefit of the additional recovery options afforded by the recently approved Income and Debt Management Policy, as these options are exercised.
- Corporate debt levels are less of an issue than care debt although recovery work continues unabated. NHS joint funded packages also continue to be an important facet of this debt equation with resource being dedicated to billing smarter to avoid unnecessary debt build up.

Consultations

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

Implications:

This item has the following implications, as indicated:

Risk management

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

Local Government (Access to Information) Act 1985

List of Background Papers

Paper	Date	Contact/Directorate/Tel
Report to the Cabinet Committee on Performance Improvement – Quarterly Corporate Performance - Quarter 1 2016/17 Report	25 October 2016	Michael Walder, Business Intelligence Team, 01772 533637
Report to the Cabinet Committee on Performance Improvement – Quarterly Corporate Performance - Quarter 4 2015/16 Report	25 July 2016	Michael Walder, Business Intelligence Team, 01772 533637

Appendix A

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 LCSB was good.

Actions taken since the last CCPI

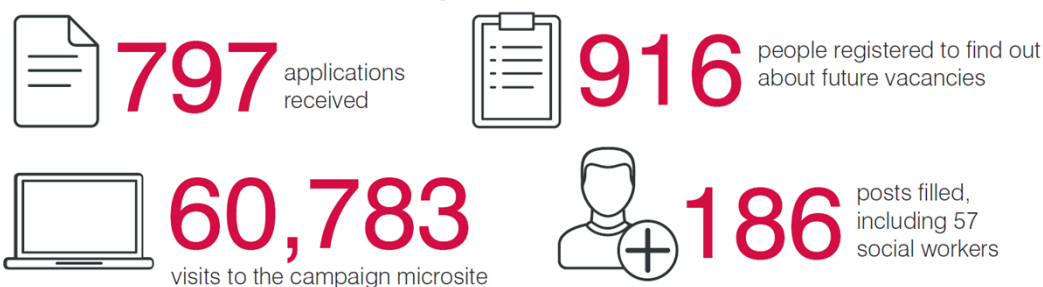
A number of actions have been put in place and developed since the last report to CCPI in October 2016:

Recruitment drive - increasing capacity and, in turn, reducing caseloads in social work teams is a vital part of solving the challenges identified during the Ofsted inspection. To support this around £4.6 million in additional staffing capacity across children's social care, adoption, safeguarding, inspection and audit.

Children's social care is a challenging area to recruit to, not only in Lancashire but also across many parts of the country, but the summer campaign to recruit to various roles in children's services has had a positive effect. To date more than 186 permanent posts have been recruited to including 57 social workers.

The recruitment campaign has been very successful as is highlighted by the below visual which provides an evaluation of the period from May to August 2016. However, it needs to be noted that a significant proportion of posts that have been filled are by candidates with very little practice experience.

Key results from the campaign



Roles recruited to include social workers; advanced practitioners; team managers; independent reviewing officers; and business support.

Framework agreement – Skylakes continue to provide additional capacity by taking on new work and assessments on behalf of children's social care and this arrangement will continue until January 2017 at which point this resource will end. The additional capacity is allowing social work teams to address the backlog of work that has accumulated so that they are better placed to deal with the rising demand in areas of children's social care. Plans are now being put in place to ensure that children's social care are prepared for the increased volume of work that they will receive once the skylakes contract ends.

Director of Children's Services role - Linda Clegg was appointed to the statutory Director of Children's Services (DCS) role on an interim basis earlier this year to help us quickly address the challenges set out by Ofsted following their inspection in late 2015. Linda shares her time between the county council and Blackburn with Darwen Council, and her work here is currently focused on our safeguarding and children's social care teams.

The process to appoint a permanent DCS has now been completed and Amanda Hatton will start work in February 2017 and Linda Clegg will support Amanda to ensure a seamless handover of responsibilities.

Ofsted quarterly monitoring inspection - The letter which details the Ofsted findings from the September monitoring inspection was published on 3 October 2016 and can be found [here](#). The date for the next inspection has now been set and this will take place on the 11 and 12 January and the key lines of enquiry have been agreed with Ofsted and are as follows:

- Children subject to a CIN Plan during the period from the 19/09/2016 – 19/11/2016.
- Children subject to a CP Plan during the period from the 19/09/2016 – 19/11/2016.
- Chronologies on Child Protection (CP) and Child in Need (CIN) cases.
- Case Summary's on Child Protection and Child in Need cases.
- Management oversight.
- Child and Family Assessments.

Peer Challenge – on 10 and 11 October 2016, Jane Ivory (Assistant Director, Wigan) led a team of colleagues from across the region to assess and challenge the improvements that have been made to children's services in Lancashire. They spent time looking at cases and talking to social workers about these cases, analysing performance and policy information and facilitated a number of focus groups made up of different cohorts of staff and partners. On 9 November they fed back their findings and they identified three key areas for further improvement which included the 'front door', oversight of Child in Need work and early help. It was significant that these are areas that we are already aware need improvement and plans are either in place, or are being developed, to address these. This demonstrates that there is a far better understanding of the strengths and weaknesses in children's social care.

DfE Review – one of the conditions of the Improvement Notice from the secretary of state was that as well as the quarterly monitoring inspections from Ofsted the DfE would also undertake a review every six months. The first DfE Review took place on 19 and 20 October and was led by Tony Crane (DfE Advisor) and two senior civil servants from the department.

The outcome of the DfE review was a report to ministers that appraised the progress being made in Lancashire and areas of future focus which include:

- Implementation of practice improvement
- Multi – agency early help
- Management capacity
- Placement sufficiency
- DCS transition arrangements
- Role of the Lancashire Safeguarding Children Board

The minister has subsequently written to the Leader and stated that the expected progress is being made but that this must be sustained and at pace.

DCS briefings – the second round of staff briefings led by Linda Clegg have been completed with three sessions in the north, central and east of the county and over 360 staff attending. The purpose of these staff briefings is to ensure the workforce is fully aware and able to inform improvement and so that Linda can share and discuss the key priorities moving forwards. Evaluation feedback has been good with 95% of those that attended having a better understanding of progress in delivering the improvement plan and 96% have a better understanding of current and future priorities. An overall theme of the feedback was that staff are starting to see improvements taking hold.

12 week improvement plan – the new 12 week improvement plan was agreed by the Improvement Board on 12 October and has prioritised the following areas:

Workforce

- Reducing caseloads
- Recruitment of additional capacity
- Effective management oversight

Providing quality services

- Accurate and complete performance information informs priorities and decision making
- Audit process drives improvement
- Implementation of a single operating model
- Effective multi agency support for children looked after and care leavers
- External scrutiny and challenge

Managing Demand

- Establish a coherent multi agency early help offer
- Implement new risk sensible assessment model
- MASH/CART redesign

Participation and Engagement

- Young People

- Children's Services Staff
- Partners

Project Accuracy – Project Accuracy was developed to increase the accuracy of the data in management reports which were derived from the data entry made onto the Lancashire Children's System by Social Work Practitioners.

The Regional Information Group (RIG - part of the North West children's services sector led improvement approach) stated recently a satisfaction and confidence that performance information in Lancashire is increasingly accurate and providing a platform for more robust decision making and resource allocation at all levels. And the 2015/16 year end RIG report stated that 'the quality of data in Lancashire has demonstrably improved during the year'.

Risk sensible – the implementation of this model is being led by Mick Muir (an independent consultant) and will improve the skills and confidence of staff in identifying risk and making the appropriate decisions about how this risk is managed. The risk sensible model continues to be implemented and all managers / IROs / MASH will have been trained in this by November 16 at which point the Advanced Practitioners will also begin training all of the social workers across County. This training will run from the beginning of December 16 through to January 2017. From January 17 until the end of March 2017 there will be 1 training session booked for every team, including Senior, Team and Practice managers, social workers and IROs to work through the model. Partner organisations are also interested in understanding and practicing in line with the risk sensible approach and funding has been agreed by the LSCB to facilitate this.

Practice Improvement Model – a period of intensive support and focus, working alongside staff in Fylde and Wyre to improve practice consistently across social work teams. Initial work has focussed on engaging with staff and understanding the issues:

- Analysing the data
- Reviewing staffing, retention, culture, standardisation of policy and procedures
- Auditing cases to understand quality of practice issues
- Observations of practice
- Interviews with Managers and staff at all levels

In the lead up to Christmas, staff will be engaged in a series of workshops so that they are central to designing the solutions to existing practice issues. The next phase will be to test out these new solutions in the New Year in Fylde and Wyre and, where effective, new models of working will then be rolled out across the county from May 2017.