

Lancashire County Council

Cabinet Committee on Performance Improvement

Wednesday, 5th December, 2018 at 2.00 pm in Committee Room 'B' (The Diamond Jubilee Room) - County Hall, Preston

Agenda

Part I (Open to Press and Public)

No. Item

1. **Apologies for Absence**
2. **Disclosure of Pecuniary and Non-Pecuniary Interests**

Members are asked to consider any Pecuniary and Non-Pecuniary Interests they may have to disclose to the meeting in relation to matters under consideration on the Agenda.
3. **Minutes of the Meeting held on 4th October 2018** (Pages 1 - 6)
4. **Withdrawal from the European Union: Implications for Lancashire County Council**

Verbal update.
5. **Corporate Risk and Opportunity Register Quarter 3** (Pages 7 - 26)
6. **Quarterly Corporate Performance Monitoring Report – Quarter 2 2018/19** (Pages 27 - 36)
7. **CCPI Report - Customer Access** (Pages 37 - 52)
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

The next meeting of the Cabinet Committee on Performance Improvement will be held at 2.30pm on Tuesday 26th February 2019 in Committee Room B – The Diamond Jubilee Room, County Hall, Preston.

L Sales
Director of Corporate Services

County Hall
Preston

Agenda Item 3

Lancashire County Council

Cabinet Committee on Performance Improvement

Minutes of the Meeting held on Thursday, 4th October, 2018 at 2.00 pm in Committee Room 'B' (The Diamond Jubilee Room) - County Hall, Preston

Present:

County Councillor Geoff Driver CBE (Chair)

County Councillors

M Green

H Khan

B Yates

Mrs S Charles

C Crompton

G Gooch

1. Apologies for Absence

Apologies for absence were received from County Councillor Albert Atkinson and Amanda Hatton.

County Councillor Barrie Yates replaced County Councillor Atkinson.

2. Disclosure of Pecuniary and Non-Pecuniary Interests

No pecuniary or non-pecuniary interests were disclosed.

3. Minutes of the Meeting held on 27 June 2018

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

Matters Arising

Following a query from County Councillor Geoff Driver, it was agreed that an update on the meeting between the Schools Improvement Team and the Teaching Schools Alliance would be brought to the next meeting on 5 December 2018.

4. Corporate Risk & Opportunity Register Quarter 2

A report was presented by Paul Bond, Head of Legal and Democratic Services, providing an updated Quarter 2 Corporate Risk and Opportunity Register for the Cabinet Committee to consider and comment upon.

The Cabinet Committee noted that the Register would be presented to the next Audit, Risk and Governance Committee on 29 October 2018.

Highlights included:

CR1.1 – shortlisting had taken place and interviews for the permanent Chief Executive position would be held week beginning 8 October and interviews for the Executive Director – Education and Children's Services would take place week beginning 15 October.

CR1.2 – Service Challenge reviews were progressing in line with the agreed timetable and were due to be completed later in October. These would be referred to Corporate Management Team, then Cabinet in December.

CR7 – The Audit, Risk and Governance Committee would be receiving a report on delivering major projects/schemes on time and within budget at their next meeting on 29 October 2018. The assessment process issues were being addressed by Management Team.

CR8 – The Lancashire Parent/Carer Forum had now been established.

CR9 – A lot of progress had been made on the discharge of patients in a safe and timely manner from hospital into either their own home or enablement/short term care. County Councillor Gooch reported that delayed transfer of care from hospital figures had reduced by 40% when compared to the previous year. It was hoped that this risk would be able to come off the Register for the next quarter.

CR12 – This was a new entry on the Register 'Unlawful disclosure of personal or commercial data caused by a deliberate or accidental or technical breach, resulting in a risk to the rights and freedoms of the data subject or the intellectual property of the county council'. Reported incidents could be categorised as follows:

Theft/loss (mobiles/laptops)

Human error (information sent to the wrong address)

Misconduct (accessing information an employee is not entitled to access)

It was reported that there were very few misconduct incidents although there had been an increase in reportable incidents as a whole across the country. Various controls had been put in place to comply with the new General Data Protection Regulations including a mandatory E-learning course for staff. Work was also being done to promote awareness and BTLS were looking at introducing a more secure software system. The Cabinet Committee noted that numbers of reports to the Information Commissioners Office fluctuated but were very low (single figures).

Resolved: That the Cabinet Committee on Performance Improvement note the updated Corporate Risk and Opportunity Register.

5. Quarterly Corporate Performance Monitoring Report Quarter 1 2018/19

A report was presented by Donna Talbot, Head of Service, Business Intelligence, providing an overview of performance activity across the council for Quarter 1 of 2018/19.

Education and Children's Services

It was reported that the number of looked after children had continued to increase both in Lancashire and regionally with over 2,000 looked after children in Lancashire. This was a real concern and various ways of reducing this figure were currently being looked at including looking at those children on Care Orders and the possible revocation of these, and ways in which we could prevent children coming into care, through a successful Life Chances Fund bid. There were rising numbers of children looked after in Preston and Burnley so these were the priority areas. In response to a query from County Councillor Driver, Sally Allen, Head of Safeguarding, Inspection and Audit, agreed to find out why numbers had risen in these areas.

There had also been a rise in the number of referrals from the Police: County Councillor Driver queried whether this should be raised through the Children's Services Improvement Board.

The Cabinet Committee noted that retention rates for newly qualified social workers had continued to improve.

The adoption service had been rated Good in the recent Ofsted re-inspection. The average time between a child entering care and being placed with their adoptive family had continued to improve. Sally Allen confirmed that, when looking to place children, the county council also looked at prospective adopters who had registered with independent adoption agencies. Lancashire was also successful at finding permanent homes for hard to place children.

It was reported that permanent exclusions in all schools were increasing and that rates in Lancashire were higher than regional and national comparators; John Readman was currently looking into this issue.

Adult Services and Public Health

The Cabinet Committee noted there were still concerns about the level of permanent residential admissions for older people and that various options were being considered to reduce this figure. It was reported that Chorley Council was currently developing Primrose Gardens Extra Care Scheme, consisting of apartments for 55s and over, enabling them to live independently whilst providing onsite staff, planned care for those with an eligible care need and shared communal areas including a café and hairdressing salon. A similar project in Burnley was currently being looked into.

Troubled Families Unit

There was a discussion about the government term 'Troubled Families Unit'. The Cabinet recommended that, for Lancashire, the programme should instead be called the Supporting Families Unit.

Ofsted Post Inspection Update

Sally Allen, Head of Safeguarding, Inspection and Audit, reported that the Inspectors had recognised the significant improvements made since their last inspection, and that the overall effectiveness judgement was Requires Improvement. The county council had been described as a committed and responsible Corporate Parent and strong partnerships had been referred to throughout the report, together with positive participation and engagement from children and young people.

One of the areas for improvement was that further work was required to improve the educational attainment of children looked after at Key Stage 4. The report also identified that, whilst there was a high number of care leavers age 16 and 17 in education, employment or training, these numbers reduced through the ages of 19 to 21. County Councillor Driver stated that we needed to know why this was happening.

The Adoption Service was judged to be a strength and the report stated that leadership and governance was increasingly effective, and that strategic plans were now better aligned and partnerships with key agencies were working more effectively.

The report noted that further work with partners was required to improve our response to children and families affected by domestic abuse. The Committee were informed that a Domestic Abuse Task Group had also been established.

The Cabinet Committee noted that care leavers had a positive and confident view of the local authority as a corporate parent, and appreciated the higher profile they now had.

It was reported that a new Children's Services Improvement Plan was scheduled to be considered by Cabinet in November which would address the 11 recommendations of the inspection.

A link to the full inspection report was provided for the information of the Cabinet Committee.

County Councillor Driver wished to place on record his thanks to all staff involved with the inspection for all their hard work.

Resolved: That the Cabinet Committee on Performance Improvement note the reported performance for quarter 1 of 2018/19 and the Children's Services inspection update information provided.

6. Statutory Social Care Annual Report for 2017/18 - Complaints and Customer Feedback

A report was presented by Angela Esslinger, Complaints and Appeals Manager, providing complaints and customer feedback on statutory social care complaints for children and young people and adults for 2017/18.

It was reported that 540 adult social care complaints had been received in 2017/18, which was an increase of 13% from the previous year. However, there was nearly twice as many compliments, with a total of 1009 being received in 2017/18. In addition, the Stage 0 complaints, which were those which had been resolved early in the process, had almost doubled compared to last year and complaints to the Local Government Ombudsman had seen a slight increase this year.

Details of the Joint Complaints Protocol involving Unitary Authorities, Clinical Commissioning Groups and Health Trusts in Lancashire were provided to the Cabinet Committee.

It was reported that 265 statutory complaints had been received in relation to children's social care, which was an overall increase by just over 20% from the previous year. No Stage 3 Review Panels had been held in 2017/18. The increase in Stage 0 complaints had risen from 60 in 2016/17 to 150 in 2017/18. There had been a decrease in Local Government Ombudsman children's social care complaints of 50% (from 47 in 2016/17 to 23 in 2017/18).

In relation to non-statutory children's social care complaints, these dropped by just over 6%, from 93 in 2016/17 to 87 in 2017/18 and social work practice was the most common complaint category – the same as for statutory complaints.

The Committee noted there had been a welcome rise in compliments for children's social care; a total of 148 compliments were received in 2017/18 compared to 58 in 2016/17, due to the incorporation of compliments from other children and young people's services.

It was reported that complaints represented just under 2 per cent of all active adult social care and children's social care cases throughout Lancashire in 2017/18.

Details of identified learning for all complaints were set out in the report.

The Committee were informed that a compliment had been received from the Local Government Ombudsman in relation to the way a specific joint complaint across health and social care had been handled.

Resolved: That the Cabinet Committee on Performance Improvement note the statutory social care complaints annual report for children and young people and adults for 2017/18, acknowledging the associated learning.

7. Urgent Business

There were no items of Urgent Business.

8. Date of Next Meeting

The next meeting of the Cabinet Committee on Performance Improvement would be held on Wednesday 5th December 2018 at 2.00pm in Committee Room B – The Diamond Jubilee Room, County Hall, Preston.

L Sales
Director of Corporate Services

County Hall
Preston

Cabinet Committee on Performance Improvement

Meeting to be held on Wednesday, 5 December 2018

Report of the Head of Legal & Democratic Services

Electoral Division affected: (All Divisions);
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Corporate Risk and Opportunity Register Quarter 3

(Appendix 'A' refers)

Contact for further information:

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

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

Background and Advice

Following the corporate approach to reporting on risk and opportunity, the quarter 3 Corporate Risk and Opportunity register was reported to Corporate Management Team, following a review of the register. The register has now been updated to reflect changing priorities and the budget. Following this Cabinet Committee, the Register will be presented to the next Audit, Risk and Governance Committee. An updated Corporate Risk and Opportunity Register is attached at Appendix 'A'.

For this quarter, there are two new entries to the register and one deletion. The new additions are:

- CR13 – Children's Social Care - Increase in demand, including rise in number of contacts and referrals and an increase in Children Looked After numbers. In line with national trends there has been a notable increase in referrals to children's social care. The number of children looked after has continued to increase, although similar and larger increases have been reported both nationally and regionally. The increase in demand continues to impact on caseloads. The service has put in place several mitigating actions and is undertaking demand analysis work to inform next steps.

- CR14 - Intermediate care for older people in a residential setting. A review of the Lancashire intermediate care system is being undertaken and will include consideration of the best practice model for each service area including community beds. Joint action plans are being developed with NHS colleagues and a new board has been set up to monitor progress.

The one deletion from the register is:

- CR 9 - Discharge of patients from hospital into their own home or enablement/short term care in a safe and timely manner. Performance across the acute sector is at target so this is no longer a business critical risk. The risk will be retained on the service register for the purposes of managing winter pressures.

Risk Identification Number (RIN)	Risk Description
CR1	Delivering the Operational Plan to ensure a strong and sustainable County Council <ul style="list-style-type: none"> • Establishing a strong and visible leadership team • Embed a focus on service delivery to secure a better service at a lower cost • Develop a sustainable financial strategy Allowing for mitigating actions the residual score remains at 16
CR2	Protect and safeguard children. Further mitigating actions added. Residual risk score has reduced to 12.
CR3	Complying with statutory requirements and duties relating to children looked after, children in need and children leaving care. Following the Ofsted inspection the residual risk score has been reduced to 12.
CR4	Recruit and retain experienced staff within Children's Services. Further mitigation actions added. Residual risk has reduced to 12
CR5	Managing our data well and producing effective management information. Allowing for mitigating actions the residual score is 12.
CR6	Implement/maintain core systems that support the organisation, deliver transformational change and deliver efficiencies, cost reductions and produce effective management information that supports management decision making. Allowing for mitigating actions the residual score is 12.
CR7	Delivering major projects/schemes on time and within budget. Allowing for mitigating actions the residual score is 12.
CR8	Delivering a statutory service for children and young people with special educational needs and/or disabilities. Allowing for further mitigating actions the residual score has been reduced to 12
CR10	Adult social care provision is adequate and responsive to meet current and future demand. Allowing for further mitigating actions the residual score remains at 12
CR11	Supporting disadvantaged families to fulfil their potential (Troubled Families Programme. Allowing for further mitigating actions the

	residual score remains at 16
CR12	Unlawful disclosure of personal or commercial data caused by a deliberate or accidental or technical breach resulting in a risk to the rights and freedoms of the data subject or the intellectual property of the county council. Allowing for mitigating actions the residual risk score is 12.
CR13	Children's Social Care - Increase in demand, including rise in number of contacts and referrals and an increase in Children Looked After numbers. Allowing for mitigating actions this risk has a residual score of 16
CR14	Intermediate care for older people in a residential setting. Allowing for mitigating actions this risk has a residual score of 12
CO1	Delivering the Operational Plan to ensure a strong and sustainable County Council <ul style="list-style-type: none"> Delivering growth and prosperity for the whole of Lancashire This opportunity has a score of 16
CO2	Apprenticeship Levy and Apprentice % in Public Sector. This has an opportunity score of 15
CO3	Develop and implement improved recruitment and retention practices to address increasing challenges. This has an opportunity score of 16.

Implications:

This item has the following implications, as indicated:

Risk management

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

List of Background Papers

None

Reason for inclusion in Part II, if appropriate

N/A

Corporate Risk & Opportunity Register Q3 2018/19

Risk Identification Number (RIN)	Description	Risk Type	Possible Risk Consequences	Current Controls	Risk Score	Mitigating Actions	Residual Score	Risk Owner	Direction of Travel
CR1	<p>Delivering the Operational Plan to ensure a strong and sustainable County Council</p> <p>1. Establishing a strong and visible leadership team</p>	Organisational	<ul style="list-style-type: none"> Inability to deliver a balanced budget from 2021/22 Lack of buy-in/engagement from staff Managers do not possess the leadership skills required, leading to demotivated staff and poor service delivery The organisation does not have the right people in the right jobs leading to service failure Staff do not know what is expected of them and they do not possess the skills to adequately do their job Unable to meet Terms and Conditions savings targets Services become unsustainable and we cannot fulfil our statutory duties Compounds ability to set balanced budget 	<ul style="list-style-type: none"> Priorities Board established comprising work stream leads and chaired by the Chief Executive Time table for each work stream has been developed and agreed Programme Office is managing the overall programme of activity Managers toolkit – HR front door launched 24th September 2018 Leadership and employee conferences being held throughout November 2018 Inspirational speakers – first speaker November – ongoing collection for future events Corporate Management Team intranet pages updated Recruitment for Chief Executive and Resources Director completed Introduction of new suite of leadership & management modules Specification for MSC, MBA senior Leaders apprenticeship – procurement started PRIDE event October 2018 Staff survey – field work undertaken and completed Performance Engagement – new briefing sessions for managers and staff completed 	20	<ul style="list-style-type: none"> Research new Induction Programme and commence development for new Lancashire Induction Further develop and launch new 'Inspiration Matters' e-briefing November 2018 New suite of Leadership and Management modules to support development of managers, linked to national occupational standards and apprenticeships – January 2019 Continue procurement process for training provider for senior leadership apprenticeships. Contract expected to be in place for December 2018 PRIDE event 1st November 2018 Staff Survey – analysis data Chief Executive and Director of Resources post recruited to on a permanent basis. Executive Director Education and Children's Services interviews recruited to on a permanent basis. 	16	Overall Risk Owner is CMT however there is a lead officer for each work stream	<p>This risk is being monitored by both the Priorities Board and CMT</p> <p>Draft People Strategy to be informed by outcome of staff survey</p> <p>Cabinet considering service challenge savings options on 3rd December 2018</p> <p>Savings options agreed by Cabinet in December will be presented to budget Full Council in February 2019</p>

	<p>2. Embed a focus on service delivery to secure a better service at a lower cost</p> <p>3. Develop a sustainable financial strategy</p>	<p>Organisational</p> <p>Finance</p>	<ul style="list-style-type: none"> Unable to deliver a balanced budget in future years Insufficient reserves Services become unsustainable and we cannot fulfil our statutory duties 	<ul style="list-style-type: none"> 100% of reviews have been reported to the Service Challenge panel 88% have been reported to Corporate Management Team 		<ul style="list-style-type: none"> The timescale for the programme is on track Final proposed saving options to be reported to Cabinet 3rd December 2018 			
CR2	Protect and safeguard children	People/Service delivery	Children are put at risk of harm.	<ul style="list-style-type: none"> Clear line of sight to front-line practice at all levels: Chief Executive, Executive Director, Cabinet Member, DCS, Deputy Director and all managers to ensure leaders have a good understanding of the quality of practice and the safeguarding arrangements in place across children's services. Clear governance and accountability arrangements in place via the Improvement & Accountability Board and the six boards which report to it. Effective partnership arrangements at a strategic and operational level which support multi-agency working to safeguard and promote the welfare of children. Clear escalation processes in place where there is a professional disagreement. Quarterly safeguarding meetings including the Chief Executive, DCS, Leader, Cabinet Member for Children, Young People & Schools, LSCB Chair and the Police. DCS weekly meetings with Cabinet Member and Lead Member to discuss current issues/developments. Serious Case Review learning shared to improve safeguarding practice. MASH (Multi-Agency Safeguarding Hub) arrangements strengthened to ensure an appropriate multi-agency 	16	<ul style="list-style-type: none"> New Children and Families Board to be established following the conclusion of the Improvement Board. In line with revised "Working Together", (July 2018), new multi-agency safeguarding arrangements to be established, to ensure there is a shared responsibility between agencies for safeguarding and promoting the welfare of children. Safeguarding arrangements have been strengthened. Ofsted inspection (June 2018) - Inspectors broadly agreed with our self-assessment. Annual Improvement Plan developed following the Ofsted inspection (June 2018) to ensure continued improvement at pace. The plan will be presented to Cabinet for approval in December 2018. 	12	Director of Children's Services	<p>The proportion of newly qualified social workers (ASYEs) has continued to reduce which indicates that retention of newly qualified staff is improving with staff remaining in Lancashire as they gain experience.</p> <p>This reflects the support provided to ASYEs by managers, advanced practitioners and the impact of the Social Work Academy.</p> <p>The proportion of social workers with over three years' experience has also improved indicating that experienced staff are also being retained. The average caseload for all social workers remains comparatively good.</p>

				<p>response where there are safeguarding concerns about a child with more timely decision making at the point of referral.</p> <ul style="list-style-type: none"> • Serious incident reporting in place to ensure an appropriate response to serious safeguarding concerns and when necessary notification to Ofsted/DfE. • External reviews of front-line practice by Ofsted, DfE, LGA and North West ADCS to provide external, independent evaluation of the quality of practice. Robust audit arrangements and reporting in place to ensure an accurate understanding of the quality of practice. This has improved compliance and is starting to improve quality. • Performance monitoring undertaken with action taken to address areas of underperformance and ensure service user records are accurate and up to date. • Social Work Academy established providing robust induction and continuous professional development for social workers. • Leadership Academy commenced September 2018. 				<p>Monthly audits of quality of practice.</p> <p>Advanced practitioner workshops planned, linked to child's journey in line with priorities in the Improvement Plan.</p> <p>Whilst compliance has significantly improved further work is required to ensure that the quality of practice is consistently good across all areas. The Improvement Plan sets out agreed priorities and timescales.</p>
CR3	Complying with statutory requirements and duties relating to children looked after, children in need and children leaving care.	People/service delivery	<p>Local authority is legally and financially liable, and may be subject to judicial review if found in breach of its statutory responsibilities.</p> <p>Further DfE intervention if Ofsted judge Children's Services to be inadequate.</p>	<ul style="list-style-type: none"> • Robust audit arrangements including monthly audit cycle to check compliance and the quality of practice. Corporate legal oversight. • Serious incident reporting to ensure appropriate management oversight. • Serious Case Review learning shared. • External inspection and peer reviews. Ofsted inspection of Children's Services in June 2018 noted significant improvements, with an overall effectiveness judgement of requires improvement to be good. Practice is compliant with statutory requirements and audit is reliable and effective. The way in which help and support is delivered to children in need is no longer a cause for concern. The Council is described as a committed and responsible corporate parent and the response to care leavers is 	16	<ul style="list-style-type: none"> • An Improvement Plan is in development (consultation with Partners November 2018) to address the recommendations from the inspection and progress will be monitored via the Improvement & Accountability Board. • Sufficiency strategy: Both the Bungalow (complex needs unit) and Slyne Road (Adolescent Support Unit) are now registered with Ofsted. Building work at South Avenue (the crisis unit) is not yet complete. • An audit schedule for the next 6 months is in development with agreed audit priorities to ensure a continued focus on the quality of practice. 	12	<p>Director of Children's Services</p> <p>Significant progress made. Leaders can now demonstrate that they know their services well. The focus is now on making the cultural shift from compliance with statutory requirements to improving the quality of practice.</p> <p>Further work is required to address variability in the quality of practice, to ensure that all children in need receive a consistently good service.</p>

				<p>now much more focused and supportive.</p> <ul style="list-style-type: none"> • Clear line of sight to front-line practice from the Cabinet Member and DCS and Stronger management oversight in districts. • The Social Work Academy and advanced practitioner workshops are promoting Lancashire as a learning organisation and are supporting staff retention. • Independent Reviewing Officer capacity has been increased and has strengthened compliance. 					<p>The pace of change needs to be maintained as part of our continuing improvement journey from requires improvement to be good.</p> <p>The Improvement Plan will set out agreed priorities and timescales and will inform the Ofsted annual conversation in January 2019 and be presented to Cabinet.</p>
CR4	Recruit and retain experienced staff within Children's Services	People/service delivery	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 via quarterly workforce report; monthly monitoring via Improvement Dashboard. Weekly monitoring of social work workforce position and caseloads. • Workforce Strategy Board established to ensure strong focus on recruitment and retention and workforce development. • Revised supervision policy now in place to support staff retention. • Social Work Academy established providing robust induction and continuous professional development for social workers, including ASYEs. • 12 Advanced Practitioner posts support social workers to aid staff retention. • Leadership Academy now in place with particular focus on up-skilling first line managers to strengthen leadership of practice. 	20	<ul style="list-style-type: none"> • Development programme for more experienced Grade 9 social workers. • Improve compliance with supervision requirements to ensure staff receive appropriate support. • Retention of staff in children's social care is improving, with both newly qualified staff and experienced staff choosing to remain with Lancashire. (Sept 2018: ASYEs 27.9% (April 2017: 50.1%). Experienced social workers: • The number of inexperienced workers in post has increased slightly (April 2017: 50.1%, June 2018: 23.8%, August 2018: 27.9%). • The proportion of experienced social workers in post has reduced slightly this quarter (April 2017: 15.2%, June 2018: 31.9%, Aug 2018 30.3%). 	12	Director of Children's Services	<p>The experience imbalance has improved considerably since April 2017.</p> <p>This reflects the support that is provided to ASYEs by managers, advanced practitioners and the impact of the Social Work Academy.</p> <p>The proportion of social workers with over three years' experience has improved indicating that experienced staff are also being retained. The average caseload for all social workers remains comparatively good.</p> <p>There is still a reliance on the use of agency staff, although this is expected to reduce by December 2018, following recent</p>

									recruitment campaigns. The Improvement Plan sets out agreed priorities and timescales.
CR5	Managing our data well and producing effective management information	Organisational	<p>Ineffective collection, collation and input of data</p> <p>Failure to improve quality of data in council systems including those that have already been implemented and those that are being implemented.</p> <p>Ineffective use of business intelligence, resulting in the inability to identify and respond to changing trends and inform strategic decisions.</p> <p>Impact on strategic planning, understanding demand management 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, with potential for negative financial consequences</p> <p>OFSTED/CQC/LGA and other external organisations will be using inaccurate information to judge performance.</p> <p>Service planning and management will be severely compromised.</p> <p>Potential for incorrect payment of providers, staff etc</p>	<ul style="list-style-type: none"> Information Management Strategy. Accuracy Steering Group chaired by Director of Adult Services oversees a programme of work to improve data quality within systems used by Adult Services Data Quality and Performance Group oversees quality of information in systems for children's services Regular provision of management information to staff at all levels across adults and children's services helps to embed ownership of data and improve recording. Use of 'exception reports' which proactively highlights data anomalies and inconsistencies. Development of a Corporate Performance Dashboard is facilitating a council-wide view of all services, which will improve the quality of reported data as anomalies will be highlighted. 	16	<ul style="list-style-type: none"> 'Project Accuracy' for Adults Services focussing on procedures and data quality is now underway. Performance and Data Quality Group (Children's Services) is a well-established group facilitated by the Practice Improvement Officer. Heat maps have been designed to monitor Annex A data quality. Additional temporary resource employed within Business Intelligence to provide reports for Project Accuracy 2. Clear governance structure in place to ensure a continued focus on data quality/accuracy: <ul style="list-style-type: none"> Data Quality and Performance Group. LCS Systems Steering Group - provides governance to the DQP Group. Practice Improvement Meetings (PIMs) looking at performance and data quality. Children's Portfolio Review Board - development of systems within Children's Services. <p>Governance Boards established for Early help Module, Education, Health and care Plans module and the Education Management System.</p> <ul style="list-style-type: none"> Draft Digital Strategy – the developing strategy has a work stream relating to data and developing an information architecture across the core systems. Landscape review of business intelligence is currently being undertaken which will highlight opportunities for development and improvement of reporting systems. The Passport to Independence Trackers are being documented (functional and technical specifications are being written) so that they are fully understood. This will inform the support and the development of a migration plan. Weekly provision of Annex A heat map to operational managers. Analysis of heat map clearly indicating actions needed Review of performance using Chat tool provided to operational managers. Agree actions to provide LCC data required and request associated data from partners (police, health etc) Key members of BI are on the Inspection readiness group (to also include partners as appropriate) 	12	CMT	Children's - Regular meetings with Deputy Director Children's Services and Executive Director Escalation via Improvement and Accountability Board.

						<ul style="list-style-type: none"> Workshops have taken place with the Business Intelligence Service to identify Corporate Reporting. The outcome of these workshops will form the basis of requirements for how the council manages reporting in the future. This will be an integral part of the Digital Strategy. 			
CR6	Implement/maintain core systems that support the organisation, deliver transformational change and deliver efficiencies, cost reductions and produce effective management information that supports management decision making.	Organisational/Reputational	<p>Front line service delivery impeded because new/old systems are not fit for purpose</p> <p>Back office unable to function</p> <p>Failure to maximise use of new technology, including mobile devices to deliver savings and to operate in a more effective way, including integration with partners.</p> <p>New systems are implemented without full transformational and operational processes being defined and tested that impact on service delivery.</p> <p>Lack of management buy-in from service areas to drive forward change and ensure services work to new practices in a consistent way so that system implementation is as smooth as possible and the council maximises the benefit from its investment in new technology.</p> <p>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</p>	<ul style="list-style-type: none"> Roadmaps have been developed for all key major systems. Governance arrangements in place with full impact assessment carried out for all system changes. Central co-ordination, control and monitoring in place which assists in performance management of BTLS. Corporate wide approach implemented for all system changes involving services, L&D, BI etc. on wider impacts and how system changes are managed into the business. Sign off arrangements for roadmaps, including prioritisation of work, are in place. Boards have been established for major system implementations. Current major implementations are: Early Help Module, Education, Health and Care Plans Module, MASH and CSE. Which are due to go live in early October 2018. Implementation of On-Line School Admissions and Education Management system which is now live. Implementation of On-Line School Admissions and Education Management system. Information management strategy and approach being rolled out with all new systems. Small transformation team available to support system changes and implementations supplemented by relevant service areas to encourage ownership, super users etc. Local Information Systems still exist but are being replaced over time with new core systems and other corporate solutions, i.e new Highways solution has replaced 23 existing systems. 	16	<ul style="list-style-type: none"> Continued monitoring of data within Lancashire Children's Service. Governance Boards established for Early Help Module, Education, Health and Care Plans module, MASH and Child Sexual Exploitation. No major issues identified in recent Ofsted inspection. Critical incidents escalated within Corporate Services and BTLS. Internal Audit have given Substantial assurance over the effectiveness of controls operating over the Systems Support function within Core Systems. New system roadmaps developed to provide more control over system changes. Core Systems are continually reviewing request against council priorities and strategies. HAMS specific - Fortnightly meetings with Highways Service continue, with focus on discussing and managing operational issues, with a continuous tracking of issues and timescales for rectifying these. HAMS Specific - After comprehensive work with the service and a review by audit, a programme of work has been identified and underway. A Highways Improvement Board has been established which includes a comprehensive training and support plan for the service. Which has now begun. Close working with Business intelligence and BTLS to undertake Landscape Review of reporting across the authority – completion due Oct 2018 	12	Director of Programmes & Project Management	<p>On-going review and control of development work plans and roadmaps through relevant Portfolio Review Boards</p> <p>Establishment of overarching review and control of Work Plans and Roadmaps by Digital Board. 1st Report 5th October 2018</p> <p>Access for managers to simplified Oracle reports re staff sickness etc by Dec 2018</p> <p>As part of the new emerging Digital Strategy there is a work stream looking at the technologies that will underpin the delivery of digital. The development of an architectural vision for the digital strategy is underway, working closely with BTLS. This includes a landscape review of existing technologies. Date for delivery to be established through Digital Board 5.10.18</p>

			controlled shutdown. Impact on service delivery	<ul style="list-style-type: none"> Corporate performance information being developed as part of systems implementations though long term reporting tool needs developing and implementing. JSNA and other needs assessments. Discussed with various management teams on an ongoing basis. Weekly provision of information to operational managers for LCS Performance Data on projects supplied to the Corporate Dashboard from PPMS. New operating process and procedures developed and implemented to overcome recurring issues/problems - continuous improvement cycle implemented. 					Programme delivery model for Early Help Module/ Education, Health Care Plan to be replicated across new system delivery projects and programmes – demonstrates effective service participation and ownership of system integration
CR7	Delivering major projects/schemes on time and within budget	Development & regeneration	Scheme viability in doubt due to speculative estimating and project management Pressure on capital programme	<ul style="list-style-type: none"> Capital Board Capital Programme reports to Cabinet Active project and programme management 	16	<ul style="list-style-type: none"> Initial review work undertaken of a sample of major capital schemes to improve the estimating and testing of current and future scheme costs. These include: <ul style="list-style-type: none"> Reporting of cost ranges for new schemes Routine updating of cost estimates Inclusion of contingency at industry standards and benchmarks Governance of the capital programme has been strengthened under the auspices of the Capital Board where responsibility for oversight and challenge of cost estimates and capital budgets sits. A comprehensive review of the projects for 2018/19 including prior year slippage has been undertaken by project and programme managers, supported by finance and commissioning. The primary purpose of the review was to propose a delivery programme for 2018/19 which was approved by Cabinet in September and which now forms the agreed baseline for monitoring purposes. The review was focused on: <ul style="list-style-type: none"> Updating the delivery programme for 2018/19 informed by the delivery performance in 2017/18 and previous years. Reviewing the level of funding available for unallocated budgets and the requirement for these to be continued to be carried forward. Removal of budgets previously included in 2018/19 which have been carried forward from previous years where there is no expectation or plan of delivery in 2018/19. Of the new approved projects a realistic assessment of 2018/19 deliverability was 	12	Exec Director Growth, Transport and community services	The proposed delivery programme for 2018/19 has been risk-assessed as being deliverable and to which project and programme managers will be held accountable using the following actions: <ul style="list-style-type: none"> Detailed monitoring of the delivery programme through 2018/19 to ensure slippage is reported in a timely manner and a robust level of challenge is provided to programme and project managers to ensure delivery remains on track. Performance reports developed to enable the Capital Board to

						made with delivery timeframes and budgets being moved to future years where appropriate.			undertake this monitoring and challenge.
CR8	Delivering a statutory service for children and young people with special educational needs and/or disabilities.	People/Organisational	<p>Not providing adequate service which places the LA at risk of appeals to SENDIST Tribunal, increased reputational risk via complaints corporately and to LGO.</p> <p>Unmet need will result in CYP failing to meet their potential and therefore not be supported as positively as possible into adulthood.</p> <p>The failure to recruit and retain staff.</p> <p>Lack of confidence in council services.</p> <p>The lack of accessibility and quality of information on the local offer</p>	<ul style="list-style-type: none"> • Following the SEND Local Area Inspection a WSA has been submitted identify improvements to the service offered by LCC and the Clinical Commissioning Groups. The following areas were identified as requiring action: <ul style="list-style-type: none"> ○ The lack of strategic leadership and vision across the partnership ○ Leaders' inaccurate understanding of the local area ○ Weak joint commissioning arrangements that are not well developed or evaluated ○ The failure to engage effectively with parents and carers ○ The confusing, complicated and arbitrary systems and processes of identification ○ The endemic weaknesses in the quality of EHC plans ○ The absence of effective diagnostic pathways for ASD across the local area, and no diagnostic pathway in the north of the area ○ No effective strategy to improve the outcomes of children and young people who have SEN and/or disabilities ○ Poor transition arrangements in 0–25 healthcare services ○ The disconcerting proportion of children and young people who have an EHC plan or statement of SEN who are permanently excluded from school ○ The inequalities in provision based on location 	25	<ul style="list-style-type: none"> • Recruitment of qualified staff funded by the SEND reform grant. • Commissioning arrangements with Health being reviewed. • The actions to implement the Written Statement of Action. These include: <ul style="list-style-type: none"> ○ <i>SEND Partnership Board established with five thematic working groups to implement the written statement of action.</i> ○ <i>SEND Partnership team delivering a series of parent/carers engagement events across the county. Further programme of events are being planned for the autumn.</i> ○ <i>Open feedback survey in place.</i> ○ <i>Supporting the formation of a Lancashire Parent/Carer forum.</i> ○ <i>Implementation of the early help (IT) module.</i> • Strategic reporting and monitoring of improvement plan at Cabinet and CMT level. • Active leadership of Health and Wellbeing Partnership is leading SEND improvement plan. 	12	Director of Children's Services	<p>The Local Area SEND Inspection identified serious weakness in delivery of the SEND Reforms.</p> <p>The monitoring visits by DfE and NHS England have confirmed continued progress has been made. Further monitoring visits are planned for December 2018.</p>

CR10	Adult social care provision is adequate and responsive to meet current and future demand	People/Organisational	<p>People's' needs are not met due to non-availability of care provision. The market is not responsive enough to respond to demand. People living in rural areas or with very complex needs are difficult to find appropriate support for.</p> <p>Delays to Hospital discharge, blocking moving on from enablement or Short Term Care, people remain at home without support.</p> <p>People with complex health and social care needs cannot be supported appropriately.</p>	<ul style="list-style-type: none"> The Homecare Framework has commenced and care provision is tendered in 'lots' covering all areas of the County. Care is sourced and awarded on a rotational basis across all providers for that area to guarantee adequate volumes of work and create sustainability. Work needs to be undertaken around the residential care market. Through the work of P2I, people are able to optimise their independence, access the right service at the right time, and reduce dependency on formal support as appropriate. This in turn will support the demand on the market. 	16	<ul style="list-style-type: none"> Weekly Homecare mobilisation operational meetings to review progress/raise challenges/agree actions. Board oversight. Weekly Homecare domiciliary care delays circulated for information across ops/Commissioning/Contracts 	12	Director of Adult Services	Homecare mobilisation almost complete and the strategic risk is improving. Residual risk score to be reviewed next quarter as risk may have been sufficiently mitigated.
CR11	Supporting disadvantaged families to fulfil their potential (Troubled Families Programme)	People/Organisational	<p>Failure to achieve Payment by Results targets due to specific requirements of the programme.</p> <p>Failure to accrue maximum income from the programme for the authority.</p> <p>Failure to meet savings target attributed to the service for current financial year.</p> <p>Possible reputational risk as a result of missing a national target.</p> <p>Possible reputational risk if progress not made with the TFU Maturity Model and service transformation with partners.</p> <p>Risk of additional scrutiny of programme</p>	<ul style="list-style-type: none"> Robust tracking processes in place with view to maximising payment by result claim opportunities. Ongoing data matching to identify new eligible families The target in the MTFs for TFU Payment by Results (PBR) claims for 2017/18 was for 1,500 PBR claims to be made and this target has been exceeded. The position as at 22/03/2018 is that 22% of the PBR claims available have been claimed with just over 2 years of the programme remaining. The current positive trajectory is anticipated to continue to improve with the team ensuring that all available data and information systems are fully utilised to maximise PBR claim opportunities 	20	<ul style="list-style-type: none"> Development of reporting processes to ensure monthly progress checks against targets Redesigning of outcomes plan to set more achievable/realistic targets Review of Governance Arrangements commissioned. Districts supported to identify families where potential claims can be made Workforce development complete for shared assessment. Lead Professional and Risk Sensible approach. Revised assessment CAF documentation, Quality Assurance and processes to assist in meeting requirements. TFU Maturity Model self-assessment completed and developed action plan to support delivery and improvement. 	16	Director of Public Health	<p>2740 payment by results Payment By Results (PBR) claims have been submitted to the Troubled Families team for the period up to the September 2018 claims window.</p> <p>Whilst this is a shortfall of the budgeted target (2950) for this period, the Children and Family Wellbeing service has identified a number of priority areas of focus which will hopefully generate additional PBR claims.</p> <p>On completion of the above it is anticipated that</p>

									there will be an increase in the trajectory to a target figure of 4120 PBR's by the close of the March 2019 claims window.
CR12	Unlawful disclosure of personal or commercial data caused by a deliberate or accidental or technical breach resulting in a risk to the rights and freedoms of the data subject or the intellectual property of the county council.	People/Organisational	<p>Potential impact on the data subject – Physical/financial/mental harm including potential distress and in some circumstances a threat to their safety.</p> <p>Potential impact on the county council if the organisation's confidential commercial data has been exposed resulting in a material loss</p> <p>Financial penalty given to the council by the Information Commissioner (up to £17.7 million).</p> <p>Compensation claim to the council by the data subject.</p> <p>Reputational damage to the council</p>	<ul style="list-style-type: none"> Information Security Incident Management Policy. Information security incident reporting form seen by SIRO, DPO, and IG Managers. Senior Information Security Officer dedicated to investigating and risk assessing all incidents (not every incident is a breach). Close relationship with the ICO Very proactive SIRO reporting to CMT and Heads of Service. Dedicated DPO and IG Manager promoting risk management actions. Regular staff notices and key messages to all staff. Mandatory eLearning course for all staff which has to be repeated if user is responsible for an incident. Controls in place with BTLS to consult IG regarding issues or access. 	16 (Major/Likely)	<p>Extra controls created to comply with GDPR:</p> <ul style="list-style-type: none"> Procedure set up to report certain types of personal data breach to the ICO within 72 hours of becoming aware of the breach. Robust breach detection, investigation and internal reporting procedures in place, facilitating decision-making about whether or not to notify the ICO and the affected individuals. A comprehensive record of all personal data breaches. Advice given to managers on whether disciplinary action is recommended. HR Policy has been revised to include serious data breaches as an example of gross misconduct Executive Directors and Directors and Heads of Service informed of all serious breaches in their service area. The importance of keeping information secure continues to be promoted at every opportunity and prompt action is taken to address and learn from any potential breaches. Internal Audit have confirmed that appropriate controls are in place within Children's Service. Formal management letters are now issued within Safeguarding Inspection & Audit and Fostering, Adoption, Residential & YOT when incidents are down to human error. 	12 (Major/Possible)	Director of Corporate Services	<p>The number of reported incidents has now levelled following the sharp increase earlier in the year. The increase can therefore be attributed to the introduction of mandatory e-learning and awareness raising campaigns.</p> <p>The Information Governance Team plan to introduce specific training for staff who have been involved in an information security breach focused on learning lessons. The training will be introduced next quarter.</p> <p>Awareness raising through staff notices etc is ongoing</p>
CR 13	Increase in demand, including rise in number of contacts and referrals and an increase in	People/Organisational	<ul style="list-style-type: none"> High, unmanageable caseloads. Potential drift and delay - impact on timeliness of assessment, plans and interventions with children & families. 	<ul style="list-style-type: none"> Data Quality & Performance Group oversees data accuracy, ensuring reliable performance data to aid managers understanding of demand. Weekly and monthly performance reports provide trend data. 	20	<ul style="list-style-type: none"> Demand analysis, including dip sampling of cases, being completed as part of service challenge to inform our understanding of the source, type and reasons underpinning the increase in demand seen in recent months. This will identify learning, commissioning gaps and whether demand can be managed differently. 	16	Director of Children's Services	<p>There has been a notable increase in referrals to children's social care.</p> <p>The number of children looked after</p>

Children Looked After numbers.

Financial implications.

- Monitoring of performance and caseloads via Start-Well Senior Leadership Team.
- Monthly Practice Improvement Meetings in each locality chaired by the Head of Service to scrutinise performance.
- Prevention & Demand Management Board oversees front door arrangements and quality and appropriateness of contacts/referrals. The Board reports to the Improvement & Accountability Board.
- Becoming Looked After Panels in each locality to consider all placement requests.
- Challenge via monthly Children's Services Finance & Monitoring Board re savings targets.
- Sufficiency Strategy includes targets to reduce CLA numbers through prevention of S20 accommodation and children exiting from care. More effective placement finding will also reduce costs.

- Track and challenge meetings chaired by Improvement Partner established in each locality to ensure appropriateness of care plans for CLA and to reduce costs.
- Tracking of home placements awaiting revocation, to ensure, where appropriate, more timely discharge of Care Orders for children placed with parents

has continued to increase, although similar and larger increases have been reported both nationally and regionally.

The increase in demand continues to impact on social work caseloads, with the average caseload at 20.9 - September 2018, (June 2018: 22.9), although some caseloads are significantly higher than this.

Further action is being taken to address this:

- Scheme of delegation reviewed and Head of Service approval now required for children becoming looked after.

- Successful life chances bid will support children on the edge of care.

- Increased use of Family Group Conferencing as a demand management strategy.

- Adolescent Support Unit and Outreach Service are preventing the need for accommodation.

The findings of the demand analysis

									work will also inform next steps
CR14	Intermediate care for older people in a residential setting	People/Organisational	<ul style="list-style-type: none"> Operational issues leading to service failures Unavailability of community beds for older people on a short term basis Prolonged period of rehabilitation and recuperation before the person goes home Delayed transfer from hospital Reputational challenge for the Council if care homes operated by the council are judged by CQC as 'Requires Improvement' 	<ul style="list-style-type: none"> New Head of Service has been appointed and a programme to drive forward changes in management culture and performance has been developed Management responsibilities have been realigned 	16 (Major/Likely)	<ul style="list-style-type: none"> A review of the Lancashire intermediate care system is being commissioned using money from the BCF, and will include consideration of the best practice model for each service area including the community beds Working with NHS colleagues to agree joint action plans Discussion with CQC on lessons learnt and action plans County Council care homes will formally be part of RADAR and QUIP safeguarding systems A quarterly Quality Assurance Panel will be set up with Director of Adult Services and Head of Service presenting a progress report against the action plans the Executive Director, Head of Safeguarding and an external NHS representative 	12(Major/Possible)	Executive Director for Adult Services and Health & Wellbeing	Following the implementation of the mitigating actions CQC ratings have improved.
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	<p>Delivering the Operational Plan to ensure a strong and sustainable County Council</p> <p>Delivering growth and prosperity for the whole of Lancashire</p>	Development & regeneration	<p>Self-sustaining organisation</p> <p>Stronger and growing economic base</p> <p>Ability to deliver affordable high quality services with outcomes relevant to the needs of our residents, communities and businesses</p> <p>Improved productivity and earning power of all residents</p> <p>Continued successful delivery of the LEP's current strategic economic growth programmes.</p> <p>Successfully securing new resources for Lancashire to support job and business</p>	<ul style="list-style-type: none"> Lancashire Enterprise Partnership (LEP) has secured almost £1 billion of national resources to deliver a transformational programme of economic growth which see the delivery of new jobs, business and housing growth and strategic transport infrastructure. Key programmes/projects secured include the Preston, South Ribble and Lancashire City Deal, Growth Deal, three Enterprise Zones, Growing Places Funding, Boost Business Lancashire and Superfast Broadband. ESIF monies, both Regional Development Funds and Social Funds, totalling circa £200m are currently ring-fenced for use in Lancashire (LEP area) over the next 5 years. This supports business support initiatives, innovation investment, environmental and 	12	<ul style="list-style-type: none"> Work with local authority partners to ensure national resources to support economic growth and regeneration are secured. Maximise the support from key local and national public and private sector stakeholders outside of the County Council. The County Council to give greater consideration to using its investment and prudential borrowing capacity and investment funds to bring forward a portfolio of strategic development opportunities Recent Growth Deal settlement of circa £70m will provide resource for six key projects to advance over the next three years. The LEP has secured a £320m Growth Deal programme to be delivered by 2021. Work with local authority partners and the LEP to agree: 	16	CMT	Whilst the opportunity to secure EU funds (underwritten by HMG) looks more positive in the medium term, we are also preparing in the event that EU Structural funds are replaced with complete rounds of national or sectoral productivity funding. The development of a UK Shared Prosperity Fund could also create new funding opportunities for place-based growth

			creation, housing growth and the delivery of strategic transport infrastructure linking to drive economic growth and regeneration, linking residents and businesses with economic opportunities.	<p>flood mitigation measures as well as skills development and employability work. Post Brexit vote, projects which have been through the full approval process are not able to sign a final contract with MHCLG and project funding is being restricted to spend prior to end 2018. Significant beneficiaries include the Council, other local authorities, Higher Education Institutes' and Colleges.</p> <ul style="list-style-type: none"> Secured national Digital Skills Pilot status Lancashire Leaders attended a "growth" workshop on 24 July to develop shared priorities with the support of the LEP. Following this an Economic Development themed workshop took place on the 25th September 2018. NW Made Smarter pilot approved by Government. Lancashire is one of five NW LEPs co-designing this programme with industry partners 		<ul style="list-style-type: none"> a Local Industrial Strategy (aim to be an early adopter) a new Lancashire Prospectus an approach to future growth initiatives and priorities <p>the London School of Economics have been secured as a critical friend</p> <ul style="list-style-type: none"> Economic Development's main ERDF project Boost, has secured a Grant Funding Agreement and is applying for funding to the end 2021. Business Growth Service staff will, as far as possible, seek to frontload activity and spend within this project in-case funding or activity is prematurely curtailed. For the programme as a whole, we have issued calls in all measures in an effort to defray as much of the programme as early as possible. We are now looking to a further bid which could take the project to 2021. Lancashire's Transforming Cities submission with Government. Developing response of Lancashire Enterprise Partnership to Governments LEP review. A special board meeting took place on 12 September 2018. On-going input to work of Transport for the North on strategic development corridors 		<p>strategies – though further details not expected until later in 2018.</p> <p>We are now looking to move forward with the production of a Local Industrial Strategy to maximise new funding opportunity. New national housing and transport infrastructure funds will be targeted in support of local strategic priorities.</p> <p>The LEP Review, published in July will present some significant challenges for local partners as the LEP is required to establish it's own legal entity and further distance itself from any local authority support.</p>	
CO2	Apprenticeship Levy and Apprentice % in Public Sector	People/org anisational	Increase in Apprentices in the workforce and use the Apprenticeship levy to its maximum benefit to support critical development needs in the County Council	The Apprenticeship Levy is live from April 2017 and the first payment from the digital account was in May 2017. Work is being undertaken across LCC with Heads of service or their representatives to discuss their overall workforce development and what part the Levy could play in this.	12	<ul style="list-style-type: none"> Maximise the benefits of the Apprenticeship Levy within LCC by working in conjunction with Management Team, Finance and HR to embed this into structures across the organisation. Working with services to identify the quick wins where these suit their business need and to thus eliminate training expenditure where we can, and link to Levy fund. L&D are speaking to Heads of Service to see how their training needs can be creatively addressed to link with the Levy, where possible. Heads of Service have been asked to report to L&D any current areas of training expenditure commitment that they have entered into. Heads of Services have been asked not to enter into any further financial commitments without speaking to L&D Close working relationship with the LGA and we are focussing currently on Higher degree 	15	Dir of Corporate Services	We now have more Standards available to us, which we have been waiting for and we have developed a draft strategy with the LGA support which we intend to share with Director, HR, Finance , CMT

						apprenticeships. LGA will be supporting LCC in developing a strategy and future spending plan.			
CO3	Develop and implement improved recruitment and retention practices to address increasing challenges	People/Organisational	Reduced staff turnover, especially 'hard to fill' roles; improve staff morale; reduce costs; reduce sickness absence; improve productivity.	Action plan approved by CMT. Some of the focus will be on Children's and Adult Services initially	12	<ul style="list-style-type: none"> Align to wider draft 'People Strategy' Following requests from recruiting managers to improve the recruitment process, a small task group was established to identify and implement 'quick win' recruitment improvements. Working with high recruiting services, these improvements which include improved guidance and support, and quicker and easier processes and systems, have increased the number of applications to our roles and reduced recruitment times for roles in Adults Services from around 7 months to 2 months. We have started to develop the foundations of smarter recruitment practices which are being piloted in Adults and Children's Services. We are also building and developing the Lancashire brand to help us attract high quality candidates. 	16	Dir of Corporate Services	

Key to Scores

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

			LIKELIHOOD			
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Cabinet Committee on Performance Improvement

Meeting to be held on Wednesday, 5 December 2018

Report of the Chief Executive

Part I

Electoral Division affected:
All

Quarterly Corporate Performance Monitoring Report – Quarter 2 2018/19

Contact for further information:

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Executive Summary

This Corporate Performance Monitoring Report provides an overview of performance activity across the Council for quarter 2 of 2018/19.

Highlights:

- Average social worker caseloads remain comparatively low and good.
- The number of first time entrants to the youth justice system and reoffending levels in Lancashire continue to reduce and are lower than regional and national rates.
- Performance in the county for delayed transfer of care from hospital (delayed days) and timeliness of social work assessments continues to improve.
- Much greater numbers of people are receiving reablement and effectiveness remains high as people are remaining at home.
- The average number of days taken to repair street lighting faults is reducing.

However:

- Referrals to children's social care have continued to increase and the timeliness of undertaking assessments has deteriorated.
- Child protection plan and children looked after rates increased and are substantially higher than those nationally.
- Concerns remain about the level of residential admissions for older people.

Recommendation

The Cabinet Committee on Performance Improvement is asked to comment on and note the reported performance for quarter 2 of 2018/19.

Performance Summary Education and Children's Services

Key for performance:

On track/good	Slightly below desired level	Requires improvement
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Performance Measure	Good is High or Low	2016/17	2017/18	Q1 18/19	Q2 18/19	England Average
Children's Social Care						
Number and rate of referrals during the year	L	9,907/403.9	10,337/419.4	3,377/136.8	2,605/105.1	552.5
Number and percentage of referrals that are re-referrals during the year	L	1,890/19.0%	1,937/19.0%	660/19.5%	568/21.8%	21.9%
Percentage of assessments completed during the year which took over 45 days	L	26.9%	25.0%	23.7%	26.6%	17.3%
Number and rate of children with a Children in Need Plan (snapshot as at 30 June)	L	1,825/74.3	1,660/67.2	1,716/69.2	1,754/70.7	-
Number and rate of children with a child protection plan (snapshot as at 30 Sept)	L	1,412/57.5	1,243/50.4	1,221/49.5	1,351/54.5	45.3
Percentage of children with a repeat child protection plan over last 12 months (snapshot as at 30 Sept)	L	5.5%	6.2%	6.6%	6.0%	-
Rate of Children Looked After (CLA) number/per 10,000 (snapshot as at 30 Sept)	L	1,842/75.0	1,968/79.7	2,021/81.9	2,053/82.8	64.0
Percentage of CLA in 3 or more placement over last 12 months (snapshot as at 30 Sept)	L	7.7%	7.9%	9.1%	9.8%	10%
Percentage of staff on Assessed and Supported Year in Employment (ASYE) (snapshot as at 30 Sept)	L	44.9%	27.2%	23.8%	29%	-
Percentage of staff who are experienced social workers (3+ years) (snapshot as at 30 Sept)	H	New measure	26.0%	31.9%	30%	-
Average caseload per social worker (snapshot as at 30 Sept)	L	New measure	22.0	22.9	20	-

Children's Social Care

There has been a 4.9% increase in referrals received during quarter two when compared to the same period the previous year (2,481 referrals Q2 2017/18) with a corresponding increase in re-referrals. The majority of the referrals in quarter two 2018/19 originated from the Police (998 referrals or 38.3%).

Around 26% of assessments completed during quarter two took over 45 days to complete which is higher than all comparator averages (England 17.3%, North West 16.3%).

During quarter two, the number of children with child protection plans increased by 10.6% on the previous quarter and the latest rate (54.5) was significantly higher than the national rate. The number of children with 'children in need' plans remained stable but the number of children looked after increased again on the previous quarter. The average caseload for all social workers remains comparatively low.

Performance Measure	Good is High or Low	2016/17	2017/18	Q1 2018/19	Q2 2018/19	England Average
Adoptions						
Average time between a child entering care and moving in with their adoptive family, for children who have been adopted (days)	L	489	426	386	557	520 (2014-17)
Days between a local authority receiving court authority to place a child and the local authority deciding on a match to an adoptive family (days)	L	236	156	148	218	220 (2014-17)

Adoptions

Quarter two recorded an increase in the average time between a child entering care and moving in with their adoptive family but the current rolling year figure of 419 days is still rated good in comparison to the latest national figure. Of the 18 children that gained adoption orders during quarter two, 6 of them took significantly longer than average between entering care and being placed (over 900 days each); 5 of these children were over 4 years old at time of adoption including a pair of siblings. For the remaining 12, the average was 263 days, much lower, and well within the 426 day (14 month) target.

Performance Measure	Good is High or Low	Previous Period	Latest Available	England Average
Rate per 100,000 local youth of first time entrants to youth justice system	L	180 (Jan 17 - Dec 17)	180 (Apr 17 - Mar 18)	273 (Apr 17 - Mar 18)
% of Young People reoffending	L	39.6% (April 16 - June 16)	39.2% (Jul 16 - Sept 16)	41.7% (Jul 16 - Sept 16)

Youth Offending Team

There were fewer first time entrants to the youth justice system in Lancashire for the last reported period and the Lancashire rate of first time entrants remains lower than the national and regional rates. Lancashire continues to be in the upper quartile nationally against this indicator. Lancashire youth re-offending levels have reduced and remain lower than the national and regional rates. Lancashire continues to be in the second quartile nationally against this indicator.

Performance Measure	Good is High or Low	Previous Period	Latest Available	England Average
School Improvement				
Proportion of children achieved a good level of development EYFS	H	69.4% (2016/17)	69.5% (2017/18)	71.5%
Percentage of pupils reaching the expected standard in reading, writing and mathematics at KS2	H	61.0% (2016/17)	64.0% (2017/18 provisional)	64%
Average Attainment 8 score at GCSE	H	45.7 (2016/17)	46.6 (2017/18 provisional)	46.5
Average Progress 8 score at GCSE	H	-0.14 (2016/17)	-0.08 (2017/18 provisional)	-0.08
% Education settings rated Good/Outstanding	H	90.3% (Jun 18)	89.5% (Sept 18)	86.0% (Sept 18)

School Improvement

Performance of Lancashire pupils at Early Years Foundation Stage remained stable. The Lancashire average was lower than the national (71.5%) and statistical neighbour (71.4%) but similar to the regional (68.9%) averages.

Provisional data published by the Department for Education for 2017/18 shows an improvement in the proportion of pupils reaching the expected standard in reading, writing and mathematics by the end of primary school (Key Stage 2). Revised (confirmed) data for Key stage 2 is to be published in December 2018.

Provisional data published by the Department for Education for GCSEs suggests during 2017/18, the average Attainment 8 score per pupil for Lancashire (46.6) was similar to the national (46.5), regional (45.5) and statistical neighbours (46.1) averages. Lancashire performance had improved on the previous year (45.7). The average Progress 8 score (progress a pupil makes from the end of key stage 2 to the end of key stage 4) for Lancashire (-0.08) also improved and was similar to the national rate (-0.08). Revised data for Key stage 4 is to be published in January 2019.

Growth, Environment, Transport and Community Services

Performance Measure	Good is High or Low	2016/17	2017/18	Q1 2018/19	Q2 2018/19
Street lighting and highways					
Average number of working days to repair a LCC street lighting fault	L	4.6	7	4.35	4.14
Highway Safety Carriageway Defects repaired within 20 working days.	H	97%	64%	66%	Sept data not available see text
Waste management					
% of recycling, re-use and composting	H	46%	42%	43%	42%
% diversion of municipal waste away from landfill (including recovery)	H	49%	51%	55%	56%
Libraries and museums					
Number of visits to libraries each quarter	H	4,007,475	3,573,465	879,387	924,536
Number of visits to museums each month	H	256,318	244,365	58,544	59,032
Number of E-Book downloads each month	H	162,384	212,925	58,659	64,857
Number of library public issues each month	H	4,170,173	3,622,043	891,108	967,543
Planning applications					
% of minerals and waste planning applications determined within 13 weeks	H	50% (Q4)	67%	50%	57%
% of Regulation 3 planning applications determined within 8 weeks	H	56% (Q4)	78%	60%	80%

Street lighting and highways

The average number of working days to repair Lancashire County Council street lighting faults was lower in quarter 2 of 2018/19 than in the previous quarter and this year's performance to date shows a marked improvement on last year's.

The recently approved highways defect repair policy was implemented from mid-August, meaning that reporting changed in accordance with that policy. As a result, there was no September data in respect of highway safety carriageway defects repaired within 20 working days so full quarter information is not available. However, performance had improved during the months of July and August (July 87% and August 96%). Data relating to the new highways policy will be included in the Corporate Performance Monitoring Report for quarter 3 of 2018/19.

Waste management

The recycling, re-use & composting rates in Q2 compared to Q1 (2018/19) has dropped a percentage point having seen a sizable drop in kerbside green waste collection in the months of July and August of around 4,000 tonnes. There are slightly lower tonnages at the recycling centres of green and recyclate waste. Residual waste at kerbside continues to see increases with the recycling centres remaining comparable in tonnages to Q1 figures.

Percentage of waste re-used, recycled, composted and recovered

Mass loss trials continue to improve at Thornton Waste Treatment facility which is contributing towards this increased percentage rate, benefiting from less tonnes to landfill and increased diversion. Lancashire Renewables Limited have also secured new off-take markets for both refuse derived fuels and compost like output which is also contributing to the diversion of tonnes from landfill.

Libraries and museums

Nationally, the volume of loans from libraries is decreasing and that is the case in some libraries in Lancashire. However, Lancashire is now experiencing an upturn in terms of loans and footfall in some libraries, which is reassuring. It is recognised that libraries should not be measured on the volume of book loans alone, a point reiterated by the Minister with responsibility for Public Libraries in England and Wales. Many citizens use their library for other reasons. Some library users rarely borrow a book or don't borrow in high numbers but regard their library as enabling them to use a community space, have digital access, feel less isolated, and have access to information and community activity. Libraries provide cultural venues with activity that brings enjoyment and supports the health and wellbeing of those citizens who visit them. This factor has been recently applauded by the Health Secretary who is encouraging the use of libraries as part of social prescribing by doctors.

The service is developing a range of new indicators to cover the offers which feature in the library strategy.

Planning

In quarter 2 2018-19, a total of 7 County matter applications were determined, of which 4 (57%) were determined within the 13 week decision period. The 3 applications that were not determined within this period each had an agreed timescale in place.

10 applications for Lancashire County Council's own Regulation 3 development were determined in quarter 2 2018-19. 8 (80%) of these were determined within 8 weeks (there is no national standard in respect of this indicator, but 8 weeks is the standard set for district council applications of a similar scale).

Adult Services and Public Health

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

Performance Indicator	Good is: H/L	2016/17	2017/18	Q1 2018/19	Q2 2018/19	England Average
Adult social care - personalisation						
Adults aged over 18 receiving self-directed support (personal budgets) (ASCOF) snapshot as at 31 March	H	77.8%	77.4%	76.8%	76.2%	89.7%
Adults receiving direct payments (ASCOF) snapshot as at 31 March	H	23.9%	25.1%	26.5%	28.0%	28.5%
Support for carers						
Carers receiving direct payments for support direct to carer (ASCOF) during the year	H	98.3%	98.6%	99.4%	99.3%	74.1%
Support for people with learning disabilities						
Proportion of adults with learning disabilities who live in their own home or with their family (ASCOF) during the year	H	85.5%	85.3%	85.1%	84.0%	77.2%
Support for people to remain independent						
Permanent admissions to residential and nursing care homes per 100,000 pop aged 18-64 (ASCOF) during the year	L	17	19.2	19.6	17.5%	14.0%
Permanent admissions to residential and nursing care homes per 100,000 pop aged 65+ (ASCOF) during the year	L	742.3	728.9	731.7	729.7	585.6
Number of permanent admissions to residential and nursing care homes pop aged 65+ during the year	L	1,795	1,761	1,792	1,787	-
Waiting times for OT assessments (snapshot number of clients in OT allocation worktray)	L	1,995	1,384	1,140	745	-
Number of reablement referrals during the year	H	3,642	7,392	2,079 (3m)	2,037 (3m)	-
Number of completed reablement support plans during the year	H	3,207	6,657	1,851 (3m)	1,646 (3m)	-
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (ASCOF) from 1 October to 31 December each year	H	83.8%	88.1%	88.2% (3m)	88.2% (3m)	82.9%
Timeliness of assessment and support						
Assessments completed within 7 days during the year	H	82.6%	85.1%	87.6% (3m)	87.1% (3m)	-
Assessments completed within 28 days during the year	H	94.6%	95.6%	96.1% (3m)	96.3% (3m)	-
Delayed transfers of care from hospital (DToc) – total delayed days due to social care in month as detailed each year	L	2,167 (Mar 17)	1,232 (Mar 18)	1,093 (Jun 18)	1,102 (Sep 18)	-
Quality of services						
Care Quality Commission – Care Home ratings good/outstanding snapshot as at 31 March	H	70.0%	75.9%	78.8% (Jun 18)	80.4% (Sep 18)	80.8%
Care Quality Commission Community Care Service ratings snapshot as at 31 March	H	80.1%	91.0%	92.8% (Jun 18)	94.0% (Sep 18)	86.5%

Support for people to remain independent

The focus on maximising people's independence continues to be demonstrated by the number of people who are receiving reablement and its effectiveness. However, concerns remain about the level of residential admissions for older people as we remain higher than the national average, and various options are being considered to reduce this.

The number of people waiting for OT assessments reduced steadily towards the end of 2017/18 and has seen considerable further improvement in recent months.

Timeliness of assessments and support

Over 96% of social work assessments were completed within 4 weeks. There are currently around 1100 people waiting for a social work assessment. This figure is a significant reduction on the 1400 reported as waiting at the end of the previous quarter and reflects the work that is underway to reduce the backlog. However, many of the remaining cases are people who are waiting for review and are proving more complex to manage and resolve which is making it difficult to reduce the numbers waiting quickly. Capacity in the Promoting Independence Reviews Team has also reduced because of people securing other permanent roles.

The 2018/19 monthly totals for delayed transfer of care from hospital (delayed days) continue to show considerable improvement and Lancashire is on track to maintain levels close to the September 2018 targets recently published for all authorities as part of the Better Care Fund 2018/19 Operational Guidance.

Quality of services

The percentage of care homes being rated good or outstanding continues to improve, and is similar to the national average.

Of the 409 Lancashire care homes rated, 18 are in-house residential services for older people and 77.8% (14) of these were rated good or outstanding. The other 4 were rated as requires improvement. Of the 409 care homes rated, 8 are in-house disability short break services and 100% of these were rated good or outstanding.

The percentage of community care services rated good or outstanding continues to improve and performance is significantly above the national average. Of the total 201 community care services rated, 9 services are in-house disability services (8 domiciliary services and 1 shared lives service) and 100% of these were rated good or outstanding.

Performance Measure	Good is High or Low	2016/17	2017/18	Q1 2018/19	Q2 2018/19	England Average
Health Checks						
Number of NHS Health Checks offered to eligible population	H	75,892	96,920	29,348	26,286	-
Number of NHS Health Checks completed	H	47,107	51,486	11,928	12,827	-
% completed of NHS Health Checks offered	H	62.1%	53.1%	40.6%	48.8%	42.6% (Q1)
Alcohol						
Percentage of alcohol users that left alcohol treatment successfully who do not re-present to treatment within 6 months	H	58.9%	54.7% (published Sept 2018)	n/a	n/a	39.0%
Drug use						
% of opiate drug users that left drug treatment successfully who do not re-present to treatment within 6 months	H	8.8%	7.1% (published Sept 2018)	n/a	n/a	6.3%
% of non-opiate drug users that left drug treatment successfully who do not re-present to treatment within 6 months	H	57.3%	52.7% (published Sept 2018)	n/a	n/a	36.4%
Children & Family Wellbeing service						
	Good is High or Low	2016/17	2017/18	Q1 2018/19	Q2 2018/19	England Average
- Number of families attached to the programme	H	4,305 (Q4, 2016/17)	8,647	10,169	12,498	n/a
- Payment by results claims (submitted to the DCLG)	H	841 (2017)	2,097 (rolling figure)	2,409	2,740	n/a

Health Checks

Across the lifetime of the NHS Health Check programme, 224,420 of the current eligible population aged 40 – 74 years of 354,935 have had an NHS Health Check which equates to 63.2%. Invites to and uptake of appointments in quarter 2 of 2018/19 was higher than in the previous quarter and in the corresponding quarter of 2017/18.

Alcohol

2017/18 data published in September 2018 showed that the proportion of alcohol users that left alcohol treatment successfully who do not re-present to treatment within 6 months was lower when compared to the previous year, however this was considerably higher than that nationally.

Drug use

2017/18 data published in September 2018 showed that the proportions of both opiate and non-opiate drug users that left drug treatment successfully who do not re-present to treatment within 6 months was lower when compared to the previous year, however this was considerably higher than that nationally.

Children & Family Wellbeing service

A further 2,329 families were attached to the Troubled Families programme in quarter 2 of 2018/19, increasing the number to 12,498 as at 30 September 2018.

The cumulative total of 'payments by results' claims achieved by the claim window closure as at 30 September 2018 – end of quarter 1 - was behind (210 short of) the targeted position (2,950).

Numerous discussions have taken place with colleagues from the national Troubled Families team and we are working closely with them focusing on a wide range of areas which could further increase our payments by results claims including a data cleansing exercise and the implementation of the Early Help Module along with the alignment of school attendance to the agreed percentage target progression. We are also planning further discussions with partners such as the Department of Works and Pensions and Lancashire Adult Learning around data gaps to support payments by results claims.

It is anticipated that that the target of 8,620 payments by results claims will be achieved by the time the 5 year programme ends in 2019/20.

Consultations

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

Implications:

This item has the following implications, as indicated:

Risk management

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

Local Government (Access to Information) Act 1985

List of Background Papers

None

Reason for inclusion in Part II, if appropriate

N/A

Cabinet Committee on Performance Improvement

Meeting to be held on 5th December 2018

Electoral Division affected: All

Customer Access Performance Report

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Executive Summary

This report provides an update for the Cabinet Committee on Performance Improvement on the operation and performance of the Customer Access Service.

Recommendation

The Cabinet Committee on Performance Improvement is asked to comment on and note the contents of this report.

Background and Advice

The Customer Access Service currently deliver first point of contact for telephone, email and social media interactions for 28 Lancashire County Council services, handling over 1.1 million customer interactions a year. This equates to roughly two thirds of all customer contacts coming into the Council.

In addition to this, the Customer Access Service also process 24,800 Blue Badge applications, over 5,000 Crisis Support Applications, and over 51,700 Customer Satisfaction feedback reports.

These services are diverse and vary widely from booking a wedding, handling sensitive safeguarding reports, to reporting a pothole. Each service has its own data handling tool(s) which we record contacts in, requiring Customer Access staff to be able to competently use over 25 separate specialist systems.

The Customer Access Service provides specialist teams to ensure the best use of resource to deliver the range and volume of services in a cost effective manner. Advisors are multi-skilled and trained to handle enquiries on a variety of services across a variety of channels, using a best of breed telephony platform to route these interactions to the correct person for resolution.

Customer Access operates between 8am and 6pm, Monday to Friday and employs staff to cover 190.5 full-time equivalent posts.

Given the current financial climate, Customer Access are already working towards multiple savings targets with various existing programmes of work.

The following table illustrates the volume of contacts presented for all services delivered through the Customer Access Service, April to September 2018, along with comparisons with the corresponding period from the previous year.

Customer Access Service overall performance – April to September 2018

Measure	2017/18	2018/19
Telephone Calls Received	469,026	458,108
Telephone Calls Answered	417,001	414,628
<i>% Answered</i>	88.9%	90.5%
emails Received	93,433	95,454
emails Completed	93,099	96,195
<i>% Completed</i>	99.6%	100.0%
Social Media Received	n/a	867
Social Media Completed	n/a	867
<i>% Completed</i>	n/a	100.0%
Total Contacts Received	562,459	554,429

The reduction in contacts received is an indication that we may be starting to realise achievements in the ongoing campaign to assist appropriate channel shift for services, allowing effective self-service through the website. The decrease in telephony contacts and corresponding increase in email contacts also reflects the continuing effect of ongoing vacancies within the service which reduces the resource available to answer calls. The attrition rate within Customer Access has increased over the past 18 months largely due to an increase in opportunities elsewhere within the authority.

We continually measure performance so that:

- We can demonstrate that enquiries are handled without undue delay. This is as a result of the accurate forecasting of call volumes by 15 minute interval by day. We then compare the forecast to the actual performance.
- Customer experience is assessed by analysing data from our customer satisfaction surveys and as a result processes are re-engineered to deliver the optimum experience.

- Regular communication and feedback from senior managers is taken on board. We meet periodically with Heads of Service to discuss the specific service needs.

Performance, Transformation & Improvement Programme

The service is actively involved with delivering requirements to support the following work areas within the above programme:

Adults Social Care

The percentage of Adult Social Care calls and emails received into Customer Access that result in a referral to Adult Social Care has remained consistent at 9.5% with a further 22.5% resulting in the requirement for some other form of assessment or review from the Social Work teams.

There has been ongoing liaison between the two services during the Service Challenge process to look at a more effective and robust front door in order to help manage the increasing demand on the Adults Service. Customer Access will take part in an Association of Directors of Adult Social Services Peer Review in November 2018 to help identify both best practice and potential opportunities for improved working practises.

In addition to this, a current project to analyse the Adult Social Care call traffic within Customer Access has already identified a number of potential improvement opportunities that will both enhance the customer experience and realise efficiencies within Customer Access.

Adult Safeguarding

The accuracy and timeliness of Customer Access was recently singled out for praise by external consultants who were commissioned to review the Multi Agency Safeguarding Hub service. The performance management within Customer Access was highlighted as being 'rarely found in the public sector' and, following on from the review, Customer Access will be heavily involved in the redesign of the front door for Adults Multi Agency Safeguarding Hub, building on current best practice to improve efficiency and manage risk

Children's Social Care

There has been a slight reduction in contacts handled by the Customer Access Service for Children's Social Care as a result of fewer repeat and follow up calls. The move towards callers discussing cases and concerns directly with Social Workers is now fully embedded and, following the project to analyse the Adult Social Care call traffic within Customer Access, we hope to realise further efficiencies and improvements to the customer experience.

Early Help Module

In October 2018, the Liquid Logic Early Help Module system module was brought in to enable more collaborative working and to simplifying the step up and step down process between Children's Multi Agency Safeguarding Hub and the Children, Families and Wellbeing Service. In January 2019, Special Educational Needs and Disabilities will also begin to use this module.

As the existing front door for many Multi Agency Safeguarding Hub referrals, the Customer Access Service has been a key element within the project; amending our processes and retraining staff to use the new Early Help Module whilst continuing to use the Liquid Logic system for cases already open to Children's Social Care.

Children Not in Education, Employment or Training

Customer Access are currently working with the Learning & Skills Service in order to provide a clearer picture on data for young persons aged 16-19, who are not in education, employment or training. This will involve liaising with young people as well as parents and guardians, employers, and education and training providers, and will also consider different contact and communication methods in order to maximise engagement. This is an ongoing piece of work and will focus on a cohort of around 2,500 young people (10% of all school leavers) currently listed as either not in education, employment or training or with an unknown status. This will allow the Learning & Skills Service to focus on particular areas of need to reduce not in education, employment or training numbers going forward. The proposal is that this element of work will transfer to the Customer Access Service in the new financial year.

AskHR Service

As part of the Customer Access savings programme, funding for 7 full time equivalent posts was reduced in April 2018 for the AskHR Service and temporary funding from within the Customer Access Service budget was agreed until December 2018. The project has focused on the online uptake of Human Resources enquiries and customer self-service to reduce the volume of HR contacts.

Analysis reports were produced looking at both telephony and email enquiry types to support the development and introduction of a new Managers' Toolkit. The Toolkit provides the information, guides and support that managers need on a regular basis. As part of the analysis reports, Customer Access have also reviewed the AskHR telephony messages to simplify the options presented to customers, raise awareness of the Managers' Toolkit and provide improved reporting; specifically in relation to popular HR enquiry types.

Blue Badge Service

Improvements in application processing time, waiting times, and the uptake of the Blue Badge online application system continues to be sustained in the Customer Access

Service. The approval rate of Blue Badge applications so far this year is 85% and as at end of October 2018, there were a total of 58,283 Blue Badges in circulation.

Lancashire County Council delivers the Blue Badge Service on behalf of the Department for Transport and Customer Access have recognised that some applicants find their online application process difficult. We therefore offer an assisted application service where we will make an appointment at a convenient time for the customer and contact them in order to complete the application using the information they provide. 1,401 assisted applications have been completed so far this financial year. We have also updated the Blue Badge section on the Lancashire County Council website to include information for applicants.

The Blue Badge Service continues to offer a fast track application process for terminally ill Blue Badge applicants (also known as palliative care applications).

Crisis Support

The number of Crisis Support applications received for the year so far is 2,001, the approval rate has decreased to 35% compared to 39% in 2017/18. This has been due to improved signposting allowing us to find alternative solutions for our citizens. The number of applications received this year has also reduced, partially influenced by the change from monetary awards to the provision of food parcels. It should also be noted that numbers received last year were influenced by the problems experienced with tax credits, the same issues have not occurred this year.

The tables below illustrate the assistance provided by the Crisis Support scheme for the first two Quarters of 2018/2019.

Applications for assistance with food & fuel – April to September 2018

Period	Received	Awarded	Declined
1. April - June	727	178	549
2. July - September	701	190	511
TOTAL	1,428	368	1,060

Applications for assistance with furniture – April to September 2018

Quarter	Received	Awarded	Declined
1. April - June	294	168	126
2. July - September	279	165	114
TOTAL	573	333	240

Education Management System

In September 2017 a new Online School Admissions system was introduced allowing customers to apply for Primary and Secondary school places. The new online system provides a complete self-service approach from applying and submitting an application, though to the publication of online results for school places.

During the summer of 2018, further work has been done to review previous performance and improve the system. Work has included revision of the communication messages and amending the way school names appear in the system for an improved customer experience.

Family Information Service

As part of a Customer Access Service improvement review advisors no longer use the Synergy system as it was identified that this did not add value to the process. Benefits realised from this change include greater efficiency and an improved customer experience along with a simplified, shortened training programme.

The Customer Access Service has also worked closely with Corporate Communications to further develop and promote the digital channel for the service, allowing customers to self-serve. In addition, the scope for first point of contact resolution has been increased slightly which has helped Customer Access reduce the impact on the service workload.

Highways Systems

The new Highway Asset Management system went live on 1 April 2017, and work continues to embed usage within the Highways service. Customer Access are supporting this work, contributing to regular Governance Board meetings and liaising closely with the service to develop and improve use of the customer module by both The Customer Access Service and the Highways service. The customer experience is a key consideration for this work, and the intention is to improve the amount of information available for the customer at the first point of contact by working with the service to improve communication.

There have also been multiple updates to the online self-service Report It portal. The intention is for customers to be able to use this to both report and see progress updates. Customer Access have considered the customer experience and provided input for design and testing.

NoWcard Renewals

Extra support from the Customer Access Service was given to the main cohort of NoWcard renewals that expired at the end of March 2018 and the project proved to be successful. This was extended through April and May to ensure that support was available for all the 180,000 NoWcards expiring.

School Transport

As part of a transformation programme initiated by the Customer Access Service, a new 5 year (Gold Pass) was introduced in July 2018. Advisors now handle enquiries in relation to both this and the online Season Ticket which was introduced in May 2017. Recently, we have worked with the service and the Communications team to promote the season ticket in the run up to the new September school year.

Customer Access Service Specific projects

Restructure of the Service

In July 2018 the Customer Access Service undertook a restructure of the service which was successfully implemented in September 2018. The service redesign reduced the operating hours in line with agreed savings and provided a clearer, more balanced framework in order to successfully deliver the service and achieve the additional economies required moving forward.

The number of senior managers has reduced and roles have been redefined in order to ensure that each member of staff is accountable for tasks that are appropriate to their grade. This will allow staff to focus on specific elements of the business, ensuring ownership and accountability as well as encouraging them to develop and improve processes. It is intended that this will provide a consistency of work that will both improve quality and generate greater levels of efficiency.

Crucially, the new structure offers different development pathways for all staff, providing opportunities that will expose them to different tasks and allow them to build the skills and experience required to develop their career within the service. The retention of staff will be a key element in the success of the service moving forward and the ability to demonstrate tangible career pathways, as well as actively nurturing talent within the service, will be crucial in achieving this.

Internal Audit

An internal audit was completed in October 2018 to determine the adequacy and effectiveness of the administration of the Crisis Support Scheme. Substantial assurance was provided that the framework of control is both adequately designed and effectively operated, ensuring the efficient provision of awards to eligible individuals.

Areas of good practise highlighted within the report included the detailed process guides in place, the thorough eligibility checks undertaken and the effectiveness of regular performance monitoring in ensuring that applications are completed in line with the Crisis Support Scheme policy.

Recruitment

An internal review of recruitment has been conducted in order to improve the retention of staff within Customer Access. Assessment days have been introduced in order to test and observe potential employees, strengthening the recruitment process and showcasing the benefits of Lancashire County Council as an employer. These will continue to be developed and refined, incorporating the anticipated changes that the new Oracle Recruitment System will bring in order to select the right candidates in the most timely and thorough manner.

The table below illustrates the number of Customer Service Advisors recruited so far during 2018/2019.

Customer Service Advisors recruited – April to September 2018

Period	Customer Contact Centre	Social Care	HR
April – September	6	14	0

Training

The table below illustrates the number of Training Sessions that have taken place so far during 2018/2019, along with the number of Advisors who have been trained.

Advisors trained – April to September 2018

Service Area	Customer Contact Centre		Social Care		HR	
Period	Sessions	Agents	Sessions	Agents	Sessions	Agents
April - September	51	326	25	148	11	46

An additional 25 bespoke training sessions have also been delivered to 148 members of staff on a variety of systems and skills, developing staff within their roles.

Savings

The current financial year to date has seen a further reduction in both budget and headcount within Customer Access, continuing the trend over the last three years. Future savings have been agreed but are dependent on technology implementation. The savings in the Customer Access Service delivered to date have totalled £1,005,000, and we have seen a reduction of 44.4 full time equivalent posts (the saving quoted includes a transfer of £58k 2.50 full time equivalent posts to the Emergency Duty Team). It should be noted that the budget for the Customer Access Service is based almost entirely on staffing and therefore in order for Customer Access to make the necessary saving reductions, staffing levels must be reduced. Reducing

headcount without reducing the work coming through the centre will result in longer wait times for callers and callers having to abandon calls and make several further call attempts before resolving their enquiry. This could lead to complaints and have a negative impact on the reputation of the authority.

The projects delivered to date are:

- The removal of the Lancashire House reception support function, and
- The reduction in Social Care opening hours.

Work continues across the other projects to deliver:

- A Social Care Portal,
- Improved HR self-service,
- Telephony automation,
- Making reductions against the Customer Access Service support function, and
- The full blending of email contact into the service with telephony.

Service Plan and Vision

The Customer Access Service Plan and Vision have been reviewed and approved by Stephen Young (Executive Director of Growth, Environment and Communities), Sue Procter (Director of Programmes and Project Management) and Councillor Peter Buckley. It supports a customer focused approach to service delivery, and encourages a channel shift to digital customer solutions. It also demonstrates the Customer Access Service contribution and commitment to:

- Increasing and improving 'access channel change',
- Reducing the cost of service delivery by promoting self-service and automation for specific services, and
- Ensuring that the services provided keep the citizens of Lancashire at the core of what we do.

Whilst there is a focus on digital contacts, customers will not be excluded because they do not have internet access at home. Lancashire residents will still have telephone access to our trained advisors who understand the specific services areas.

Genesys Programme Phase 2 - Technology Improvements

As part of the development of the Genesys toolkit, the Customer Access Service has overseen the implementation of AskHR and Children's Social Care emails onto the Genesys platform in order to blend them with telephony contacts presented to advisors. This is more efficient and avoids the manual handling of reports and data between systems.

Handling emails in Genesys has allowed more visibility of workloads, quicker handling times and more accurate forecasting and reporting. A project to move Adult Social

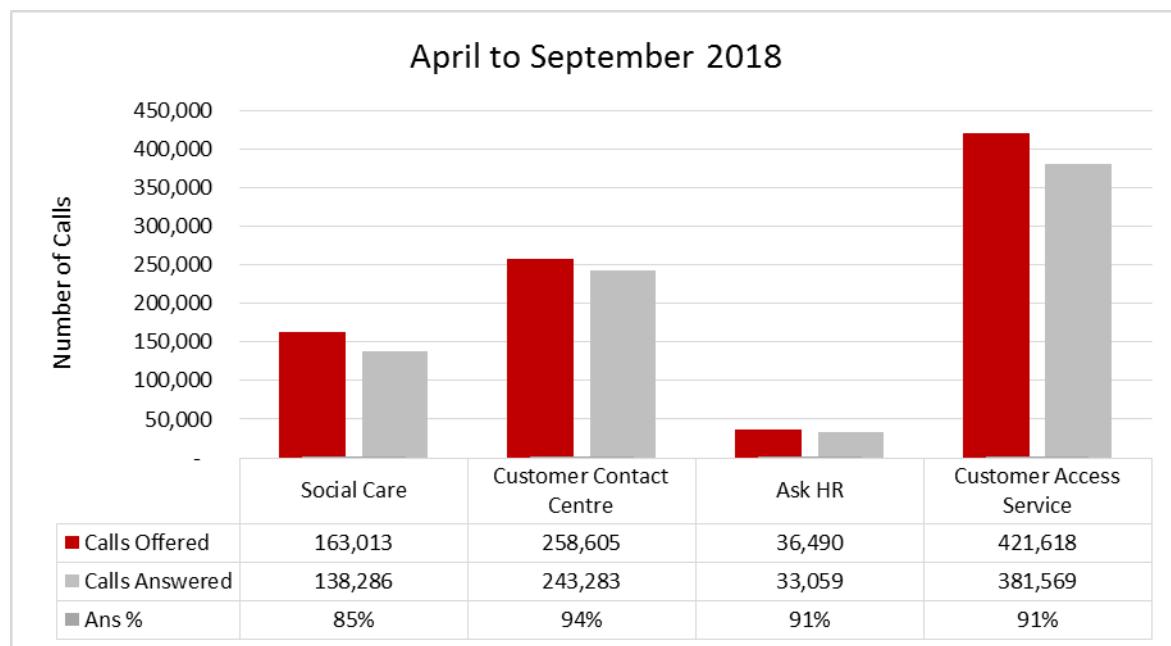
Care emails onto Genesys is now being developed following which all email contact throughout Customer Access will be successfully blended with traditional telephony contacts.

New Hardware equipment

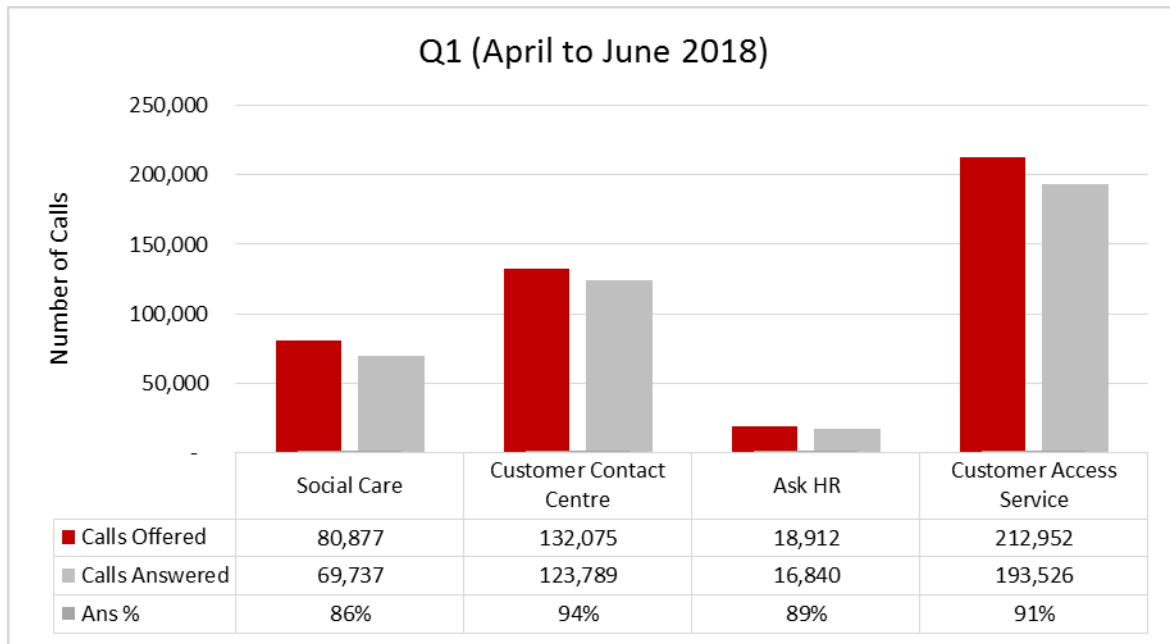
The Customer Access Service managed the delivery of a full PC asset refresh across all departments to provide new Lenovo assets with increased memory and performance speeds. The asset refresh was followed by an upgrade to wider, flat screen monitors, allowing advisors to open more windows within the screen and therefore enabling them to carry out tasks more efficiently. Headsets were also upgraded to include better audio controls, noise reduction features and acoustic shock cancelling hardware.

Telephony & Email Performance

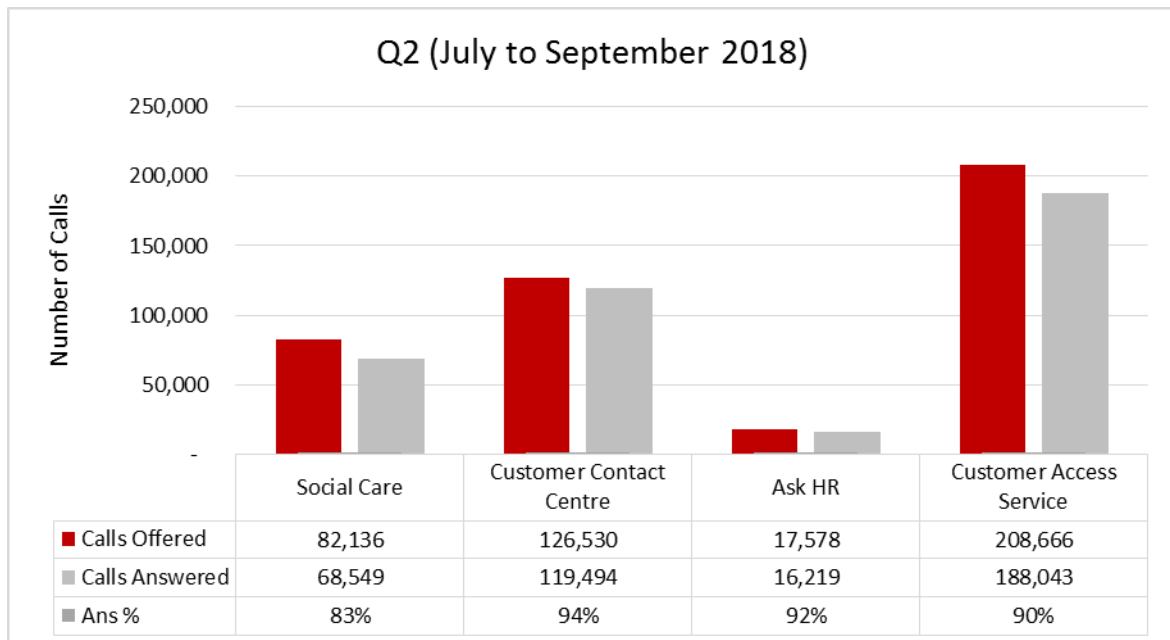
Telephony performance – April to September 2018



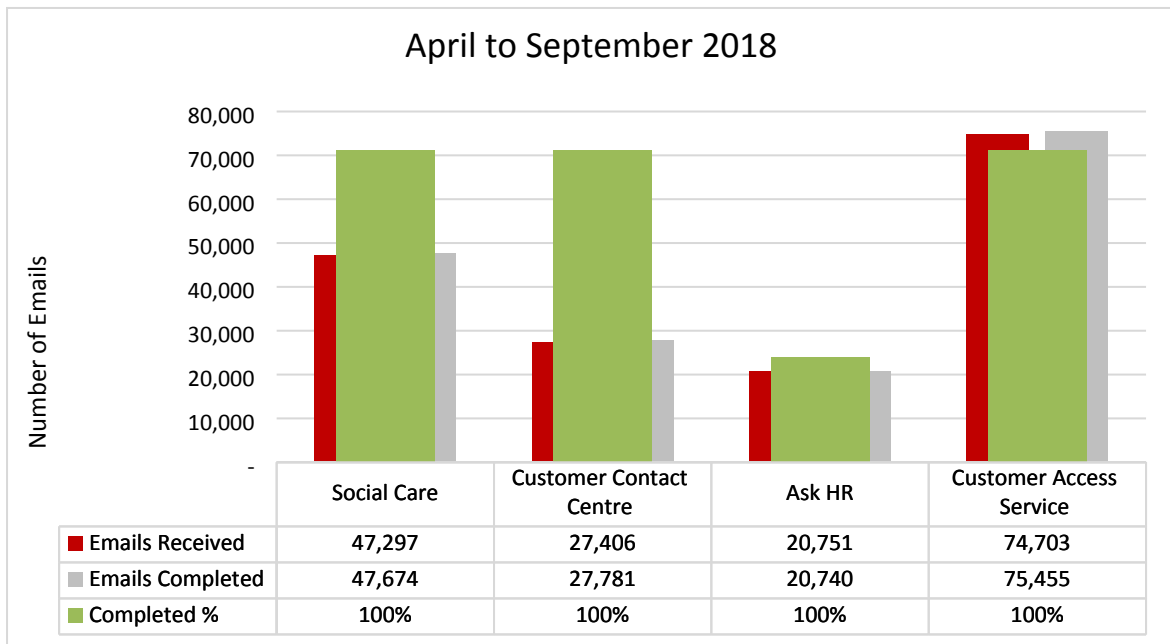
Telephony performance – April to June 2018



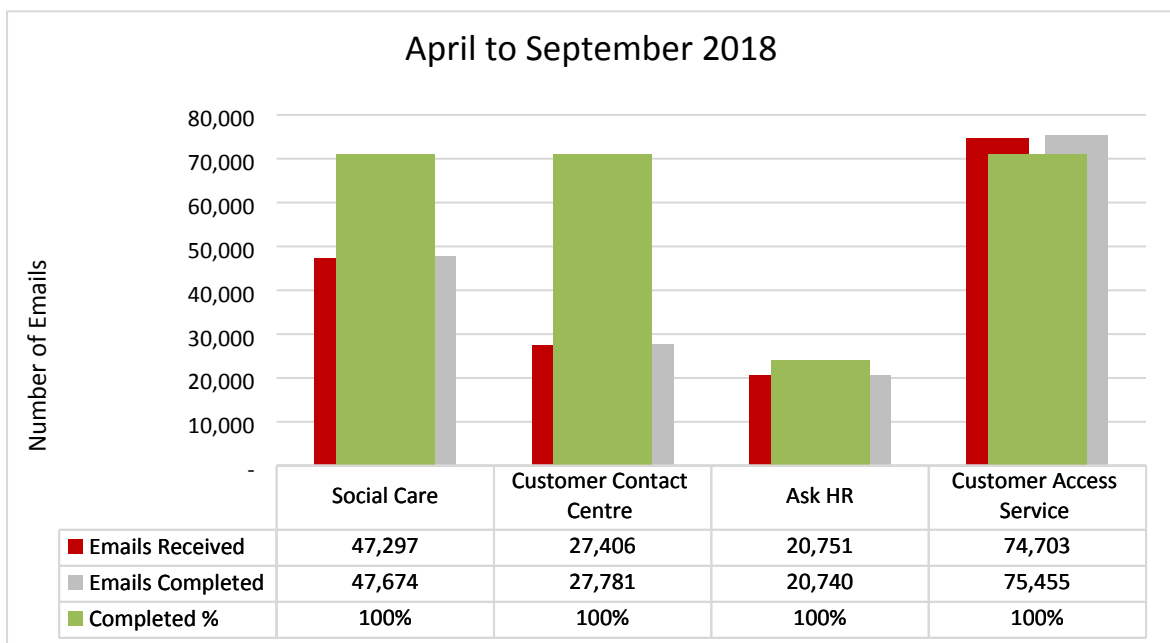
Telephony performance – July to September 2018



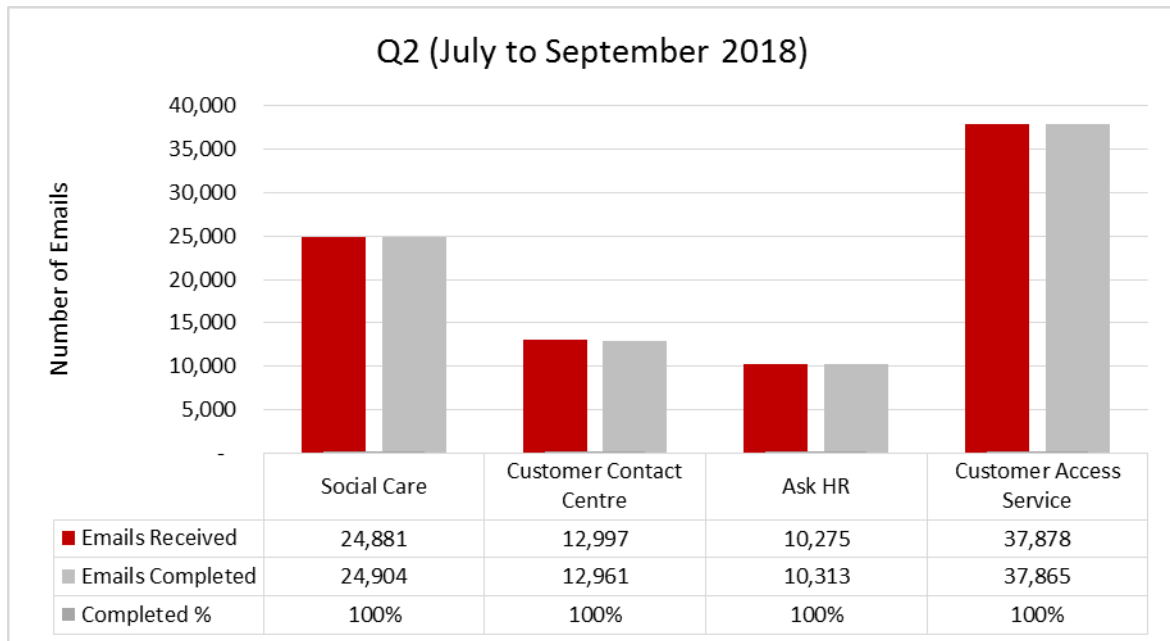
Email performance – April to September 2018



Email performance – April to June 2018

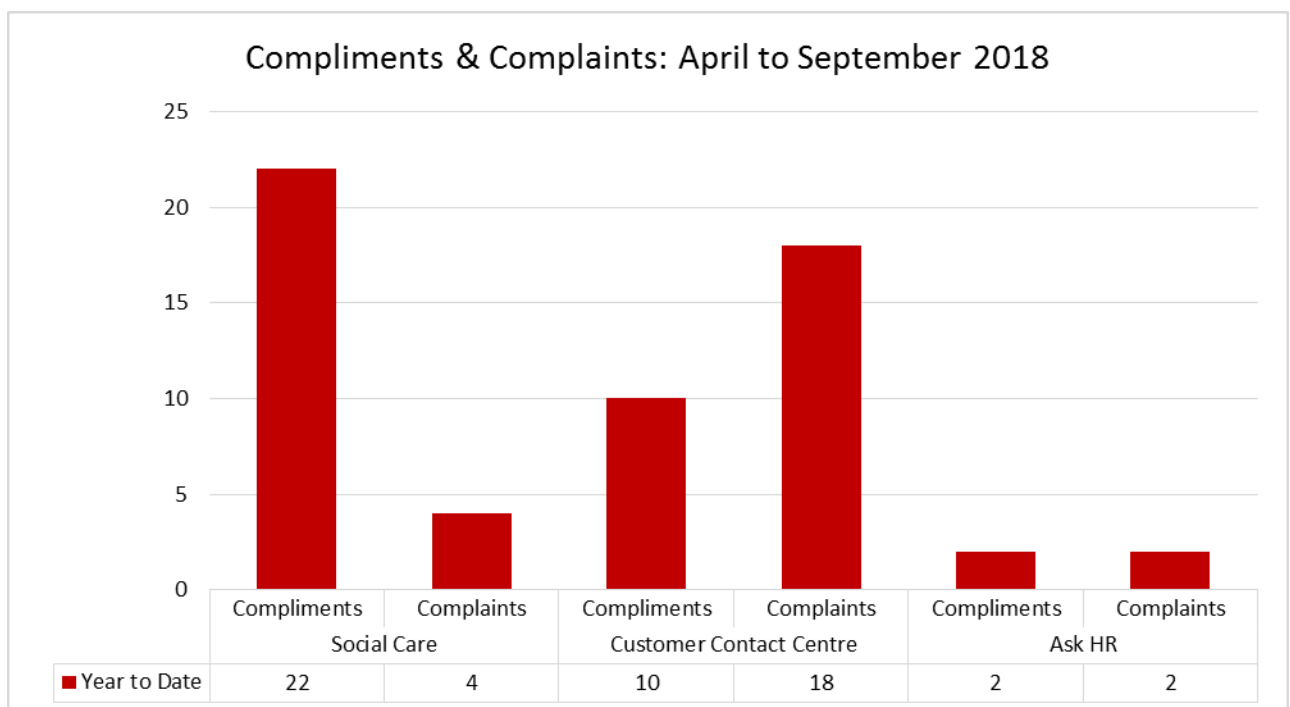


Email performance – July to September 2018



Compliments and Complaints

The number of overall compliments the Customer Access Service has received so far during 2018/2019 is 34 with the number of complaints received being 24. Both figures are from a total number of 553,562 contacts received.



Future Improvements

Genesys Programme Phase 2 - Technology Improvements

As part of the Genesys Phase 2 project, the Customer Access Service will benefit from the delivery of several important work streams:

- **Auto Attendant Utterance** – an intelligent piece of software that recognises speech to effectively routes calls to the customer's desired service. This will be implemented on the signposting line.
- **Auto Attendant Call By Name** – software that will effectively route calls to a person rather than a service for an improved customer experience. This will be implemented on the Social Care line and route calls to social workers and other members of staff.
- **Data integration** – an application that will pre-populate a customer's information into a system once connected to an advisor, generating an improvement to customer experience and a reduction of handling time.
- **Skype and Email Integration** – for ease of use and an improved customer experience, advisors will have the ability to transfer calls and emails immediately by entering the name of the desired contact within Genesys rather than search for it in another system.
- **Social Media & Webchat** – implementation of alternative contact channels for customers to contact the Customer Access Service.
- **Acorn POP** – an application to pre-populate processes and guidance to advisors based on the customer's query, improving efficiency and consistency of service.

All of the work streams to be delivered are intended to ensure an improved way of working for the benefit of the customer. Customer Access are working side by side with BT Lancashire Services and Anana (the software provider) to ensure that the deliverables are utilised to their full potential.

Blue Badge Improvements

Due to the current Department for Transport contract coming to an end, we are in the process of bringing in a new Client Management System. This will be provided by Northgate and will be an enhancement on their current product which is included as part of the Department for Transport contract. The new system will allow greater reporting and forecasting ability to support better planning within the service, as well as offering enhanced usability and functionality.

We have also made several improvements to our Blue Badge processes in order to make them more efficient and accurate. These include working closely with Able2 Occupational Therapy, who provide Independent Medical Assessments on unclear cases, and changing the requirements for a new applicant's photograph. In addition to this, the Department for Transport will bring in some new guidance in 2019 to bring

parity to those with non-physical or hidden disabilities. This work has been added to our Blue Badge improvement plan to ensure that we are prepared for these changes and also to help manage the transitional period.

Winter Refresher

As part of our commitment to the Highways service, Customer Access delivered winter refresher briefings in October to all trained advisors, covering key areas such as gritting and flooding. This content is developed based on input from Communications, Highways and Customer Access lessons learned from the previous year.

Emergency Planning

Our business continuity facility at Marsh Lane, Preston was fully tested in both June and October this year. The facility was also used several times during May, June and July in order to support staff during train strikes.

Customer Access Service attended Day 2 of Exercise Falcon Rose in April 2018 and provided a tactical representative for Nuclear Exercise in October.

Our Service Resilience Plan is being reviewed for submission to Health, Safety and Resilience at the end November 2018 and our business continuity arrangements are currently being audited by the internal Lancashire County Council Audit Team.

Health and Safety

The Health, Safety and Resilience service conducted a Health and Safety survey with all Customer Access Service staff, the results of which were delivered in January 2018.

Improvements made as a result of the survey include:

- A review of First Aider resource and the re-establishment of First Aider meetings,
- A new training package for Display Screen Equipment Assessors to ensure actions identified in risk assessments are implemented,
- The use of the Customer Access Service intranet for key health and safety information, and
- The establishment of a building user group with Facilities Management.

Staff Surveys and briefings

In early 2018, the Customer Access Service completed a number of staff briefing sessions to communicate the results of the Customer Access Service staff survey which was completed by 162 members of staff in 2017. The briefings allowed staff to contribute to the areas requiring improvement and a variety of suggested ideas have now been implemented.

A further Customer Access Service staff survey will be completed in 2018 to build on the corporate staff survey and ensure that we continually engage with, and listen to, our staff.

Service Challenge

The Customer Access Service Challenge was scheduled for September 2018 and involved a substantial amount of work, conducting research, investigating proposals and developing options to share across the organisation with our senior and corporate management teams, and our elected members.

Consultations

Internal/external customers and service areas, including the Customer Access Service and HR staff.

Implications:

This item has the following implications, as indicated:

Risk management

This report is for noting and therefore a risk analysis in relation to the content on this report has not been required.

Financial Implications

There are no financial implications arising from this report.

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

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