

## Lancashire County Council

### Cabinet Committee on Performance Improvement

Tuesday, 26th February, 2019 at 2.30 pm in Cabinet Room 'B' - The Diamond Jubilee Room, County Hall, Preston

#### Agenda

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

##### No. Item

**1. Apologies for Absence**

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

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

**3. Minutes of the Meeting held on 5th December 2018** (Pages 1 - 8)

**4. Quarterly Corporate Performance Monitoring Report – Quarter 3 2018/19** (Pages 9 - 18)

**5. Corporate Risk and Opportunity Register - Quarter 4** (Pages 19 - 36)

**6. 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.

**7. Date of Next Meeting**

The next meeting of the Cabinet Committee on Performance Improvement will be held at 2.00pm on Tuesday 23<sup>rd</sup> April 2019 in Committee Room B – The Diamond Jubilee Room, County Hall, Preston.

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

The meeting is likely to move into private session to consider the following report, and the public will be excluded from that part of the meeting. The reason for this is that the report will involve the disclosure of confidential and/or exempt information as defined within S100A(3) and Schedule 12A of the Local Government Act 1972. A final decision on whether the meeting shall move into private session will be taken during the meeting.

A notice was published in accordance with the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012. No representations have been received in response to this notice.

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

The Committee is asked to consider, whether, under Section 100A(4) of the Local Government Act, 1972, it considers that the public should be excluded from the meeting during consideration of the following items of business on the grounds that there would be a likely disclosure of exempt information as defined in the appropriate paragraph of Part 1 of Schedule 12 to the Local Government Act, 1972 as indicated against the heading to the items, and that in all circumstances of the case the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

**Part II (Not Open to Press and Public)**

- 10. Update report on the performance of Lancashire County Council's Waste Processing Facilities** (Pages 37 - 46)

L Sales  
Director of Corporate Services

County Hall  
Preston

## Lancashire County Council

### Cabinet Committee on Performance Improvement

**Minutes of the Meeting held on Wednesday, 5th December, 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

|            |               |
|------------|---------------|
| A Atkinson | Mrs S Charles |
| M Green    | G Gooch       |
| C Crompton | K Iddon       |
| H Khan     | S Turner      |
| P Buckley  |               |

**1. Apologies for Absence**

No apologies for absence were received.

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

No pecuniary or non-pecuniary interests were disclosed.

**3. Minutes of the Meeting held on 4th October 2018**

**Resolved:** That the minutes of the meeting held on 4<sup>th</sup> October 2018 be confirmed and signed by the Chair.

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

Paul Bond, Head of Legal and Democratic Services provided a verbal update on the current Brexit position, and what the county council was doing in preparation for either a deal or no deal scenario.

The UK and the EU had prepared a withdrawal agreement about how the UK would leave the EU, in addition to a political declaration, which gave an overview of what the UK and EU's relationship would be in the longer term.

Paul reported that leaders of the 27 other EU countries had signed off the withdrawal agreement and political declaration, and that Theresa May needed to persuade her MPs to back it: a vote would take place on 11 December 2018. If the deal was approved, it would also need to be approved by the European Parliament.

Should Parliament reject the deal, the default position would be for the UK to leave without a deal. In this instance, MPs would have 28 days to suggest a way forward which may include some form of re-negotiation.

In light of the above, Laura Sales, Director of Corporate Services was taking forward a piece of work looking at the impact of what both a deal and a no deal Brexit would have on Lancashire. A cross-Directorate Officer Working Group had been set up and was looking at a number of areas to assess how these potential impacts could be felt locally. The Working Group was focussing on the following areas, which Paul provided details on:

- The Lancashire economy including future funding;
- The county council as an employer;
- Community cohesion and civil contingencies;
- Ports and borders;
- Citizen's rights.

The Cabinet Committee noted that other work streams included the Lancashire environment, procurement and regulatory services.

It was reported that, whilst the Government had emphasised that the negotiated deal was its preferred option, it had recently published a number of technical papers to ensure businesses and citizens understood what was required in a 'no-deal' scenario. In some cases, there were direct implications for local authority services and programmes. It was reported that, as part of the work mentioned above, the Director of Corporate Services would be assessing these technical papers.

**Resolved:** The Cabinet Committee on Performance Improvement noted that an updated report would be presented to them in due course.

## **5. Corporate Risk and Opportunity Register Quarter 3**

A report was presented by Paul Bond, Head of Legal and Democratic Services, providing an updated (Quarter 3) 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 28<sup>th</sup> January 2019.

It was reported that, for this quarter, there were two new entries and one deletion. The two new entries were:

CR13 – Children's Social Care: 'Increase in demand, including rise in number of contacts and referrals, and an increase in Children Looked After numbers'. It was noted that the number of children looked after had continued to increase, and that similar and larger increases had been reported both nationally and regionally. The Cabinet Committee were informed that the service had put several mitigating

actions in place and was undertaking demand analysis work to inform the next steps.

CR14 – 'Intermediate care for older people in a residential setting'. It was reported that a review of the Lancashire intermediate care system was underway and would include consideration of the best practice model for each service area, including community beds. Councillor Gooch reported that three service providers, currently contracted to the county council, would be delivering the service. County Councillor Turner informed the Cabinet Committee that he had recently attended the new Board Meeting which had been set up to monitor progress, and reported that the ongoing work on the review had received positive feedback.

The deletion was:

CR9 – 'Discharge of patients from hospital into their own home or enablements/short term care in a safe and timely manner'. It was reported to the Cabinet Committee that performance for this had improved dramatically and therefore it was no longer a business critical risk. However, it was noted that the risk would be retained on the service register for the purposes of managing winter pressures.

It was reported that discharge planning started to take place as soon as people were admitted to hospital. The delayed transfer of care figure had reduced by 43% and it was noted that work was ongoing in relation to prescription waiting times.

Paul provided an update of the risks that remained on the Register and an explanation of the scores key.

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

## **6. Quarterly Corporate Performance Monitoring Report – Quarter 2 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 2 of 2018/19.

### **Education and Children's Services**

Referrals to Children's Social Care had continued to increase and around 26% of assessments completed in Quarter 2 had taken over 45 days to complete. In addition, the number of children with child protection plans had increased by 10.6%, giving a rate of 54.5 per 10,000 population, which was significantly higher than the national rate, and the number of children looked after had increased again when compared to the previous quarter.

However, it was reported that average social worker caseloads remained comparatively low, and that the number of first time entrants to the youth justice system and re-offending levels in Lancashire had continued to reduce; these figures were lower than regional and national rates.

There had been an increase in the average time between a child entering care and moving in with their adoptive family, but the current rolling figure of 419 days was rated good in comparison to the latest national figure. County Councillor Green pointed out that the increase in days could be due to circumstances out of the county council's control, and asked that more information be provided to Cabinet Committee on what had caused the delays.

Provisional data published by the Department for Education for 2017/18 showed an improvement in the proportion of pupils reaching the expected standard in reading, writing and mathematics by the end of Key Stage 2. In relation to GCSEs, Lancashire's performance had improved on the previous year, and both the Attainment 8 score per pupil and the Progress 8 scores were currently similar to the national rates. However, it was agreed that Lancashire should be aiming to be better than the national average.

### **Growth, Environment, Transport and Community Services**

It was reported that the average number of days taken to repair street lighting faults had reduced. The Cabinet Committee noted that data relating to the new Highways policy would be included in the Corporate Performance Monitoring Report for Quarter 3 of 2018/19.

County Councillor Iddon reported that LED street lighting saved the county council around £200k per year. County Councillor Iddon agreed to look into County Councillor Crompton's query on what percentage of Lancashire was covered by LED street lighting.

In response to a query, County Councillor Atkinson informed the Cabinet Committee that fly tipping figures in Lancashire had reduced and that new rules were due out in relation to fly tipping, in an attempt to reduce the figures further.

Tonnage figures for re-used, recycled and composted waste at the Household Waste Recycling Centres for both Lancashire and the districts were requested. It was noted that the county council had saved money at the Household Waste Recycling Centres due to the service being in-house and the reduction in opening hours at some of the smaller centres.

In relation to the libraries and museums figures, County Councillor Buckley asked how these were RAG rated. Donna agreed to provide this information. The Cabinet Committee noted that the Libraries and Museums Service was developing a range of new indicators to cover the offers which featured in the library strategy.

## **Adult Services and Public Health**

It was reported that, as part of the Service Challenge, various options were being considered to reduce the level of residential admissions for older people, including working with partners on various issues, and the establishment of a night service. Performance for delayed transfers of care from hospital (delayed days) continued to show considerable improvement, and timeliness of social work assessments continued to improve, with over 96% being completed within 4 weeks. In addition, much greater numbers of people were receiving reablement, and effectiveness remained high as people were remaining at home.

Although there were still approximately 1,100 people waiting for a social work assessment, it was noted that these people would already have been triaged, and that this was a significant reduction in the number reported at the end of the previous quarter.

A discussion took place around registered social landlords. County Councillor Crompton would report any specific problems to CC Gooch, who would arrange for these to be looked into.

Although the proportion of alcohol and drug users that had left treatment successfully and who did not re-present to treatment within 6 months was lower when compared to the previous year, it was noted that the figures for both were considerably higher than those nationally. There were a number of reasons for the reduction and the team monitoring the contract were in discussions with providers.

The Cabinet Committee noted that the county council was working closely with the Troubled Families Team to further increase our payments by results claims including a data cleansing exercise, the implementation of the Early Help Module and the alignment of school attendance to the agreed percentage target progression. County Councillor Turner reported that a sample of 15 cases from the Team had recently been analysed and that the system was working well.

**Resolved:** That the Cabinet Committee on Performance Improvement note the reported performance for Quarter 2 of 2018/19.

### **7. Customer Access Performance Report**

A report was presented by Sarah Jenkins, Head of Service – Customer Access Service. A revised page 48 was circulated to Cabinet Committee Members.

The Customer Access Service delivered the first point of contact for telephone, email and social media interactions for 28 Lancashire County Council services, handling over 1.1 million customer interactions per year. This equated to approximately two thirds of all customer contacts coming into the council.

It was reported that the reduction in contacts received was 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 Cabinet Committee noted there was a difference in the number of telephone calls received to those answered. It was explained that this could be due to people putting the phone down before it had been answered, but that many of these people would either ring back or email in. There had also been a drop in the number of telephone calls received since the previous year. It was noted that lots of work had been done with Children's Services which had reduced the amount of repeat calls; we were also looking to do this work with Adult Services. In addition, more people were using self-service through the website. County Councillor Khan informed the Cabinet Committee that she had received positive feedback from constituents on the email service.

Sarah reported that the Customer Access Service had taken part in an Association of Directors of Adult Social Services Peer Review in November, to help identify best practice and potential opportunities for improved working practices, and that the Service had received excellent feedback. In addition, for Adult Safeguarding, the accuracy and timeliness of Customer Access had recently been singled out for praise by external consultants, who had been commissioned to review the Multi Agency Safeguarding Hub.

It was noted that the AskHR Service attracted one of the highest numbers of contacts. As part of the Customer Access savings programme, 7 full time equivalent posts had been reduced in April 2018 for the AskHR Service, and temporary funding from within the Customer Access Service budget had been agreed until December 2018. The project had focussed on the online uptake of HR enquiries and customer self-service, to reduce the volume of HR contacts.

In relation to the Blue Badge Scheme, improvements had been made in application processing time and waiting times. In addition, the Department for Transport had recently undertaken a consultation which had resulted in a decision to extend the criteria to those with non-physical disabilities.

It was reported that Customer Access savings delivered to date totalled £1,005,000. This saving included a figure of £58,000 to transfer 2.50 full time equivalent posts to the Emergency Duty Team, as part of the Customer Access Service redesign which had been implemented in September 2018.

As part of the Genesys Programme Phase 2, Sarah reported that emphasis would be put on more automation, where appropriate, and it was reported that the following work streams would be delivered:

- Auto Attendant Utterance
- Auto Attendant Call By Name
- Data integration
- Skype and Email Integration
- Social Media and Webchat



- Acorn POP

County Councillor Driver and County Councillor Buckley thanked Sarah for all the hard work being done within the Customer Access Service.

**Resolved:** That the Cabinet Committee on Performance Improvement note the report.

#### **8. Urgent Business**

There were no items of Urgent Business.

#### **9. Date of Next Meeting**

The next meeting of the Cabinet Committee on Performance Improvement would be held at 2.30pm on Tuesday 26<sup>th</sup> February 2019 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 Tuesday, 26 February 2019

### Report of the Chief Executive

Part I

Electoral Division affected:  
All

### Quarterly Corporate Performance Monitoring Report – Quarter 3 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 3 of 2018/19.

Highlights:

- Referrals to children's social care have decreased.
- The average time between a child entering care and moving in with their adoptive family has reduced significantly.
- The rate of first time entrants to the youth justice system and reoffending levels in Lancashire are lower than regional and national rates.
- Attainment improved amongst pupils at key stages 2 and 4 in 2017/18 compared to 2016/17.
- The proportion of adults receiving direct payments is now higher than the national average.
- High numbers of people are receiving reablement and effectiveness remains high as people are remaining at home.
- Waiting lists in adult social care are improving, especially so for those awaiting Occupational Therapy (OT) assessments.
- We are seeing an increase in the quality rating of Lancashire care homes and community care services.

However:

- Timeliness of undertaking children's social care assessments is higher than other comparators.
- The number of children looked after rates continued to increase.
- Despite the recent improvement, concerns remain about the level of residential admissions for older people.
- The time taken to repair some highway defects and street lighting faults is above the number of days targeted.

## Recommendation

The Cabinet Committee on Performance Improvement is asked to comment on and note the reported performance for quarter 3 of 2018/19.

## Performance Summary Education and Children's Services

Key for performance:

On track/good   Slightly below desired level   Requires improvement

| Performance Measure  | Good is High or Low | 2016/17     | 2017/18      | Q1 18/19    | Q2 18/19    | Q3 18/19   | England Average |
|--|---------------------|-------------|--------------|-------------|-------------|------------|-----------------|
| <b>Children's Social Care</b>  |                     |             |              |             |             |            |                 |
| 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 | 2482/100.0 | 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%   | 511/20.5%  | 21.9%           |
| Percentage of assessments completed during the year which took over 45 days                              | L                   | 26.9%       | 25.0%        | 23.7%       | 26.6%       | 25.0%      | 17.3%           |
| Number and rate of children with a Children in Need Plan (snapshot as at 31/12/18)                       | L                   | 1,825/74.3  | 1,660/67.2   | 1,716/69.2  | 1,754/70.7  | 1,720/69.4 | -               |
| Number and rate of children with a child protection plan (snapshot as at 31/12/18)                       | L                   | 1,412/57.5  | 1,243/50.4   | 1,221/49.5  | 1,351/54.5  | 1,329/53.6 | 45.3            |
| Percentage of children with a repeat child protection plan over last 12 months (snapshot as at 31/12/18) | L                   | 5.5%        | 6.2%         | 6.6%        | 6.0%        | 6.7%       | -               |
| Rate of Children Looked After (CLA) number/per 10,000 (snapshot as at 31/12/18)                          | L                   | 1,842/75.0  | 1,968/79.7   | 2,021/81.9  | 2,053/82.8  | 2,083/84.0 | 17.3%/64.0      |
| Percentage of CLA in 3 or more placements over last 12 months (snapshot as at 31/12/18)                  | L                   | 7.7%        | 7.9%         | 9.1%        | 9.8%        | 9.2%       | 10%             |
| Percentage of staff on Assessed and Supported Year in Employment (ASYE) (snapshot as at 31/12/18)        | L                   | 44.9%       | 27.2%        | 23.8%       | 29%         | 30.5%      | -               |
| Percentage of staff who are experienced social workers (3+ years) (snapshot as at 31/12/18)              | H                   | New measure | 26.0%        | 31.9%       | 30.0%       | 35.9%      | -               |
| Average caseload per social worker (snapshot as at 31/12/18)   | L                   | New measure | 22.0         | 22.9        | 20.0        | 19.8       | -               |

### Children's Social Care

There has been a 17% decrease in referrals received during quarter three when compared to the same period the previous year (3,010 referrals Q3 2017/18). Just over a third of referrals in quarter three 2018/19 originated from the Police (874 referrals or 35.2%).

Around 25% of assessments completed during quarter three took over 45 days to complete which is higher than all comparator averages (England 17.3% and North West 16.3%).

The latest rate of children with child protection plans (53.6) remains significantly higher than the national rate the number of children looked after increased again on the previous quarter.

Average caseloads have remained stable, but some workers have very high caseloads which impact on the quality of practice. An audit of caseloads has been completed and actions agreed to address this.

| Performance Measure  | Good is High or Low | 2016/17 | 2017/18 | Q1 2018/19 | Q2 2018/19 | Q3 2018/19 | England Average |
|--|---------------------|---------|---------|------------|------------|------------|-----------------|
| <b>Adoptions</b>   |                     |         |         |            |            |            |                 |
| 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        | 372        | 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        | 136        | 220 (2014-17)   |

### Adoptions

Quarter three recorded a significant reduction in the average time between a child entering care and moving in with their adoptive family. The current rolling year figure for January to December 2018 is 430 days which is better than the latest national average figure (520 days). 20 children gained adoption orders during quarter three.

| 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 (Apr 17 - Mar 18)    | 200 (Jul 17 - June 18)  | 262 (Apr 17 - Mar 18)    |
| % of Young People reoffending   | L                   | 39.2% (Jul 16 - Sept 16) | 38.7% (Oct 16 - Dec 16) | 40.4% (Jul 16 - Sept 16) |

### Youth Offending Team

There were more first time entrants to the youth justice system in Lancashire for the last reported period but the Lancashire rate of first time entrants remains lower than the national and regional rates. Lancashire dropped into the second quartile nationally against this indicator. Lancashire youth re-offending levels have reduced further 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 |
|--|---------------------|-----------------|-------------------------|-----------------|
| <b>School Improvement</b>  |                     |                 |                         |                 |
| Percentage of pupils reaching the expected standard in reading, writing and mathematics at KS2 | H                   | 61.0% (2016/17) | 65.0% (2017/18 revised) | 65%             |
| Average Attainment 8 score at GCSE   | H                   | 45.7 (2016/17)  | 46.7 (2017/18 revised)  | 46.6            |
| Average Progress 8 score at GCSE   | H                   | -0.14           | -0.09                   | -0.02           |

|   |   |                    |                   |                  |
|---|---|--------------------|-------------------|------------------|
|   |   | (2016/17)          | (2017/18 revised) |                  |
| % Education settings rated Good/Outstanding | H | 89.5%<br>(Sept 18) | 89.3%<br>(Dec 18) | 85.0%<br>(Dec18) |

### School Improvement

Revised 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). At Key Stage 4 level, the average Attainment 8 score per pupil for Lancashire (46.7) was similar to the national (46.6), regional (45.7) and statistical neighbours (46.3) 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 (-0.09) also improved. It was lower than the national rate (-0.02), however better than the regional (-0.16) and statistical neighbours average (-0.10) rates.

### Growth, Environment, Transport and Community Services

| Performance Measure   | Good is High or Low | 2016/17   | 2017/18   | Q1 2018/19 | Q2 2018/19 | Q3 2018/19 |
|---|---------------------|-----------|-----------|------------|------------|------------|
| <b>Highways</b>   |                     |           |           |            |            |            |
| Safety Carriageway Defects repaired within 4 hours (emergency) target 95%   | H                   | -         | -         | -          | -          | 95.2%      |
| Safety Carriageway Defects repaired within 2 working days (urgent) target 95%                                     | H                   | -         | -         | -          | -          | 87.2%      |
| Safety Carriageway Defects repaired within 5 working days (non-urgent) target 90%                                 | H                   | -         | -         | -          | -          | 80.8%      |
| Safety Carriageway Defects repaired within 20 working days (non-urgent) target 90%                                | H                   | -         | -         | -          | -          | 95.7%      |
| <b>Street lighting</b>  |                     |           |           |            |            |            |
| Average number of working days to repair a LCC street lighting fault (including traffic management) target 5 days | L                   | 4.6       | 7         | 7.32       | 5.69       | 6.97       |
| <b>Waste management</b>   |                     |           |           |            |            |            |
| % of recycling, re-use and composting   | H                   | 46%       | 42%       | 43%        | 42%        | 42%        |
| % diversion of municipal waste away from landfill (including recovery)  | H                   | 49%       | 51%       | 55%        | 56%        | 60%        |
| <b>Libraries and museums</b>  |                     |           |           |            |            |            |
| Number of visits to libraries each quarter  | H                   | 4,007,475 | 3,573,465 | 879,387    | 924,536    | 877,167    |
| Number of visits to museums each month  | H                   | 256,318   | 244,365   | 58,544     | 59,032     | 23,140     |
| Number of E-Book downloads each month   | H                   | 162,384   | 212,925   | 58,659     | 64,857     | 64,779     |
| Number of library public issues each month  | H                   | 4,170,173 | 3,622,043 | 891,108    | 967,543    | 873,920    |
| <b>Planning applications</b>  |                     |           |           |            |            |            |
| % of minerals and waste planning applications determined within 13 weeks  | H                   | 50% (Q4)  | 67%       | 50%        | 57%        | 71%        |
| % of Regulation 3 planning applications determined within 8 weeks   | H                   | 56% (Q4)  | 78%       | 60%        | 80%        | 45%        |

### *Highways and Street lighting*

The migration to the Highways Asset Management System has brought some difficulties for both Highway Asset and Highway Services in respect of monitoring and managing pothole and street lighting faults. Processes are now in place where faults that are soon to exceed their respective targets are flagged to appropriate staff so that action can be taken at an early opportunity.

### *Highway defects*

The approved highways defect repair policy was implemented during quarter 2 2018/19, meaning that reporting changed in accordance with that policy. As a result, there is no Q1 or Q2 data in respect of highway safety carriageway defects repaired within the new policy response time standards.

Since monitoring against the new response standard, a defect reporting issue was identified with the 4hr and 2 day defects which affected response times, however this has now been addressed which should improve future performance figures.

Many of the five day defects require extensive traffic management due to the road type and location. In order to improve response times, meetings are now scheduled each month countywide between operations staff and Highways Safety inspectors to plan the inspection programme for the month and identify defects requiring traffic management. The countywide traffic management contract has recently been renewed following a procurement exercise, and the availability of traffic management will be improved.

### *Street lighting*

The combination of changes to inspections, routine maintenance and public reporting have resulted in changes to the profile of faults resulting in different resourcing requirements. Changes to the resourcing and procurement arrangements have been made to better match this profile e.g. Traffic management contracts have been amended to have additional providers available for peaks in faults over the winter period. In addition over the next 18 months the number of faults will reduce as the remaining 38,000 conventional units are converted to LED.

### *Waste management*

The Recycling rate compared to Q2 (18/19) remains consistent, having seen reductions in tonnages across all waste streams. Residual waste at kerbside continues to see increases, albeit lower than originally forecast with the current out-turn predicting to be up by half a percent compared to the 2017/18 position.

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

Mass loss operations have resulted in better performance at Thornton Waste Treatment facility which is contributing to the continued increased % rate, benefiting from less tonnes to landfill and increased diversion. Now that we have secured an outlet for the processed material, it has also allowed us to increase throughput at our Farington Waste Treatment facility. The mass-loss operation at Thornton has now proved successful enough to become ongoing operational practice.

### Libraries and museums

Visitor numbers to libraries and museums as well as e-book downloads and library public issues fell in December 2018. Most of the decreases are not significant, and due to seasonal trends/the effect of Christmas closing. With a significantly reduced portfolio of museums comparing the year end 2018/19 visitor figures with previous years will not be meaningful, as it does not reflect the performance of the remaining museum sites.

The main factor for the large drop in museum visits was the return of 3 museums (Lancaster City Museum, Lancaster Maritime Museum and the Cottage Museum) to Lancaster City Council on 1 October 2018 at the end of the management agreement that had been in place between both councils since 2003. The City Museum has high footfall throughout the year and will account for most of the reduction in numbers. In addition, Helmshore Museum closed at the end of October 2018 at the end of its summer opening season and will re-open on 29 March 2019.

### Planning

In quarter 3 2018-19, a total of 7 County matter applications were determined, of which 5 (71%) were determined within the 13 week decision period. The two other applications determined outside this period were Clifton March Waste Water Treatment Works (WWTW), which was subject to a unilateral agreement, and Westby Landfill.

9 applications for LCC's own Regulation 3 development were determined in quarter 3 2018-19. 4 (44%) of these were determined within 8 weeks. Two of the applications determined outside 8 weeks were subject to Section 106 agreements (Grace mire Farm and the Preston Western Distributor Road Scheme). The remaining three determined outside 8 weeks were agreed with the applicant. The 8 week target is a discretionary target used for district schemes but applied to Lancashire County Council's own schemes in the absence of a national target.

## 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 | Q3 2018/19 | England Average |
|---|--------------|---------|---------|------------|------------|------------|-----------------|
| <b>Adult social care - personalisation</b>  |              |         |         |            |            |            |                 |
| Adults aged over 18 receiving self-directed support (personal budgets) (ASCOF) snapshot as at period end                  | H            | 77.8%   | 77.4%   | 76.8%      | 76.2%      | 75.8%      | 89.7%           |
| Adults receiving direct payments (ASCOF) snapshot as at period end  | H            | 23.9%   | 25.1%   | 26.5%      | 28.0%      | 29.6%      | 28.5%           |
| <b>Support for carers</b>   |              |         |         |            |            |            |                 |
| Carers receiving direct payments for support direct to carer (ASCOF) during the period                                    | H            | 98.3%   | 98.6%   | 99.4%      | 99.3%      | 99.0%      | 74.1%           |
| <b>Support for people with learning disabilities</b>  |              |         |         |            |            |            |                 |
| Proportion of adults with learning disabilities who live in their own home or with their family (ASCOF) during the period | H            | 85.5%   | 85.3%   | 85.1%      | 84.0%      | 83.0%      | 77.2%           |



| <b>Support for people to remain independent</b>   |   |                |                |                |                |                         |       |
|---|---|----------------|----------------|----------------|----------------|-------------------------|-------|
| Permanent admissions to residential and nursing care homes per 100,000 pop aged 18-64 (ASCOF) during the period   | L | 17             | 19.2           | 19.6           | 17.5           | 17.2                    | 14.0  |
| Permanent admissions to residential and nursing care homes per 100,000 pop aged 65+ (ASCOF) during the period   | L | 742.3          | 728.9          | 731.7          | 729.7          | 709.3                   | 585.6 |
| Number of permanent admissions to residential and nursing care homes pop aged 65+ during the period   | L | 1,795          | 1,761          | 1,792          | 1,787          | 1,737                   | -     |
| Waiting times for OT assessments (snapshot number of clients in OT allocation work tray)  | L | 1,995          | 1,384          | 1,140          | 745            | 320                     | -     |
| Number of reablement referrals during the period  | H | 3,642          | 7,392          | 2,079          | 2,037          | 1,811 (3 month average) | -     |
| Number of completed reablement support plans during the period  | H | 3,207          | 6,657          | 1,851          | 1,646          | 1,643 (3m ave.)         | -     |
| Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (ASCOF) during the period | H | 83.8%          | 88.1%          | 88.2%          | 88.2%          | 86.3% (3m ave.)         | 82.9% |
| <b>Timeliness of assessment and support</b>   |   |                |                |                |                |                         |       |
| Assessments completed within 7 days during the period   | H | 82.6%          | 85.1%          | 87.6%          | 87.1%          | 86.6% (3m ave.)         | -     |
| Assessments completed within 28 days during the period  | H | 94.6%          | 95.6%          | 96.1%          | 96.3%          | 96.5% (3m ave.)         | -     |
| Delayed transfers of care from hospital (DToC) – total delayed days due to social care in month as detailed each period   | L | 2,167 (Mar 17) | 1,232 (Mar 18) | 1,093 (Jun 18) | 1,102 (Sep 18) | 1,094 (Nov 18)          | -     |
| <b>Quality of services</b>  |   |                |                |                |                |                         |       |
| Care Quality Commission (CQC) – Care Home ratings good/outstanding snapshot as at period end  | H | 70.0%          | 75.9%          | 78.8% (Jun 18) | 80.4% (Sep 18) | 82.4% (Dec 18)          | 81.5% |
| CQC Community Care Service ratings snapshot as at period end  | H | 80.1%          | 91.0%          | 92.8% (Jun 18) | 94.0% (Sep 18) | 95.0% (Dec 18)          | 86.9% |

### *Adult social care - personalisation*

There is an increase in the proportion of people receiving direct payments, which now takes Lancashire higher than the national average. This is primarily due to service users choosing to take direct payments when their home care provision was reviewed. Direct payments allow people to choose their own provider of services, rather than receiving services from a provider commissioned by the Local Authority.

### *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. There has been a reduction in the number of older people admitted to residential care, but concerns still remain about the medium term level of admissions.

Residential care admission rates across the North West are generally significantly higher than the national average, and this suggests this is a strategic commissioning challenge the whole North West region must address. We are therefore committed to working with colleagues to bring in additional expertise to address the concerns as part of North West Association of Directors of Adult Social Services Sector Led

Improvement work. Lancashire's own admission rate is itself considerably higher than the national average, and so it is a key Service Challenge for us to address the causes of this high rate and drive sustained improvement by learning from other Councils and from testing different approaches and specific measures. Targets have been set for these improvements over the next 4 years, which will also deliver significant financial savings. However, not all the necessary measures are yet in place to ensure improvements are sustainable, and the admission rates may also have some in year seasonal fluctuations that will mask the scale and even the direction of change over the medium to long term.

The number of people waiting for OT assessments continues to reduce and shows a dramatic improvement over recent years.

#### *Timeliness of assessments and support*

Over 96% of social work assessments were completed within 4 weeks. There are still currently around 1100 people waiting for a social work assessment, though this figure is improving and waiting times themselves are improving. Waiting lists are influenced partly by front door demand, but also by provider failure and competing priorities within other service areas. Remaining cases have all been screened and temporary services commissioned where appropriate. Ensuring people have the right response and are able to find appropriate information when they enquire about adult social care is a priority, and a programme of work is underway to improve the options available for people who express a desire for support. The website and the way enquiries are dealt with at the customer services centre are both under review.

Delayed transfers 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 now exceeds the national average.

Of the 409 Lancashire care homes rated, 17 are in-house residential services for older people and 82.4% (14) of these were rated good or outstanding. The other 3 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 | Q3 2018/19 | England Average    |
|---|---------------------|---------------------|---|---|------------|------------|--------------------|
| <b>Health Checks</b>  |                     |                     |   |   |            |            |                    |
| Number of NHS Health Checks offered to eligible population  | H                   | 75,892              | 96,920                                    | 29,348                                  | 26,286     | 24,517     | -                  |
| Number of NHS Health Checks completed   | H                   | 47,107              | 51,486                                    | 11,928                                  | 12,827     | 14,274     | -                  |
| % completed of NHS Health Checks offered  | H                   | 62.1%               | 53.1%                                     | 40.6%                                   | 48.8%      | 58.2%      | 43.6% (Q2 2018/19) |
| <b>Alcohol</b>  |                     |                     |   |   |            |            |                    |
| Percentage of alcohol users that left alcohol treatment successfully who do not re-present to treatment within 6 months | H                   | 58.9%               | 54.7% (rolling year April 17 to March 18) | 54.4% (rolling year July 17 to June 18) | n/a        | n/a        | 38.5%              |
| <b>Drug use</b>   |                     |                     |   |   |            |            |                    |
| % of opiate drug users that left drug treatment successfully who do not re-present to treatment within 6 months         | H                   | 8.8%                | 7.1% (rolling year April 17 to March 18)  | 6.9% (rolling year July 17 to June 18)  | n/a        | n/a        | 6.1%               |
| % 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% (rolling year April 17 to March 18) | 52.2% (rolling year July 17 to June 18) | n/a        | n/a        | 35.7%              |
| <b>Children &amp; Family Wellbeing service</b>  |                     |                     |   |   |            |            |                    |
|   | Good is High or Low | 2016/17             | 2017/18                                   | Q1 2018/19                              | Q2 2018/19 | Q3 2018/19 | England Average    |
| - Number of families attached to the programme  | H                   | 4,305 (Q4, 2016/17) | 8,647                                     | 10,169                                  | 12,498     | 14,164     | n/a                |
| - Payment by results claims (submitted to the DCLG)   | H                   | 841 (2017)          | 2,097 (rolling figure)                    | 2,409                                   | 2,740      | 3,158      | n/a                |

### Health Checks

Across the lifetime of the NHS Health Check programme, 238,694 of the current eligible population aged 40 – 74 years of 354,935 have had an NHS Health Check which equates to 63.2%. Although invites to appointments in quarter 3 of 2018/19 were lower than in the previous quarter, the uptake was greater.

### Alcohol

Rolling data for the year from July 2017 to June 2018 published in December 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 quarter, however was considerably higher than that nationally.

### Drug use

Rolling data for the year from July 2017 to June 2018 published in December 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 slightly lower when compared to the previous quarter, however this was considerably higher than that nationally.

### *Children & Family Wellbeing Service*

A further 1,666 Troubled Families were attached to the programme in quarter 3 of 2018/19, increasing the number to 14,164 as at 31 December 2018. There has been a noticeable increase in attachments during December 2018, compared to other months during 2018, due to implementation of a new process.

The cumulative total of 'payments by results' claims which are submitted to the Ministry for Housing, Communities and Local Government on a quarterly basis achieved by the claim window closure as at 31 December 2018 – end of quarter 3 - was ahead (38 and 1.2% greater than) the targeted position (3,120).

It was recently agreed that we look to maximise our claims by accelerating progress with partners and getting them to sharing this responsibility. This is an identified action in the children services 'Getting to Good' plan.

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 Tuesday, 26 February 2019

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

Electoral Division affected:  
(All Divisions);

### Corporate Risk and Opportunity Register Quarter 4

(Appendix "A" refers)

Contact for further information:

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#### Executive Summary

This report provides an updated (Quarter 4) Risk and Opportunity Register for the Committee to consider and comment upon.

#### Recommendation

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

#### Background and Advice

Following the corporate approach to reporting on risk and opportunity the quarter 4 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 committee, the Register will be presented to the next Audit, Risk & Governance Committee. An updated Corporate Risk and Opportunity Register is attached at Appendix A.

For this quarter there are no new entries to the register and two deletions. The deletions are:

- CR10 – Adult social care provision is adequate and responsive to meet current and future demand. Homecare mobilisation is almost complete and the strategic risk is improving and as a result the residual risk has been revised downwards.
- 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. Between 1<sup>st</sup> October and 31<sup>st</sup> December 2018 there have been 91 information

security incidents reported. This is a decrease of 11.65% on the previous quarter. This indicates that incident reporting has further stabilised from the previous quarter and is an indication of growing awareness and understanding of staff responsibilities and the importance of information governance across the organisation. As result of this stabilisation and subsequent downward trajectory the residual risk score has been revised accordingly. However, this issue will continue to be monitored on a quarterly basis by Corporate Management Team.

| <b>Risk Identification Number (RIN)</b> | <b>Risk Description</b>   |
|---|---|
| CR1                                     | <p>Delivering the Operational Plan to ensure a strong and sustainable County Council</p> <ul style="list-style-type: none"> <li>• Establishing a strong and visible leadership team</li> <li>• Embed a focus on service delivery to secure a better service at a lower cost</li> <li>• Develop a sustainable financial strategy</li> </ul> <p>Allowing for mitigating actions the residual score remains at 16 (Major/Likely)</p> |
| CR2                                     | <p>Protect and safeguard children. Further mitigating actions added. Residual risk score has reduced to 12 (Major/Possible)</p>   |
| CR3                                     | <p>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 (Major/Possible)</p>  |
| CR4                                     | <p>Recruit and retain experienced staff within Children's Services. Further mitigation actions added. Residual risk has reduced to 12 (Major/Possible)</p>  |
| CR5                                     | <p>Managing our data well and producing effective management information. Allowing for mitigating actions the residual score is 12 (Major/Possible)</p>   |
| CR6                                     | <p>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 (Major/Possible)</p>  |
| CR7                                     | <p>Delivering major projects/schemes on time and within budget. Allowing for mitigating actions the residual score is 12 (Major/Possible)</p>   |
| CR8                                     | <p>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 (Major/Possible)</p>  |
| CR11                                    | <p>Supporting disadvantaged families to fulfil their potential (Troubled Families Programme. Allowing for further mitigating actions the residual score remains at 16 (Major/Likely)</p>  |
| CR13                                    | <p>Children's Social Care - Increase in demand, including rise in number of contacts and referrals and an increase in Children</p>  |

|      |  |
|------|--|
|      | Looked After numbers. Allowing for mitigating actions this risk has a residual score of 16 (Major/Likely)  |
| CR14 | Intermediate care for older people in a residential setting. Allowing for mitigating actions this risk has a residual score of 12 (Major/Possible)   |
| CO1  | Delivering the Operational Plan to ensure a strong and sustainable County Council <ul style="list-style-type: none"> <li>Delivering growth and prosperity for the whole of Lancashire</li> </ul> This opportunity has a score of 16 (Major/Likely) |
| CO2  | Apprenticeship Levy and Apprentice % in Public Sector. This has an opportunity score of 15 (Outstanding/Possible)  |
| CO3  | Develop and implement improved recruitment and retention practices to address increasing challenges. This has an opportunity score of 16 (Major/Likely)  |

## Consultations

N/A

## Implications:

This item has the following implications, as indicated:

## Risk management

Good governance enables an authority to pursue its vision effectively as well as underpinning that vision with sound arrangements for control and management of risk. An Authority must ensure that it has a sound system of internal control which includes effective arrangements for the management of risk. Failure to develop and maintain a Corporate Risk & 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 Q4 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><b>Delivering the Operational Plan to ensure a strong and sustainable County Council</b></p> <p>1. Establishing a strong and visible leadership team</p> | Organisational | <ul style="list-style-type: none"> <li>Inability to deliver a balanced budget in future years</li> <li>Inability to attract high calibre candidates leading to less effective governance arrangements</li> <li>Lack of buy-in/engagement from staff</li> <li>Managers do not possess the leadership skills required, leading to demotivated staff and poor service delivery</li> <li>The organisation does not have the right people in the right jobs leading to service failure</li> <li>Staff do not know what is expected of them and they do not possess the skills to adequately do their job</li> <li>Unable to meet Terms and Conditions savings targets</li> </ul> | <ul style="list-style-type: none"> <li>Priorities Board established comprising work stream leads and chaired by the Chief Executive</li> <li>Programme Office is managing the overall programme of activity</li> <li>Inspirational speakers – ongoing collection for future events have been identified</li> <li>Corporate Management Team intranet pages updated</li> <li>Cabinet agreed service challenge savings options on 3<sup>rd</sup> December 2018</li> <li>Introduction of new suite of Leadership and management modules to support development of LCC managers, linked to national occupational standards and apprenticeships.</li> <li>MSc, MBA senior Leaders Apprenticeship procurement finalised. MBA –UCLAN; MSc - Lancaster.</li> <li>Management Style Questionnaire – BTLS have altered this at our request and it is currently under test. The aim is to include this with the new Performance Engagement (PE) Tools.</li> <li>A new Performance Management workshop has been rolled out for managers to complement the introduction of the PE process.</li> <li>Staff survey completed. Briefed to CMT</li> <li>Vision and Values communicated and plan to further embed</li> <li>Research work on Induction Programme has commenced and scope is under development</li> <li>Staff Survey Briefings to Dirs. and Heads of Service completed</li> </ul> | 20         | <ul style="list-style-type: none"> <li>Development work on 'Our Vision for Lancashire' is nearing completion</li> <li>Commence development for new Lancashire Induction</li> <li>CMT Intranet pages – continue with content in new template style</li> <li>Continue new suite of Leadership and management modules to support development of LCC managers, linked to national occupational standards and apprenticeships</li> <li>Staff survey findings rolled out to Head of Service for action planning</li> <li>Cross organisational themes to be assessed and links to People Strategy</li> <li>MSQ and CFQ- new format being tested. Aim to roll out January. New Values are embedded into this new format</li> <li>Development of 'Inspiration matters' short briefings will link to the newly communicated Values to support the embedding in the organisation.</li> <li>Progress Information sessions with Staff, Managers and Universities in respect of MSc and MBA via Apprenticeship Levy.</li> <li>Information to Communications Team to support organisational message surrounding Performance Engagement via CEO email</li> </ul> | 16 (Major/Likely) | 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>Savings options agreed by Cabinet in December will be presented to budget Full Council in February 2019</p> <p>Proposed corporate strategy 'Our Vision for Lancashire' document to be presented to Cabinet on 7<sup>th</sup> February and then Full Council on 14<sup>th</sup> 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"> <li>Services become unsustainable and we cannot fulfil our statutory duties</li> <li>Compounds ability to set balanced budget</li> </ul> <ul style="list-style-type: none"> <li>Unable to deliver a balanced budget in future years</li> <li>Insufficient reserves</li> <li>Services become unsustainable and we cannot fulfil our statutory duties</li> </ul> | <ul style="list-style-type: none"> <li>Final proposed saving options agreed by Cabinet 3<sup>rd</sup> December 2018 and Full Council on 14<sup>th</sup> February 2019 as part of the 2019/20 budget setting process.</li> </ul> <ul style="list-style-type: none"> <li>LOBO (Lender Option Borrower Option) redeemed with associated c£1.8m initial annual reduction in financing costs.</li> <li>December Cabinet money matters report including c£77m of savings proposals from service challenge process and reduction in gap in 2019/20 from £60m to £14.6m and by 2022/23 down from £135m to £46M</li> <li>January money matters cabinet report production covered outcome of provisional settlement and updated monitoring and Medium Term Financial Strategy position. - 2019/20 gap of £10.245m and a gap by 2022/23 of c£47m</li> <li>Budget Scrutiny Working Group meetings have taken place over recent months with an emphasis on savings</li> </ul> |    | <ul style="list-style-type: none"> <li>Corporate Management Team have agreed to a second phase of the service challenge process</li> <li>New governance structure to be established</li> <li>Develop process for further challenge. This will include: <ul style="list-style-type: none"> <li>Further challenge for some phase 1 services based on updated benchmarking data</li> <li>Cross cutting themes (Organisational/Finance &amp; Commercial/health &amp; Care)</li> </ul> </li> </ul> <ul style="list-style-type: none"> <li>Commercialisation update to Internal Scrutiny.</li> <li>Treasury Management / Investment and Capital Strategy production for January Audit Committee</li> <li>Business Rate pilot application successful, progress with district council partners - governance arrangements and implementation.</li> <li>Progress further work / analysis of a small number of proposals identified within service challenges but not sufficiently developed to make December Cabinet.</li> <li>Support and development of service challenge 2 process / work streams</li> </ul> |                     |                                 | <p>Service Challenge Phase 2 programme to be completed by Autumn 2019</p>   |
| CR2 | Protect and safeguard children  | People/Service delivery              | Children are put at risk of harm.   | <ul style="list-style-type: none"> <li>Clear line of sight to front-line practice at all levels: Chief Executive, Executive Director, Cabinet Member, Director of Children's Social Care, 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.</li> <li>Clear governance and accountability arrangements in place via the Improvement &amp; Accountability Board and the six boards which report to it.</li> </ul>   | 16 | <ul style="list-style-type: none"> <li>The Children's Partnership will report to the 'Getting to Good' Board</li> <li>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.</li> <li>Safeguarding arrangements have been strengthened. Ofsted inspection (June 2018) - Inspectors broadly agreed with our self-assessment.</li> <li>Annual Improvement Plan developed following the Ofsted inspection (June 2018) to ensure continued improvement at pace. The plan was</li> </ul>  | 12 (Major/possible) | 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</p> |

|  |  |  |   |  |   |  |   |
|--|--|--|---|--|---|--|---|
|  |  |  | <ul style="list-style-type: none"> <li>• 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.</li> <li>• Quarterly safeguarding meetings including the Chief Executive, Director of Children's Social Care, Leader, Cabinet Member for Children, Young People &amp; Schools, Lancashire Safeguarding &amp; Children's Board Chair and the Police.</li> <li>• Director of Children's Social Care weekly meetings with Cabinet Member and Lead Member to discuss current issues/developments.</li> <li>• Serious Case Review learning shared to improve safeguarding practice.</li> <li>• MASH (Multi-Agency Safeguarding Hub) arrangements strengthened to ensure an appropriate multi-agency response where there are safeguarding concerns about a child with more timely decision making at the point of referral.</li> <li>• Serious incident reporting in place to ensure an appropriate response to serious safeguarding concerns and when necessary notification to Ofsted/Department for Education (DfE).</li> <li>• External reviews of front-line practice by Ofsted, DfE, Local Government Association and North West Association of Directors of Children's Services 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.</li> <li>• Performance monitoring undertaken with action taken to address areas of underperformance and ensure service user records are accurate and up to date.</li> <li>• Social Work Academy established providing robust induction and</li> </ul> |  | <p>presented to Cabinet for approval in December 2018.</p> <ul style="list-style-type: none"> <li>• The average caseload for all social workers remains stable at 20.0. However, the average caseloads for less experienced social workers are above target levels: ASYE: 17.2 - target: 15; 1 - 2 years: 22.3 - target: 20.0; 2 - 3 years: 22.7 - target: 20.0.</li> </ul> |  | <p>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. However staff retention in some teams remains a challenge.</p> <p>Whilst experience levels are improving, some teams still have a high proportion of ASYES which impacts on caseloads and workload management within the team.</p> <p>Across all experience levels some social workers have caseloads significantly higher than the county average. This impacts on the quality of practice and is an inspection risk in terms of our ambition to achieve consistently good outcomes for children. Caseloads are being reviewed by the Acting Director of CSC alongside staff vacancies and the use of agency staff.</p> |
|--|--|--|---|--|---|--|---|

|     |   |                         |   |   |    |   |                     |                                 |  |
|-----|---|-------------------------|---|---|----|---|---------------------|---------------------------------|--|
|     |   |                         |   | <p>continuous professional development for social workers.</p> <ul style="list-style-type: none"> <li>Leadership Academy commenced September 2018.</li> </ul>   |    |   |                     |                                 |  |
| 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"> <li>Robust audit arrangements including monthly audit cycle to check compliance and the quality of practice. Corporate legal oversight.</li> <li>Serious incident reporting to ensure appropriate management oversight.</li> <li>Serious Case Review learning shared.</li> <li>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 now much more focused and supportive.</li> <li>Clear line of sight to front-line practice from the Cabinet Member and Director of Children's Social Care and Stronger management oversight in districts.</li> <li>The Social Work Academy and advanced practitioner workshops are promoting Lancashire as a learning organisation and are supporting staff retention.</li> <li>Independent Reviewing Officer capacity has been increased and has strengthened compliance.</li> </ul> | 16 | <ul style="list-style-type: none"> <li>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.</li> <li>The Better for Children Development Plan has been produced to address the recommendations from the inspection and progress will be monitored via the Improvement &amp; Accountability Board.</li> <li>A schedule of audit team priorities was agreed at Senior Management Team (Oct 18 - Feb19) to ensure a continued focus on the quality of practice. The agreed work is progressing.</li> </ul> | 12 (Major/possible) | Director of Children's Services | <p>Since the inspection in June 2018 the pace of progress has slowed. 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. The pace of change needs to accelerate as part of our continuing improvement journey from requires improvement to be good.</p> <p>Children's services will be re-inspected in 2019 under the ILACS inspection framework (Inspection of Local Authority Children's Services). The focus will be on permanence.</p> <p>Preparation for this inspection has commenced and will include an external peer review by the Local Government Association.</p> |

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|     |   |                         |   |   |    |  |                     |                                 | The Getting to Good Plan sets out agreed priorities and timescales.   |
| CR4 | Recruit and retain experienced staff within Children's Services       | People/service delivery | Inability to deliver effective services.<br>High caseloads.<br>Lack of management oversight.<br>Increased staff turnover.<br>Increased agency spend.  | <ul style="list-style-type: none"> <li>Vacancy monitoring via quarterly workforce report; monthly monitoring via Improvement Dashboard. Weekly monitoring of social work workforce position and caseloads.</li> <li>Workforce Strategy Board established to ensure strong focus on recruitment and retention and workforce development.</li> <li>Revised supervision policy now in place to support staff retention.</li> <li>Social Work Academy established providing robust induction and continuous professional development for social workers, including ASYEs.</li> <li>12 Advanced Practitioner posts support social workers to aid staff retention.</li> <li>Leadership Academy now in place with particular focus on up-skilling first line managers to strengthen leadership of practice.</li> </ul> | 20 | <ul style="list-style-type: none"> <li>Development programme for more experienced Grade 9 social workers.</li> <li>Improve compliance with supervision requirements to ensure staff receive appropriate support.</li> <li>The proportion of inexperienced workers (ASYEs) in post in April 17 was 50.1% and as at the end of December had reduced to 29.8%. This figure has increased slightly in the last quarter (Sep 18 - 27.8%) which is attributed to the drive to reduce the use of agency staff which has reduced from 46 FTE in September to 41.5 as at the end of Dec 18.</li> <li>The proportion of experienced workers in post in April 17 was 15.2% and has increased to 35.9% as at the end of December 2018. However, agency staff still form a considerable part of the experienced worker cohort, accounting for 33.8% of the cohort of experienced social workers.</li> <li>The average caseload for all Children's Social Care social workers remains stable at 20.0 as at the end of December, although some social workers have caseloads significantly higher than the county average.</li> </ul> | 12 (Major/possible) | Director of Children's Services | Retention of staff in children's social care has improved since April 2017, with more newly qualified staff and experienced staff choosing to remain with Lancashire.<br><br>This reflects the support that is provided to ASYEs by managers, advanced practitioners and the impact of the Social Work Academy. The proportion of social workers with over three years' experience has improved indicating that experienced staff are also being retained. The Better for Children Development Plan sets out agreed priorities and timescales |
| CR5 | Managing our data well and producing effective management information | Organisational          | Ineffective collection, collation and input of data<br><br>Failure to improve quality of data in council systems including those that have already been implemented and those that are being implemented. | <ul style="list-style-type: none"> <li>Information Management Strategy.</li> <li>Accuracy Steering Group chaired by Director of Adult Services oversees a programme of work to improve data quality within systems used by Adult Services</li> <li>Data Quality and Performance Group oversees quality of information in systems for children's services</li> </ul>   | 16 | <ul style="list-style-type: none"> <li>'Project Accuracy' for Adults Services focussing on procedures and data quality is now underway.</li> <li>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.</li> <li>Clear governance structure in place to ensure a continued focus on data quality/accuracy: <ul style="list-style-type: none"> <li>Data Quality and Performance Group.</li> </ul> </li> </ul>  | 12 (Major/possible) | CMT                             | Children's - Regular meetings with Deputy Director Children's Services and Executive Director Escalation via Improvement and Accountability Board.  |

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|     |   |                             | <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"> <li>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.</li> <li>Use of 'exception reports' which proactively highlights data anomalies and inconsistencies.</li> <li>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.</li> </ul>   |    | <ul style="list-style-type: none"> <li>Practice Improvement Meetings (PIMs) looking at performance and data quality.</li> <li>Children's Portfolio Review Boards have oversight of development of systems</li> </ul> <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"> <li>Draft Digital Strategy – the developing strategy has a work stream relating to data and developing an information architecture across the core systems.</li> <li>A strategy for Business Intelligence and reporting is being developed and will be presented to Corporate Management Team</li> <li>A Performance Management Framework is being developed to supplement the proposed new 'Our Vision for Lancashire' document</li> <li>Workshops have taken place with the Business Intelligence Service to identify Corporate Reporting.</li> <li>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.</li> </ul> |                     |   |   |
| 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>Failure to deliver transformational change.</p> <p>Failure to deliver efficiencies and cost reductions.</p> <p>Failure to produce the information needed to support management decision making.</p> <p>Lack of management buy-in from service areas to drive forward change.</p> <p>Failure to ensure that services work to new practices in a consistent way so as to maximise the</p>   | <ul style="list-style-type: none"> <li>Roadmaps have been developed for all key major systems. Governance arrangements in place with full impact assessment carried out for all system changes.</li> <li>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&amp;D, BI etc. on wider impacts and how system changes are managed into the business.</li> <li>Sign off arrangements for roadmaps, including prioritisation of work, are in place. Boards have been established for major system implementations.</li> </ul> | 16 | <ul style="list-style-type: none"> <li>Continued monitoring of data within Lancashire Children's Service.</li> <li>Governance Boards established for Early Help Module, Education, Health and Care Plans module, MASH and Child Sexual Exploitation.</li> <li>No major issues identified in recent Ofsted inspection.</li> <li>Critical incidents escalated within Corporate Services and BTLS.</li> <li>Internal Audit have given Substantial assurance over the effectiveness of controls operating over the Systems Support function within Core Systems.</li> <li>New system roadmaps developed to provide more control over system changes. Core Systems are continually reviewing request against council priorities and strategies.</li> <li>HAMS specific - Fortnightly meetings with Highways Service continue, with focus on discussing and managing operational issues, with</li> </ul>   | 12 (Major/possible) | 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.</p> <p>Access for managers to simplified Oracle reports is being developed</p> |

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|-----|---|----------------------------|---|---|----|---|---------------------|---|---|
|     |   |                            | <p>benefit from investment in new technology.</p> <p>Ineffective reporting arrangements. Statutory returns will be compromised, so incorrect performance will be reported nationally.</p> <p>Ineffective working practices and targeting of resources to work priorities.</p> <p>May impact on response times.</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> | <ul style="list-style-type: none"> <li>• 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.</li> <li>• Information management strategy and approach being rolled out with all new systems.</li> <li>• 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.</li> <li>• 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</li> <li>• Performance Data on projects supplied to the Corporate Dashboard from PPMS.</li> <li>• New operating process and procedures developed and implemented to overcome recurring issues/problems - continuous improvement cycle implemented.</li> </ul> |    | <p>a continuous tracking of issues and timescales for rectifying these.</p> <ul style="list-style-type: none"> <li>• HAMS Specific - Implementation of improvement plan almost complete, outcomes recorded and monitored against audit report. Highways Improvement Board continues to operate, and transition to Business as Usual being developed. Supported by Core Systems and Programme Office. Comprehensive training and support plan for the service being delivered.</li> <li>• HAMS specific – follow-up Audit review undertaken and report expected in January 2019.</li> <li>• Close working with Business intelligence and BTLS to undertake Landscape Review of reporting across the authority – completion due Oct 2018</li> <li>• The development of an architectural vision for the digital strategy is underway, working closely with BTLS. This includes a landscape review of existing technologies. First draft under review.</li> <li>• Critical incidents escalated to Director and through BTLS.</li> </ul> |                     | <p>Adoption of Digital 1<sup>st</sup> Strategy March 2019</p> <p>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</p> |   |
| CR7 | Delivering major projects/schemes on time and within budget | Development & regeneration | <p>Scheme viability in doubt due to speculative estimating and project management</p> <p>Pressure on capital programme</p>  | <ul style="list-style-type: none"> <li>• Capital Board</li> <li>• Capital Programme reports to Cabinet</li> <li>• Active project and programme management</li> </ul>  | 16 | <ul style="list-style-type: none"> <li>• Initial review work undertaken of a sample of major capital schemes including Lancashire Central to improve the estimating and testing of current and future scheme costs. These include: <ul style="list-style-type: none"> <li>○ Reporting of cost ranges for new schemes</li> <li>○ Routine updating of cost estimates</li> <li>○ Inclusion of contingency at industry standards and benchmarks</li> </ul> </li> <li>• 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</li> </ul>  | 12 (Major/possible) | Exec Director Growth, Transport and community services  | <p>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:</p> <ul style="list-style-type: none"> <li>• Detailed monitoring of the delivery programme through 2018/19 to</li> </ul> |



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|-----|--|-----------------------|--|--|----|--|------------------------|---------------------------------|--|
|     |  |                       |  |  |    | <p>approved by Cabinet in September and which now forms the agreed baseline for monitoring purposes. The review was focused on:</p> <ul style="list-style-type: none"> <li>○ Updating the delivery programme for 2018/19 informed by the delivery performance in 2017/18 and previous years.</li> <li>○ Reviewing the level of funding available for unallocated budgets and the requirement for these to be continued to be carried forward.</li> <li>○ 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.</li> <li>○ Of the new approved projects a realistic assessment of 2018/19 deliverability was made with delivery timeframes and budgets being moved to future years where appropriate.</li> </ul> <ul style="list-style-type: none"> <li>● Restructuring to ensure the service has the resources with the right skill sets</li> <li>● Update reports to Audit, Risk &amp; Governance Committee</li> </ul>  |                        |                                 | <p>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.</p> <ul style="list-style-type: none"> <li>● Performance reports developed to enable the Capital Board to undertake this monitoring and challenge.</li> </ul> |
| 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"> <li>● Following the SEND Local Area Inspection a 'Written Statement of Action' (WSA) has been submitted to 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"> <li>○ The lack of strategic leadership and vision across the partnership</li> <li>○ Leaders' inaccurate understanding of the local area</li> <li>○ Weak joint commissioning arrangements that are not well developed or evaluated</li> <li>○ The failure to engage effectively with parents and carers</li> <li>○ The confusing, complicated and arbitrary systems and processes of identification</li> <li>○ The endemic weaknesses in the quality of EHC plans</li> <li>○ The absence of effective diagnostic pathways for ASD across the local area, and no diagnostic pathway in the north of the area</li> </ul> </li> </ul> | 25 | <ul style="list-style-type: none"> <li>● Recruitment of qualified staff funded by the SEND reform grant.</li> <li>● Commissioning arrangements with Health being reviewed.</li> <li>● The actions to implement the Written Statement of Action. These include: <ul style="list-style-type: none"> <li>○ <i>SEND Partnership Board established with five thematic working groups to implement the written statement of action.</i></li> <li>○ <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></li> <li>○ <i>Open feedback survey in place.</i></li> <li>○ <i>Supporting the formation of a Lancashire Parent/Carer forum.</i></li> <li>○ <i>Implementation of the early help (IT) module.</i></li> <li>○ <i>SEND Partnership Board has agreed SEND Vision, Values and Strategy</i></li> <li>○ <i>New Partnership Chair appointed</i></li> <li>○ <i>New Branding for the SEND local offer</i></li> </ul> </li> <li>● Strategic reporting and monitoring of improvement plan at Cabinet and CMT level.</li> <li>● Active leadership of Health and Wellbeing Partnership is leading SEND improvement plan.</li> </ul> | 12<br>(Major/possible) | 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.</p>  |



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|      |   |                       |   | <ul style="list-style-type: none"> <li>○ No effective strategy to improve the outcomes of children and young people who have SEN and/or disabilities</li> <li>○ Poor transition arrangements in 0–25 healthcare services</li> <li>○ The disconcerting proportion of children and young people who have an EHC plan or statement of SEN who are permanently excluded from school</li> <li>○ The inequalities in provision based on location</li> </ul> |    |  |                   |                           |  |
| 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 Troubled Families Unit (TFU) Maturity Model and service transformation with partners.</p> <p>Risk of additional scrutiny of programme</p> | <ul style="list-style-type: none"> <li>● No governance procedures in place with responsibility for Troubled Families Unit oversight. Robust tracking processes in place with view to maximising payment by result claim opportunities.</li> <li>● Ongoing data matching to identify new eligible families</li> </ul>  | 20 | <ul style="list-style-type: none"> <li>● Development of reporting processes to ensure monthly progress checks against targets</li> <li>● Redesigning of outcomes plan to set more achievable/realistic targets</li> <li>● Review of Governance Arrangements commissioned.</li> <li>● Districts supported to identify families where potential claims can be made</li> <li>● Workforce development complete for shared assessment. Lead Professional and Risk Sensible approach.</li> <li>● Revised assessment CAF documentation, Quality Assurance and processes to assist in meeting requirements.</li> <li>● TFU Maturity Model self-assessment completed and developed action plan to support delivery and improvement.</li> <li>● If the funding for this programme ceases then this will result in a pressure on the budget of £2.1M</li> </ul> | 16 (Major/Likely) | Director of Public Health | <p>As at 14th December 2018 payment by results claims had been made for 3,155 families (37% of the target for the life of the programme) where significant and sustained progress was evidenced. 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.</p> <p>The service has a reduced capacity to meet the TFU targets since the implementation of a £1.25m budget reduction to the CFW service. This has reduced caseload capacity from 10k families a year to 7k families a</p> |

year. The TFU target is to 'turn around' 8620 families.

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| CR 13 | Increase in demand, including rise in number of contacts and referrals and an increase in Children Looked After numbers. | People/Organisational | <ul style="list-style-type: none"> <li>High, unmanageable caseloads.</li> <li>Potential drift and delay - impact on timeliness of assessment, plans and interventions with children &amp; families. Financial implications.</li> </ul> | <ul style="list-style-type: none"> <li>Data Quality &amp; Performance Group oversees data accuracy, ensuring reliable performance data to aid managers understanding of demand.</li> <li>Weekly and monthly performance reports provide trend data.</li> <li>Monitoring of performance and caseloads via Children's Social Care Senior Leadership Team.</li> <li>Monthly Practice Improvement Meetings in each locality chaired by the Head of Service to scrutinise performance.</li> <li>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.</li> <li>MASH and Demand Management Board oversees front door arrangements and quality and appropriateness of contacts/referrals. The Board reports to the Getting to Good Board.</li> <li>Becoming Looked After Panels in each locality to consider all placement requests.</li> <li>Challenge via monthly Children's Services Finance &amp; Monitoring Board re savings targets.</li> </ul> | 20 | <ul style="list-style-type: none"> <li>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.</li> <li>Track and challenge meetings chaired by Improvement Partner established in each locality to ensure appropriateness of care plans for CLA and to reduce costs.</li> <li>Tracking of home placements awaiting revocation, to ensure, where appropriate, more timely discharge of Care Orders for children placed with parents</li> </ul> | 16 (Major/likely) | Director of Children's Services | <p>The number of referrals to Children's social care continues to be high</p> <p>The number of children looked after has continued to increase, although similar and larger increases have been reported both nationally and regionally.</p> <p>The increase in demand continues to impact on social work caseloads, with the average caseload at 20.0 at the end of December, however this is a slight decrease in comparison to recent months. (20.9 - September, 22.9 June), although some caseloads are significantly higher than this.</p> <p>Further action is being taken to address this:</p> <p>Scheme of delegation reviewed and Head of Service approval now required for children becoming looked after.</p> <p>Successful life chances bid will</p> |

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|      |   |                       |  |   |                   |   |                    | <p>support children on the edge of care.</p> <p>Increased use of Family Group Conferencing as a demand management strategy.</p> <p>Adolescent Support Unit and Outreach Service are preventing the need for accommodation.</p> <p>Re-launch of revised pre-proceedings protocol, with tighter management of pre-proceedings cases.</p> <p>Challenging targets set in the Getting to Good Plan to reduce the number and rate of children looked after.</p> |   |
| CR14 | Intermediate care for older people in a residential setting | People/Organisational | <ul style="list-style-type: none"> <li>Operational issues leading to service failures</li> <li>Unavailability of community beds for older people on a short term basis</li> <li>Prolonged period of rehabilitation and recuperation before the person goes home</li> <li>Delayed transfer from hospital</li> <li>Reputational challenge for the Council if care homes operated by the council are judged by CQC as 'Requires Improvement'</li> </ul> | <ul style="list-style-type: none"> <li>New Head of Service has been appointed and a programme to drive forward changes in management culture and performance has been developed</li> <li>Management responsibilities have been realigned</li> </ul> | 16 (Major/Likely) | <ul style="list-style-type: none"> <li>A review of the Lancashire intermediate care system is being commissioned using money from the Better Care Fund, and will include consideration of the best practice model for each service area including the community beds. Consultants have now been appointed and are undertaking initial investigatory work.</li> <li>Working with NHS colleagues to agree joint action plans</li> <li>Discussion with CQC on lessons learnt and action plans</li> <li>County Council care homes will formally be part of RADAR and QUIP safeguarding systems</li> <li>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</li> </ul> | 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><b>Delivering the Operational Plan to ensure a strong and sustainable County Council</b></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 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> <p>Prospects of a strong collaboration across the local authorities, bringing stronger institutional leadership, including the LEP but across all sectors and partners.</p> | <ul style="list-style-type: none"> <li>Lancashire Enterprise Partnership (LEP) has secured and is delivering through partners 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.</li> <li>European Structural &amp; Investment Funds (ESIF) monies, both Regional Development Funds and Social Funds, totalling circa £200m are currently ring-fenced for use in Lancashire (LEP area) over the next 5 years. This supports business support initiatives, innovation investment, environmental and flood mitigation measures as well as skills development and employability work. Post Brexit vote, projects which have been through the full approval process are not able to sign a final contract with MHCLG and project funding is being restricted to spend prior to end 2018. Significant beneficiaries include the Council, other local authorities, Higher Education Institutes' and Colleges.</li> <li>Secured national Digital Skills Pilot status</li> <li>Lancashire Leaders collaborating around a Lancashire Plan and a series of Theme Groups, to secure a new conversation with HMG.</li> <li>The purpose of the approach is to get Lancashire over the line and into the 'fast track' of Combined Authorities to access differentiated policy and funding streams.</li> </ul> | 12                | <ul style="list-style-type: none"> <li>Strong leadership and collaboration led by local authorities and partners to maximise national resources to support economic growth and regeneration are secured, including strategy and tactics to get into the 'fast track' of places securing priority policy frameworks and funding streams.</li> <li>Optimise the support from key local and national public and private sector stakeholders outside of the County Council.</li> <li>The County Council to continue to increasingly use its investment and prudential borrowing capacity and investment funds to bring forward a portfolio of strategic development opportunities</li> <li>Growth Deal programmes 1, 2 and 3 to be delivered by 2021.</li> <li>LEP, universities,, private sector and local authorities and others to collaborate to formulate a differentiated Local Industrial Strategy for Lancashire, aligned with other key strategies, such as LTP, Local Plans, and city, town and rural regeneration.</li> <li>Economic Development's main ERDF project Boost has secured funding in to the medium term. This will provide rapid response support in light of Brexit as well bring support and investor confidence more generally.</li> <li>Development of a strong LEP is crucial to the development of a strong economy. Preparations in hand to provide a strong lean strategic collaborative LEP capable of mobilising partners, to deliver priority outcomes. The LEP is primarily already compliant with the Review but LCC is keen to secure a bold and ambitious approach.</li> <li>On-going input to work of Transport for the North on strategic development corridors</li> </ul> | 16 (Major/likely)          | CMT               | <p>EU continuity funding is secured for the Brexit transition. However, there is a lack of clarity around the next Spending Review, the Shared Prosperity Fund and other government initiatives.</p> <p>A big risk sits around the continuing prioritisation of Combined Authority areas.</p> <p>We are now looking to move forward with a strong collaboration across local authorities and the production of a Local Industrial Strategy to maximise new funding opportunities. New national housing and transport infrastructure funds will be targeted in support of local strategic priorities.</p> <p>A push to get Lancashire into the 'fast track' of areas with future deals, single pots and strong evidence led and mature relationships and approaches, with a strong supportive LEP, is an important</p> |

|     |   |                        |   |   |    |  |                           |                           |  |
|-----|---|------------------------|---|---|----|--|---------------------------|---------------------------|--|
|     |   |                        |   | <ul style="list-style-type: none"> <li>• Seeking a single strategic framework and evidence base.</li> <li>• NW Made Smarter Lancashire pilot launched. Lancashire is one of five NW LEPs co-designing this programme with industry partners.</li> <li>• Lancashire Transforming Cities Fund success to be taken to the next stage.</li> <li>• Lancashire HIF Bids to be taken to the next stage.</li> </ul> |    |  |                           |                           | strategic direction and priority.  |
| 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"> <li>• 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.</li> <li>• 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.</li> <li>• L&amp;D are speaking to Heads of Service to see how their training needs can be creatively addressed to link with the Levy, where possible.</li> <li>• Heads of Service have been asked to report to L&amp;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&amp;D</li> <li>• Close working relationship with the LGA and we are focussing currently on Higher degree apprenticeships. LGA will be supporting LCC in developing a strategy and future spending plan.</li> </ul> | 15 (Outstanding/possible) | 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 |

|     |   |                       |   |   |    |   |                   |                           |  |
|-----|---|-----------------------|---|---|----|---|-------------------|---------------------------|--|
| 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"> <li>Align to wider draft 'People Strategy'</li> <li>We have started to develop the foundations of smarter recruitment practices which are being piloted in Adults and Children's Services.</li> <li>We are also building and developing the Lancashire brand to help us attract high quality candidates.</li> <li>LCC Recruitment Portal launched successfully on 17.12.18. Career site to be launched 07.01.19. Project Board and Project Plan remains in place, along with identified resources</li> </ul> | 16 (Major/likely) | Dir of Corporate Services |  |
|-----|---|-----------------------|---|---|----|---|-------------------|---------------------------|--|

**Key to Scores**

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

# Agenda Item 10

(NOT FOR PUBLICATION: By virtue of paragraph(s) 3, 4 of Part 1 of Schedule 12A of the Local Government Act 1972. It is considered that all the circumstances of the case the public interest in maintaining the exemption outweighs the public interest in disclosing the information)

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