

NOTICE OF THE MEETING OF THE POLICY AND PERFORMANCE REVIEW COMMITTEE

TUESDAY 27 JANUARY 2015, 10 am COUNCIL CHAMBER, TOWN HOUSE, HADDINGTON

Agenda of Business

Apologies

Declarations of Interest

Members should declare any financial and non-financial interests they have in the items of business for consideration, identifying the relevant agenda item and the nature of their interest.

1. Minute of PPRC meeting on 25 November 2014 (pages 1-10)

- Delayed Discharge (pages 11-18)
 Report by Director of Health and Social Care Partnership
- Adult and Child Protection Half Year Update to Elected Members
 April 2014 September 2014 (pages 19-24)
 Report by Chief Social Work Officer
- 4. Overview of How Good is Our Council Self Evaluation 2014 (pages 25-36) Report by Depute Chief Executive Partnerships and Community Services
- 5. Annual Work Programme Update 2015 (pages 37-38)

Angela Leitch Chief Executive John Muir House Haddington 19 January 2015



MINUTES OF THE MEETING OF THE POLICY AND PERFORMANCE REVIEW COMMITTEE

TUESDAY 25 NOVEMBER 2014 COUNCIL CHAMBER, TOWN HOUSE, HADDINGTON

1

Committee Members Present:

Councillor D Berry (Convener)

Councillor J Caldwell

Councillor F McAllister

Councillor J Gillies

Councillor J Williamson

Councillor P McLennan (Items 1-4)

Councillor P MacKenzie

Councillor J Goodfellow

Other Councillors Present:

Councillor McMillan (Item 4)

Council Officials Present:

Mrs A Leitch, Chief Executive

Ms M Patterson, Depute Chief Executive - Partnerships and Community Services

Mr A McCrorie, Depute Chief Executive – Resources and People Services

Mr D Nightingale, Head of Education

Mr J Lamond, Head of Council Resources

Mr T Shearer, Head of Communities and Partnerships

Mr R Montgomery, Head of Infrastructure

Mr M Leys, Head of Adult Wellbeing

Mr D Small, Director of Health and Social Care Partnership

Mr P Vestri, Service Manager - Corporate Policy and Improvement

Mr D Proudfoot, Service Manager - Property Maintenance

Mr K Christie, Service Manager, Revenues

Mr I Dalgleish, Service Manager, Transport

Ms L Brookes, Principal Teacher Outdoor Education

Ms T Leddy, Area Manager, Adult Wellbeing

Ms A Stewart, Rent Income Team Leader

Ms A McIntyre, Revenues Performance and Business Development Officer

Ms P Bristow, Communications Officer

Mr A Strickland, Policy Officer

Clerk:

Mrs F Stewart, Committees Assistant

Apologies:

None

Declarations of Interest:

None

1. MINUTE OF PPRC MEETING ON 23 SEPTEMBER 2014

The Minute of the PPRC meeting on 23 September 2014 was agreed to be a true record of the meeting. There were no matters arising.

2. RENT ARREARS

The Depute Chief Executive, Resources and People Services, had submitted a report to inform the Committee about the significant work which had been undertaken by the Revenues service since the last Policy and Performance Review Committee report was submitted on 19 March 2013. The report also informed the Committee about improvements in current year rent collection performance and how recent collection performance compares to other Scottish Councils.

Mr Kenny Christie, Revenues Manager, summarised the report. He stated that, managing rent arrears during a time of economic downturn and welfare cuts, presented a substantial challenge to the Council. After a period of concern over staff retention, increased funding had secured one additional permanent Rent Income Officer and 3 permanent Rent Income Advisers bringing stability to the staffing establishment. This additional staff resource, and a new restructured team, would provide a more proactive approach to rent collection. Mr Christie stated that the most significant welfare reform introduced so far had seen reductions in benefit payment due to under occupation, commonly referred to as the 'bedroom tax', and this reform had had a direct impact on rent arrears from April 2013. The Revenues Service had not achieved the target set for the end of Quarter 2 but there was clear evidence of an improved performance this financial year when compared to the previous year. A Rent Arrears Scrutiny Group comprising Chief Officials, Senior Management and staff from Revenues, had been formed in December 2013 and had made good progress exploring potential developments and initiatives. Recent developments included a Text Messaging Service, a Telephony Self Service and a Web Self Service for The Revenues Team also worked jointly with internal and external stakeholders to achieve better outcomes.

Mr Christie advised that there were still challenges ahead, particularly the accelerated roll out of Universal Credit expected in March or April of next year. However, he considered that the Revenues Team was now well positioned to meet the future demands on the service.

Councillor Caldwell enquired what the main causes of rent arrears were and Mr Christie replied that, while the economic downturn and welfare reform were the main causes, unemployment and on-line gambling were also factors. Some tenants also chose not to pay their rent. Councillor Caldwell also asked what percentage of tenants paid their rent on time and was advised by Mr Christie that in-year collection was approximately 98%. Mr Christie also explained the current rent arrears targets, where a different target was set for each month.

Councillor MacKenzie asked what local circumstances might explain why East Lothian should be more affected by the removal of the spare room subsidy (RSRS) than other Local Authorities (Audit Scotland report, September 2014) and Mr Christie replied that there were two reasons; the type of housing stock in the county and the inadequate Discretionary Housing Benefit awarded to the Council to mitigate the effects of the RSRS. Despite this, the Council had still held arrears down to half the Scottish average.

The Chair compared the Revenue team's rent collection performance against the rent arrears targets and suggested that future reports could distil and highlight this information. Monica Patterson, Depute Chief Executive, underlined that the Council had set ambitious targets on rent arrears and that recent measures were having a positive impact.

Councillor Goodfellow enquired if the implementation of Universal Credit in March/April 2015 would be a wholesale transfer to the new system or if it would affect new claimants only. Mr Christie replied that it would be for new claimants only at that stage. He also pointed out that, following full implementation of Universal Credit, it was estimated that the Council's Rent Income Team would have to collect an additional £245,000 per fortnight directly from claimants whose rent is currently paid into their account by Housing Benefit.

Councillor Williamson asked if Rent Income Officers referred tenants who were found to be in genuine need to food banks and other support agencies. Mr Christie replied that such referrals were made as a matter of course. The Chair proposed that a proactive approach with other stakeholders, for example, holding seminars on how difficulties could be avoided, could prove valuable in helping to prevent arrears difficulties for tenants.

The Chair requested clarification on the Discretionary Housing Payments (DHP) illustrated in Appendices A and B, which compared East Lothian's figures to other Local Authorities in Scotland. Jim Lamond, Head of Council Resources explained that, despite an additional resource from the Scottish Government, the DHP awarded to the Council were not enough to mitigate the effects of the welfare reforms. Officers considered that the Scottish Government had either under-estimated or underallocated the DHP. The Council was now in negotiations with the Scottish Government on this matter.

Councillor McAllister congratulated Mr Christie on his presentation and complimented the Revenues Team on their performance. He was supportive of the holistic approach taken by the Council on rent collection and was impressed by the new initiatives outlined in the report.

Decision

The Committee agreed:

- to note the change in approach to managing rent collection and to recognise that the service enhancements which had been introduced were producing improvements in current year performance compared to previous years;
- ii. to note that, although as a social landlord the Council's focus continued to be around sustaining tenancies and ensuring that tenants received the help and support they needed to stay in their home, the new service improvements ensured that tenants themselves were more accountable for paying their rent

- and knew what was expected of them, as well as being clear about the consequences of non payment; and
- iii. to recognise the commitment and dedication shown by all staff involved in rent collection and to support the Revenues service during this transitional period.

3. USE OF COUNCIL BUS FLEET

The Depute Chief Executive, Partnerships and Community Services, had submitted a report to provide the Committee with an opportunity to assess current and proposed use of the existing fleet of buses within Transport Services. Appendix A to the report showed a timetable for each of the fleet vehicles over 7 days.

Ian Dalgleish, Transport Services Manager, presented the report, highlighting new initiatives aimed at improving the utilisation of the bus fleet. He advised that the current fleet of Council buses carried out transport requirements for Adult Wellbeing, Education and all the externally run day centres and lunch clubs which were partially funded by the Council through Adult Wellbeing.

Mr Dalgleish also advised that Transport Services vehicles transferred pupils from all schools to South East Academies Partnership campuses at Queen Margaret University and Edinburgh College. Currently there were 94 pupils attending and the cost per head was 86 pence per person per journey.

Mr Dalgleish also stated that meetings had recently been held with the Association of Day Centres in East Lothian to explore possible collaboration options which would allow better use of both fleets of vehicles. An investigation into the possible use of the Council fleet to provide services during school and day centre holiday periods was also underway. Currently the fleet was used for the East Lothian Special Needs Playschemes over the school breaks.

Mr Dalgleish advised that Transport Services had recently reduced the fleet by three vehicles and the work carried out by these vehicles transferred to local taxi operators. Six new buses had been ordered and they would be able to undertake longer haul trips. A further report would be brought to the PPRC with information regarding the Supported Services routes within East Lothian. The current contract for these services was due to go out to tender in December to commence on 1 April 2015.

Councillor Caldwell acknowledged that it was very difficult to achieve 100% utilisation of the bus fleet but enquired what percentage of down time there was. Mr Dalgleish replied that it was approximately 70%, which was relatively high, but corresponded with the down time of other local companies. It was hoped that the percentage would improve by 5-10% with the arrival of the new vehicles.

Councillor MacKenzie enquired how much of the costs incurred by the Transportation Service were charged out to individuals and groups, and Mr Dalgleish replied that an internal re-charge system operated with Education and Social work to recover costs. He was not aware if they in turn charged the users.

Councillor McAllister enquired if the Council provided transport for other vulnerable groups and Murray Leys, Head of Adult Wellbeing, replied that the Council had a duty of care to certain individuals in the community and assessments were carried out to identify need.

Councillor Goodfellow noted that no school buses were included in the Bus Time Graph (Appendix A) and Ray Montgomery, Head of Infrastructure, explained the operation of the school fleet. Councillor Goodfellow proposed that another report could be brought to the Committee on this operation.

The Chair enquired what use was made of the Council buses at weekends and in school holidays and Mr Dalgleish advised that they were made available to the local community and charitable organisations on a non-profit making basis.

The Chief Executive stated that the report detailed the utilisation of the bus fleet and the Committee had an opportunity to consider if there were areas where efficiencies could be made. Mr Montgomery stated that the Council had to provide the more difficult transport provision and vehicles were bought for specific purposes. Transportation was therefore not in an attractive position to take on external work and legislation required that its services could not be for hire or reward. The Chair considered that the question of efficiency was still a valid one, particularly during weekends and holidays.

Mr Montgomery sounded a note of caution for the future. He stated that the Council's budget would not bear the cost of new replacement vehicles to maintain the current standard of operation. An element of charging for services could be a reasonable way forward but that posed the question of whether the bus operation was a service or a business. The Chair considered that this point was well made and suggested Members raised this matter in future budget discussions.

The Chair congratulated the Transport Services Department on their work and described the report as very useful.

Decision:

The Committee agreed to note the content of this report which forms a basis for discussion with regard to current and future utilisation of the Council passenger carrying fleet within Transport Services.

4. PROVISION OF OUTDOOR LEARNING TO SCHOOLS

The Depute Chief Executive, Resources and People Services, had submitted a report to give an overview of the Provision of Outdoor Learning to schools in East Lothian, both past and present. The background papers included a link to the Outdoor Learning Service website which contains information on teaching sessions and a copy of the HSE report.

Liz Brookes, Principal Teacher of Outdoor Education, presented the report. Giving an overview of the Service, she stated that Education Scotland directed that 'the journey through education for any child in Scotland must include opportunities for a series of planned, quality outdoor learning experiences'. The Outdoor Learning Service was used as a vehicle for delivering the Curriculum for Excellence. Ms Brookes outlined the staffing complement in the Outdoor Learning Service and advised that all teaching

staff were fully qualified. As the Team had lost one member of staff, the Service was in a position to engage freelance staff who could contribute particular skills or expertise. A Service redesign had been carried out and had considered how the Service could be developed for the future. Ms Brookes advised that the Outdoor Specialist Service provided all schools in East Lothian with a set number of days allocated to them and was tailored to individual school/class/learner requirements. She outlined a number of ways in which the service was delivered; specialist outdoor learning days delivered by the Outdoor Learning Service which were free to pupils, Adventure Award Days delivered by Associate/Freelance staff where a nominal charge was made to participants and Extra Curricular Days delivered by Associate/Freelance staff offered at a subsidised rate to participants. There were also outdoor Learning events and Festivals as well as Outdoor Learning Projects. Volunteers and support workers provided valuable assistance but the key was to recruit volunteers who had the relevant qualifications. The Service was therefore supporting and encouraging people to gain such qualifications.

In response to a question from Councillor MacKenzie, Ms Brookes outlined the level of service provision in East Lothian in comparison to other Local Authorities in Scotland.

Councillor Williamson, who had requested the report, enquired if the Service had an adequate budget to hire the freelance staff required and Ms Brookes replied that the necessary funds were available as, previously, all activities were provided free of charge but now a cost was placed on some packages. Councillor Williamson also enquired what feedback the Council had received from Schools since the service delivery had changed. Ms Brookes replied that the changes had received a mixed reception but there had been considerable interest in the new packages. Ray Montgomery, Head of Infrastructure, stated that a lot of the services were still provided free of charge or were heavily subsidised. It was open to Members to decide whether they wanted the Outdoor Provision to remain a service going forward or be operated as a business. He also pointed out that the Outdoor Learning Service was no longer in the Education Department. It formed part of the Sport, Countryside and Leisure Group which was in the Partnerships and Services for Communities Department.

The Chair asked what the most popular outdoor activities were and Ms Brookes explained that her Team did not deliver stand alone activities; the teaching Team provided a service which used the outdoors as a classroom to deliver the Experiences and Outcomes required by the Curriculum for Excellence.

The Chief Executive noted from the report that the Outdoor Learning Service helped to deliver the Council's Single Outcome Agreement (SOA). As one of the overarching priorities of the SOA was to reduce inequalities in our communities, she enquired to what extent Outdoor Learning Provision was targeted at certain groups. Ms Brookes replied that normally all children could be involved in the activities; wheelchair users could be accommodated as adaptive equipment was available, and Children with additional support needs and Looked After Children also benefitted.

Councillor Williamson stated that he was satisfied that the level of service had been maintained despite the team losing one member of staff. He also noted that certain activities had increased and commended the team on the excellent job they do, particularly as he was aware that young people derive so much pleasure from taking part in these activities.

Decision

The Committee agreed to note the contents of this report and in particular the successful HSE Adventure Activity Licensing Authority (AALA) Inspection Report.

5. DOMICILIARY CARE RPORT - HOMECARE SERVICE

The Director of Health and Social Care had submitted an update report on the performance of the Homecare Service April 2014 – November 2014 following the Care Inspection visit and resulting Domiciliary Care Report dated 1 April 2014.

Trish Leddy, Area Manager for Adult Wellbeing, presented the report. She advised that the Home Care Service provided support for people in East Lothian to live at home. This service was registered with the Care Inspectorate which had made a second Short Notice Announced visit in April 2014 and awarded weak grades for standards assessed in specific aspects of Care and Support, Quality of Staffing and Management and Leadership. A further Announced Short Notice visit by the Care Inspectorate in July had acknowledged the considerable investment in the Service through a detailed action plan and improved grades were awarded. The Care Inspectorate also conducted a survey gathering feedback from service users who had praised the delivery of care and support from frontline staff. Also, results from 43 Quality Assurance Visits carried out by Managers of the Home Care Service showed that the majority of service users rated their experience as excellent. Areas for improvement included consistency of care and time provision. A revised Working Agreement and New Rota Pattern had been implemented within the Home Care Service on 13 October 2014.

Councillor MacKenzie enquired how many staff were employed in the Home Care Service and Murray Leys, Head of Adult Wellbeing, replied that there were approximately 105. Councillor MacKenzie also asked if the staff's workload was realistic and Mr Leys replied that they used a developmental Staff Plan to schedule work, but the key was for staff to be flexible to provide the support required.

The Chair stated that he had received feedback indicating that some clients received only 15 minutes of care and Mr Leys replied that the Council did not offer a 15 minute service. He added that the most significant change in recent times was the complexity of need as often two members of staff were required on home visits. Mr Leys acknowledged that there were still capacity issues and that the service still faced many challenges.

The Chair asked if there was any explanation for the very positive feedback from service users not being reflected in the gradings awarded by the Care Inspectorate and Mr Leys replied that there had been some transitional issues since changes to the rota had been implemented in 2012 and terms and conditions had been renegotiated with the trade unions. The service position was now being consolidated.

Councillor Gillies considered that the Council had lost many valuable members of care staff when the service had engaged an external company to manage the service in 2008. In his view, an opportunity was lost at that time to establish a social enterprise, on the Co-operative model. Mr Leys stated that, since taking up his post 3 years ago, the Council had been working closely with the private voluntary sector (STRiVE) and had moved to an outcome focussed approach. Mr Leys stated that Councillor Gillies's point was well made and he was pleased to report that the Council was now actively engaged with the social enterprise ethos.

Councillor Berry stated that the PPRC was not a policy setting environment but the report had prompted useful debate. He described the report as positive and was pleased to hear that the frontline service was good.

Decision

The Committee agreed to note the report.

6. PERFORMANCE REPORT – QUARTER 2, 2014-15

The Depute Chief Executive, Partnerships and Community Services had submitted a report to provide the Committee with information regarding the performance of Council services during Q2 (July – September) 2014/15

Andrew Strickland, Policy Officer, presented the report. He stated that Members of the Committee had attended the performance briefing for Quarter 2 on 6 November and Appendix A to the report showed the results of the quarterly Key Performance Indicators. Mr Strickland advised that graphs showing the long term trend for indicators that are below target had been incorporated into the report, together with further contextual information requested by Members.

Councillor Williamson noted from the report that only 50% of stage 2 complaints had been completed within 20 working days when the target was 80% and the Chair replied that the Committee could look for progress on this result in Quarter 3.

Councillor Goodfellow referred to the percentage of Council Tax collected and the Chair advised that this figure was correct at the end of September and would increase over the coming months. It was the end of year figure for this Indicator which was most important but it was helpful to track its performance over the whole year.

There were no requests for further investigation into any of the Indicators.

Decision

The Committee agreed to use the information provided in this report to consider whether any aspect of the Council's performance was in need of improvement or further investigation.

7. ANNUAL WORK PROGRAMME 2014-15 UPDATE

The Chair stated that he was satisfied with the agendas of the next few meetings. Councillor Williamson stated that he had received a number of complaints from constituents following the replacement of street lighting in Musselburgh. Residents had pointed out that the new LED street lamps created a smaller pool of light which raised a number of safety issues. Ray Montgomery, Head of Infrastructure, stated that he could prepare a report for a future meeting on how the LED lighting operation was evolving. He was also happy to respond to any specific enquiries the Councillor may have. The Chair proposed that a report could be brought to the April 2015 meeting.

AOB

Councillor McAllister, mindful that Council Officers often spent hours in meetings when required to attend for only one report, proposed that Officers could be contacted by text shortly before their report was due to be heard. Monica Patterson advised that this system was already used to a degree, but it was not an exact science. She would, however, raise the matter with the Council Management Team.

| Signed | |
|--------|--|
| | Councillor David Berry Convener of the Policy and Performance Review Committee |



REPORT TO: Policy and Performance Review Committee

MEETING DATE: 27 January 2015

BY: Director of Health and Social Care Partnership

SUBJECT: Delayed Discharges

1 PURPOSE

1.1 To invite members of the Committee to discuss delayed discharge performance in East Lothian.

2 RECOMMENDATIONS

Members are asked to:

2.1 Discuss the issues involved in performance on delayed discharge.

3 BACKGROUND

- 3.1 The current national target for delayed discharge performance is that there should be no one waiting more than 4 weeks for discharge from hospital. This is reflected in the East Lothian Single Outcome Agreement.
- 3.2 From April 2015 the target is that no one should wait more than 2 weeks.
- 3.3 Delayed discharge is essentially the situation where an individual's need for healthcare in their current location is completed and they are waiting for provision of care in another location or from another type of service.
- 3.4 Other locations or services are primarily another healthcare service, a care home or care at home. The definition also includes waiting for housing or adaptations or where discharge is delayed for other reasons e.g. guardianship or dispute.
- 3.5 Delayed discharge patients are monitored daily through a system called "EDISON" which is accessed and updated by both NHS and Council staff.

- 3.6 On a monthly basis the data on "EDISON" is "validated" to provide an accurate snapshot (census) of those actually available at that point in time to transfer but without a definite transfer planned. Those excluded from the validated data include disputes, guardianship, those who have transfer dates, "complex" cases and those whose health prevents transfer at that point.
- 3.7 There is therefore a difference between the numbers on the live system (EDISON) which is used for day to day management and the validated (census) numbers which are used for performance monitoring and national data analysis. It is normal for about 50% of delays on EDISON to be excluded from the validated data.
- 3.8 Appendix 1 shows East Lothian performance on the validated census data in December 2014. It also includes the rest of Lothian. There were 31 validated delays with 18 over 4 weeks and 25 over 2 weeks.
- 3.9 Appendix 2 shows validated East Lothian total number of delays from April 2013 to December 2014 along with the rest of Lothian. This shows that East Lothian performance has fluctuated. The lowest number in this period was 15 delays in October 2013 and the highest number was 43 in September 2014. The months since September have seen fluctuations, but a general improvement.
- 3.10 However, prior to this form of data collection (i.e. over the past 4 years) East Lothian has had as few as 5 validated delays and as many as 45.
- 3.11 Appendix 3 shows recent data from EDISON to illustrate the main reasons for delay in East Lothian. This shows that the biggest single reason for delay is access to nursing home places. The next biggest reason is access to home care (although this is less than half the number waiting for a nursing home place).
- 3.12 The key issues in East Lothian that are contributing to the problem are.
- 3.13 First, the vulnerability of the care home market where there has consistently been at least one care home with restricted access due to concerns.
- 3.14 Second, the vulnerability of the care at home market where providers have faced real challenges in recruitment and retention of staff which has restricted their ability to respond timeously to packages of care for people in hospital.
- 3.15 At the same time the Adult Wellbeing Service has to balance the priority of people waiting in hospital with people currently at home whose situation is deteriorating. In order to support these people at home or to access a care home and avoid a hospital admission, it can be more important to meet their needs.

- 3.16 The Health and Social Care Partnership has been actively working on this problem. A delayed discharge action plan has been in place since September 2014 and is under regular update and revision.
- 3.17 The key actions taken recently are:
- 3.18 Opening of 20 step down beds in Crookston Care Home.
- 3.19 Establishment of the Hospital to Home service.
- 3.20 Supporting care homes to address concerns and receive admissions.
- 3.21 Support to the emerging social enterprise for home care.
- 3.22 Support to independent providers of home care in terms of recruitment and retention and training and development of staff.
- 3.23 Review the process between NHS and Adult Wellbeing for managing delayed patients by establishing a "discharge hub" at Roodlands Hospital.
- 3.24 Improving our capacity to prevent admissions by funding additional capacity in the Emergency Care Service and establishing ELSIE (East Lothian Service for Integrated care for the Elderly).
- 3.25 Looking forward, there will be opportunities through the Integrated Care Fund to further improve our response and these are being developed as part of the draft strategic plan for the Integration Joint Board for health and social care.

4 POLICY IMPLICATIONS

4.1 The achievement of the national standards is set out in the Single Outcome Agreement. It is likely that the 2 week standard will not be met by April 2015.

5 EQUALITIES IMPACT ASSESSMENT

5.1 This report is not applicable to the well being of equalities groups and an Equalities Impact Assessment is not required.

6 RESOURCE IMPLICATIONS

6.1 Financial – significant additional resources have been committed to the actions set out above. These have come from non-recurring sources such as the Reshaping Care For Older People Change Fund, direct allocations from Scottish Government for delayed discharge, but have also resulted in pressures on operational budgets in the NHS and in Adult Wellbeing.

- 6.2 Personnel there are no direct implications of this paper.
- 6.3 Other none

7 BACKGROUND PAPERS

7.1 None

| AUTHOR'S NAME | David Small |
|---------------|-------------|
| DESIGNATION | Director |
| CONTACT INFO | 7778 |
| DATE | 12/01/2015 |

Appendix 1

December 2014 Validated Delayed Discharges

| | Edinburgh | East Lothian | Midlothian | West Lothian | Non - Lothian |
|--------------|-----------|--------------|------------|--------------|---------------|
| Overall | 141 | 31 | 8 | 12 | 4 |
| Over 4 Weeks | 49 | 18 | 0 | 3 | 1 |
| Over 2 Weeks | 92 | 25 | 1 | 8 | 2 |

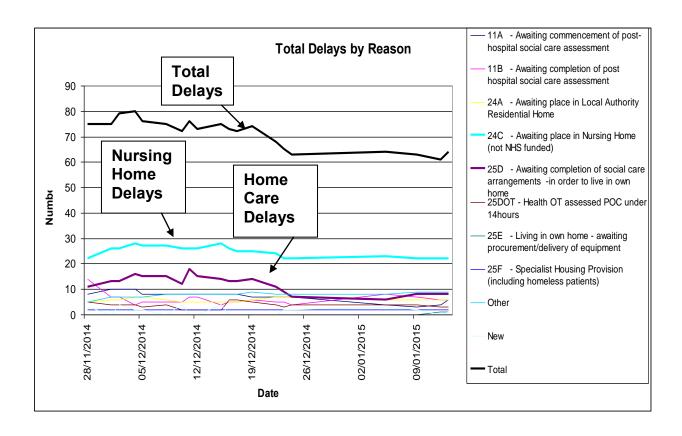
APPENDIX 2

Total Validated Delayed Discharges April 2013 to December 2014

| 2013/14 | April 2013 | May-13 | Jun-13 | Jul-13 | Aug-13 | Sep-13 | Oct-13 | Nov-13 | Dec-13 | Jan-14 | Feb-14 | Mar-14 |
|---------------|------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Overall Total | 107 | 121 | 109 | 129 | 112 | 133 | 155 | 131 | 155 | 164 | 142 | 156 |
| Edinburgh | 62 | 85 | 71 | 91 | 87 | 102 | 130 | 97 | 113 | 119 | 108 | 118 |
| East Lothian | 30 | 28 | 29 | 30 | 21 | 22 | 15 | 24 | 22 | 19 | 16 | 17 |
| Midlothian | 12 | 4 | 6 | 7 | 4 | 6 | 5 | 7 | 7 | 12 | 10 | 14 |
| West Lothian | 2 | 3 | 1 | 1 | 0 | 2 | 2 | 1 | 9 | 12 | 5 | 4 |
| Non-Lothian | 1 | 1 | 2 | 0 | 0 | 1 | 3 | 2 | 4 | 2 | 3 | 3 |

| 2014/15 | Apr-14 | May-14 | Jun-14 | Jul-14 | Aug-14 | Sep-14 | Oct-14 | Nov-14 | Dec-14 | Jan-15 | Feb-15 | Mar-15 |
|---------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Overall Total | 136 | 173 | 185 | 177 | 210 | 178 | 195 | 164 | 196 | | | |
| Edinburgh | 97 | 133 | 139 | 133 | 147 | 114 | 151 | 108 | 141 | | | |
| East Lothian | 25 | 19 | 30 | 25 | 30 | 43 | 30 | 37 | 31 | | | |
| Midlothian | 7 | 13 | 11 | 13 | 18 | 10 | 3 | 8 | 8 | | | |
| West Lothian | 5 | 4 | 4 | 5 | 9 | 8 | 9 | 9 | 12 | | | |
| Non-Lothian | 2 | 4 | 1 | 1 | 6 | 3 | 2 | 2 | 4 | | | |

Appendix 3 - Total Delays By Reason





REPORT TO: Policy Performance Review Committee

MEETING DATE: 27 January 2015

BY: Chief Social Work Officer / Head of Adult Wellbeing and

Head of Children's Wellbeing

SUBJECT: Child and Adult Protection

Half year update to Elected Members

April 2014 to September 2014

1 PURPOSE

This report gives an overview of the half yearly statistical performance information for Child and Adult Protection for Quarters 1 and 2, 2014/15.

2 RECOMMENDATIONS

- 2.1 The Committee is asked to:
 - a) Note the contents of this report

3 INTRODUCTION

- 3.1 In September 2014 a report as presented to PPRC which gave an overview of the statistical performance information for Child and Adult Protection for Quarter 4, 2013/14 and a summary report for the full year 1 April 2013 to 31 March 2014.
- 3.2 It was agreed that a half yearly update report with regard to Quarter 1 and Quarter 2, 2014/15 would be provided at PPRC in January 2015, with the Public Protection Annual Report for 2014/15 being presented to PPRC in June 2015.
- 3.3 This report therefore includes statistics for Quarter 1 and Quarter 2 2014/15 and summarises and comments on the main themes over the half year 01 April 2014 30 September 2014. The data is also set within a historical context showing annual trends since 2010/11.

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4 EAST LOTHIAN CHILD PROTECTION SUMMARY

4.1 Trends and Patterns: April – September 2014/15

| Measure | Short term trend | Long term trend | 2010/ 11 | 2011/ 12 | 2012 / 13 | 2013 / 14 | Q1 2014 / 15 | Q2 2014 / 15 | Q3 2014 / 15 | Q4 2014 / 15 | Annual (averag e) |
|--|------------------------|-----------------------|-------------|-------------|--------------|--------------|--------------------|--------------------|--------------------|--------------------|-------------------------|
| No of children on Child Protection Register (CPR) in East Lothian | 1 | • | 53 | 66 | 53 | 59 | 65 | 63 | 1 | - | 64 |

| | 2013/14 (as at 31/03/14) | Quarter 1 (Apr- Jun) | Quarter 2 (Jul- Sep) |
|---|--------------------------|-------------------------|-------------------------|
| No of children on CPR | 59 | 65 | 63 |
| No of families on the CPR | 35 | 35 | 33 |
| Rate per 1,000 on CPR (0- 15 pop) | 3.1 | 3.5 | 3.4 |
| No of IRD's within quarter | 113 | 86 | 67 |
| No of children with repeat IRD's (within 15 months) | 34 (38%) | 31 (36%) | 12 (18%) |
| % Repeat registrations on CPR in quarter (within 12 months) | 3% | 2% | 1% |
| % of ICPCC registered within quarter | 77% | 90% | 100% |

- 4.2 National statistics tell us that in East Lothian, there were significantly more child protection IRDs undertaken than the national average and slightly less number of case conferences held.
- 4.3 Over Quarter 1 and 2 2014/15 East Lothian has seen a decrease in the number of child protection inter agency referral discussions (IRDs) undertaken. The IRD overview group, however, report that the cases presented to this group on a fortnightly basis are generally appropriate.
- 4.4 Over the two quarters, East Lothian has seen an increase in the number of children placed on the child protection register (CPR). However, it should be noted that a high percent of the children being taken to case conference are registered, which evidences appropriate thresholds and decision making at the earlier IRD stage.
- 4.5 Proposals from this evaluation reflect the previously identified need to focus on the threshold for intervention and supports the work underway to support professionals to focus on thresholds for intervention with a view to achieving proportionate responses and in turn the most appropriate outcomes for children and their families. This work is due to be completed and implemented into practice by the end of January 2015.

4.6 A multi agency evaluation is currently underway in relation to children who re-registered on the CPR within a 12 month period. This evaluation will also begin to consider how effectively we are engaging with families at the stage 3 intervention level. Despite the numbers in East Lothian being low the GIRFEC and Child Protection Quality Improvement subgroup agreed to go ahead to consider any specific learning points.

4.7 <u>Getting it Right for Children and Families affected by parental problem alcohol and drug use training</u>

Following an evaluation of the training that has taken place amendments have been agreed to the current training programme. A briefing with a link to the GIRFEC toolkit will also be distributed to all professionals who have undertaken the training to date. A further two training dates have been identified for December and January. But thereafter, it is proposed to put further training on hold until the introduction of the named person across East and Midlothian when refresher training will be offered.

5. EAST LOTHIAN ADULT PROTECTION SUMMARY

5.1 Trends and Patterns: April – September 2014/15

| Measure | Short term trend | toiiii | 12 | 2012/ 13 | 2013/ 14 | Q1 2014 / 15 | Q2 2014 / 15 | Q3 2014 / 15 | Q4 2014 / 15 | Annual |
|--|------------------------|--------|-----|-------------|-------------|--------------------|--------------------|--------------------|--------------------|--------|
| Referrals | 1 | • | 941 | 1065 | 1144 | 65 | 103 | - | - | 168* |
| Investigations | 1 | - | | | | 40 | 26 | - | - | 66 |
| Duty to Inquire | N/A | N/A | 307 | 363 | 271 | | For co | mparisor | only | |
| IRD | • | - | 145 | 132 | 102 | 30 | 21 | - | - | 51 |
| Case Conferences** | 1 | • | 95 | 141 | 64 | 15 | 14 | - | - | 29 |
| Professionals meetings | 1 | • | - | 40 | 21 | 5 | 1 | - | - | 6 |
| No of open cases | • | 1 | 56 | 48 | 47 | 35 | 39 | - | - | 74 |
| Protection Orders | - | • | 5 | 11 | 4 | 0 | 0 | - | - | 0 |
| No of Large Scale Investigations | • | | 7 | 6 | 2 | 1 | 0 | - | - | 1 |

^{** 2011/12} figures include Professionals Meetings. 2014/15 figure includes reviews.

- 5.2 In 2013-2014 Scottish Government identified five National Priorities within Adult Support and Protection. One of the priorities was to develop a National Data Set which would provide a template that would enable the collection of national data. The National Data set has impacted on how we collect and report on data and as a result there has been a significant reduction in the number of referrals because we are now screening Police referrals *into* Adult Support and Protection. The other change is that we are reporting the number of investigations rather than inquiries.
- 5.3 In Quarters 1 and 2, East Lothian Adult Wellbeing received 168 referrals for adults "known or believed" to be at risk of harm, Of these, the largest number of referrals were received from "other organisations" which are largely made up of Private and Voluntary Sector. It is thought that the rise in referrals from this sector is linked to Level 1 learning and development sessions of which there have been 5 sessions in total between January and October 2014 with 135 attendees mainly made up from the third sector.
- 5.4 Of all referrals received 39% (66), progressed to Investigation, and from these there were 51 (77%) Inter-agency Referral Discussions. Although there was a significant decrease in the number of Inter- Agency Referral discussions in Quarter 2, over the period, the numbers are broadly in line with last year.
- 5.5 With the implementation of the National Data Set, it is thought that, there appears to be more accuracy in the total number of adults **believed** to be at risk of harm that are being referred due to changes to Police Scotland's internal systems. Although a significant number of the referrals received do not progress to investigation. The main primary source of harm continues to be financial harm, closely followed by psychological harm. Females across the lifespan appear to be at greater risk of harm of the total number of investigations undertaken, in comparison to their male counterparts. Analysis of the data collected shows the cumulative number of females for whom an Adult Support and Protection investigation has taken place fall within the 65 and over age groups indicating that this group is the largest group of people at risk of harm within East Lothian.

5.6 Case Conferences

In total there were 29 Adult Support and Protection case conferences in Quarters 1 and 2: 10 were initial case conferences and 19 were review case conferences. There was 1 Large Scale Investigation, commenced in Quarter 1 for a Care at Home service which has since closed. There were no Protection Orders within East Lothian within the period.

5.7 Financial Harm

Financial harm continues to feature as the most significant type of harm and remains one of Scottish Governments national priorities. A National Financial Harm Group is in the process of being set up with representation being sought through Social Work Scotland's Adult Support and Protection sub-group.

There was a national event on financial harm, the main purpose of which was in relation to information sharing. The main issue raised for Local Authorities was the lack of information shared following the outcome of an inquiry / investigation and how this information might be helpfully shared with the banks. Financial Harm and Scamming is an area that will continue to grow and links with our local banks, trading standards and welfare rights teams are essential in support and protection of adults at risk of harm. There have been 3 financial harm workshops between January and May 2014 with a total of 63 attendees.

5.9 National Campaign

Scottish Government have commissioned a national media campaign through Media Scotland this will comprise of a series of TV programmes on STV and a Print and Press release stories to be published in the Daily Record and Sunday Mail. The campaign will run from 5 February 2015 for a period of 5 weeks. A request for case studies has been made to each Lead Officer within the Local Authorities. East Lothian Council has identified one case study that involved the successful prosecution of a perpetrator of Financial Harm; consent has been agreed and the case study will be anonymised.

6 Violence Against Women & Girls

- 6.1 East and Midlothian Public Protection Office now includes a fully staffed Domestic Abuse Service (DAS) which comprises a Violence Against Women Coordinator, MARAC Co-ordinator and two full time Domestic Abuse Advisors. The SMILE project is also fully staffed with a Substance Misuse Worker and Routes to Independence Worker who began taking referrals in August 2014. SMILE also funds one of the full time Domestic Abuse Advisors within the Domestic Abuse Service.
- 6.2 The current focus for the Violence Against Women Delivery Group is to streamline referral pathways by creating one referral hub which will ensure women receive the most suitable response from the appropriate service. This will be crucial for the successful introduction of the SMILE Project's Early Response Service which aims to offer women support within 48 hours of a domestic abuse incident. From February 2014 this will include a response at weekends which is a significant and exciting step forward for East and Midlothian.
- 6.3 We are also beginning to evaluate our Multi-agency Risk Assessment Conferences (MARAC) and are proposing to purchase a package of chairs training, data analysis, facilitated evaluation and consultancy from CAADA to ensure we are working towards consistent, creative and effective MARACs.
- 6.4 The Violence Against Women Improvement Plan, based on the Scottish Governments Equally Safe Strategy has been drafted and along with a Performance Indicator framework these documents will drive forward the multi-agency Violence Against Women agenda.

7 Public Protection Office

- 7.1 East and Midlothian Public Protection Committee (EMPPC)was formally established in July 2014 and covers all functions and responsibilities of the Adult Protection Committee, the Child Protection Committee, the Offender Management Committee and the Violence Against Women Partnership, and maintains robust links with Midlothian and East Lothian Drug and Alcohol Partnership. The chair of the new Committee is Anne Neilson; the Assistant Director for Public Protection for NHS Lothian. To date East and Midlothian Public Protection Committee has met three times.
- 7.2 The Public Protection Team is now co-located in the Brunton Hall, and has strategic responsibility for Child and Adult Protection and Violence Against Women. MELDAP staff are now co-located with the Public Protection Team, and phase two which will see the police Public Protection Unit co-located as well is expected to be completed by April 2015. Improvement Plans are currently being developed in each of these areas and are reported via the Performance and Quality sub group of the EMPPC.
- 7.3 Reports go quarterly to EMPPC and CSOG (Critical Services Oversight Group) and an annual report for 2014-15, which will include all public protection workstreams, will be completed at the end of the year 2014-15. This report will be available for members of PPRC in June 2015.

8 EQUALITIES IMPACT ASSESSMENT

8.1 An Equalities Impact Assessment is not required on the performance reporting aspect of this report, however an Equalities Impact Assessment will be required on the implementation of the Public Protection Team and this is being planned in liaison with the Equalities Officer.

9 RESOURCE IMPLICATIONS

- 9.1 Financial N/A
- 9.2 Personnel N/A
- 9.3 Other N/A

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REPORT TO: Policy & Performance Review Committee

MEETING DATE: 27 January 2015

BY: Depute Chief Executive (Partnerships and Community

Services)

SUBJECT: Overview of HGIOC Self-evaluation 2014

1 PURPOSE

1.1 To provide the PPRC with an overview of the HGIOC self-evaluation 2014 and related improvement actions

2 RECOMMENDATIONS

2.1 The Committee is asked to use the information provided in this report to consider whether any aspect of the Council's performance is in need of improvement or further investigation.

3 BACKGROUND

- 3.1 HGIOC is the Council's self-evaluation model, which is used by all services to help identify strengths and areas for improvement. The aim of HGIOC is to engage managers, a wide range of staff and other stakeholders to undertake a self-evaluation of the service and the Council to determine how each service and the Council might improve. Several sources of evidence are used to help identify strengths and weaknesses, including stakeholder views, performance information and other documentary evidence. The results of HGIOC are used to inform service plans and the Council Improvement Plan.
- 3.2 HGIOC has been undertaken by Council services annually since 2009/10. Significant revisions have been made to the HGIOC model since 2010 in response to feedback from participants in the process. However, recent changes have been relatively minor to allow participants to become familiar with the process.

- 3.3 Changes for 2014 included splitting the questions into those that should be addressed by managers and those that should be addressed by a wider group of employees. Splitting the questions in this way ensures the exercise is inclusive, reduces the workload on participants in the HGIOC process and helps to ensure that the questions are relevant to the participants.
- 3.4 Another recent change to HGIOC has been the selection of some questions on the basis of risk. Prior to the 2014 self-evaluation all services addressed every HGIOC question. Using a risk-based approach in the 2014 HGIOC allowed a greater focus upon areas highlighted as being of concern either nationally or locally, including resources and financial management.
- 3.5 Due to the adoption of a risk based approach the number of questions in HGIOC reduced from 102 in 2013 to 48 in 2014. 31 questions were addressed by the wider group of employees in each service and the remaining 17 'risk based' questions were dealt with by managers from each service. It is our intention for HGIOC 2015 to once again include all 31 staff questions and a different set of 'risk based' manager questions.
- 3.6 The full list of services that undertook a HGIOC self-evaluation in 2014 can be found in Appendix A. It should be noted that due to the major council services re-structuring that took place in 2014 many of these service groupings were significantly different from the services that undertook HGIOC in 2013.
- 3.7 Due to the Council re-structuring in 2014 HGIOC was undertaken later than in previous years and over a longer timescale so that some services did not complete their HGIOC until late in 2014.

Summary of results from HGIOC 2014

- 3.8 Overall the results (the average scores for each of the questions) from HGIOC 2014 show a slight decline overall in comparison to those from 2013. Appendix B shows the average score (out of 6) for each question. The difference in score between 2013 and 2014 is also shown. Scores that have changed by 0.3 or more are highlighted with a green or red arrow to highlight their improvement or decline.
- 3.9 However, comparisons between 2013 and 2014 need to be treated with caution. Although some scores are representative of a Council-wide position as services have scored the question consistently, there is a wide degree of variation between services for other questions. The comparability of the services undertaking HGIOC should also be taken into account. The configuration of some services changed quite significantly between 2013 and 2014 which reduces the significance of direct comparison of scores.

- 3.10 Relatively high scores were recorded for questions that relate to:
 - compliance with legislation, guidance and policy
 - financial management
 - the achievement of efficiency savings
 - service user satisfaction.
- 3.11 The lowest scoring questions relate to employee engagement and reflect concern among staff on issues such as change management and workload. The results for these questions reflect the Employee Engagement Survey, which is one of the key pieces of evidence for HGIOC. Questions from the Survey that demonstrate a worsening trend over the past three years include 'I have a manageable workload' and 'Change is managed well in my area'.
- 3.12 Analysis of the comments included in HGIOC provides some explanation for the low scores. Participants cited the impact of VERS and service restructuring as causing uncertainty and increasing staff workload. The restructuring of council management also had an impact on HGIOC since many services were still undergoing significant managerial and service change (some major service reviews were ongoing during the period that the self-evaluation was being undertaken) which will have contributed to a sense of uncertainty amongst managers and staff.
- 3.13 Another area that received relatively low scores relates to the way in which the Council plans its resources. Participants felt that the process of financial planning was not sufficiently transparent. Questions relating to the link between resource management and service planning, how priorities are communicated among employees, and the engagement of staff in discussions about efficiency savings also received relatively low scores.
- 3.14 Questions relating to change management and leadership have consistently received low scores. One mitigating factor may be that the questions relating to these areas are perceived as being a reflection on others, which leads to a greater willingness by participants to select a low score.
- 3.15 It is worth noting that improvement actions identified from the 2013 HGIOC and the 2014 Employee Engagement survey around improving staff communications and developing managers' leadership and change management skills will not have been implemented in time to have had an impact before the 2014 HGIOC self evaluation exercises were undertaken. For example, the development and roll out of Chartered Management Institute level 3 and 5 courses for frontline and service manager was instigated in 2014, a major revamp of staff communications will be carried out in early 2015 and a series of One Council workshops for staff is being piloted in January 2015 before being rolled out.

Improvement actions arising from the 2014 HGIOC

- 3.16 The 2014 HGIOC exercises identified a total of approximately 400 improvement actions. Many of these actions are specific to the services undertaking the self-evaluation and will be taken forward via their service plans.
- 3.17 Appendix C details the improvement actions that have been suggested in the self evaluations that are relevant at a Council-wide/ corporate level along with comments about action that is already underway or should be considered to address these issues. Actions that need to be co-ordinated across the Council will be considered for inclusion in the 2015 Council Improvement Plan. These actions will be prioritised in accordance with their contribution to the Council's objectives and the capacity of the Council to undertake the action.
- 3.18 It should be noted that some improvement actions identified through HGIOC are already being carried out or are planned. For example, work has begun on a review of the Personal Review and Development (PRD) process which was included as a key action in the Workforce Development Plan and a review of the Council's social media policy will be carried out early in 2015.
- 3.19 Some of the actions in Appendix C are service specific. However, these actions would benefit from being co-ordinated centrally as similar actions have been raised by several services. One example is the undertaking of service user satisfaction surveys, which should be co-ordinated to ensure there is a degree of consistency in the questions and methods that are being used. Some services may be able to 'piggy-back' on other planned surveys or make use of the Citizens' Panel.

Evaluation of the Self-evaluation

- 3.20 HGIOC is now embedded within Council services as the principal framework for carrying out self-evaluation and identifying improvements across five high level questions:
 - What key outcomes have we achieved?
 - How well do we meet the needs of our stakeholders?
 - How good is our delivery of key processes?
 - How good is our management?
 - How good is our leadership?
- 3.21 A review of how HGIOC has been carried out is undertaken each year to ascertain how the process can be improved. Last year, the review resulted in the changes to HGIOC 2014 outlined above (paragraphs 3.2 3.5). The review of HGIOC 2014, involving staff who participated in the self-evaluation process will be carried out early in 2015. This will inform the review of the guidance which will be issued prior to HGIOC 2015.

- 3.22 Over the last two years a 'peer review' exercise has been undertaken by the Chief Executive and Council Management Team who review the HGIOC process and results of several services focussing on how each service is taking forward the improvement actions arising from their self-evaluation. These reviews have proved very useful and have been used to inform the review of the HGIOC process. Seven services will be subject to the peer review exercise in the new year.
- 3.23 The Council applied for and was awarded Investor In People accreditation in 2014. The HGIOC self-evaluation played a significant part in this process by providing much of the evidence that was used to inform the 'Health Check' that was carried out prior to the IIP 'inspection'. The IIP inspectors were impressed with the Council's use of HGIOC and their final report provided the following positive comment: "Your methods and mechanisms for reviewing your performance are well developed with HGIOC, Employee surveys, Customer surveys and Investors in People all used to inform changes required as you move forward."
- 3.24 The Council's use of self-evaluation was also considered by the Local Area Network in preparing the Assurance and Improvement Plan Update 2014-2017 (May 2014).

"As part of its ongoing improvement journey, the council continues to use How Good is Our Council to support its approaches to self-evaluation across a broad range of its corporate and service functions. The LAN has worked actively and positively with the council to support self-evaluation activities throughout the year. {The LAN participated in the peer review sessions carried out following the HGIOC 2013.} This, along with other improvements in performance, has helped to change the LAN's assessments in 18 areas from last year's AIP from further information required to no scrutiny required."

4 POLICY IMPLICATIONS

- 4.1 Self-evaluation provides a means of evaluating the extent to which services are achieving their desired outcomes. Self-evaluation therefore assists the Council in the delivery of all of its priorities and outcomes. The results of self-evaluation will be reflected in service plans to ensure that improvement actions are delivered.
- 4.2 Conducting robust self-evaluation will assist services in demonstrating that they are achieving Best Value. External audit of the Council is conducted in proportion to the level of perceived risk. Self-evaluation is regarded as a means of identifying and addressing weaknesses and risks. Services that conduct robust self-evaluation are likely to be considered to be at lower risk and will therefore be subject to more light-touch external scrutiny

5 EQUALITIES IMPACT ASSESSMENT

5.1 This report is not applicable to the well being of equalities groups and an Equalities Impact Assessment is not required.

6 RESOURCE IMPLICATIONS

- 6.1 Financial none
- 6.2 Personnel none
- 6.3 Other none

7 BACKGROUND PAPERS

- 7.1 Appendix A: List of completed HGIOC self-evaluations
- 7.2 Appendix B: Average HGIOC scores, rank and change between 2013 and 2014
- 7.3 Appendix C: Summary of Council/ Corporate improvement actions

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Appendix A: List of Services Completing HGIOC 2014 Self-evaluations

Adult Wellbeing **Benefits** Children's Wellbeing Corporate Policy and Improvement & Internal Audit **Customer Services** Democratic Services **Economic Development & Strategic Investment** Education Engineering Services & Building Standards **Environmental Services** Facilities Management Finance Housing HR and Payroll Information Management ΙT Legal and Procurement Licensing Community Partnerships **Property Maintenance** Revenues Roads & Transport Sport, Countryside and Leisure Strategic Assets & Capital Plan Management Trading Standards

Waste

Appendix B: Average HGIOC scores, rank and change between 2013 and 2014

| Question | 2013 | 2014 Change |
|--|------|-------------|
| 1.1.1 How is the service performing? | 4.2 | 4 🔷 -0.2 |
| 1.2.1 How well does the Service comply with guidance and legislation? | 4.9 | 4.8 🔷 -0.1 |
| 1.2.2 How well does the Service take account of best practice? | 4.7 | 4.5 🔷 -0.2 |
| 2.1.1 Can service users access the services and information that they need? | 4.4 | 4.3 🔷 -0.1 |
| 2.1.3 How satisfied are service users and communities? | 4.4 | 4.3 🔷 -0.1 |
| 3.1.1 How motivated and satisfied are employees? | 4 | 3.7 🔑 -0.3 |
| 3.1.2 Are employees deployed effectively and appropriately? | 4.6 | 3.9 🔑 -0.7 |
| 3.1.4 How well supported do staff feel? | 4.2 | 3.9 🔑 -0.3 |
| 3.1.5 To what extent do employees feel there is a positive working environment in the Service? | 4.4 | 3.7 🔑 -0.7 |
| 3.1.6 To what extent do employees feel able to exercise their initiative? | 4.8 | 4.5 🔱 -0.3 |
| 4.1.1 How well informed are community and voluntary groups about the activities being delivered by the Service? | 4.4 | 4.1 🔑 -0.3 |
| 5.1.1 How up-to-date and appropriate are the policies and guidance that cover service delivery? | 4.4 | 4.4 🔷 0 |
| 5.1.2 To what extent can we show that there are plans and procedures to ensure that work is prioritised to address needs / demand? | 4.6 | 4.3 🔑 -0.3 |
| 5.4.7 Are the communication and consultation methods used by the Service effective for all stakeholders? | 4.3 | 4.2 🔷 -0.1 |
| 6.1.2 To what extent do relevant policies outline roles, responsibilities and expectations of quality? | 4.4 | 4.2 🔷 -0.2 |
| 6.2.2 How well is resource management integrated with business planning? | 4.2 | 3.9 🔑 -0.3 |
| 6.2.6 To what extent do employees understand the nature of risk in their area? | 4.2 | 4.3 🔷 0.1 |
| 7.1.2 How well understood and well employed are health and safety guidelines? | 4.9 | 4.6 🖟 -0.3 |
| 7.1.3 Does the Service have a sufficient number of employees to deliver its activities? | 3.6 | 3 🔑 -0.6 |
| 7.1.4 To what extent are employee achievements recognised and celebrated? | 4.3 | 4 🖟 -0.3 |
| 7.2.1 Do all employees have clear job descriptions and remits? | 4.8 | 4.5 🔑 -0.3 |
| 7.2.2 To what extent does the management / staff structure provide clear lines of accountability? | 4.8 | 4 🔑 -0.8 |
| 7.2.3 To what extent do staff participate in Council working groups and contribute to the delivery of joint services? | 4.5 | 4.6 🔷 0.1 |
| 7.2.4 How effective is internal communication and consultation with employees? | 4.2 | 3.8 🖟 -0.4 |
| 7.3.1 How well embedded is Performance Review & Development (PRD)? | 4.5 | 3.7 🔑 -0.8 |
| 7.3.2 Are appropriate development and training opportunities available that address employee needs? | 4.6 | 4.1 🖟 -0.5 |
| 8.1.2 To what extent have partnerships identified joint efficiency savings? | 3.6 | 3.5 🔷 -0.1 |
| 8.1.6 How well does the Service understand the financial commitment and risk to which it is exposed through external entities? | 3.4 | 4.2 1 0.8 |
| 8.1.7 How effective are the Service's arrangements for monitoring the financial and service performance of external entities? | 3.2 | 3.9 👚 0.7 |
| 8.1.8 To what extent do we have sound and compliant business processes for purchasing, monitoring, and reviewing services? | 4 | 4.2 🔷 0.2 |
| 8.1.9 To what extent are there clear links between strategic and financial planning and commissioning decisions? | 4.1 | 3.8 🔱 -0.3 |

| 8.1.9 To what extent are there clear links between strategic and financial planning and commissioning decisions? | 4.1 | 3.8 | -0.3 |
|---|-----|-------|------|
| 8.2.1 How rigorous are the management procedures to identify and deal with budgetary variances? | 4.8 | 4.6 🔷 | -0.2 |
| 8.2.2 How well does the Service monitor, review and report upon financial performance? | 4.7 | 4.6 🔷 | -0.1 |
| 8.2.4 To what extent does financial planning demonstrate Best Value? | 4 | 4.1 🔷 | 0.1 |
| 8.3.1 To what extent can options appraisal and Best Value be demonstrated in asset planning? | 3.6 | 4 | 0.4 |
| 8.3.2 Has the Service undertaken measures to engage employees in the discussion of efficiency issues and to inform them of their individual responsibilities? | 4.2 | 3.8 🐺 | -0.4 |
| 8.3.3 Does the Service have a clear understanding of the drivers of its cost profiles and how costs change in response to changing levels of activity? | 4.2 | 4.3 🔷 | 0.1 |
| 8.3.4 Is the overall level of efficiencies expected properly co-ordinated with financial and service planning? | 4.2 | 4.3 🔷 | 0.1 |
| 8.3.5 Can the Service demonstrate quantifiable efficiency gains over the last three years? | 4.6 | 4.6 🔷 | 0 |
| 9.1.1 How strong is the leadership and direction provided by elected members and senior officials? | 3.6 | 3.1 🗸 | -0.5 |
| 9.1.2 How effectively are Council priorities communicated among employees and members? | 3.9 | 3.7 🔷 | -0.2 |
| 9.1.3 To what extent is resource allocation transparent, evidence based and linked to key objectives? | 3.8 | 3.7 🔷 | -0.1 |
| 9.1.6 How effectively does the Service promote leadership development and succession planning? | 3.6 | 3.8 🔷 | 0.2 |
| 9.2.1 To what extent do senior managers challenge and support services regarding performance? | 4.2 | 4 🔷 | -0.2 |
| 9.2.2 How effectively do senior managers drive continuous improvement? | 4 | 4 🔷 | 0 |
| 9.2.3 How effective is the Service's use of self-evaluation in service improvement? | 4.4 | 3.8 🐺 | -0.6 |
| 9.2.4 How effectively do managers encourage and promote innovation? | 4.4 | 4.2 🔷 | -0.2 |
| 9.2.5 How effectively do senior managers manage change? | 3.5 | 3.4 🔷 | -0.1 |

Appendix C: Summary of Council/ Corporate Improvement Actions

| Actions identified in 2014 HGIOC | Response | | | |
|---|---|--|--|--|
| Consultation & Feedback | , | | | |
| Conduct consultation on policy development and service changes | Policy development and service change should not be undertaken without consultation with stakeholders including staff and service users. Consideration to be given to whether services require guidance is required on stakeholder consultation | | | |
| Make greater use of service user satisfaction data and of internal stakeholder surveys | Guidance to be provided on the use of service user satisfaction data across services, using evidence from the Citizens' Panel, the use of internal stakeholder surveys and data from partners | | | |
| Greater sharing and use of customer feedback across the Council | As above | | | |
| Review the channels by which people can make complaints, comments or enquiries | The Council has an effective system for Customer Feedback but consideration will be given to how this is publicised and how people can access it. | | | |
| External communications | | | | |
| Review / establish web pages for some services | The Council's website will undergo a major re-design tin 2015 with the aim of making it more accessible, more responsive to the needs of users, and to facilitate on-line services | | | |
| Further develop online self-service options | The development of on-line services is a key aspect of the re-design of the Council website | | | |
| Use social media more effectively and develop a Council-wide stance regarding the use of social media | A review of the Council's use of social media and its social media policy will be carried out in 2015 | | | |
| Make greater use of local radio stations for communicating and advertising services | Local radio stations are already used by the Communications team but there is limited budget for paid for advertising | | | |
| Finance | | | | |
| Consider how management can engage with staff about the use of resources and financial reporting | This issue will be addressed as part of the review of staff engagement being carried out in early 2015 | | | |
| Make the financial planning process more transparent | As above | | | |

| Develop a training programme for | This will be considered as part of the on- | | | |
|--|--|--|--|--|
| managers regarding financial planning | going assessment of manager's training and development needs | | | |
| Develop the use of unit costs in some services | Consideration needs to be given as to how information about unit costs can be used in financial and service planning | | | |
| Map resources to Council objectives | As above | | | |
| Review the capital planning and option appraisal process | The option appraisal process was reviewed in 2014. Further work will be required to embed the use of option appraisal across the Council | | | |
| Improvement planning | | | | |
| Review the use of management information | The Council Improvement Plan will include an action to review and improve the use of management and performance information | | | |
| Establish a skills development programme for self-evaluation | Consideration will be given to how staff involvement in HGIOC and other self-evaluation exercises is supported, including skills development | | | |
| Review / consolidate the range of self- evaluation models used across the Council | Self-evaluation and external inspection frameworks have been mapped against HGIOC questions to reduce duplication | | | |
| Internal communications | | | | |
| Review the contents of ELNet to ensure that information is up-to-date | A major re-design of ELNet will take place in early 2015 | | | |
| Improve communication of the scope of services provided, especially in light of service reviews | Up-to-date information about services and staffing will be provided as part of the re-design of ELNet | | | |
| Ensure that staff receive feedback regarding the results of HGIOC and other improvement activities | Staff communications is being reviewed and how staff receive feedback on HGIOC and other matters will form part of the review | | | |
| Improve feedback to staff regarding CMT business | As above | | | |
| Ensure that lone workers receive all communications | As above | | | |
| Employee engagement | | | | |
| Establish an employee suggestion scheme | Feedback from and engagement with staff will be addressed as part of the review of staff communications | | | |
| | One Council workshops for staff from all | | | |

| services to share best practice and enable staff to consider improvement activities | services are being piloted in early 2015. | | | |
|---|--|--|--|--|
| Communicate Council priorities to staff in a manner that is relevant to their work | This issue will be addressed as part of the review of staff communications | | | |
| Ensure that support is provided regarding employee engagement during and after re-structuring and major service changes | As above | | | |
| Involve staff in the discussion of team performance, the setting of targets and efficiency issues | As above | | | |
| Consider ways to improve the recognition of employee achievements | As above | | | |
| Ensure regular team meetings are conducted | As above | | | |
| PRD | | | | |
| Review the PRD process | A review of the PRD process is being carried | | | |
| Ensure that the PRD process is used consistently across the Council | This issue is a key part of the review of the PRD process | | | |
| Risk management | | | | |
| Survey staff to gauge the extent to which they understand risk in their area | Consider whether managers require further guidance on risk management and engaging staff in understanding risk | | | |
| Engage staff in reviewing service risks | As above | | | |
| Service planning | | | | |
| Ensure that the service plan is used to inform team meetings, PRD etc. | Will be considered in the review of staff communications and the review of the PRD process | | | |
| Training & Development | | | | |
| Provide CMI 3 training for all new start managers | The programme of CMI Level 3 training is being rolled out and will be offered to new start managers | | | |
| Establish a Learning & Development Strategy | Learning and development for all staff is a key part of the Workforce Development Plan. Assessing staff learning and development needs will form an important part of the outcome of the review of PRD process | | | |
| Provide wider access to management training to facilitate succession planning | This is a key part of the Workforce Development Plan | | | |

Policy and Performance Review Committee: Annual Work Programme 2014/15 Update (22nd December 2014)

| Date | Performance Monitoring/ Inspection Reports | Reports requested by members/ Other Reports |
|-----------------------------|--|---|
| 27 th Jan 2015 | Adult and Child Protection Six-month Monitoring Report | Delayed Discharge |
| | | Overview of How Good is Our Council self evaluation |
| 24 th March 2015 | SOLACE / Improvement Service Performance Indicators | East Lothian Works |
| | Q3 Performance Indicators | |
| 28 th April 2015 | Customer Feedback – six monthly report | |
| 16 th June 2015 | Q4 Performance Indicators | Report on Literacy Levels in East Lothian schools |
| | Adult and Child Protection Annual Monitoring Report | Tourism Information Services |
| Sept 2015 | Q1 Performance Indicators | Property Maintenance |
| | Draft Annual Performance Report | |
| | Social Work Complaints and Feedback Annual Report | |
| | Customer Feedback Annual Report | |
| | Customer Feedback Q1 report | |

Street Lighting (Cllr John Williamson)

Supported bus services (PPR Co, 25th Nov)

School bus operation (PPR Co, 25th Nov)

Follow up report on Fly-tipping (to come back in June or September 2016)