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Council Building  
2 High Street  
Perth  
PH1 5PH

Thursday, 02 February 2017

A Meeting of the **Scrutiny Committee** will be held in **the Council Chambers, Ground Floor, Council Building, 2 High Street, Perth, PH1 5PH** on **Wednesday, 08 February 2017** at **14:00**.

If you have any queries please contact Committee Services on (01738) 475000 or email [Committee@pkc.gov.uk](mailto:Committee@pkc.gov.uk).

**BERNADETTE MALONE**  
Chief Executive

***Those attending the meeting are requested to ensure that all mobile phones and other communication devices are in silent mode.***

**Members:**

Councillor Barbara Vaughan (Convener)  
Councillor Kathleen Baird (Vice-Convener)  
Councillor Dave Cuthbert  
Councillor Dave Doogan  
Councillor John Flynn  
Councillor Alistair Munro  
Councillor Anne Younger



## Scrutiny Committee

Wednesday, 08 February 2017

### AGENDA

***MEMBERS ARE REMINDED OF THEIR OBLIGATION TO DECLARE ANY FINANCIAL OR NON-FINANCIAL INTEREST WHICH THEY MAY HAVE IN ANY ITEM ON THIS AGENDA IN ACCORDANCE WITH THE COUNCILLORS' CODE OF CONDUCT.***

- 1 WELCOME AND APOLOGIES/SUBSTITUTES**
- 2 DECLARATIONS OF INTEREST**
- 3 MINUTE OF MEETING OF THE SCRUTINY COMMITTEE OF WEDNESDAY 30 NOVEMBER 2016 FOR APPROVAL AND SIGNATURE** **5 - 12**
- 4 UPDATES BY ARMS' LENGTH EXTERNAL ORGANISATIONS**
  - (i) Culture Perth and Kinross
  - (ii) Horsecross Arts Ltd
  - (iii) Live Active Leisure Ltd
- 5 CORPORATE RISK MANAGEMENT STRATEGY** **13 - 50**

Report by the Depute Chief Executive, Environment, (Sustainability, Strategic and Entrepreneurial Development)  
(copy herewith 17/63)

**Note:** The above report will also be submitted to the Strategic Policy and Resources Committee on 8 February 2017.
- 6 ANNUAL RISK REPORT 2015/16** **51 - 104**

Report by the Depute Chief Executive, Environment, (Sustainability, Strategic and Entrepreneurial Development)  
(copy herewith 17/65)
- 7 STANDARDS AND QUALITY REPORT** **105 - 142**

Report by the Director (Education and Children's services) (copy herewith 17/37)

**Note:** The above report was also submitted to the Lifelong Learning Committee on 25 January 2017.
- 8 REPORT ON SOCIAL CARE AND SOCIAL WORK IMPROVEMENT SCOTLAND INSPECTIONS (SCSWIS)** **143 - 176**

Report by Director (Housing and Social Work) (copy herewith 17/32)

**Note:** The above report was also submitted to the Housing and Health Committee on 25 January 2017.

**9 HOUSING AND COMMUNITY CARE COMPLAINTS AND CUSTOMER FEEDBACK 177 - 192**

Report by Director (Housing and Social Work) (copy herewith 17/35)

**Note:** The above report was also submitted to the Housing and Health Committee on 25 January 2017.

**10 COUNCIL COMPLAINTS PERFORMANCE REPORT FOR 2015/16 193 - 212**

Report by Head of Legal and Governance Services (copy herewith 17/66)

**11 SEVENTH SCRUTINY REVIEW**

Verbal Update by Head of Community Planning, Strategic Commissioning and Organisational Development

***IT IS RECOMMENDED THAT THE PUBLIC AND PRESS SHOULD BE EXCLUDED DURING CONSIDERATION OF THE FOLLOWING ITEM(S) IN ORDER TO AVOID THE DISCLOSURE OF INFORMATION WHICH IS EXEMPT IN TERMS OF SCHEDULE 7A TO THE LOCAL GOVERNMENT (SCOTLAND) ACT 1973***

**P1 MINUTE OF MEETING OF THE SOCIAL WORK COMPLAINTS REVIEW COMMITTEE (CRC) OF FRIDAY 9 DECEMBER 2016**

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## SCRUTINY COMMITTEE

Minute of meeting of the Scrutiny Committee held in the Gannochy Suite, Dewar's Centre, Glover Street, Perth on Wednesday 30 November 2016 at 2.00pm.

Present: Councillors B Vaughan, K Baird, D Cuthbert, D Doogan and A Younger.

In Attendance: C Jolly, K McNamara and B Renton (all The Environment Service); J Chiles, P Davison, S Devlin, R Drummond, R Hill (up to and including Art.\*\* (Item 7), J Pepper and S Watson (up to and including Art.\*\* (Item 8) (all Education and Children's Services); H Rheinallt, L Simpson and G Taylor (all Corporate and Democratic Services); L Cameron (up to and including Art.\*\* (Item 6), C Hendry and A Taylor (all Housing and Community Care).

Apologies for Absence: Councillors J Flynn and A Munro.

Councillor B Vaughan, Convener, Presiding

### . **WELCOME AND APOLOGIES**

The Convener welcomed all those present to the meeting. Apologies for absence were noted as above.

### . **DECLARATIONS OF INTEREST**

There were no Declarations of Interest made in terms of the Councillors' Code of Conduct.

### . **MINUTE OF PREVIOUS MEETING**

The minute of meeting of the Scrutiny Committee of 21 September (Arts. 652-659) was submitted, approved as a correct record and authorised for signature.

### . **CORPORATE ANNUAL PERFORMANCE REPORT 2015/16**

There was submitted a report by the Depute Chief Executive, Environment (Sustainability, Strategic and Entrepreneurial Development) (16/535) providing an overview of how the Council and the Community Planning Partnership have performed against the shared strategic objectives for Perth and Kinross as set out within the Single Outcome Agreement 2013-2023 and the Council's Corporate Plan 2013-2018, for the period 1 April 2015 to 31 March 2016.

In response to a query from Councillor Cuthbert regarding the availability of comparator data for the rate of smoking amongst pregnant women, K McNamara advised that only one year's data is available as the performance indicator used by the NHS has changed.

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Councillor Doogan highlighted the forecasted increase in the number of single young people presenting as homeless. L Cameron advised that the indicator takes into account the factors leading to homelessness, and therefore the forecasted figure remains high due to current issues such as welfare changes and the affordability of housing.

In response to a query from Councillor Doogan regarding the correlation between the ambition to increase both average monthly earnings and employment in food and drink sectors, B Renton responded that the food and drink park is an important part of the Tay Cities Deal, and that the current approach to the creation of jobs can generate a higher level of incomes.

The Convener raised concerns regarding the future availability of the EU-funded LEADER programme. B Renton provided assurance that both the Scottish and UK Governments had guaranteed that the funding for this round of the programmes will continue until 2020/2021.

In response to a query from Councillor Doogan regarding the increase in cost per dwelling of collecting Council Tax, A Taylor responded that the service centre costs of collecting Council Tax had recently been allocated to this indicator. He provided assurance that continuing work is being done to make the collection of Council Tax more efficient, for example through the use of electronic transactions.

The Convener queried whether the amount of on target or improving indicators suggested that the targets were not aspirational enough. B Renton responded that although this is taken into account during consideration of the targets, other factors are also taken into account, such as future financial challenges in terms of budget availability.

**Resolved:**

- (i) The Perth and Kinross Annual Performance Report 2015/16, attached as Appendix 1 to Report 16/535, be approved.
- (ii) It be noted that the Perth and Kinross Annual Performance Report 2015/16, attached as Appendix 1 to Report 16/535, will be submitted to the Community Planning Partnership Board meeting on 2 December 2016.
- (iii) It be agreed that reporting on the Council's Best Value Duties will in future be presented through progress updates on the Council's Business Plan.

**JOINT BUSINESS MANAGEMENT AND IMPROVEMENT PLANS AND ANNUAL PERFORMANCE REPORTS – SIX MONTH PERFORMANCE SUMMARY**

**(i) Education and Children's Services**

There was submitted a report by the Director (Education and Children's Services) (16/480) reviewing the performance of Education and Children's Services against its Business Management and Improvement Plan (BMIP) for the period 1 April 2016 to 30 September

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2016. It was noted that Report 16/480 had been accepted by the Lifelong Learning Committee on 2 November 2016.

In response to a query from Councillor Doogan regarding the effectiveness of measures being taken to increase the number of visits to museums and galleries, S Devlin responded that the PLAYER event had exceeded expectations in this regard, and agreed to provide further information. The Convener highlighted that representatives from Culture Perth and Kinross, Live Active Leisure Ltd and Horsecross Arts Ltd will be invited to speak at future meetings of the Committee.

**Resolved:**

The contents of the Education and Children's Services six-month performance summary against its Business Management and Improvement Plan (BMIP) for the period 1 April 2016 to 30 September 2016, as set out in Report 16/480, be accepted.

**(ii) The Environment Service**

There was submitted a report by the Director (Environment) (16/490) reviewing the performance of the Environment Service against its Business Management and Improvement Plan (BMIP) for the period 1 April 2016 to 30 September 2016. It was noted that Report 16/490 had been accepted by the Environment, and Enterprise and Infrastructure Committees on 9 November 2016 and the Community Safety Committee on 23 November 2016.

Councillor Baird requested clarification on requirements for businesses joining the Perth and Kinross Better Business Partnership. C Jolly confirmed that there are a number of qualifications for businesses who want to join, including the payment of a registration fee and the location of the business. Police Scotland is also involved in the application process.

**Resolved:**

The contents of the Environment Service six-month performance summary against its Business Management and Improvement Plan (BMIP) for the period 1 April 2016 to 30 September 2016, as set out in Report 16/490, be accepted.

**(iii) Housing and Social Work**

There was submitted a report by the Director (Housing and Social Work) (16/470) reviewing the performance of Housing and Social Work against its Business Management and Improvement Plan (BMIP) for the period 1 April 2016 to 30 September 2016. It was noted that Report 16/470 had been accepted by the Housing and Health Committee on 2 November 2016 and the Community Safety Committee on 23 November 2016.

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Councillor Cuthbert requested further clarification regarding the information provided to elected members through the BMIP process. C Hendry advised that discussions will take place with elected members on future indicators. K McNamara highlighted that emerging issues will be reported through a refreshed approach to risk in due course.

Councillor Baird raised concerns regarding the rise in refusals of tenancy offers. L Cameron advised that the largest number of refusals are for rural properties.

Members discussed the method of reporting through the BMIPS, with specific regard to the six monthly updates, raising issues such as: (i) the information contained in the 6 monthly reports is old by the time the reports come to the Committee; (ii) there are many performance indicators for which there is no available data; (iii) there are not enough links between the narrative and the performance indicators. In response, K McNamara highlighted the importance of moving performance indicators to a dynamic online environment, whereby information will be more current and relevant.

**Resolved:**

- (i) The contents of the Housing and Social Work six-month performance summary against its Business Management and Improvement Plan (BMIP) for the period 1 April 2016 to 30 September 2016, as set out in Report 16/470, be accepted.

**ATTAINMENT IN PERTH AND KINROSS SCHOOLS**

There was submitted a report by the Director (Education and Children's Services) (16/481) presenting a summary analysis of pupil attainment for academic session 2015/16 in Perth and Kinross, specifically in relation to Curriculum for Excellence progress with learning and achievement in P1, P4, P7 and S3, and attainment at SCQF levels 5, 6 and 7 in secondary years S4, S5 and S6.

Councillor Cuthbert requested clarification on the drop in the number of pupils taking Advanced Higher qualifications. R Hill responded that there are less pupils, and less demand from universities for Advanced Higher qualifications.

In response to a query from Councillor Cuthbert regarding the number of those pupils not meeting targets, S Devlin advised that Perth and Kinross schools have the highest number of mainstreaming Additional Support Needs (ASN) pupils. The number of pupils who are meeting expected targets is high; high levels of mainstreaming of young people with ASN will mean such targets are unlikely to be met.

Councillor Cuthbert raised concerns regarding Perth and Kinross S4, S5 and S6 pupils who are behind their virtual comparator in terms of literacy and numeracy. R Hill highlighted that the pupils are above the virtual comparator in terms of the total



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tariff score. He further provided assurance that literacy and numeracy is being considered in all schools to identify where it is falling behind, and that work will be done to combat this issue.

The Convener requested that the figures for attainment by each individual school be distributed to the members of the Committee.

Councillor Doogan highlighted the number of pupils secure at third level or above in S3 in 2016 with regards to listening and talking, and requested clarification on what that meant for the outcomes of the young people. S Devlin commented that secondary school teachers, who have not been working with Curriculum for Excellence as long as primary school teachers, have less confidence in measuring the pupils against the planned outcomes.

**Resolved:**

The contents of Report 16/481 be noted.

**SCHOOL COMPLAINTS – ACADEMIC YEAR 2015-2016**

There was submitted a report by the Director (Education and Children's Services) (16/536) presenting to the Committee the school complaints information for the Academic Year 2015-2016.

**Resolved:**

- (i) The contents of Report 16/536 be noted.
- (ii) It be noted that work is continuing to promote and further embed the complaints handling process across all schools through ongoing advice, support and briefing/training sessions.
- (iii) It be agreed that school complaints information no longer be presented to the Scrutiny Committee as a separate report, unless exceptional circumstances arise.

**PERTH AND KINROSS CHILD PROTECTION COMMITTEE STANDARDS AND QUALITY REPORT 2015-2016**

There was submitted a joint report by the Chief Executive and Director (Education and Children's Services) (16/443) providing an overview of the key activities of the work of the Child Protection Committee to protect children and young people from abuse and neglect, and presenting the findings from a wide range of single agency and multi-agency self-evaluation activities led by the Child Protection Committee. The report set out the progress made against a 3-year improvement plan and identified key strengths and areas for further development. The report concluded that there was a strong capacity for continued improvement across the partnership to protect children and young people.

Councillor Doogan requested clarification on the increase in the number of child protection investigations and percentage of case conferences resulting in registration. J Pepper provided assurance that as there is a steady increase in the number of investigations, with conversion rates staying the same, the number of

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children on the register has risen steadily. She further provided assurance that the right children are going into the child protection system. There should be a reduction next year, and evaluation work has been carried out to demonstrate that intervention is being carried out earlier.

In response to a query from Councillor Doogan regarding what action is being taken on the most prevalent household characteristic, J Pepper responded that work is being done with Housing, and that these issues are being taken very seriously on a corporate level in the Council.

The Convener requested further clarification on the identification of young carers in the primary sector. S Devlin advised that colleagues from PKAVS had been attending headteacher development sessions to provide advice on young carers, and these had been productive sessions. She provided further assurance that consideration is being given to how the sessions can be improved and groups of schools can be better targeted.

**Resolved:**

The contents of the Child Protection Committee Standards and Quality Report 2015 – 2016, attached as Appendix 1 to Report 16/443, be noted.

**FIFTH SCRUTINY REVIEW – CHARGING FOR COUNCIL SERVICES**

There was submitted a report by the Depute Chief Executive, Environment (Sustainability, Strategic and Entrepreneurial Development) (16/573) providing an update on the ongoing implementation outstanding of recommendations from the Fifth Scrutiny Review (Charging for Council Services). The implementation of the Review's recommendations was initially reported to the Scrutiny Committee on 20 April 2016 (Report 16/77 refers).

**Resolved:**

- (i) The work undertaken to implement outstanding recommendations from the Fifth Scrutiny Review, as detailed in Appendix 1 to Report 16/573, be noted.
- (ii) The rolling programme of service charge reviews, as outlined in Appendix 2 to Report 16/573, be continued.
- (iii) The Depute Chief Executive, Environment (Sustainability, Strategic and Entrepreneurial Development) be requested to submit a further update report once the reviews scheduled for 2017/18, as outlined in Appendix 2 to Report 16/573, have been completed.

**IT WAS AGREED THAT THE PUBLIC AND PRESS SHOULD BE EXCLUDED DURING CONSIDERATION OF THE FOLLOWING ITEM IN ORDER TO AVOID THE DISCLOSURE OF INFORMATION WHICH IS EXEMPT IN TERMS OF SCHEDULE 7A TO THE LOCAL GOVERNMENT (SCOTLAND) ACT 1973.**

**MINUTE OF MEETING OF SOCIAL WORK COMPLAINTS REVIEW COMMITTEE OF 8 SEPTEMBER 2016**

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There was submitted and noted the minute of meeting of the Social Work Complaints Review Committee of 8 September 2016.

. **MINUTE OF MEETING OF SOCIAL WORK COMPLAINTS REVIEW  
COMMITTEE OF 16 SEPTEMBER 2016**

There was submitted and noted the minute of meeting of the Social Work Complaints Review Committee of 16 September 2016.

. **MINUTE OF MEETING OF SOCIAL WORK COMPLAINTS REVIEW  
COMMITTEE OF 27 OCTOBER 2016**

There was submitted and noted the minute of meeting of the Social Work Complaints Review Committee of 27 October 2016.

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**PERTH AND KINROSS COUNCIL**

**Scrutiny Committee – 8 February 2017**

**Strategic Policy and Resources Committee – 8 February 2017**

**CORPORATE RISK MANAGEMENT STRATEGY**

**Report by the Depute Chief Executive, Environment  
(Sustainability, Strategic and Entrepreneurial Development)**

This report presents a new Risk Management Policy, Strategy and Framework, to reflect the changing circumstances facing the Council.

**1 BACKGROUND/ MAIN ISSUES**

- 1.1 The effective management of risk in the Council's activities is a vital part of supporting the delivery of positive outcomes for Perth and Kinross, and is a key part of the Council's strategic improvement framework.
- 1.2 If we do not manage risk effectively, the consequences can impact on the Council's reputation, its financial position, and safety of staff and the public. However, adopting an approach which is too risk averse can deprive the Council of the opportunities to be innovative and creative, in tackling the considerable challenges facing our public services.
- 1.3 Risk Management is part of the Council's overall governance framework. Governance around local government decision-making and delivery has never been so crucial or complex, as we continue to adapt to changing circumstances and develop more diverse and ambitious ways of working with partners and with our communities. Therefore a review of our approach to risk management is necessary, including the existing Corporate Risk Management Strategy. The key drivers are:
  - The impact of public service reform, with new operational models such as the Integration Joint Board for Health and Social Care.
  - The move to more partnership based working, through Arms Length External Organisations (ALEOs) such as Culture Perth and Kinross; collaborative working with other Councils; and our changing engagement with communities through local Action Partnerships.
  - With the challenges facing the Council we need to be more entrepreneurial and commercial in our approach, to create our authorising environment, where we are highly risk aware, but not risk averse.

- 1.4 To support the review of our risk management arrangement, an Internal Audit review of the current Risk Management Strategy was carried out as part of the audit plan for 2015/16, with the scope to ensure the adequacy of corporate risk management within the Council. The final report was submitted to the Audit Committee on 29 June 2016 (Report no 16/309).
- 1.5 This audit identified a number of opportunities for the Council to develop its risk management arrangements further, to provide greater levels of assurance to senior management and Elected Members that key risks are being managed effectively. The key opportunities identified for further improving the Council's approach are detailed in Appendix 1.
- 1.6. Therefore this report contains a revised approach to risk management, and taking the above factors into account.
- 1.7 Elected Members have a key role in managing risks, as well as the scrutiny of Council services in mitigating these risks. This role is being reflected in new guidance being prepared by the Scrutiny Committee Review Group, to assist all Members in their scrutiny role for the Council.

## **2. PROPOSALS**

- 2.1 The new approach to risk management is contained in Appendix 2. A revised risk management framework has been developed based on best practice industry standards including the International Standard in Risk Management – ISO: 31000 and the Office of Governance & Commerce (OGC) Management of Risk Guidance (MoR) and the Association of Local Authority Risk Managers, (ALARM). The revised framework incorporates the opportunities identified within the Internal Audit report.
- 2.2 In accordance with the above guidance, our risk management framework is set out in 4 parts:
- Risk Management Policy - statement of the Council's commitment to effective risk management
  - Risk Management Strategy – articulates our overall approach to risk and provides a detailed risk hierarchy
  - Risk Management Appetite Statement – describes the levels of risk the Council is prepared to tolerate in pursuit of our objectives
  - Risk Management Process Guide - details how the risk management process will be carried out at an operational level

2.3 The key changes to the previous Risk Strategy are:

- Distinctive statements of policy, strategy, risk appetite and process, to meet good practice from internal audit reports, and national standards (see section 2.1).
- Detailed description of our Risk Management Process.
- Clear definition for the terminology used by the Council in Risk Management, so there is no ambiguity.
- Statements and direction on the need to be risk aware not risk adverse, and ensuring the risks involved are not maximising opportunities available.
- Commentary on our own approach to managing risks within our multiple partnership arrangements.

2.4 The Internal Audit review recognised the need for additional training as there has been a turnover of staff involved in this activity recently, and it is proposed that key staff in services undertake the Management of Risk (MoR) course, or equivalent. This course is aimed at anyone working within a corporate governance environment that has responsibilities for identifying, assessing, planning, or managing risks, or reporting on risk management activities across the organisation.

2.5 The next stage in development of our approach of risk is to undertake risk workshops to familiarise staff with this new approach, establish milestones, define the risk appetite and refresh the risk probability and impact matrixes, as well as the governance for the risk and controls.

### 3. CONCLUSION AND RECOMMENDATION

3.1 The Strategic Policy and Resources Committee is asked to:

- (a) Approve the proposed Risk Management Policy, Strategy and Appetite detailed in Appendix 2.

3.2 The Scrutiny Committee is asked to:

- (a) Note the contents of the proposed Risk Management Policy, Strategy and Appetite detailed in Appendix 2.

#### Author

| Name          | Designation                                            | Contact Details                                                                                    |
|---------------|--------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| Gordon Dawson | Team Leader – Strategic Planning, Improvement and Risk | 01738 475000<br><a href="mailto:TESCommitteeReports@pkc.gov.uk">TESCommitteeReports@pkc.gov.uk</a> |
| Lisa Simpson  | Head of Legal and Governance Services                  | 01738 475000<br><a href="mailto:TESCommitteeReports@pkc.gov.uk">TESCommitteeReports@pkc.gov.uk</a> |

## Approved

| Name          | Designation                                                                                              | Date            |
|---------------|----------------------------------------------------------------------------------------------------------|-----------------|
| Jim Valentine | Depute Chief Executive,<br>Environment (Sustainability,<br>Strategic and Entrepreneurial<br>Development) | 10 January 2017 |

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## 1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

| <b>Strategic Implications</b>                       | <b>Yes / None</b> |
|-----------------------------------------------------|-------------------|
| Community Plan / Single Outcome Agreement           | <b>Yes</b>        |
| Corporate Plan                                      | <b>Yes</b>        |
| <b>Resource Implications</b>                        |                   |
| Financial                                           | <b>None</b>       |
| Workforce                                           | <b>None</b>       |
| Asset Management (land, property, IST)              | <b>None</b>       |
| <b>Assessments</b>                                  |                   |
| Equality Impact Assessment                          | <b>None</b>       |
| Strategic Environmental Assessment                  | <b>None</b>       |
| Sustainability (community, economic, environmental) | <b>None</b>       |
| Legal and Governance                                | <b>Yes</b>        |
| Risk                                                | <b>Yes</b>        |
| <b>Consultation</b>                                 |                   |
| Internal                                            | <b>Yes</b>        |
| External                                            | <b>None</b>       |
| <b>Communication</b>                                |                   |
| Communications Plan                                 | <b>None</b>       |

### 1. Strategic Implications

#### Community Plan / Single Outcome Agreement/Corporate Plan

- 1.1 This report supports the delivery of the Strategic Objectives within Community Plan/ Single Outcome Agreement 2013-23 and Corporate Plan 2013-18.

### 2. Resource Implications

#### Financial

- 2.1 Not applicable

#### Workforce

- 2.2 Formal risk management training should be provided for all risk-responsible staff within the Council. Training should also be provided to staff at all levels of the Council to ensure all staff are empowered to highlight new and emerging risks.
- 2.3 Staff with responsibility for risk management at Corporate and Service levels should be encouraged to obtain a formal risk management qualification.

#### Asset Management (land, property, IT)

2.4 Not applicable

### **3. Assessments**

#### Equality Impact Assessment

- 3.1 Under the Equality Act 2010, the Council is required to eliminate discrimination, advance equality of opportunity, and foster good relations between equality groups. Carrying out Equality Impact Assessments for plans and policies allows the Council to demonstrate that it is meeting these duties.
- 3.2 This report has been considered under the Corporate Equalities Impact Assessment process (EqIA) with the following outcome:
- Assessed as not relevant for the purposes of EqIA

#### Strategic Environmental Assessment

- 3.3 The Environmental Assessment (Scotland) Act 2005 places a duty on the Council to identify and assess the environmental consequences of its proposals. No further action is required as it does not qualify as a PPS as defined by the Act and is therefore exempt.

#### Sustainability

- 3.4 Under the provisions of the Local Government in Scotland Act 2003 the Council has to discharge its duties in a way which contributes to the achievement of sustainable development. In terms of the Climate Change Act, the Council has a general duty to demonstrate its commitment to sustainability and the community, environmental and economic impacts of its actions.
- 3.5 The information contained within this report has been considered under the Act. However, no action is required as the Act does not apply to the matters presented in this report.

#### Legal and Governance

##### Internal

- 3.6 The Head of Legal and Governance has been consulted in the preparation of this report.

##### External

- 3.7 No external consultation was required in the preparation of this report.

### Risk

- 3.8 This report is entirely related to the management of risk in the organisation

## **4. Consultation**

### Internal

- 4.1 The Head of Legal and Governance, Head of Democratic Services and Chief Internal Auditor have been consulted in the preparation of this report.

### External

- 4.2 No external consultation was required.

## **5. Communication**

- 5.1 Communicating this new approach to risk management will be central to embedding good practice in the organisation. Subject to approval of the report a Communications Plan will be implemented to achieve this objective

## **2. BACKGROUND PAPERS**

- 2.1 Internal Audit Report, Corporate Risk Management Assignment 15-34, March 2016 (Report no 16/309).

## **3. APPENDICES**

- Appendix 1 – Internal Audit Recommendations
- Appendix 2 – Perth and Kinross Council Risk Management Policy, Strategy and Appetite

### Internal Audit Recommendations

- (1) Define the Council's risk appetite - this should drive the Council's approach to risk management and provide officers with clear guidance around how risks should be managed. The risk appetite should also be used to promote a more positive approach to risk which makes it clear that the Council is not risk averse and should be used for identifying and exploiting opportunities.
- (2) Publish and implement a revised stand-alone Corporate Risk Management Strategy along with an overarching Risk Management Framework. These should be approved by the appropriate Council committee, and communicated to all officers to emphasise the importance of developing and embedding a positive risk management culture.
- (3) Consider restructuring the format of the current risk profiles (risk registers). This should reflect the needs of all strategic and operational decision making groups (e.g. Committee, EOT and SMTs), link to operational risk profiles and have a focus on overall risk assessment. This should include appropriate analysis of internal and external factors/conditions, rather than changes to identified controls associated with risks as is currently the case.
- (4) To ensure appropriate awareness of and engagement in risk management, Elected Members should have sight of Corporate and Service Risk Profiles on a regular basis (at least 6-monthly) through reporting to relevant Council Committees.
- (5) Executive and Service management should ensure that there is assessment of risk profiles on a more frequent basis. This will allow for continuous identification and assessment of emerging risks and this should encourage a more pro-active approach to risk management.
- (6) There is scope to enhance risk management reporting to ensure a more targeted and focused approach within strategic and operational Council governance groups. At present, risk is being reported alongside performance information but there was limited evidence of risk management being subject to regular detailed assessment.
- (7) The Council should assess the effectiveness of those groups (e.g. Scrutiny Committee, EOT and SMTs) identified in the Corporate Risk Management Strategy as having risk management responsibilities to confirm the extent to which they are contributing to effective risk management throughout the Council.

- (8) Formal risk management training should be provided for all risk-responsible staff within the Council. Training should also be provided to staff at all levels of the Council to ensure all staff are empowered to highlight new and emerging risks.
- (9) The Council should encourage staff who are responsible for risk management at Corporate and Service levels (i.e. risk champions) to obtain a formal risk management qualification.



**PERTH & KINROSS COUNCIL**

# **RISK MANAGEMENT POLICY**

Building Ambition. Building Confidence. Building Resilience.

## **POLICY STATEMENT**

Risk is inherent in all of the Council's activities. It can never be eliminated; the aim is have effective arrangements in place within the Council to identify, assess, mitigate and manage risk.

Perth & Kinross Council is committed to a policy of risk management that protects its elected members, employees, stakeholders, assets, liabilities, professional reputation and the wider community against potential losses or damage. We will use risk management to minimise threats and maximise opportunities to achieve our strategic vision and deliver on our objectives. Risk management must be embedded into our business and planning processes and be understood and implemented throughout the organisation at every level.

Risk management as a crucial aspect of internal control is fundamental to the good governance of this Council. It facilitates better strategic decision making and more effective business processes that will allow the Council to exploit opportunities and achieve better value for the community, whilst ensuring that it meets the high standards of accountability, probity, compliance and transparency required of a public body.

## **INTENT & PURPOSE**

This policy confirms Perth & Kinross Council's commitment to good corporate governance through effective risk management.

The Purpose of this policy is to:

- provide guidance regarding the management of risk to support the achievement of the Council's corporate and community objectives, protect our people and business assets and ensure financial sustainability
- develop a culture of risk awareness, encouraging innovation and the realisation of opportunities within the Council's daily operations;
- ensure compliance with risk management processes that are mandated by legislation;
- integrate and align risk management systems with the Council's activities and business processes;
- encourage continuous review and improvement of Council's risk assessment and management processes.

## **SCOPE**

This Policy applies to all Perth & Kinross Council activities. It forms part of the Council's governance framework and applies to all elected members, staff, contractors and volunteers. The principles also apply in our arrangements with partners and other external agencies.

## **OUR RISK MANAGEMENT VISION**

To create a mature risk intelligent culture within the Council; where effective risk management supports the organisation and is integrated with our business and planning processes enabling us to identify threats and opportunities to the achievement of our objectives and performance; and address these in a timely and appropriate way.

## **OUR RISK MANAGEMENT OBJECTIVES**

1. To safeguard and protect our people, property, assets and professional reputation.
2. To create a workplace culture where all elected members and staff assume responsibility for managing risk in their day to day activities.
3. To embed a consistent and coherent, organisation-wide, approach to identifying, quantifying and controlling risks which enable the Council to realise opportunities for benefits as well as minimising vulnerabilities and threats
4. To promote sound management and business practices, enhance the quality of decision making and protect governance and accountability principles.
5. To ensure that risk management is a key supporter in service improvements, achieving our corporate priorities and sound financial stewardship.
6. To deploy our resources and operational capabilities in an efficient, effective and responsible manner

## **RISK MANAGEMENT PRINCIPLES**

The risk management principles are not compliance focused. They are a set of statements based on ISO 31000 to guide and assist in the design, implementation and oversight of the risk management framework.

Risk management:-

- creates and protects value;
- is an integral part of the Council's business and management processes;
- is part of decision making processes;
- explicitly addresses uncertainty;
- is systematic, structured and timely;
- is based on the best available information;
- is tailored to our organisation;
- takes human and cultural factors into account;
- is transparent and inclusive;
- is dynamic, iterative and responsive to change; and
- facilitates continual improvement of the organisation.



## **RISK APPETITE**

The Council's risk appetite is outlined in the Risk Appetite Statement. As risk is fluid and dynamic, the Risk Appetite Statement is not a definitive statement, but instead sets out the risk tolerance parameters that should be applied when assessing risk in each situation.

## **RISK GOVERNANCE**

Risk governance refers to the arrangements that we have in place within the Council to make decisions about risk. It includes the leadership, accountabilities and oversight that builds and improves the risk management approach. Risk governance is an essential part of our overall governance responsibilities.

Our risk governance structure is set out in the Risk Management Strategy.

## **PROCEDURE**

The Council's Risk Management philosophy and approach is documented in the Risk Management Strategy.

The Council's Risk Management processes and procedures are documented in the Risk Management Process.

## **RESPONSIBILITY & REVIEW**

The Chief Executive has overarching responsibility for risk management within the organisation and as such shall ensure that the Council's Risk Management Framework is regularly monitored and reviewed to ensure its continuing effectiveness in managing risk and delivering value. The Framework shall be formally reviewed every three years, or sooner, if required to comply with legislative or policy changes.



## Appendix 2a

# RISK MANAGEMENT STRATEGY

## Building ambition, Building Confidence, Building Resilience

### INTRODUCTION

The management of risk is a crucial aspect of internal control and therefore a key element of good governance in any organisation. “Governance” is a well recognised term but an often misunderstood concept. Many people see it simply as the rules and controls in place within an organisation (sometimes perceived as barriers to activity) but it is in fact much broader; it encompasses the culture, leadership, values, systems, processes, controls and resources of an organisation and more importantly, how these are directed and managed to enable the organisation to achieve its objectives and defined outcomes. Far from being a barrier to getting things done, good governance is the key enabler for organisational success.

To be effective, any risk management process must create value by increasing the ability or likelihood of achieving aims and objectives. In the context of local government, robust risk management creates value through facilitating better decision making, more effective internal control, service improvement, change and innovation. To achieve this, however, the management of risk and the setting of controls must be directly linked to the priorities and objectives of the Council, integrated into all of our business processes and implemented consistently across the whole organisation.

Many organisations, across all sectors, make the mistake of treating risk management as a compliance driven, stand-alone function; perceived as “centrally” owned and somewhat detached from day to day operations. This approach undermines the ability of these organisations to derive the most value from the risk management processes. Risk reporting and monitoring becomes too resource intensive and complex and as a result the organisation has no comprehensive oversight of its risks. In many organisations the process of risk reporting and monitoring ends up being the output as opposed to the means to an end; that end being increasing the likelihood of the organisation achieving its objectives

Whilst the language around risk may be technical at times, integrated risk management as a concept is relatively straightforward and highly effective, if applied consistently and at every level throughout the organisation. Key to effective integrated risk management is the direct link of the controls to the objectives (as illustrated in the figure below). In summary;-

- What is it that you are trying to achieve? ( business objective)
- What is likely to prevent or hinder you from achieving that objective? (key risks)
- In those circumstances what do you need the control to do to help eliminate or mitigate the risk? (the control objective)
- Develop, test, monitor and review the control to ensure that it is effective (Key Control)

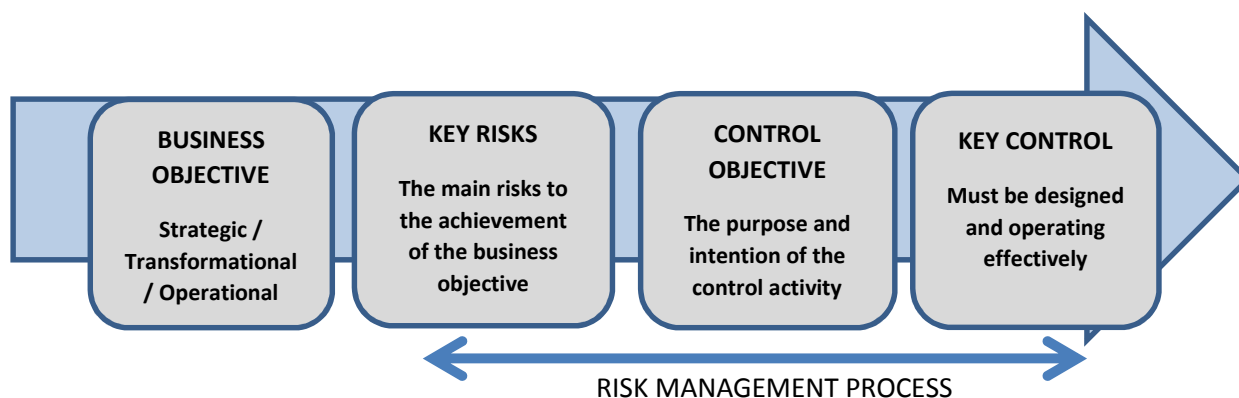


Figure 1

The integration of risk management with our business planning and performance management processes will ensure that the Council is best placed to identify emerging risk, manage and mitigate threats and exploit opportunities for change and growth. We must ensure that our risk vision, culture, appetite, governance and resources are aligned to the achievement of our objectives and support better risk intelligent decision making.

## OUR RISK MANAGEMENT VISION

To be a risk intelligent Council where risk management is fully integrated into our decision making and business processes, enabling the Council to deliver more cost efficient and effective services, be innovative and enterprising, and to continuously improve.

## OUR RISK CULTURE

We know that to be effective, process must follow culture. Changing our risk management processes and procedures will not create and deliver value to our organisation if our organisational culture remains static. Public sector bodies have traditionally had a culture of avoiding risk. In these changing and challenging times, however, Perth & Kinross Council and our public sector partners must become more risk intelligent in our approach to managing uncertainty, to enable us to exploit opportunities and maximise potential benefits, as opposed to being solely focussed on minimising potential threats.

If we are to continue to be successful, we must recognise that risk taking is not only inevitable but necessary. As an organisation we must also accept that some mistakes may be made along the way and acknowledge that a “blame culture” will stifle change and innovation and thereby hinder or derail any progress.

We understand that the tone set at the top is crucial to successfully developing a risk intelligent environment. At political and strategic level therefore we advocate proactive risk management throughout the whole Council.

We want to create an authorising environment where our elected members and staff understand the value of risk management and are supported to make appropriate risk based decisions and to take personal responsibility for the management of risk at every level. Key business risks will be monitored at the highest level but we will also be continuously reviewing the effectiveness of our risk management processes; responding positively to challenge and learning from mistakes.

We appreciate that developing a more risk intelligent culture takes time and will require meaningful changes to be made to our established ways of operating.

## **What does a risk intelligent organisation look like?**

A risk intelligent organisation does not seek to eliminate risk, or even to minimise it in all cases. Instead it seeks to manage risk exposure across all parts of the organisation, so that, at any given time, it is incurring just enough of the right kind of risk to effectively pursue its goals and objectives.

A risk intelligent organisation:-

- understands that risk management must be integrated into core business processes
- assumes turbulence is inevitable and emphasises prevention and preparedness to improve organisational resilience and agility
- is vigilant for a broad range of opportunities and risks across the whole organisation
- acknowledges the need for specialist controls in some business areas, but where possible seeks to harmonise, synchronise and rationalise risk management and controls
- considers interactions among multiple risks as opposed to focussing on a single risk or event, and considers the combined impact
- creates a common risk language within the organisation so that there is a consistent method and approach to identifying, evaluating, monitoring and reporting risk across the whole Council
- encourages informed risk taking for value creation, rather than focussing on pure risk avoidance

To establish ourselves as a risk intelligent council therefore we must ensure that:-

- everyone understands the Council's approach to risk; its values, appetite and processes
- elected members and staff have the necessary knowledge and tools to enable them to make good risk-based decisions and manage risk appropriately and effectively, in their day to day activities
- we adopt and apply our risk management approach consistently across all business activities of the Council from strategic planning, to day to day operational service delivery
- within the Council we are all comfortable acknowledging and talking openly about risk and that we develop a common risk vocabulary that promotes shared understanding
- we all understand and promote the value that effective risk management can bring to the organisation
- we all take personal responsibility and recognise when we need to involve others
- we create a safe environment for individuals to constructively challenge others in respect of risk, including those in authority, without fear and retribution and we respond positively
- we are a learning Council, continuously seeking to improve our collective understanding of risk management, learning from our mistakes

## **OUR RISK CONTEXT**

Perth & Kinross Council is a complex business, delivering a broad range of services to the community. As a public body it is highly regulated and accountable for its performance to a wide range of stakeholders and the community.

Despite significant financial constraints and a rapidly changing public sector landscape, the Council is under pressure not only to sustain current service delivery, but to meet ever increasing demand pressures, improve our performance, and deliver best value for our community. To simply remain sustainable we need to take a more entrepreneurial approach to how we do business. We must seek out and develop new and innovative ways to deliver their services, through partnerships and increased collaboration with the public private and third sectors. With enterprise, innovation and collaboration, however, comes additional uncertainty which will create a new and very different risk landscape for public authorities. The need for effective risk management within the Council, therefore, has never been more crucial.

This Risk Management Strategy sets out the Council's approach to risk management. It does not identify what our risks are or state how these should be managed as risk management should be a fluid and iterative process. Instead it sets the tone and direction for the organisation and provides the blueprint for how our risk management vision and objectives can be realised.

Our approach to risk management will be determined by our own risk environment; it is important that we understand our local context and the internal and external factors that shape or influence our risk environment.

- Internal factors include our culture, standards and values, our resources and capabilities, our governance arrangements, our internal stakeholders, contract, commissioning and partnership arrangements, our strategic aims and objectives.
- External factors include decreasing budgets, a rapidly changing policy environment, increasing pressure on public services, an ambitious national public sector reform agenda, challenging national targets and outcomes and a legislative drive towards empowering communities to have more influence and control on decision making and the delivery of local public services.

These factors need to be known, understood and evaluated before we can manage risk effectively within the organisation.

## **OUR RISK APPETITE**

Knowing and understanding our risk appetite is crucial to the effectiveness of our risk management process. Risk appetite is the amount of risk that an organisation is willing to accept in pursuit of its objectives. Organisations will have different risk appetites depending on their sector and risk culture and even within each organisation, a range of appetites exist for different risks which may change over time. As risk is such a dynamic thing, it is impossible to make a definitive appetite statement. The impact of uncertainty can vary widely depending upon specific circumstances at any given time.

Our Risk Appetite Statement provides stakeholders with an understanding of the parameters within which Perth & Kinross Council will tolerate certain key business risks. It is designed to guide and support elected members and staff to make better risk based decisions in their day to day activities to enable the Council to achieve its goals and support sustainability. A more detailed Risk Factor Impact Table which helps determine appetite is contained within the Risk Management Toolkit.

## OUR APPROACH

### Risk management standard

The approach is based on best practice industry standards including the International Standard in Risk Management – ISO: 31000 and the Office of Governance & Commerce (OCG) Management of Risk Guidance (MoR) and the Association of Local Authority Risk Managers, (ALARM). More information about the standard is contained within the Risk Management Toolkit.

### Risk categories

Local Government is a complex business presenting a wide and diverse range of opportunities and threats to the achievement of our objectives. Our approach categorises risks which the Council must manage as:

1. **Strategic:** risks which potentially impact upon the Council's ability to achieve its corporate objectives
2. **Transformational:** those risks related to programmes of change and specific projects
3. **Operational:** risks which impact upon the Service's ability to deliver its services and support functions

### Risk factors

Whilst we have 3 broad categories of risk to consider, the factors which impact upon these are wide ranging and diverse. Threats and opportunities to our strategic, transformational and operational objectives can emerge from a number of areas. Similarly the consequential risks can impact a number of areas.

Whilst this list is not exhaustive, for the purposes of our Risk Management Framework, our most common risk factors relate to:-

- **Human Resource**
- **Legislation & Compliance**
- **Finance**
- **Information Technology & Security**
- **Reputation & Public Image**

Other risk factors include:

- **Property & Assets**
- **Environment**
- **Partnership & Collaboration**
- **Contract & Procurement**

These risk factors and how we assess their potential impact are explained in more detail in the Risk Appetite statement.

## Risk management process

The Risk Management Process is a core component of the Risk Management Framework. It provides a structured approach to the identification, evaluation and management of risk at every level within the organisation. It enables the Council to prioritise risks in a consistent manner based on an impact/likelihood matrix analysis. By taking an integrated, organisation wide approach to the management of risk, the Council will be better placed to realise potential benefits and achieve greater value from the risk management process as a key driver in service performance and improvement.

There are seven elements in the Risk Management Process

1. **Establish the context**
2. **Risk Identification**
3. **Risk Analysis**
4. **Risk Evaluation**
5. **Risk Treatment**
6. **Monitor and Review**
7. **Communication & Consultation**

Each of the elements are described in detail in the Risk Management Toolkit. The Risk Management Process as a whole is illustrated at Figure 2 below

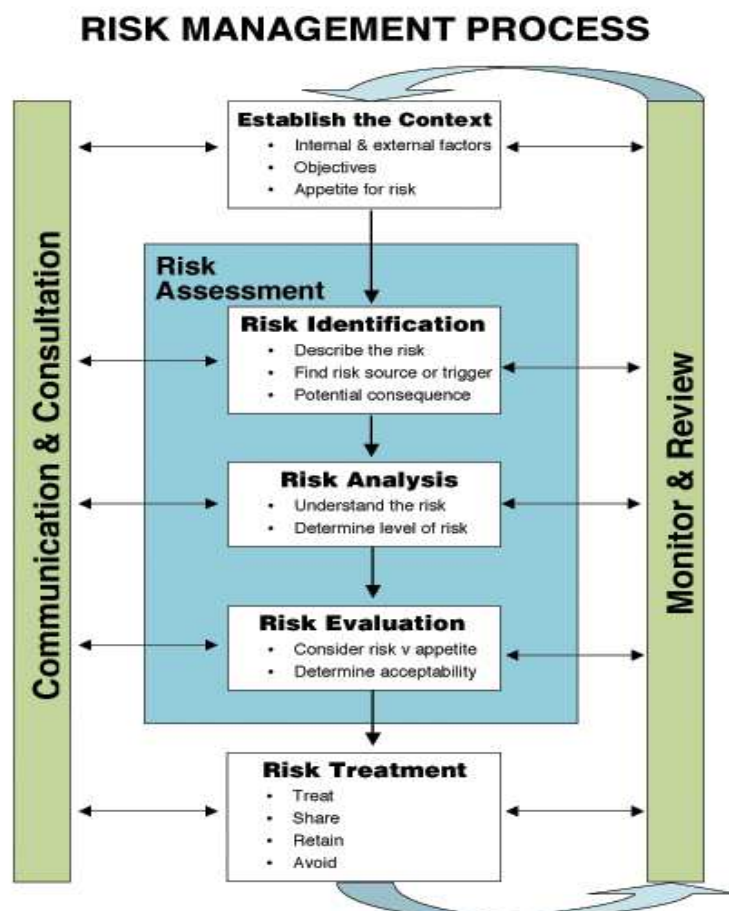


Figure 2



If Perth & Kinross Council is to derive real value from its risk management process then it must be a fluid and ongoing process, implemented by people at every level of the organisation. It is important that we have sight of our risks both vertically and horizontally across the organisation as a whole. This organisation wide approach to risk management ensures that our risk resources and capabilities can be deployed to maximum effect and aligned to the Council's strategic aims.

The Risk Management Framework should be used proactively to identify threats and opportunities to the achievement of our corporate and community objectives. It should be an intrinsic part of our business planning and performance management processes at strategic, operational and interagency level. Risk management is dynamic therefore it cannot be a 6 monthly or annual stand-alone process for the purposes of reporting; it must be embedded into our day to day business activities.

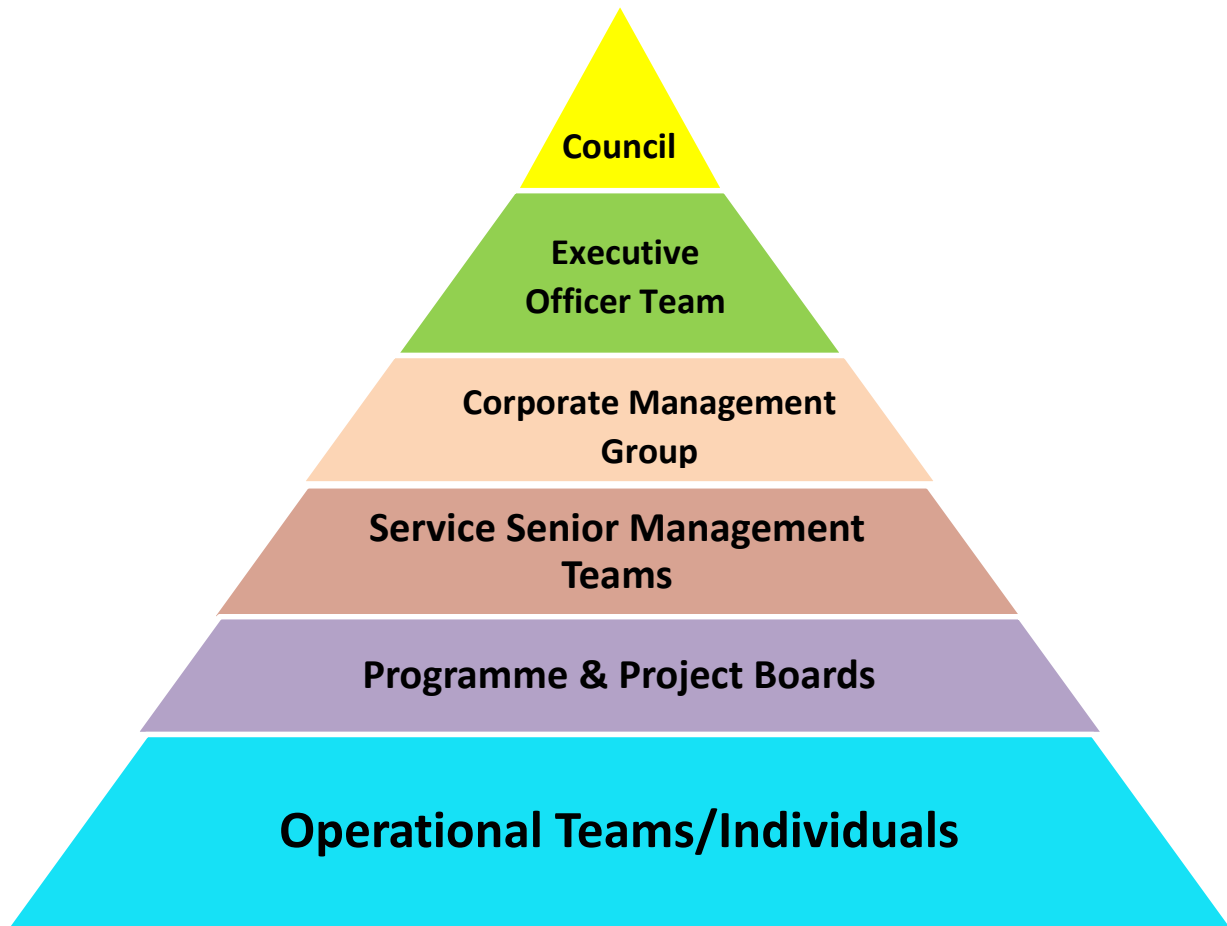
The purpose of Risk Management is to eliminate the barriers to our success. If risk management is to be a true enabler of improved organisational performance, it is vital that individuals recognise that risk management is a means to that end – and the process is not an end in itself.

## **OUR RISK GOVERNANCE STRUCTURES**

While it is important to ensure that the Council is '*doing risk management right*', it is equally important to '*do the right risk management*'. This includes having processes in place so that the appropriate levels of management have oversight of the different levels of risk across the department. The risk hierarchy defines accountability for identifying, treating, monitoring, communicating and managing risks throughout the organisation.

It is vital that risk is managed effectively at every level of the organisation. This means that risk must be fully integrated into our business processes and system to ensure that risk is being identified, managed and reported at each level. Accountability for risk will depend upon the nature of the risks.

The Council's integrated business planning system cascades from the Community Plan and Corporate Plan through to Service and programme plans, operational team and project plans, and then distilled into individual performance and development plans. The planning cycle provides an opportunity for the Corporate Management Group and Service Management Teams to undertake analysis regarding emerging or known risks that may impact on their purpose and objectives.



**Strategic Risk:** May have a positive or negative effect on achieving the Council's strategic objectives.

**Transformational Risk:** May have a positive or negative effect on the ability of the Council or the Service to deliver its programme or project objectives

**Operational Risk:** May have a positive or negative effect on the ability of the Service to deliver its operational objectives.

**Priority 1  
EXTREME**

Risk remains extreme or high even after all identified controls and treatments have been applied

**Priority 2  
HIGH**

Risk is high after controls have been applied, but can be reduced with further treatments

**Priority 3  
MANAGEABLE**

Appropriate controls keep the risk medium

**Priority 4  
ACCEPTABLE**

Appropriate controls keep the risk low / negligible

## Risk hierarchy

- **The Council** agrees the Risk Management Framework comprising the Risk Management Policy, Strategy and Appetite statement for the organisation, and with the Executive Officer Team (EOT) it champions the risk management principles, establishes the risk appetite and sets the tone for how risk will be managed across the whole organisation.
- **The Executive Officer Team** is responsible for implementing the Risk Management Framework at strategic level, reviews risk evaluation against organisational risk appetite and ensures that risk management is integrated into the Council's business processes and practices. The EOT manages Priority 1 Strategic Risks and monitors any other high priority risks which have been escalated to it by the Corporate Management Group (CMG) in accordance with the Risk Management Framework
- **The Corporate Management Group (CMG)** manage strategic risks and monitor Priority 1 & 2 transformational risks and those operational risks which have a cross service impact or potentially impact upon the delivery of strategic objectives. The CMG ensures that the Risk Management Framework is implemented and integrated into operational business practice across the organisation. The CMG will escalate Priority 1 Strategic Risks to the EOT, and the CMG can also escalate high priority Transformational or Operational Risks which may impact upon the delivery of the Council's strategic objectives.
- **Service Senior Management Teams** implement the risk management framework and integrate effective risk management into their business processes and practices. They ensure that risks are identified against the delivery of strategic and operational objectives, and are the key lever for the escalation of risks to the CMG if they can no longer be effectively managed within the service or present a wider organisational or strategic risk. They also monitor high priority transformational risks which impact upon their business areas.
- **Programme & Project Boards** manage all risks associated with the delivery of change programmes or specific projects. Ensure that Priority 1 & 2 risks are escalated to :-
  - the CMG if they have an impact upon the delivery of a strategic objective or if they potentially impact upon the operational objectives of more than one Service; or
  - The Service Senior Management Teams if they will impact upon operational targets or objectives for that Service.
- **Operational teams** are responsible for ensuring that the risk management framework is implemented at operational level. They are responsible for the management of the day to day risks associated with delivery of the service or support function. They provide reasonable assurance to Senior Management Teams that the main tactical and operational risks arising from service operations are identified, assessed, managed and monitored. They ensure that Priority 1 & 2 operational risks are escalated to the Service Senior Management Teams for monitoring and review.

- All individuals within the organisation are responsible for complying with the Council's risk management framework and ensuring that they undertake training appropriate to the level of risk that they are managing.

## OUR RISK ASSURANCE FRAMEWORK

Our risk hierarchy is designed to ensure that our risks are effectively managed and monitored internally throughout the organisation.

As risk management is an integral part of the Council's internal control system and governance framework, however, we must also be able to provide assurance as to the effectiveness of our risk management process to external stakeholders.

The risk assurance framework can be thought of as "lines of defence" in terms of mitigating and managing risks.

- **The first line of defence** in any organisation is the risk culture. The tone that we set at the top will be the foundation for good risk management. We must all communicate our risk approach and values consistently across the Council at every level and reinforce this by our actions and behaviours.
- **The second line of defence** are the management teams/ programme boards/ projects teams who own the risks ("process owners") and are responsible and accountable for the identification and management of the risks within their areas.
- **The third line of defence** are those with oversight responsibility – this will be the Senior Management Teams / Corporate Management Group / Executive Officer Team depending upon the nature and level of the particular risks.
- **The fourth line of defence** comes from the Council's corporate control and compliance functions such as Finance, Legal, HR, Corporate Risk, Procurement, Information Technology, Information Security & Compliance, and Health & Safety. These functions must collaborate with process owners to develop and monitor controls to mitigate identified risks. They also play a key role in independently evaluating risk and alerting management to emerging risks.
- **The fifth line of defence** are our internal and external audit functions which review controls and management procedures, identify issues and improvement opportunities and evaluate the overall design and effectiveness of the Council's internal control processes.
- **The final line of defence** is the Council's Audit & Scrutiny Committees. The Audit Committee oversees the Council's risk management activities and the effectiveness of the internal controls. The Scrutiny Committee ensures that the risk management framework is aligned to the Council's objectives and supports continuous improvement in risk performance.

## **OUR COMMITMENT TO CONTINUOUS IMPROVEMENT**

We are looking for our risk maturity to develop and grow. We recognise the importance of learning from mistakes and ensuring that our risk management framework remains vital and dynamic to meet the challenges of 21<sup>st</sup> Century local government. We will regularly monitor and review our risk management processes to ensure that:

- it remains relevant and fit for purpose as our internal and external context changes
- it is effective in mitigating threats and maximising benefits to our organisation and the community
- our risk criteria remain relevant in a rapidly changing public sector landscape
- as an organisation we can capture learning from our risk management activities
- we are achieving our expected risk management outcomes

More detailed processes for monitoring, reviewing and assessing our risk management maturity are detailed in the Risk Management Toolkit.



# PERTH & KINROSS COUNCIL

## RISK APPETITE STATEMENT

This Risk Appetite Statement describes the level of risk that Perth & Kinross Council is prepared to tolerate or accept in pursuit of its objectives. It is important that our appetite and thresholds are understood and communicated consistently throughout the organisation and with our stakeholders.

Establishing our risk appetite is fundamental to implementing a systematic approach to identifying, assessing, and managing risk within the Council. Below is an overall statement of our risk appetite. Table 1 below sets out our appetite in respect of each risk category. Table 2 sets out appetite and thresholds in respect to our most common risk factors and Table 3 sets out our appetite to risk in respect of our work as a partner, collaborator contractor or funder. More detail information as regards risk factor impact assessment is contained within the Risk Management Toolkit.

### Overall Risk Appetite Statement

**As a highly regulated public body Perth & Kinross Council has an overall conservative risk appetite. We will act in accordance with this risk appetite statement to achieve strategic objectives and remain a high performing and ambitious Council.**

We recognise that it is not practical or desirable to avoid all risk and that a greater degree of risk will require to be accepted if our programme of change and transformation is to succeed. In a rapidly changing public sector environment we will employ sound organisation wide risk management principles, transparent decision-making, and effective communication to prioritise our risk. In these challenging times we must maintain a highly motivated, diverse, talented, and empowered work force and will deploy resources to maximise their use and effectiveness. Our reputation as an effective, ethical and respected Council is highly valued. We will continue to operate with integrity, maintain strong ethical standards and adhere to all applicable legal and regulatory requirements.

**Table 1: CATEGORY RISK APPETITE STATEMENT**

| <b>RISK CATEGORY</b>    | <b>DESCRIPTION</b>                                                                              | <b>OVERALL RISK APPETITE</b> | <b>RATIONALE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|-------------------------|-------------------------------------------------------------------------------------------------|------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>STRATEGIC</b>        | Risks which impact on the delivery of the Council's corporate or community planning objectives. | <b>MODERATE</b>              | Perth & Kinross Council is a high performing Council committed to continuously improving the services that we provide to our community. We are working in challenging times, with an ambitious national public service reform agenda, high customer demand and expectation, and reducing local government funding. In order to realise our ambitions we are prepared to accept a moderate degree of risk to ensure that we can maximise the benefits of any opportunities for growth and development which may arise, subject to the particular risk factor thresholds outlined below.                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>TRANSFORMATIONAL</b> | Risks which impact upon the ability to deliver change and transformation within the Council     | <b>MODERATE/HIGH</b>         | The public sector landscape is continually changing. The traditional approach to public service delivery is no longer considered sustainable or appropriate and public bodies need to rethink how their services can be delivered to better meet the needs of our communities and deliver better value for money. National policy is moving towards increased partnership and collaboration which will require more innovative and complex service delivery models to be developed. Perth & Kinross Council recognises that this new landscape significantly changes the traditional local government risk profile. We accept that new and different risks will emerge, that will require to be managed. We understand that in order to remain a successful and sustainable organisation, we need to be more innovative, entrepreneurial and open to opportunity and challenge. We will accept a moderate to high degree of risk in order to secure the long term benefits of transformation, subject to the particular risk factor thresholds outlined below. |
| <b>OPERATIONAL</b>      | Risks which impact on the delivery of Council Services                                          | <b>MODERATE</b>              | Local authority service delivery is a highly regulated complex business. Services budgets are reducing and customer demand is increasing. The Council recognises that it requires to accept a moderate level of risk in order to continue to deliver an appropriate level of service, at value for money, subject to the particular risk factor thresholds outlined below.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

**Table 2: RISK FACTOR APPETITE**



| <b>RISK FACTOR</b>                  | <b>DESCRIPTION</b>                                                                                                                                                                                   | <b>APPETITE</b>                                                             | <b>RATIONALE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|-------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>HUMAN RESOURCE</b>               | <p>Risks which impact upon Employees :</p> <ul style="list-style-type: none"> <li>• Workplace culture</li> <li>• Conduct and behaviour</li> <li>• Attendance</li> <li>• Change management</li> </ul> | <p><b>NO</b></p> <p><b>LOW</b></p> <p><b>LOW</b></p> <p><b>MODERATE</b></p> | <p>The Council has no appetite for risks that undermine the health and safety, diversity and equality of our employees or the public</p> <p>The Council has a low appetite for weaknesses in employee conduct</p> <p>Employees are the Council's key asset, therefore the Council has a low appetite for absence, which may impact upon operational delivery of services, or impact upon the wellbeing of other staff.</p> <p>To keep pace with the changing public sector landscape the Council recognises that change in public service delivery is inevitable and large scale service redesign is necessary. The Council will accept a moderate degree of risk in terms of its workforce capacity, planning, development and performance as it transforms its services through redesign, collaboration and alternative delivery models.</p> <p>Decisions to assume more risk will take into account internal and external factors such as best practices, innovation, changes in economic or market conditions, and national policy.</p> |
| <b>LEGISLATION &amp; COMPLIANCE</b> | <p>Risks which compromise compliance with applicable laws and</p>                                                                                                                                    | <b>NO</b>                                                                   | <p>The Council has no appetite for :</p> <ul style="list-style-type: none"> <li>• breaches of statutory obligations, regulations</li> <li>• breaches of ethics or professional standards</li> <li>• bribery, fraud or any form of corruption</li> <li>• criminal acts by employees or elected members</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

|                |                                                                                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|----------------|----------------------------------------------------------------------------------------------|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                | regulations                                                                                  | <b>LOW</b>      | The Council has a low appetite for weaknesses in governance and internal control processes                                                                                                                                                                                                                                                                                                                                                            |
| <b>FINANCE</b> | Risks which compromise sound financial management and sustainability                         |                 | To maintain our long term financial viability and deliver on our objectives we must exercise prudent stewardship over our financial resources, maintain strong internal controls and ensure compliance with applicable governmental and accounting standards. We recognise that we cannot control or precisely predict external factors that may affect our financial resources, but we will make prudent decisions to mitigate the financial impact. |
|                | <ul style="list-style-type: none"> <li>Financial stewardship and internal control</li> </ul> | <b>LOW</b>      | The Council has a low appetite for weaknesses in financial stewardship, internal controls, reporting, and resource utilisation and expenditures that impair completion of business-critical functions.                                                                                                                                                                                                                                                |
|                | <ul style="list-style-type: none"> <li>Short term financial risks</li> </ul>                 | <b>MODERATE</b> | The Council has a moderate appetite for short-term financial risk that occurs in response to external factors, providing it is consistent with a plan for long-term health and stability of the Council and its people.                                                                                                                                                                                                                               |
|                | <ul style="list-style-type: none"> <li>Sustainability</li> </ul>                             | <b>MODERATE</b> | The targeted level of uncommitted non-HRA General Fund Reserves continues to be in the range of 2% to 4% of the Council's net revenue expenditure in the medium term. The risk threshold is 2 % which shall be reviewed annually as part of the Council's budget setting processes                                                                                                                                                                    |

|                                                      |                                                                                                                                                                 |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>INFORMATION<br/>TECHNOLOGY &amp;<br/>SECURITY</b> | The risk that information technology processing, security, stability, capacity, and performance jeopardises core operations or breaches compliance requirements |                 | Information systems must support the delivery of our core functions with sufficient capability, capacity, resiliency, and security from internal and external threats. The Council is moving towards an increasingly mobile and technologically dependent workforce, and we therefore we must have a robust and secure technological infrastructure that meets its workforce and operational needs while supporting measured innovation. |
|                                                      | <ul style="list-style-type: none"> <li>• Compliance risks</li> </ul>                                                                                            | <b>NO</b>       | The protection of confidential information on Council systems is paramount. The Council has no appetite for the unauthorised access to or use of systems and confidential data and will maintain strong controls to mitigate threats against its technology infrastructure and to protect confidential information held.                                                                                                                 |
|                                                      | <ul style="list-style-type: none"> <li>• Systems</li> </ul>                                                                                                     | <b>LOW</b>      | The Council has a low appetite for losing continuity of business operations stemming from unreliable telecommunications or system availability. Business resiliency planning and execution must be aligned with strategic objectives.                                                                                                                                                                                                    |
|                                                      | <ul style="list-style-type: none"> <li>• Innovation</li> </ul>                                                                                                  | <b>MODERATE</b> | The Council has a moderate appetite for innovative technology solutions to meet user demands in a rapidly changing environment and to support and facilitate change and business transformation.                                                                                                                                                                                                                                         |

|                                      |                                                                                                                                                                                               |                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|--------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>REPUTATION &amp; PUBLIC IMAGE</b> | <p>Risks which impact upon the reputation and public image of the Council.</p> <ul style="list-style-type: none"> <li>• Conduct &amp; standards</li> <li>• Operational performance</li> </ul> | <p><b>NO</b></p> <p><b>LOW</b></p> <p><b>LOW</b></p> <p><b>MODERATE</b></p> | <p>The reputation of the Council is important to maintain the credibility necessary to achieve its objectives. Elected members and staff must embrace equality, act with integrity, behave ethically and operate honestly and transparently.</p> <p>The Council has no appetite for any criminal acts or breach of ethical or professional standards</p> <p>The Council has a low appetite for any breaches of internal HR, financial or other internal regulatory processes which may compromise the integrity of the Council.</p> <p>The Council has a low appetite for any risks which are likely to result in loss of critical services to our communities.</p> <p>The Council has a moderate appetite for risk in respect of service performance levels in order to support innovation and creativity in our pursuit of more efficient operations. We accept the potential for increased short-term risk to achieve the long-term outcome of greater efficiency and effectiveness within the organisation and across the wider public service.</p> |
| <b>PROPERTY AND ASSETS</b>           | <p>Risk of loss or damage to property and other physical assets which may impact upon service or community provision and business continuity</p>                                              | <p><b>NO</b></p> <p><b>LOW</b></p>                                          | <p>The Council has no appetite for the misappropriation or misuse of Council property or physical assets</p> <p>The Council has a low appetite for any risks which are likely to result in destruction or damage to Council property and other physical assets such as fleet</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |

|                                 |                                                                           |                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|---------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>ENVIRONMENT</b>              | Risks which may have an impact upon the environment                       | <b>LOW</b><br><br><b>MODERATE</b><br><br><b>MODERATE/<br/>HIGH</b> | <p>The Council has a low appetite for any risks which may have a long term detrimental impact upon the environment</p> <p>The Council has a moderate appetite for short to medium term environmental risks in pursuit of long term sustainable development and economic growth.</p> <p>The Council recognises the importance of recycling, reuse and renewable schemes in respect of our environment. The Council will therefore accept a higher degree of risk in the short term to achieve long term environmental benefits.</p> |
| <b>CONTRACT AND PROCUREMENT</b> | Risks which flow from the Council's contract and procurement arrangements | <b>NO</b><br><br><b>NO</b><br><br><b>MODERATE</b>                  | <p>The Council has no risk appetite for any contractual or procurement arrangements which may involve serious and organised crime groups</p> <p>The Council has no risk appetite for contract or procurement activity which constitutes a breach of Scottish, UK or European procurement legislation.</p> <p>Council has a moderate risk appetite in respect of using procurement and contracting arrangements innovatively and creatively to maximise savings and generate income for the Council</p>                             |

**Table 3: RISK FACTOR APPETITE AS A PARTNER, CONTRACTOR, COLLABORATOR OR FUNDER**

| <b>RISK FACTOR</b>                  | <b>DESCRIPTION</b>                                                                                                                                                                                                                                                | <b>APPETITE</b>                                     | <b>RATIONALE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>HUMAN RESOURCE</b>               | <p>Risks arising from partnership and collaborative arrangements which will likely impact upon employees :</p> <ul style="list-style-type: none"> <li>• Changes to organisational structures and governance arrangements</li> <li>• Employee wellbeing</li> </ul> | <p><b>MODERATE/ HIGH</b></p> <p><b>MODERATE</b></p> | <p>The Government has an ambitious programme for the radical reform of public services with a strong focus on greater partnership working and collaborative arrangements across all sectors, which local government and our statutory partners must deliver. The Council recognises that it needs to significantly change how its services are delivered and that any service redesign will impact upon its employees.</p> <p>The Council has a moderate to high appetite for short term risks in terms of redesigning service structures and implementing new governance arrangements to support alternative service delivery vehicles in order to achieve better and more equitable outcomes for communities.</p> <p>Change programmes bring great opportunities for employees but the Council also recognises that for some the prospect of change presents a potential risk to morale and wellbeing . To mitigate this risk the Council will invest in training and development but is prepared to accept a moderate level of risk in this regard, in order to ensure the sustainability of our public services in the long term.</p> |
| <b>LEGISLATION &amp; COMPLIANCE</b> | <p>Risks which compromise compliance with applicable laws and regulations</p>                                                                                                                                                                                     | <b>NO</b>                                           | <p>The Council has no appetite for :</p> <ul style="list-style-type: none"> <li>• breaches of statutory obligations, regulations</li> <li>• breaches of ethics or professional standards</li> <li>• bribery, fraud or any form of corruption</li> <li>• criminal acts by employees or elected members</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

|                                              |                                                                                                                                                                                                              |                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                              |                                                                                                                                                                                                              | <b>LOW</b>                               | The Council has a low appetite for weaknesses in any agreed governance and internal control processes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>FINANCE</b>                               | <p>Risks which compromise sound financial management and sustainability</p> <ul style="list-style-type: none"> <li>Financial stewardship and internal control</li> <li>Short term financial risks</li> </ul> | <p><b>LOW</b></p> <p><b>MODERATE</b></p> | <p>The Council recognises that it may not always have direct control in respect of the funding where services are delivered through partnership, collaborative or arm's length models. It does however still have a statutory responsibility to deliver best value in respect of public money.</p> <p>The Council has a low appetite for weaknesses in financial stewardship, internal controls, reporting, and resource utilisation and expenditures by the partnership, collaboration or arm's length bodies that fail to deliver the agreed outcomes and value for money.</p> <p>In its capacity as partner, contractor, collaborator or funder ( dependent upon the delivery vehicle), the Council will accept a moderate degree of financial risk in the short term to support the development and implementation of alternative delivery models to deliver better and more equitable outcomes for communities.</p> |
| <b>INFORMATION TECHNOLOGY &amp; SECURITY</b> | The risk that information technology processing, security, stability, capacity, and performance jeopardises the achievement of the agreed outcomes or                                                        |                                          | <p>Information systems must support the delivery of the agreed outcomes with sufficient capability, capacity, resiliency, and security from internal and external threats.</p> <p>In any partnership, collaborative, contracted or delegated arrangement, the sharing of adequate and relevant information between parties will be crucial to success. Failure to share relevant information at the right time presents a significant risk of performance failure.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                   |





|                              |                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|                              | <ul style="list-style-type: none"> <li>Operational performance</li> </ul>                                                                      | <p><b>LOW</b></p> <p>The Council has a low appetite for any risks which are likely to result in significant service delivery failure.</p> <p><b>MODERATE</b></p> <p>The Council has a moderate appetite for short term risk in respect of service performance levels in order to support the effective implementation of any agreed alternative service delivery model and the achievement of the agreed objectives .</p>                                                                                                                                                                                                                          |  |
| <b>PROPERTY &amp; ASSETS</b> | Risk of loss or damage or failure to fully utilise property and other physical assets which may impact upon achievement of the agreed outcomes | <p><b>NO</b></p> <p>The Council has no appetite for the misappropriation or misuse of Council property or physical assets</p> <p><b>LOW</b></p> <p>The Council has a low appetite for any risks which are likely to result in destruction or damage to Council property and other physical assets such as fleet</p> <p><b>MODERATE /HIGH</b></p> <p>The Council has a moderate to high appetite for short term risk in order to deliver more effective and efficient shared services through a rationalised public sector estate</p>                                                                                                               |  |
| <b>ENVIRONMENT</b>           | Risks which may have an impact upon the environment                                                                                            | <p><b>LOW</b></p> <p>The Council has a low appetite for any risks which may have a long term detrimental impact upon the environment</p> <p><b>MODERATE</b></p> <p>The Council has a moderate appetite for short to medium term environmental risks in pursuit of long term sustainable development and economic growth.</p> <p>The Council recognises the importance of recycling, reuse and renewable schemes in respect of our environment. The Council in its capacity as partner, contractor, collaborator or funder, will therefore accept a higher degree of risk in the short term to achieve better long term environmental outcomes.</p> |  |

|                                       |                                                                |                 |                                                                                                                                                                 |
|---------------------------------------|----------------------------------------------------------------|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>CONTRACT &amp;<br/>PROCUREMENT</b> | Risk which flow from any contract and procurement arrangements | <b>NO</b>       | The Council has no risk appetite for any contractual or procurement arrangements which may involve serious and organised crime groups                           |
|                                       |                                                                | <b>NO</b>       | The Council has no risk appetite for contract or procurement activity which constitutes a breach of Scottish, UK or European procurement legislation.           |
|                                       |                                                                | <b>MODERATE</b> | Council has a moderate risk appetite in respect of using procurement and contracting arrangements innovatively and creatively to deliver better value for money |

**PERTH AND KINROSS COUNCIL****Scrutiny Committee****8 February 2017****Annual Risk Report 2015/2016****Report by Depute Chief Executive, Environment  
(Sustainability, Strategic and Entrepreneurial Development)**

This report submits the Annual Risk Report 2015/16 for consideration by the Committee.

**1. BACKGROUND/ MAIN ISSUES**

- 1.1 The effective management of risk in the Council's activities is a vital part of supporting the delivery of positive outcomes for Perth and Kinross, and is a key part of the Council's strategic improvement framework.
- 1.2 If we do not manage risk effectively, the consequences can impact on the Council's reputation, its financial position, and safety of staff and the public. However, adopting an approach which is too risk averse can deprive the Council of the opportunities to be innovative and creative, in tackling the considerable challenges facing our public services.
- 1.3 Risk Management is part of the Council's overall governance framework. Governance around local government decision-making and delivery has never been so crucial or complex, as we continue to adapt to changing circumstances and develop more diverse and ambitious ways of working with partners and with our communities.
- 1.4 Elected Members have a key role in managing risks, as well as the scrutiny of Council services in mitigating these risks. This report contains the Annual Risk Report 2015/16, for corporate risks and Service risks (Appendix 1) which demonstrates the activity undertaken to mitigate the corporate and service risks to the Council, up to 31 March 2016. This report was submitted to the Strategic Policy and Resources Committee on 30 November 2016 (Report No: 16/531).
- 1.5 The corporate risks are monitored monthly by the Executive Officer Team, with each risk being presented on a programmed rolling basis, over the year. Service risks are monitored and reviewed as regular items on the agenda of Service Senior Management Teams.

- 1.6 Previously, the Annual Risk Report has been presented to the Strategic Policy and Resources and Scrutiny Committees concurrently with the Risk Management Strategy for the following period, and this was the original intention for this year's report. However due to the increasing pace of public service reform and other factors, a much more intensive review of risk and a new approach to risk is required. This work has been delayed due to the long term absence of a key member of staff leading on this work.
- 1.7 The new Risk Strategy and Framework have been updated to reflect recent changes arising from the Council's Annual Governance Statement, and are being submitted for consideration by the Strategic Policy and Resources Committee and Scrutiny Committee in February 2017.

## 2. CONCLUSION AND RECOMMENDATION

- 2.1 Presentation of the Annual Risk Report gives the Committee an opportunity to review both the subject of corporate and service risks, and the measures being taken to manage these risks.
- 2.2 The Scrutiny Committee is asked to:
- (a) Note the Annual Risk Report for 2015/16, detailed in Appendix 1.

### Author

| Name           | Designation                                                    | Contact Details                                                                                    |
|----------------|----------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| Keith McNamara | Head of Strategic Commissioning and Organisational Development | 01738 475000<br><a href="mailto:TESCommitteeReports@pkc.gov.uk">TESCommitteeReports@pkc.gov.uk</a> |

### Approved

| Name          | Designation                                                                                     | Date            |
|---------------|-------------------------------------------------------------------------------------------------|-----------------|
| Jim Valentine | Depute Chief Executive, Environment (Sustainability, Strategic and Entrepreneurial Development) | 10 January 2017 |

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You can also send us a text message on 07824 498145.

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## 1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

|                                                     |                   |
|-----------------------------------------------------|-------------------|
| <b>Strategic Implications</b>                       | <b>Yes / None</b> |
| Community Plan / Single Outcome Agreement           | <b>Yes</b>        |
| Corporate Plan                                      | <b>Yes</b>        |
| <b>Resource Implications</b>                        |                   |
| Financial                                           | <b>None</b>       |
| Workforce                                           | <b>None</b>       |
| Asset Management (land, property, IST)              | <b>None</b>       |
| <b>Assessments</b>                                  |                   |
| Equality Impact Assessment                          | <b>None</b>       |
| Strategic Environmental Assessment                  | <b>None</b>       |
| Sustainability (community, economic, environmental) | <b>None</b>       |
| Legal and Governance                                | <b>Yes</b>        |
| Risk                                                | <b>Yes</b>        |
| <b>Consultation</b>                                 |                   |
| Internal                                            | <b>Yes</b>        |
| External                                            | <b>None</b>       |
| <b>Communication</b>                                |                   |
| Communications Plan                                 | <b>None</b>       |

### 1. Strategic Implications

#### Community Plan / Single Outcome Agreement/Corporate Plan

- 1.1 This report supports the delivery of the Strategic Objectives within Community Plan/ Single Outcome Agreement 2013-23 and Corporate Plan 2013-18.

### 2. Resource Implications

#### Financial

- 2.1 Not applicable

#### Workforce

- 2.2 Not applicable

#### Asset Management (land, property, IT)

- 2.3 Not applicable

### **3. Assessments**

#### Equality Impact Assessment

- 3.1 Under the Equality Act 2010, the Council is required to eliminate discrimination, advance equality of opportunity, and foster good relations between equality groups. Carrying out Equality Impact Assessments for plans and policies allows the Council to demonstrate that it is meeting these duties.
- 3.2 This report has been considered under the Corporate Equalities Impact Assessment process (EqIA) with the following outcome:
- Assessed as not relevant for the purposes of EqIA

#### Strategic Environmental Assessment

- 3.3 The Environmental Assessment (Scotland) Act 2005 places a duty on the Council to identify and assess the environmental consequences of its proposals. No further action is required as it does not qualify as a PPS as defined by the Act and is therefore exempt.

#### Sustainability

- 3.4 Under the provisions of the Local Government in Scotland Act 2003 the Council has to discharge its duties in a way which contributes to the achievement of sustainable development. In terms of the Climate Change Act, the Council has a general duty to demonstrate its commitment to sustainability and the community, environmental and economic impacts of its actions.
- 3.5 The information contained within this report has been considered under the Act. However, no action is required as the Act does not apply to the matters presented in this report.

#### Legal and Governance

##### Internal

- 3.6 The Head of Legal and Governance has been consulted in the preparation of this report.

##### External

- 3.7 No external consultation was required in the preparation of this report.

##### Risk

- 3.8 This report is entirely related to the management of risk in the organisation

#### **4. Consultation**

##### Internal

- 4.1 The Head of Legal and Governance, Head of Democratic Services and chief Internal Auditor have been consulted in the preparation of this report.

##### External

- 4.2 No external consultation was required.

#### **5. Communication**

- 5.1 Communicating this new approach to risk management will be central to embedding good practice in the organisation. Subject to approval of the report a Communications Plan will be implemented to achieve this objective

#### **2. BACKGROUND PAPERS**

- Report to the Strategic Policy and Resources Committee on 30 November 2016 (Report No: 16/531)

#### **3. APPENDICES**

- Appendix 1 – Annual Risk Report 2015/16





## Appendix 1

# Corporate Risk Report as at 31 March 2016

The report shows the progress update against improvement actions at 31 March 2016. The current position as at November 2016 is shown in the final column.

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| Strength |                                                       |
|----------|-------------------------------------------------------|
| <b>A</b> | Controls are working effectively                      |
| <b>B</b> | Controls require further development                  |
| <b>C</b> | Significant controls not operating effectively        |
| <b>D</b> | Significant controls do not exist or have broken down |

## CORPORATE RISK 1      Support the most vulnerable in our society during welfare reform

The Welfare Reform Act received Royal Assent on 8 March 2012. It introduces a wide range of reforms which aim to make the benefits and tax credits system fairer and simpler. The Council needs to ensure that it implements the changes from reform including helping people to move into and progress in work, while supporting the most vulnerable.

**Relevant Strategic Objectives:** Supporting people to lead independent, healthy and active lives; and promoting a prosperous, inclusive and sustainable economy.

**Risk manager**                      Housing and Community Care  
**Risk impact with controls**        4 - Major  
**Risk probability with controls**    2 - Unlikely  
**Risk control effectiveness**        B - Controls require further development

| Current Internal Controls                                                                                                                                                                                                     | Control Owner                  | Strength | Improvement action and timescale                                                                                                                                                                                         | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                            | Current – as at November 2016 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| <b>Leadership</b>                                                                                                                                                                                                             |                                |          |                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                        |                               |
| Employment Connections Partnership in place to improve access to employment services and opportunities for sustained employment for vulnerable and disadvantaged groups and individuals living in both urban and rural areas. | Head of Planning & Development | <b>A</b> |                                                                                                                                                                                                                          | Employment Connections Partnership dissolved and functions incorporated into the new Economy and Lifelong Learning Outcome Delivery Group which will oversee the delivery of actions including employability.                                                                                                                                                                          |                               |
| Employability Strategy and Action Plan in place.                                                                                                                                                                              | Head of Planning & Development | <b>B</b> | The Growing the Economy Group requested a new Economic Development Strategy in December 2015 to super cede the existing, stand-alone Employability Strategy and asked for it to be completed by the end of October 2016. | <b>In progress.</b> The new Economic Development Strategy and Action Plan are being drafted and should be completed by the end of October 2016. It will then be presented to the Growing the Economy Group before the Outcome Delivery Group and Enterprise and Infrastructure Committee before Christmas 2016. Resource constraints are the biggest risk to this timescale being met. |                               |

**Strength**  
**A** Controls are working effectively  
**B** Controls require further development  
**C** Significant controls not operating effectively  
**D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                                                | Control Owner                             | Strength | Improvement action and timescale | Progress update against improvement actions                                                                                                                                                                                                                                                                 | Current – as at November 2016 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|----------|----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| Perth and Kinross Fuel Poverty Statement and action plan demonstrates the Council's commitment to tackle fuel poverty in Perth and Kinross by 2016.                                      | Head of Housing & Strategic Commissioning | A        |                                  | Perth and Kinross Council and its Partner agencies are taking a number of actions to address levels of fuel poverty and achieve the local outcomes set out within the Local Housing Strategy.<br><br>A revised Local Housing Strategy (2016-2021) was approved at Housing and Health Committee in May 2016. |                               |
| Effective leadership by the EOT, Housing and Community Care Services Management Team and the Council wide working group.                                                                 | Head of Finance & Support Services        | A        |                                  | Timely relevant communications and guidance to all relevant stakeholders is ongoing.                                                                                                                                                                                                                        |                               |
| <b>Management</b>                                                                                                                                                                        |                                           |          |                                  |                                                                                                                                                                                                                                                                                                             |                               |
| Revenues & Benefits and Welfare Rights Business Management and Improvement Plan in place to set out current plans for managing welfare reform. Progress monitored by HCC SMT.            | Head of Finance & Support Services        | A        |                                  | The Joint Welfare Reform Steering Group continues to be the main communication forum. All changes/issues identified are managed with timeous and effective implementation. Universal Credit began to roll out as of 25 April 2016. Plans are in place for both formal and informal, positive audit checks.  |                               |
| Ongoing briefings to staff to raise awareness of current developments in welfare reform and potential impact on the Council.                                                             | Head of Finance & Support Services        | A        |                                  |                                                                                                                                                                                                                                                                                                             |                               |
| Money and welfare advice is available to all tenants, resident household members, sharing owners and housing applicants and provides information and advice on a range of money matters. | Head of Housing & Strategic Commissioning | A        |                                  |                                                                                                                                                                                                                                                                                                             |                               |
| Rent Arrears Steering Group oversees implementation of rent arrears action plan and performance management framework.                                                                    | Head of Housing & Strategic Commissioning | A        |                                  |                                                                                                                                                                                                                                                                                                             |                               |

**Strength**

- A** Controls are working effectively
- B** Controls require further development
- C** Significant controls not operating effectively
- D** Significant controls do not exist or have broken down

## CORPORATE RISK 2      Protect vulnerable adults at risk

Public protection covers a wide range of individuals and communities. The council cannot guarantee the protection of the public as such, but can identify the circumstances and opportunities that are most likely to lead to harm and take steps that can help reduce the risk happening. This corporate risk focuses on the protection of adults at risk. Adults at risk are defined as adults aged 16 years or over who: are unable to safeguard their own well-being, property, rights or other interests; are at risk of harm; and because they are affected by disability, mental disorder, illness, or physical or mental infirmity, are more vulnerable to being harmed than adults who are not so affected.

**Relevant Strategic Objectives:** Supporting people to lead independent, healthy and active lives; and creating a safe and sustainable place for future generations.

**Risk manager**                      Housing and Community Care  
**Risk impact with controls**        5 - Critical  
**Risk probability with controls**    1 - Rare  
**Risk control effectiveness**        A - Controls are working effectively

| Current Internal Controls                                                                                                                                      | Control Owner                             | Strength | Improvement action and timescale                                                                                               | Progress update against improvement actions                                                                                          | Current – as at November 2016 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| <b>Leadership</b>                                                                                                                                              |                                           |          |                                                                                                                                |                                                                                                                                      |                               |
| Chief Social Work Officer post in place to provide clear professional leadership and accountability.                                                           | Chief Executive                           | A        | Chief Social Work Officer's annual report 2015 – October 15<br><br>Chief Social Work Officer's annual report 2016 – October 16 | <b>Completed.</b> The Chief Social Work Officer's annual report was approved by Council on 7 October 2015.<br><br><b>New Action.</b> |                               |
| <b>Management</b>                                                                                                                                              |                                           |          |                                                                                                                                |                                                                                                                                      |                               |
| Strategic performance management and scrutiny arrangements in place, including use of self-evaluation, to ensure quality control and targets are being met.    | Head of Housing & Strategic Commissioning | A        |                                                                                                                                |                                                                                                                                      |                               |
| Training and development of staff at all levels to ensure we have a skilled and competent social care workforce, able to meet the challenges the sector faces. | Senior Corporate Strategy Manager         | A        |                                                                                                                                |                                                                                                                                      |                               |

**Strength**  
**A** Controls are working effectively  
**B** Controls require further development  
**C** Significant controls not operating effectively  
**D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                                                     | Control Owner                                                                  | Strength | Improvement action and timescale                                                                                                                                                                                                              | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Current – as at November 2016                                                                                                                                                                                                                                                                                                                                                                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Audit and improvement processes in place including regular adult support and protection case file audits.                                                                                     | Head of Community Care                                                         | A        | 3 monthly report to Service Management – Ongoing                                                                                                                                                                                              | <b>Ongoing.</b> This is reported to the Service Management on a quarterly basis.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Ongoing public awareness raising around adult and child protection issues to encourage members of the public to report any concerns to the various agencies involved.                         | Head of Community Care/ Head of Services for Children, Young People & Families | A        | Local Engagement Workshop (Protection and Safety) – Ongoing<br><br>Implement the Child Protection Committee improvement plan for 2014/15 – August 15<br><br>Implement the Child Protection Committee improvement plan for 2015-2018 – July 18 | <b>In progress.</b> A communication plan for public awareness over the next year is to be established and a joint working group with the Adult Support and Protection Committee on public protection awareness raising.<br><br><b>Completed.</b> An update to the Improvement Plan was included in the CPC Standards and Quality Report 2014 - 2015, approved by the Children, Young People and Families Partnership in August 2015 and Full Council in October, with significant progress made across the majority of the high-level actions.<br><br><b>New Action.</b> A new three year Child Protection Committee Improvement Plan has been developed for 2015-2018, aligned with the Integrated Children's Services Plan 2013 - 2015. This new plan was approved by the CPC on 26 January 2016. | <b>In progress:</b> A multi-agency Communications Sub Group for Public Protection has been convened and a communications strategy devised to raise public awareness over 2016/17.<br><br>This group reports progress regularly to the Child Protection Committee (CPC) The CPC will consider more localized approaches to raising community awareness and community responsibility for protecting children at its meeting in August 2016. |
| Regular involvement of and feedback from service users to ensure services are designed to meet their needs.                                                                                   | Head of Community Care                                                         | A        |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Disclosure Scotland procedures in place to enhance public safety by protecting vulnerable adults through safer recruitment.                                                                   | Chief Social Work Officer                                                      | A        |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Appropriate Adult Scheme in place to ensure people under 17, or anyone with mental health problems or learning difficulties, has an appropriate adult present when interviewed by the Police. | Head of Community Care                                                         | A        |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                           |

#### Strength

- A** Controls are working effectively
- B** Controls require further development
- C** Significant controls not operating effectively
- D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                                                                                | Control Owner                                                                  | Strength | Improvement action and timescale | Progress update against improvement actions | Current – as at November 2016 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|----------|----------------------------------|---------------------------------------------|-------------------------------|
| Multi Agency Public Protection Arrangements (MAPPA) and Multi-Agency Risk Assessment Conference (MARAC) arrangements are in place to give a consistent approach to the management of offenders across Perth and Kinross. | Head of Community Care/ Head of Services for Children, Young People & Families | A        |                                  |                                             |                               |

#### Strength

|          |                                                       |
|----------|-------------------------------------------------------|
| <b>A</b> | Controls are working effectively                      |
| <b>B</b> | Controls require further development                  |
| <b>C</b> | Significant controls not operating effectively        |
| <b>D</b> | Significant controls do not exist or have broken down |

### CORPORATE RISK 3

### Protect vulnerable children and families

Public protection covers a wide range of individuals and communities. The Council cannot guarantee the protection of the public as such, but can identify the circumstances and opportunities that are most likely to lead to harm and take steps that can help reduce the risk happening. This corporate risk focuses on the protection of vulnerable children and families.

**Relevant Strategic Objectives:** Giving every child the best start in life.

**Risk manager** Education and Children's Services  
**Risk impact with controls** 4 - Major  
**Risk probability with controls** 1 - Rare  
**Risk control effectiveness** B - Controls require further development

| Current Internal Controls                                                                                                                                          | Control Owner                              | Strength | Improvement action and timescale                                      | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Current – as at November 2016 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|----------|-----------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| <b>Leadership</b>                                                                                                                                                  |                                            |          |                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                               |
| Chief Social Work Officer post in place to provide clear professional leadership and accountability.                                                               | Chief Executive                            | <b>A</b> | Chief Social Work Officer's annual report 2015 – October 15           | <b>Complete.</b> This report was approved by Council on 7 October 15 and sent to Scottish Government.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                               |
| Effective leadership of the Children, Young People and Families Partnership (CYP&FP) to ensure we work effectively with our partners to deliver seamless services. | Director (Education & Children's Services) | <b>A</b> | Report progress on the Integrated Children's Services Plan – April 16 | <p><b>In progress.</b> The group has been renamed the Children, Young People and Families Partnership the (CYP&amp;FP) to reflect more fully the remit. It continues to meet four times per year as a minimum.</p> <p>A development workshop took place in May 2015 and key actions agreed which will be incorporated into the Integrated Children's Services Plan (ICSP).</p> <p>The Partnership considered a report on the impact of Health and Social Care Integration.</p> <p>The first six-monthly ICSP progress report was received in August 2015.</p> <p>The new Corporate Parenting Sub-Group will be launched in October with a full day of training by <i>Who Cares? Scotland</i>.</p> |                               |

**Strength**

- A** Controls are working effectively
- B** Controls require further development
- C** Significant controls not operating effectively
- D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                   | Control Owner                                          | Strength | Improvement action and timescale                                                                       | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                        | Current – as at November 2016 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|----------|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| <b>Management</b>                                                                                                                                           |                                                        |          |                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                    |                               |
| Strategic performance management and scrutiny arrangements in place, including use of self-evaluation, to ensure quality control and targets are being met. | Head of Services for Children, Young People & Families | <b>A</b> | Children and Families Services' Management Team to undertake a services self-evaluation – September 15 | <b>Revised timescale – August 2016.</b> A self-evaluation programme has been agreed with Team Leaders focusing on 3 Quality Indicators for services for children from <i>How well are we improving the lives of children and young people?</i> , and services for children which link with areas for improvement highlighted in the Child Protection Committee Standards & Quality Report 2014/15. |                               |
|                                                                                                                                                             |                                                        |          | Further embed improvement and reporting across Children and Families' Services – Ongoing               | <b>In progress.</b> Relevant information has been collated and complied in the Chief Social Work Officer's Report for 2014/15 and considered by Council on 7 October. A revised and improved performance and quality assurance framework is a priority for 2015/16 and the new Service Manager who comes into post in November 2015.                                                               |                               |
|                                                                                                                                                             |                                                        |          | Develop a more detailed quarterly performance management /information framework – April 16             | <b>In progress.</b> Relevant information has been collated and complied in the Chief Social Work Officer's Report for 2014/15 and considered by Council on 7 October. A revised and improved performance and quality assurance framework is a priority for 2015/16 and the new Service Manager who comes into post in November 2015.                                                               |                               |

#### Strength

- A** Controls are working effectively
- B** Controls require further development
- C** Significant controls not operating effectively
- D** Significant controls do not exist or have broken down



| Current Internal Controls                                                          | Control Owner                                                                                     | Strength | Improvement action and timescale                                                               | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Current – as at November 2016                                                                                                                                                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|----------|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Proportionate intervention in line with GIRFEC (Getting it Right for Every Child). | Head of Education (Early Years & Primary)/ Head of Services for Children, Young People & Families | <b>B</b> | Deliver further training for all key staff – Ongoing                                           | <p><b>In progress.</b> Six successful multi-agency locality events for staff and managers took place in November and the content emphasized the importance of GIRFEC in delivering the key objectives set out in the Community Plan and Integrated Children's Services Plan.</p> <p>Implementation of the Tayside-wide single Child's Plan and Guidance on Chronologies across Perth and Kinross has commenced from 18 April 2016. New training programmes are developed to support this and led by the ECS GIRFEC Development Officer and Child Protection Learning and Development Officer. This will be evaluated over the summer and a report prepared for the GIRFEC Strategy Group in September 2016.</p> <p>Staff in Services for Young People will receive training in the Named Person role and GIRFEC approaches.</p> | <b>In progress:</b> A GIRFEC progress report was provided to the Children, Young People and Families Partnership in August 2016 showing that there had been very good progress on made in the plans to deliver a successful GIRFEC approach in Perth and Kinross and that our state of readiness for implementation of Parts 4 and 5 of the Children and Young People (Scotland) Act was high. |
|                                                                                    |                                                                                                   |          | Embed the updated integrated assessment framework across all services (multi agency) – Ongoing | <p><b>In progress.</b> The assessment framework will be reviewed by December 2016 to take account of GIRFEC processes and to reduce, align or streamline the range of meetings which plan for and review progress of children and young people.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>In progress:</b> The assessment framework will be reviewed by December 2016 to take account of GIRFEC processes and to reduce, align or streamline the range of meetings which plan for and review progress of children and young people.                                                                                                                                                   |

#### Strength

- A** Controls are working effectively
- B** Controls require further development
- C** Significant controls not operating effectively
- D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                   | Control Owner                                          | Strength | Improvement action and timescale                                       | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Current – as at November 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|----------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Partnership working with SCRA to reduce delays to processing Children's Hearings and decision making.                                                       | Head of Services for Children, Young People & Families | <b>B</b> | Chair Children's Hearing Performance Group and report issues – Ongoing | <p><b>In progress.</b> Regular meetings take place with the Locality Reporter and Chair of the Children's Panel. Joint training sessions with social workers and panel members are arranged at least once per annum and in March 2016 the focus was Continuing Care and Concurrency which was positive and received well by participants.</p> <p>The adherence to national Time Intervals for the submission of reports to the Children's Reporter has improved and there will be a focus on consolidating this improvement over 2016/17.</p> <p>Two key areas of focus over 2016/17 are the relatively disproportionate referral rate from schools as a single service to the Reporter and closer examination of the reasons which lie behind applications for Child Protection Orders for children with whom Services for Children, Young People and Families are already engaged.</p> | <p><b>In progress:</b> Regular meetings take place with the Locality Reporter and Chair of the Children's Panel. Joint training sessions with social workers and panel members took place in March 2016 with a focus on Continuing Care and Concurrency, which was positive and received well by participants; a further event will take place in November with a focus on decisions about contact with parents.</p> <p>The adherence to national Time Intervals for the submission of Initial Assessment Reports and Social Background Reports to the Children's Reporter improved over 2015/16 and there is a focus on consolidating this improvement over 2016/17.</p> |
|                                                                                                                                                             |                                                        |          | Improvement plan with SCRA – Ongoing                                   | <p><b>In progress.</b> Revision of current guidance to schools in relation to referral to reporter is underway.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Ongoing public awareness raising around child protection issues to encourage members of the public to report any concerns to the various agencies involved. | Head of Services for Children, Young People & Families | <b>A</b> | Local engagement workshop (Protection and safety) – Ongoing            | <p><b>In progress.</b> A Communications Group has been established and meeting regularly with a joint communications plan under development.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <p><b>In progress:</b> A Communications Group has been established for Public Protection and this meets regularly. A joint communications plan is being developed for 2016/17.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |

#### Strength

- A** Controls are working effectively
- B** Controls require further development
- C** Significant controls not operating effectively
- D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                     | Control Owner                                                                      | Strength | Improvement action and timescale                                                                                                                                                                                                                          | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Current – as at November 2016                                                                                                                                                                                                                                                                                                                                                                                   |
|-------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Regular involvement of and feedback from service users to ensure services are designed to meet their needs.                   | Head of Services for Children, Young People and Families                           | <b>B</b> | Develop approaches for increasing engagement with, and feedback from service users – Ongoing<br>Develop a more structured approach to learning from collective views of children who are looked after and subject to a Child Protection Measure – Ongoing | <b>In progress.</b> A self-evaluation of the effectiveness of advocacy support for children who are looked after and/or whose names are included on the child protection register has been carried out. An advocacy working group has been re-established to agree principles and devise new approaches which are more systematic. Service Level Agreements with independent advocacy services will be reviewed over 2016/17 and new services commissioned in line with need and service priorities for children and young people who are looked after or in need of protection. |                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Disclosure Scotland procedures in place to enhance public safety by protecting vulnerable children through safer recruitment. | Chief Social Work Officer                                                          | <b>A</b> | Phased introduction of the Protection of Vulnerable Groups Scheme to replace and improve upon the current disclosure arrangements – Ongoing                                                                                                               | <b>In progress.</b> Initial phasing of the migration is completed and systems are in place to manage PVG checking for new and existing staff members.                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Child protection frameworks in place to ensure the best possible outcomes for vulnerable children.                            | Head of Services for Children, Young People & Families / Chief Social Work Officer | <b>A</b> | Further embed improvement and reporting across Children & Families' Services – Ongoing                                                                                                                                                                    | <b>Completed.</b> From August 2015 – this is reported under the Child Protection Committee Annual Improvement Plan and within the Standards and Quality Report for 2014/15.                                                                                                                                                                                                                                                                                                                                                                                                      | Develop more focussed measures to improve performance in relation to Child Protection Case Conferences – <b>Ongoing</b><br><br><b>In progress:</b> A fixed term post of Independent Chair of Child Protection Case Conferences has been created which will have the responsibility for improvement in this area. The post will be filled in November 2016 and this work will be taken forward by November 2017. |

#### Strength

- A** Controls are working effectively
- B** Controls require further development
- C** Significant controls not operating effectively
- D** Significant controls do not exist or have broken down

## CORPORATE RISK 4 Effectively manage changing financial circumstances

We recognise that our Services need to continue to adapt to meet the changing requirements of our communities and the economic environment. There is a serious risk that the financial climate and increasing demands for services will impact on our ability to deliver our outcome targets and maintain service performance into the future.

**Relevant Strategic Objectives:** Giving every child the best start in life; Developing educated, responsible and informed citizens; Promoting a prosperous, inclusive and sustainable economy; Supporting people to lead independent, healthy and active lives; and Creating a safe and sustainable place for future generations.

**Risk manager** Chief Executive's Service  
**Risk impact with controls** 4 - Major  
**Risk probability with controls** 3 - Possible  
**Risk control effectiveness** B - Controls require further development

| Current Internal Controls                                                                                                                                  | Control Owner                                                       | Strength | Improvement action and timescale                                           | Progress update against improvement actions                                                                                                                                                           | Current – as at November 2016                                                                                                                                                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|----------|----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Leadership</b>                                                                                                                                          |                                                                     |          |                                                                            |                                                                                                                                                                                                       |                                                                                                                                                                                                                 |
| Effective corporate governance and leadership of transformation programme.                                                                                 | Head of Strategic Commissioning & Organisational Development        | A        |                                                                            |                                                                                                                                                                                                       |                                                                                                                                                                                                                 |
| Securing the Future Strategy to support the delivery of savings through revised service delivery models and ongoing improvement activities in the Council. | All Directors                                                       | A        |                                                                            |                                                                                                                                                                                                       |                                                                                                                                                                                                                 |
| Reserves Strategy in place to cushion the impact of uneven cash flow, unexpected events or to meet liabilities.                                            | Head of Finance                                                     | A        |                                                                            |                                                                                                                                                                                                       |                                                                                                                                                                                                                 |
| Corporate Workforce Plan to recruit and retain high quality staff.                                                                                         | Director (Housing & Social Work)/ Corporate Human Resources Manager | A        | Implement Corporate Workforce Plan – improvement actions Ongoing 2013-2018 | <b>In progress.</b> The annual workforce report was approved by the Council in December 2014. Various workstreams are underway. Progress will be included in the next annual report in December 2015. | <b>In progress:</b> The annual workforce report Building Ambitions a 21st Century Workforce described progress at the Council in May 2016. Various recruitment initiatives are in place for hard to fill posts. |
| Medium Term Financial Plan setting out financial direction for the Council.                                                                                | Head of Finance                                                     | A        |                                                                            |                                                                                                                                                                                                       |                                                                                                                                                                                                                 |

**Strength**  
**A** Controls are working effectively  
**B** Controls require further development  
**C** Significant controls not operating effectively  
**D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                                                                                                                        | Control Owner                                                              | Strength | Improvement action and timescale               | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Current – as at November 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|----------|------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A Corporate Asset Management Plan in place to manage the Council's infrastructure, assets and IT.                                                                                                                                                                | Head of Performance & Resources/ Head of Finance & Support Services        | <b>B</b> | Revise Corporate Asset Management Plan         | <p><b>In progress.</b> Asset Management Plans for Roads and Fleet were approved at SP&amp;R Committee in June 2015.</p> <p>Greenspace is scheduled for completion by June 2016.</p> <p>Corporate Asset Management is working with Property colleagues to produce a property asset management plan which is scheduled for completion this year.</p> <p>These updated Asset Management Plans will be utilised to produce an updated Corporate Asset Management Plan to inform the Council's future strategic investment.</p> | <p>In progress. Asset Management Plans for Roads and Fleet were approved at SP&amp;R Committee in June 2015.</p> <p>A Greenspace Asset Management Plan has been drafted but is on hold pending full Council consideration of budget proposals in February 2017 which may impact on the overall greenspace strategy.</p> <p>Corporate Asset Management is working with Property colleagues to produce a property asset management plan in conjunction with the rollout of the property management system, Concerto.</p> <p>Once the stream asset management plans are completed they will be utilised to produce an updated Corporate Asset Management Plan to inform the Council's future strategic investment.</p> |
| <b>Management</b>                                                                                                                                                                                                                                                |                                                                            |          |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Financial and performance management systems in place to monitor progress and highlight any issues which are likely to have a significant impact on the Securing the Future Strategy, Medium Financial Plan, Corporate Workforce Plan and Asset Management Plan. | Head of Finance/ Director (Environment)/ Corporate Human Resources Manager | <b>A</b> | Quarterly monitoring to EOT and MOWG – Ongoing | <b>In progress.</b> Quarterly monitoring to EOT and MOWG undertaken.                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Elected Member cooperation/ collaboration in setting priorities for the future.                                                                                                                                                                                  | Head of Public Service Reform, Culture and Community Development           | <b>A</b> |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Budget monitoring process to highlight issues which may prevent Services from delivering within planned budget.                                                                                                                                                  | Head of Finance                                                            | <b>A</b> |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

**Strength**

- A** Controls are working effectively
- B** Controls require further development
- C** Significant controls not operating effectively
- D** Significant controls do not exist or have broken down

| Current Internal Controls                                                     | Control Owner                                   | Strength | Improvement action and timescale | Progress update against improvement actions                                                                                                                                                                                          | Current – as at November 2016                                                                                                                                                                                                                                                                                                                                                |
|-------------------------------------------------------------------------------|-------------------------------------------------|----------|----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Budget Review Process in line with Transformation Strategy.                   | Head of Finance                                 | A        |                                  |                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                              |
| Effective communication with members of the public around the budget process. | Head of Finance/<br>Head of Democratic Services | A        |                                  | Inclusion in latest issue of Perth & Kinross News, web page developed and added to front page of website and social media messaging/promoted posts scheduled for coming weeks.<br><br>Budget consultation commenced 1 December 2015. | Feature appeared in the Winter 2015 Perth & Kinross News in relation to the online budget calculator and information featured on the website and in social media. An update on the results was then provided in the committee report and the final budget confirmed in a press release on our website, in social media and in the Spring 2016 issue of Perth & Kinross News. |

#### Strength

- A** Controls are working effectively
- B** Controls require further development
- C** Significant controls not operating effectively
- D** Significant controls do not exist or have broken down

## CORPORATE RISK 5      Deliver the Council's Capital Programme

The Council's Capital Programme delivers a wide range of major infrastructure projects. Significant controls are in place to ensure that the Council continues to deliver this programme. Progress and levels of slippage are routinely monitored and scrutinised.

**Relevant Strategic Objectives:** Giving every child the best start in life; Developing educated, responsible and informed citizens; Promoting a prosperous, inclusive and sustainable economy; Supporting people to lead independent, healthy and active lives; and Creating a safe and sustainable place for future generations.

**Risk manager**                      The Environment Service  
**Risk impact with controls**        3 - Major  
**Risk probability with controls**    2 - Unlikely  
**Risk control effectiveness**        B – Controls require further development

| Current Internal Controls                              | Control Owner                                                                      | Strength | Improvement action and timescale            | Progress update against improvement actions                                                                                                              | Current – as at November 2016 |
|--------------------------------------------------------|------------------------------------------------------------------------------------|----------|---------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| <b>Leadership</b>                                      |                                                                                    |          |                                             |                                                                                                                                                          |                               |
| Effective leadership of the delivery of the programme. | Depute Chief Executive (Sustainability, Strategic and Entrepreneurial Development) | <b>A</b> | Implement actions from review - Ongoing     | <b>In progress.</b> Improvements to the delivery of the Capital Programme will continue to be made and monitored.                                        |                               |
| Financial and Service Capital Programmes in place.     | Depute Chief Executive (Sustainability, Strategic and Entrepreneurial Development) | <b>A</b> | Develop Overall Capital Programme – Ongoing | <b>In progress.</b> An overall Capital Programme has been developed which contains information on project management responsibility, budget and phasing. |                               |

**Strength**  
**A** Controls are working effectively  
**B** Controls require further development  
**C** Significant controls not operating effectively  
**D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                                                                                                                                               | Control Owner                                                                    | Strength                                                      | Improvement action and timescale                                                                                                               | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                               | Current – as at November 2016                                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| Draft contract arrangements in place to take due account of the need to ensure probity in the expenditure of public money.                                                                                                                                                              | Head of Legal & Governance Services                                              | <b>B</b><br><br>We may wish to consider downgrading this risk | Further review to be carried out as part of the Best Value Property Review and rolled out for the other types of contracts if agreed – Ongoing | Review of procurement completed December 2015. Implementation of resulting action plan is ongoing<br><br>A revision of the Council Contract Rules and Guidance has commenced. Due for completion by March 2017.<br><br>A Contracts Review Panel comprising the Head of Legal & Governance Services, the Chief Accountant and the Corporate Procurement Manager now fulfils the role originally envisaged for the Strategic Advisory Group .<br><br><b>Action Complete</b> |                                                                                      |
| Financial regulations in place to ensure that contract arrangements take due account of the need to ensure probity in the expenditure of public money.                                                                                                                                  | Head of Finance                                                                  | <b>A</b>                                                      |                                                                                                                                                | Biennial review to commence in 2016.                                                                                                                                                                                                                                                                                                                                                                                                                                      | The updated Financial Regulations will be considered by Council on 14 December 2016. |
| <b>Management</b>                                                                                                                                                                                                                                                                       |                                                                                  |                                                               |                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                      |
| Effective scrutiny arrangements in place to enable officers to monitor performance of Capital programme to achieve delivery. Performance arrangements established to confirm performance to EOT, Strategic Investment Group (SIG), SMTs, Corporate Resources Group (CRG) and Committee. | Depute Chief Executive Sustainability, Strategic and Entrepreneurial Development | <b>B</b>                                                      |                                                                                                                                                | <b>In progress.</b> Reports are considered by SIG on a bi-monthly basis.<br><br>SP&R Committee approved revised report criteria (report 15/396 refers) on 23 September 2015 for the initial officer assessment of capital funded projects and revised business case templates for capital funded projects.                                                                                                                                                                |                                                                                      |
| A Programme Board for the programme (CRG) has been approved by EOT to monitor progress against key targets and milestones and highlight any issues which are likely to have an impact on the plan.                                                                                      | Depute Chief Executive Sustainability, Strategic and Entrepreneurial Development | <b>B</b>                                                      |                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                      |

**Strength**

- A** Controls are working effectively
- B** Controls require further development
- C** Significant controls not operating effectively
- D** Significant controls do not exist or have broken down



**CORPORATE RISK 6****Maintain security of information and prevent public sector fraud and corruption**

In response to Police Scotland advice, it is proposed that there is a new corporate risk around prevention of public sector fraud and corruption. This includes insider corruption through bribery or intimidation. Better prevention, detection and systems to prevent public sector corruption across all Council Services is essential to our approach to dealing with the current financial pressures we face. In addition, risks are identified in relation to cyber security and maintaining the safety of the Council's information.

**Relevant Strategic Objectives:** Giving every child the best start in life; Developing educated, responsible and informed citizens; Promoting a prosperous, inclusive and sustainable economy; Supporting people to lead independent, healthy and active lives; and Creating a safe and sustainable place for future generations.

**Risk manager** Housing and Community Care  
**Risk impact with controls** 4 - Major  
**Risk probability with controls** 3 - Possible  
**Risk control effectiveness** B - Controls require further development

| Current Internal Controls                                                                                                                                                                                         | Control Owner                                        | Strength | Improvement action and timescale                                                                                     | Progress update against improvement actions                                                                                                                                                                                                   | Current – as at November 2016                                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| <b>Leadership</b>                                                                                                                                                                                                 |                                                      |          |                                                                                                                      |                                                                                                                                                                                                                                               |                                                                 |
| Fraud and Corruption Policy 2006 sets out the arrangements put in place by the Council to ensure members, employees and contractors behave with honesty and integrity in all their actions in the public service. | Head of Legal & Governance Services/ Head of Finance | <b>B</b> | Training provided to staff to ensure they are aware of how the new policy will apply in the work place – December 15 | <b>Revised Timescale – December 16.</b> The high level risk assessments have now been completed for the Services. Counter Fraud and Corruption elearning packages are being reviewed with a view to rolling these out throughout the Council. |                                                                 |
| Information Management Strategy.                                                                                                                                                                                  | Head of Legal & Governance Services                  | <b>B</b> | Strategy to be re-drafted. Final version to be in place – March 16                                                   | <b>Revised Timescale – March 17.</b> Development of the Information Management Strategy has begun.                                                                                                                                            | Development of the Information Management Strategy is underway. |
| Contract rules provide policy and guidance on contract and tendering activity.                                                                                                                                    | Head of Legal & Governance Services                  | <b>A</b> |                                                                                                                      |                                                                                                                                                                                                                                               |                                                                 |

**Key:****Strength**

- A** Controls are working effectively
- B** Controls require further development
- C** Significant controls not operating effectively
- D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                                                     | Control Owner                                       | Strength | Improvement action and timescale                                                                                                                                                                                                                                    | Progress update against improvement actions                                                                                                                                                                                                    | Current – as at November 2016                                                                                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Councillor's Code of Conduct sets out the standards of behaviour expected of Councillors in Perth and Kinross including gifts and hospitality, use of Council resources and personal conduct. | Head of Legal & Governance Services                 | A        |                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                |                                                                                                                                                                                                     |
| Employees' Code of Conduct sets out the standards of behaviour expected of Council employees including gifts and hospitality, use of Council resources and personal conduct.                  | Corporate Human Resources Manager                   | A        | Roll out of updated e-learning module – October 15                                                                                                                                                                                                                  | <b>Revised timescale - March 16.</b> The employee Code of Conduct and accompanying managers' guidance has been implemented since 2014. The new version of the e-learning module is due to be rolled out.                                       | <b>Complete:</b> eLearning Module was deployed in March 2016 with the move to Brightwave elearning. An Inside News Bulletin was issued to employees on 2 March promoting the new e-learning module. |
| Gifts and Hospitality Policy and Procedures introduced in 2011 to supplement the rules set out in the Council's Financial Regulations and Employee Code of Conduct.                           | Head of Legal & Governance Services                 | A        |                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                |                                                                                                                                                                                                     |
| Participation in the National Fraud Initiative and arrangements in place for investigating and reporting data matches identified by NFI.                                                      | Head of Finance/ Head of Finance & Support Services | A        | Undertake data matching exercise using the electoral register to detect any potential fraud – March 16                                                                                                                                                              | <b>In progress.</b> Data matching is well progressed. Information will be available in March 2016 in respect of the initiative.                                                                                                                | <b>Complete:</b> All work associated with Housing Benefit has been completed. The next data matching information is expected in November 2016 and appropriate plans are in place.                   |
| <b>Management</b>                                                                                                                                                                             |                                                     |          |                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                |                                                                                                                                                                                                     |
| Counter Corruption Group established to ensure collaboration with Police Scotland and other agencies with an anti-crime role.                                                                 | Director (Housing & Community Care)                 | B        | Continue to maintain the Integrity Group within the Community Planning structure at a tactical level reporting to the thematic head for Community Safety who will report to the Community Safety and Environment Delivery Group and thereafter to the CPP - Ongoing | <b>In progress.</b> Governance arrangements include an Integrity Group chaired by the Director (Housing & Community Care) with a remit to reduce organisational vulnerabilities across services and functions through a preventative approach. |                                                                                                                                                                                                     |

**Key:**

**Strength**

- A** Controls are working effectively
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- D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                                                             | Control Owner                       | Strength | Improvement action and timescale                                                                                                                                                        | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                | Current – as at November 2016                                                                                                                                                                                                                                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Corporate Policy and Governance Group in place.                                                                                                                                                       | Head of Legal & Governance Services | A        |                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                       |
| Risk based internal audit plan is prepared annually to provide assurance on the operation of control systems which are designed to detect fraud and irregularities.                                   | Head of Finance                     | A        |                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                       |
| Whistleblowing Procedures.                                                                                                                                                                            | Head of Finance                     | A        | Risk assessment training – December 15                                                                                                                                                  | <b>Revised timescale - April 16.</b> The risk assessment framework is currently being piloted. The risk assessment exercise was due to be completed by 31 December 2015, however, two Services have yet to complete risk assessments and have been requested to do so as a matter of urgency. Once complete and analysed, training will be procured and rolled out throughout the Council. | <b>Revised timescale:</b> December 16. The high level risk assessments have now been completed for the Services. Counter Fraud and Corruption elearning packages are being reviewed with a view to rolling these out throughout the Council.                                                                                          |
| Written procedures are in place for all significant Council activities, that incorporate the appropriate internal controls to deter fraud or corruption.                                              | Head of Finance                     | B        | This should form part of service risk assessments. In addition, as part of internal audit reviews, these controls will be examined and tested for adequacy and effectiveness – ongoing. | <b>In Progress</b> – this action will remain ongoing for the foreseeable future                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                       |
| High standards in the recruitment, training and development of employees in order to ensure that all are able to reinforce the high ethical standards of the Council by their leadership and example. | Corporate Human Resources Manager   | A        | Review the Council's Recruitment Selection Policy and procedures including processes for vetting/screening employees – 2015                                                             | <b>Revised timescale - March 16.</b> The Council's Safer Recruitment Toolkit has been refreshed and is about to be piloted by Children & Families. Eric recruitment page to be relaunched.                                                                                                                                                                                                 | <b>Revised timescale:</b> 31 October 2016<br>PKC is participating in the Care Inspectorate/SSSC working group revising the national guidelines for safer recruitment, launching 31 October 2016. PKC toolkit and Eric recruitment page will be relaunched to coincide with national launch. Pilot carried out in Children & Families. |

**Key:**

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| Current Internal Controls                                                                                            | Control Owner                                                       | Strength | Improvement action and timescale                                                                | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                             | Current – as at November 2016                                                                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|----------|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                      |                                                                     |          | Revise corporate induction programme to highlight employee responsibilities in this area – 2015 | <p><b>Revised timescale - Ongoing.</b> A refreshed Corporate Induction Programme was launched in November 2015 including updated Eric pages and a digital induction guide.</p> <p>Quarterly half day corporate induction events and monthly learning lunches aimed at managers providing a welcoming, supportive induction for new employees are currently ongoing.</p> | <b>Complete:</b> Half day corporate induction events will continue to take place on a quarterly basis. Monthly learning lunches will continue to be offered to managers to support them with induction of new employees. |
| Arrangements in place for the management of information risk including an information security policy and standards. | Senior Information Risk Owner / Head of Legal & Governance Services | A        | Maintain PSN Compliance annually – September 15                                                 | <b>Completed.</b> This action is complete and will continue to be subject to ongoing monitoring and review.                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                          |
|                                                                                                                      |                                                                     |          | Awareness raising sessions and training programme – Ongoing                                     | <b>In progress.</b> The Information Security page on Eric has been amended to include general items of information security news. The Information Security e-learning module will be reviewed following its implementation in the Council's new e-learning system.                                                                                                      |                                                                                                                                                                                                                          |

**Key:  
Strength**

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**CORPORATE RISK 7****Ensure the health, safety and wellbeing of Council employees and those who are affected by the Council's work**

Perth and Kinross Council recognises its responsibilities and obligations to ensure, so far as reasonably practicable, the health, safety and wellbeing of all employees and other persons who might be affected by the Council's undertakings in accordance with the Health & Safety at Work etc. Act 1974 and associated legislation. Maintaining these health and safety standards is a key area of risk for all Council Services.

**Relevant Strategic Objectives:** Creating a safe and sustainable place for future generations.

**Risk manager**

The Environment Service

**Risk impact with controls**

4 - Major

**Risk probability with controls**

2 - Unlikely

**Risk control effectiveness**

B - Controls require further development

| Current Internal Controls                                                                                                                                                                                                                                                                               | Control Owner                   | Strength | Improvement action and timescale | Progress update against improvement actions | Current – as at November 2016 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|----------|----------------------------------|---------------------------------------------|-------------------------------|
| <b>Leadership</b>                                                                                                                                                                                                                                                                                       |                                 |          |                                  |                                             |                               |
| Corporate Health Safety and Wellbeing Consultative Committee provides direction, a means of regular consultation between Perth & Kinross Council elected members, Chief Officers and employees through trade union representatives and a forum for the discussion of corporate health & safety matters. | Head of Performance & Resources | A        |                                  |                                             |                               |
| Health, Safety and Wellbeing – Occupational Health and Safety Policy sets out how Perth & Kinross Council manages the health, safety and wellbeing of its employees and those who are affected by the organisation's work.                                                                              | Head of Performance & Resources | A        |                                  |                                             |                               |

**Key:****Strength**

- A** Controls are working effectively
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| Current Internal Controls                                                                                                                                                                                                                                    | Control Owner                   | Strength | Improvement action and timescale | Progress update against improvement actions | Current – as at November 2016 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|----------|----------------------------------|---------------------------------------------|-------------------------------|
| <b>Management</b>                                                                                                                                                                                                                                            |                                 |          |                                  |                                             |                               |
| Two monthly reporting to the Executive Officer Team on health & safety issues and policy ensures that Council's overall approach to health and safety is rigorously monitored and reviewed.                                                                  | Head of Performance & Resources | A        |                                  |                                             |                               |
| The Corporate Management Group has a strategic role to manage and improve health & safety performance.                                                                                                                                                       | Head of Performance & Resources | A        |                                  |                                             |                               |
| Performance is reported as part of Corporate and Service level annual health & safety reports and quarterly reports to Service Management Teams, Corporate Management Group, Executive Officer Team and Health, Safety and Wellbeing Consultative Committee. | Head of Performance & Resources | A        |                                  |                                             |                               |
| Service Health and Safety Consultative arrangements provide a means of regular consultation between Service Management representatives and employees, providing a forum for the discussion of Service health & safety matters.                               | Head of Performance & Resources | A        |                                  |                                             |                               |

**Key:**

**Strength**

- A** Controls are working effectively
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- D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                                                                                                                   | Control Owner                   | Strength | Improvement action and timescale                                                                                                                          | Progress update against improvement actions                                                                                                                                                                                                                     | Current – as at November 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Occupational Health Policy promotes good health at work through health screening and surveillance and preventative medical services as well as health promotion and education initiatives as appropriate.                                                   | Head of Performance & Resources | A        |                                                                                                                                                           |                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Additional Management Arrangements and procedures where appropriate provide details of responsibilities in relation to topic specific hazards.                                                                                                              | Head of Performance & Resources | A        | Implementation of management arrangements – Ongoing                                                                                                       | <b>In progress.</b> Management arrangements are in place on an ongoing basis.                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Health & Safety Team Co-ordinators have been identified as being responsible for ensuring activities and workplaces are assessed to identify risks and determine the suitability of preventative measures put in place and to develop Safe Systems of Work. | Head of Performance & Resources | B        | Introduce and develop health and safety performance records that will clearly identify service responsibilities and use these records as an auditing tool | <b>In progress.</b> Each service has a programme of individual risk profile exercises which are complete. Performance Monitoring Records issued by March 2016.<br><br>Performance Monitoring Records have been issued to all Health & Safety Team Coordinators. | <b>In progress:</b> Performance monitoring records all issued to Health and Safety Team Co-ordinators.<br><br>All services assessed by Health, Safety & Wellbeing as per the information provided in their risk profile – high, med-high, medium, low medium, low. All high and med-high services will have an interim visit by an advisor to review progress of the service's highest risk areas by December 2016.<br><br>Visits to those assessed as medium risk to commence January 2017. |
| The training needs of all employees are regularly assessed using the employee review and development scheme and where appropriate information, instruction and training on health & safety matters are provided.                                            | Head of Performance & Resources | A        |                                                                                                                                                           |                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

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| Current Internal Controls                                                                                                                                                                         | Control Owner                   | Strength | Improvement action and timescale                                                                        | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Current – as at November 2016                                                                                                                                                                                                                                                                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|----------|---------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| The effective communication, by managers, of policies, procedures and safe working practice assist in achieving high standards of health & safety performance.                                    | Head of Performance & Resources | A        | Build on existing practices under the new management arrangements – Ongoing                             | <b>In progress.</b> Policies, procedures and safe working practices are regularly reviewed.                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                             |
| Council premises remain safe through appropriate repair, maintenance, inspection, examination and testing regimes.                                                                                | Head of Property                | B        | A review of all property compliance has been undertaken with a number of improvement actions identified | <b>In progress.</b> The Compliance Team has formally been established since late summer 2015. A review of all contracts and specifications has been undertaken leading to a revised contract strategy being proposed. Associated with this - all existing contracts are extended and the specifications reviewed and refreshed to deliver the appropriate level and quality of service. Legionella, gas safety and fire risk assessments are in place.<br><br>The revised contract strategy is planned to be implemented in October 2016. | Existing compliance contracts have now been extended to terminate on 31 March 2017; new contracts have been tendered and bids are currently being assessed to commence on 1 April 2017.                                                                                                                                                                     |
| Corporate Health, Safety & Wellbeing Team provides advice and supports the preparation, formulation, development, monitoring and auditing of health & safety arrangements throughout the Council. | Head of Performance & Resources | B        | Start a Review Programme following the introduction of Health and Safety Performance Records.           | <b>In progress.</b> Review programme to monitor compliance to commence in May 2016.                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>In progress.</b> Interim reviews started in May 2016 looking at all high and high/medium risk activities. These will continue until the end of the financial year (April 2017).<br><br>Thereafter a full review and reporting process will be implemented to fit with the Corporate Health, Safety and Wellbeing Consultative Committee quarterly cycle. |

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**CORPORATE RISK 8      Effective corporate governance**

As a public body, the Council is required to operate to the highest possible standards, is subject to scrutiny by other bodies and is accountable to the public. The Council must conduct its business in accordance with the law and ensure that public money is safeguarded, properly accounted for, and used appropriately. To fulfil these duties, the Council has put in place arrangements for the governance of its affairs.

**Relevant Strategic Objectives:** Giving every child the best start in life; Developing educated, responsible and informed citizens; Promoting a prosperous, inclusive and sustainable economy; Supporting people to lead independent, healthy and active lives; and Creating a safe and sustainable place for future generations.

|                                       |                                          |
|---------------------------------------|------------------------------------------|
| <b>Risk manager</b>                   | The Chief Executive's Service            |
| <b>Risk impact with controls</b>      | 5 - Critical                             |
| <b>Risk probability with controls</b> | 1 - Rare                                 |
| <b>Risk control effectiveness</b>     | B - Controls require further development |

| Current Internal Controls                                                                                                                                          | Control Owner   | Strength | Improvement action and timescale                                                                                                                                                                                     | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Current – as at November 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
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| <b>Leadership</b>                                                                                                                                                  |                 |          |                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Perth and Kinross Council Corporate Plan 2013-18 sets out the vision for the area and how the Council will deliver on its strategic objectives and local outcomes. | Chief Executive | A        | <p>Review of Corporate Governance – 30 April 16</p><br><br><br><br><br><br><br><p>Review of Corporate Governance – 31 December 16</p><br><br><br><br><br><br><br><p>Review of Corporate Governance – 31 March 17</p> | <p><b>In Progress.</b> A phased programme of review activity is planned.</p> <p>Phase 1:</p> <ul style="list-style-type: none"> <li>• Redesign internal Governance Assurance Process</li> <li>• Develop governance framework for Integrated Joint Board</li> <li>• Review / revise governance arrangements for ALEOs to bring within scope of AGS assurance process</li> <li>• Develop new Local Code on Following the Public Pound</li> <li>• Revise remit of Policy &amp; Governance Group</li> </ul> <p>Phase 2:</p> <ul style="list-style-type: none"> <li>• Review of contract commissioning, monitoring and management arrangements</li> <li>• Review Following the Public Pound arrangements across all services</li> </ul> <p>Phase 3:</p> <ul style="list-style-type: none"> <li>• Review the remit of audit and scrutiny functions to encompass performance aspect of governance as well as compliance</li> </ul> | <p><b>On target:</b> 31 March 2017. Phase 1 of the review was complete in June 2016. Phase 2 of the review is currently in progress. The review is on target to meet the deadline of 30 March 2017. Phase 2 and 3 are on target. Phase 2 has commenced.</p> <p>Phase 2:</p> <ul style="list-style-type: none"> <li>• Review of contract commissioning, monitoring and management arrangements</li> <li>• Review Following the Public Pound arrangements across all services</li> </ul> <p>Phase 3:</p> <ul style="list-style-type: none"> <li>• Review the remit of audit and scrutiny functions to encompass performance aspect of governance as well as compliance</li> <li>• Refresh Council's Local Code of Corporate Governance</li> <li>• Review key policies and processes to align with the principles of the International Framework of Good</li> </ul> |

**Key:**  
**Strength**

|          |                                                       |
|----------|-------------------------------------------------------|
| <b>A</b> | Controls are working effectively                      |
| <b>B</b> | Controls require further development                  |
| <b>C</b> | Significant controls not operating effectively        |
| <b>D</b> | Significant controls do not exist or have broken down |

| Current Internal Controls                                                                                                                                   | Control Owner   | Strength | Improvement action and timescale                                                                                                                                                                                             | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Current – as at November 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                             |                 |          |                                                                                                                                                                                                                              | <ul style="list-style-type: none"> <li>Refresh Council's Local Code of Corporate Governance</li> <li>Review key policies and processes to align with the principles of the International Framework of Good Governance in the Public Sector</li> <li>Develop information management strategy</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <ul style="list-style-type: none"> <li>Governance in the Public Sector</li> <li>Develop information management strategy</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                     |
| Perth and Kinross Community Plan/ SOA 2013-23 sets out the shared vision for the area and how the Council will work with other Community Planning Partners. | Chief Executive | A        | <p>Develop joint resourcing arrangements across the CPP – December 15</p> <p>Implement recommendations from the Community Empowerment Working Group to strengthen community insight to SOA delivery processes – April 16</p> | <p>The joint resourcing pilot in Eastern Perthshire has developed and is implementing an action plan to deliver service improvements for workless households in the locality. Outcome Delivery Plans 2015/16 have been delivered and have provided six monthly updates to CPP Board. These will continue to be delivered in 2016/17 with updates to CPP Board. A series of workshops were held with elected members in November and December to discuss the Community Empowerment Act and plans for Local Community Planning Partnerships. A workshop with elected members and Heads of Service was held on 8 March to carry out scenario planning for the Local Community Planning Partnership arrangements.</p> <p><b>Revised timescale</b> – September 16. Joint resourcing is in progress within Eastern Perthshire, and will be rolled out to the rest of the localities.</p> <p><b>In progress.</b> Plans for Local Community Planning Partnerships are advancing with a start date of April 2016. Initial meetings, which will involve elected members, community reps and services will examine the SOA in relation to the locality and Story of Pace. Governance, Organisational Development and Communications currently being developed and implemented.</p> <p><b>Revised timescale</b> – June 16. Draft statutory guidance for the Community Empowerment Act have been received late March 16, for consultation. A response to the consultation is currently being prepared.</p> | <p><b>In progress.</b> Joint Resourcing Pilot reported progress to CPP Boards in April and September and the Economy and Lifelong Learning ODG. Recommendations were approved by both and a detailed action plan is being implemented alongside service improvement work with front line workers in Blairgowrie and Rattray.</p> <p>Action Partnerships have been established with the first meeting commenced in October 2016.</p> <p>The Council responded to the draft regulations and finalised regulation has been published.</p> |

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| Current Internal Controls                                                                                                                                                                                             | Control Owner               | Strength | Improvement action and timescale                                                                       | Progress update against improvement actions                                                                                                                                                                                   | Current – as at November 2016                                                                                                                                                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                       |                             |          | Develop proposals for local Community Planning arrangements – April 16                                 |                                                                                                                                                                                                                               | Arrangements are now in place.                                                                                                                                                                                            |
| Medium Term Financial Plan.                                                                                                                                                                                           | Head of Finance             | A        |                                                                                                        |                                                                                                                                                                                                                               |                                                                                                                                                                                                                           |
| Local Code of Corporate Governance sets out the decision-making processes of the Council, scrutiny and the role of statutory officers.                                                                                | Chief Executive             | B        | Ensure staff and elected members understand the overarching nature of corporate governance – Ongoing   | <b>In progress</b> – The Local Code of Corporate Governance will be refreshed in the final phase of the wider review of Corporate Governance once other governance review actions have been implemented– Timescale March 2017 | <b>Revised timescale:</b> March 2017. The Local Code of Corporate Governance will be refreshed in the final phase of the wider review of Corporate Governance once other governance review actions have been implemented. |
| Scheme of Administration sets out membership, powers and responsibilities of the Council's committees, sub-committees and working groups and lists areas where the Council has delegated decision-making to officers. | Head of Democratic Services | A        | Review Scheme to better reflect community planning responsibilities – December 15                      | <b>Revised timescale – June 16.</b>                                                                                                                                                                                           | <b>Revised timescale – December 16.</b>                                                                                                                                                                                   |
| Standing Orders set out rules for the regulation of proceedings and business of the Council and its Committees/Sub-Committees.                                                                                        | Head of Democratic Services | A        | Review Standing Orders to ensure they remain relevant and fit for purpose – December 15                | <b>Revised timescale – June 16.</b>                                                                                                                                                                                           | <b>Revised timescale – December 16.</b>                                                                                                                                                                                   |
| Protocol for Member/ Officer Relations.                                                                                                                                                                               | Head of Democratic Services | A        | Ensure elected members and staff are aware of the protocol and requirement to abide by it – January 16 | <b>Revised timescale – 31 March 16.</b>                                                                                                                                                                                       | <b>Complete</b>                                                                                                                                                                                                           |

**Key:**

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| Current Internal Controls                                                                                                                                                                                         | Control Owner                                       | Strength | Improvement action and timescale                                                                                     | Progress update against improvement actions                                                                                                                                                                                                                                                                                                         | Current – as at November 2016                                                                                              |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Councillor's Code of Conduct sets out the standards of behaviour expected of Councillors in Perth and Kinross including gifts and hospitality, use of Council resources and personal conduct.                     | Head of Legal & Governance Services                 | A        |                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                            |
| Contract rules provide policy and guidance on contract and tendering activity.                                                                                                                                    | Head of Legal Services                              | A        | Revise policy against new procurement legislation – March 16                                                         | <b>Revised timescale</b> – 31 July 16. The new regulations are still to be published but it is hoped that these will be available in April 2016. Revised timescale of end July 2016 covers revision of contract rules, guidance and all other documentation.                                                                                        | <b>Revised timescale:</b> February 2017. New rules have been drafted, but require further input from the Procurement Team. |
| Financial regulations in place to ensure that contract arrangements take due account of the need to ensure probity in the expenditure of public money.                                                            | Head of Finance                                     | A        |                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                            |
| Fraud and Corruption Policy 2006 sets out the arrangements put in place by the Council to ensure members, employees and contractors behave with honesty and integrity in all their actions in the public Service. | Head of Legal & Governance Services/Head of Finance | B        | Training provided to staff to ensure they are aware of how the new policy will apply in the work place – December 15 | <b>Revised Timescale – December 16.</b> The high level risk assessments have now been completed for the Services. Counter Fraud and Corruption elearning packages are being reviewed with a view to rolling these out throughout the Council.                                                                                                       | <b>Revised timescale:</b> March 2017. Rolling out of training.                                                             |
| Whistleblowing Procedures.                                                                                                                                                                                        | Head of Finance                                     | A        | Include Whistleblowing procedures in e-learning module – July 16                                                     | <b>New action.</b> Whistleblowing procedures are in place. The procedures will be included within the CIPFA e-learning module referred to above.                                                                                                                                                                                                    |                                                                                                                            |
| Employees' Code of Conduct sets out the standards of behaviour expected of Council employees including gifts and hospitality, use of Council resources and personal conduct.                                      | Corporate Human Resources Manager                   | A        | Consultation with Trade Unions concluded on e-learning module – April 15.                                            | <b>Completed.</b> Delay due to roll out of Brightwave. Inside News Bulletin issued 2 March 2016. All employees and other workers who carry out work for or on behalf of the Council should complete the Employee Code of Conduct eLearning module which is now available and can be found in 'PKC Essentials' on Learn Innovate Grow online (LIGo). |                                                                                                                            |

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**B** Controls require further development  
**C** Significant controls not operating effectively  
**D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                                                        | Control Owner                       | Strength | Improvement action and timescale                                    | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Current – as at November 2016                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|----------|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Code of Guidance on Following the Public Pound.                                                                                                                                                  | Head of Legal & Governance Services | A        | Working group currently working on simplifying the rules – March 16 | <p><b>In progress.</b> It is still anticipated that a final draft will be complete by 31 March 2016 for submission to the EOT.</p> <p>Initial scope of improvement has been extended to ensure more effective governance around FPP spend in light of the amount of spend identified in 2014/15 annual report (approx. £10M distributed to 200+ organisations).</p> <p>New Draft Code of Guidance being further reviewed in light of anticipated changes to procurement legislation.</p> <p>Practical toolkit is being developed to complement the Code and assist Officers.</p> <p>Review of existing FPP arrangements across the organisation to be reviewed to ensure alignment with commissioning and procurement legislation and good practice.</p> | <p><b>Complete:</b> the Code of Guidance is complete and has been approved by SP&amp;R</p> <p><b>In Progress:</b> the review of existing FPP arrangements across the organisation are under review in conjunction with the Corporate Procurement Manager.</p> |
| <b>Management</b>                                                                                                                                                                                |                                     |          |                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                               |
| The Chief Executive and Executive Officer Team meet every two weeks as the Executive Officer Team; and the Chief Executive and Depute Chief Executives meet weekly as the Chief Executive Group. | Chief Executive                     | A        |                                                                     | These meetings continue to be held on an ongoing basis.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                               |
| Strategic Investment Group monitors all capital projects and meets on an eight weekly basis.                                                                                                     | Chief Executive                     | A        |                                                                     | The Strategic Investment Group continues to meet on an 8 weekly basis.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                               |

**Key:**  
**Strength**

**A** Controls are working effectively  
**B** Controls require further development  
**C** Significant controls not operating effectively  
**D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                                    | Control Owner                                                  | Strength | Improvement action and timescale                                       | Progress update against improvement actions                                                                                                                                     | Current – as at November 2016                                                                                                                          |
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| Directors and Heads of Service meet as the Corporate Management Group which has a key role in the development and implementation of Council strategy and policy.             | Directors                                                      | A        | Corporate Management Group development programme in place – January 16 | <b>Completed.</b> A programme of meetings is in place. Some of these meetings will be used to facilitate the Senior Leadership Development Programme that has been established. |                                                                                                                                                        |
| Corporate Policy and Governance Group in place.                                                                                                                              | Head of Legal & Governance Services                            | A        |                                                                        |                                                                                                                                                                                 |                                                                                                                                                        |
| Performance and risk management framework in place against the Corporate Plan and Community Plan/SOA including annual report to Council and monthly reports to EOT.          | Head of Strategic Commissioning and Organisational Development | A        |                                                                        |                                                                                                                                                                                 |                                                                                                                                                        |
| Corporate Risk Management Strategy identifies the key areas of risk linked to delivery of the Council's strategic objectives and how these are being managed by the Council. | Head of Strategic Commissioning and Organisational Development | A        | Review of Risk – June 16                                               | <b>New Action.</b> Review of Risk underway. Findings to be incorporated with Annual Report scheduled for SP&R Committee in June 16.                                             | <b>In Progress:</b> Annual Risk report to go to SP&R Committee in November 2016. New Risk Strategy to go to SP&R/Scrutiny Committees in February 2017. |
| Service Business Management and Improvement Plans underpin Council's key strategic documents which are reported on six monthly.                                              | Head of Strategic Commissioning and Organisational Development | A        |                                                                        |                                                                                                                                                                                 |                                                                                                                                                        |

**Key:**  
**Strength**

**A** Controls are working effectively  
**B** Controls require further development  
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**D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                                                                                                   | Control Owner               | Strength | Improvement action and timescale                                                                                                                                                                        | Progress update against improvement actions                                                                                                                                                                                                             | Current – as at November 2016 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| Budget Review Process in line with Transformation Strategy. Service Revenue Budget proposals are updated to reflect progress on the delivery of the Council's Transformation Strategy.                                                      | Head of Finance             | A        |                                                                                                                                                                                                         | The three year Revenue Budget was approved at Council on 11 February 2016.                                                                                                                                                                              |                               |
| Budget monitoring process to highlight issues which may prevent Services from delivering within planned budget.                                                                                                                             | Head of Finance             | A        | Continued regular revenue and capital monitoring reporting to the Strategic Policy and Resources Committee and the Executive Officer Team. Reports to Committee – February, April, October and December | <b>In progress.</b> Revenue Monitoring Reports for 2015/16 were considered by SP&R Committee on 23 September 2015, 2 December 2015 and 10 February 2016. The next report to Committee will be on 20 April 2016.                                         | Report to SP&R in April 2016. |
| Signed agreements and monitoring arrangements in place with external agencies for services provided: This includes regular reporting to Service Senior Management Teams and the Purchased Services Board within Housing and Community Care. | Directors                   | A        | Review client monitoring arrangements in place with Live Active Leisure and Horsecross – Ongoing                                                                                                        | <b>In progress.</b> Longer term client monitoring arrangements are being reviewed in context of wider review of procurement and contracting processes across ECS. Interim Change Manager is monitoring both Live Active Leisure and Horsecross pro tem. |                               |
| Mechanisms in place for effective communication/ collaboration with elected members in setting priorities for the future and informing policy.                                                                                              | Head of Democratic Services | A        | Review the member development programme to ensure members are fully informed of the public sector reform agenda – Ongoing                                                                               | <b>Completed.</b> Now in implementation phase.                                                                                                                                                                                                          |                               |

**Key:**  
**Strength**

**A** Controls are working effectively  
**B** Controls require further development  
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**D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                           | Control Owner                                                      | Strength | Improvement action and timescale                                                                                                                                                              | Progress update against improvement actions                                                                                                                                                                    | Current – as at November 2016                                                                                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Risk based internal audit plan is prepared annually to provide assurance on the operation of control systems which are designed to detect fraud and irregularities. | Head of Finance                                                    | A        | Internal Audit will complete its approved plan on time and will continually evaluate any changes to the control environment - Ongoing                                                         | <b>In progress.</b> This is an end of year target. Currently on schedule for completion by 31 March 16 for planned activity.                                                                                   | Currently on schedule for completion by 31 March 2017.                                                                                                |
| Arrangements in place for the management of information risk including an information security policy and standards.                                                | Senior Information Risk Owner/ Head of Legal & Governance Services | A        |                                                                                                                                                                                               |                                                                                                                                                                                                                |                                                                                                                                                       |
| Council's employment policies and practices promote the public sector equalities duties, are legally compliant and support Council objectives.                      | Corporate Human Resources Manager                                  | A        |                                                                                                                                                                                               | The Shared Parental Leave Policy was approved by CMG in April 2015 and has now been implemented. To date, four applications have been received - three Non-Teaching applications and one Teaching application. |                                                                                                                                                       |
| Annual review of governance framework and production of Annual Governance Statement provides assurance to the public about the way the Council is run.              | Head of Legal & Governance Services                                | A        | Annual review of governance framework – June 16                                                                                                                                               | <b>New Action.</b> Expected completion date June 16.                                                                                                                                                           | <b>Revised timescale:</b> March 2017. As part of the Review of Corporate Governance above.                                                            |
| Right First Time Guidance on decision making.                                                                                                                       | Head of Legal & Governance Services                                | B        | This action point has been superseded. Effective decision making will be looked at in the wider review of Corporate Governance being carried out by the Head of Legal and Governance Services | Governance Review Scope complete December 2015<br>Phase 1 of the review complete June 2016<br>Phase 2 in progress.<br>Timescale March 2017                                                                     | <b>Revised timescale:</b> March 2017. Governance Review Scope completed December 2015. Phase 1 of the review complete June 2016. Phase 2 in progress. |
| Committee Report Template.                                                                                                                                          | Head of Democratic Services                                        | A        |                                                                                                                                                                                               |                                                                                                                                                                                                                |                                                                                                                                                       |

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## CORPORATE RISK 9 Growing the Economy

The current economic climate is improving and our population is projected to grow by 24% by 2037, which is the third highest in Scotland. Our response is to tackle the obstacles to economic growth that exist within Perth and Kinross to accelerate recovery and promote economic security. The restoration of Perth's city status has presented the Council with a unique opportunity to maximise the potential of Perth as a catalyst for the area's economic growth.

**Relevant Strategic Objectives:** Promoting a prosperous, inclusive and sustainable economy.

**Risk manager** The Environment Service  
**Risk impact with controls** 4 - Moderate  
**Risk probability with controls** 2 - Unlikely  
**Risk control effectiveness** B - Controls require further development

| Current Internal Controls                                                                                                                                                                         | Control Owner                  | Strength | Improvement action and timescale                                                                                                                                                                                         | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                            | Current – as at November 2016                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| <b>Leadership</b>                                                                                                                                                                                 |                                |          |                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                        |                                                             |
| Employability Strategy and Action Plan in place.                                                                                                                                                  | Head of Planning & Development | B        | The Growing the Economy Group requested a new Economic Development Strategy in December 2015 to super cede the existing, stand-alone Employability Strategy and asked for it to be completed by the end of October 2016. | <b>In progress.</b> The new Economic Development Strategy and Action Plan are being drafted and should be completed by the end of October 2016. It will then be presented to the Growing the Economy Group before the Outcome Delivery Group and Enterprise and Infrastructure Committee before Christmas 2016. Resource constraints are the biggest risk to this timescale being met. | The Employability Strategy is going to SP&R on 20 November. |
| Economic & Lifelong Learning Outcome Delivery Group Action Plan in place.                                                                                                                         | Head of Planning & Development | A        |                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                        |                                                             |
| Perth City Plan in place.                                                                                                                                                                         | Head of Planning & Development | A        |                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                        |                                                             |
| Events and Festivals Strategy in place to provide a strategic framework for the Council's approach to the attraction and development of events and festivals in order to deliver economic growth. | Head of Planning & Development | A        |                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                        |                                                             |

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**C** Significant controls not operating effectively  
**D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                       | Control Owner                  | Strength | Improvement action and timescale                                                                                                                                                                                                                                                                                                       | Progress update against improvement actions                                                                                                     | Current – as at November 2016                                                                                                                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Strategic and local development plans and policies set out a vision of how Perth and Kinross should develop in a sustainable way.               | Head of Planning & Development | A        | Work on supplementary guidance – Ongoing                                                                                                                                                                                                                                                                                               | <b>In progress.</b> MIR prepared for LDP2 in line with statutory requirements to refresh the plan. Public consultation from late November 2015. | Refresh the Local Development Plan 2 (LDP2) – <b>Ongoing</b><br><br><b>In progress:</b> Public consultation has now been concluded and submissions are now being analysed in line with the development plan scheme timetable. |
| A programme of activity for key sector areas such as tourism, and food & drink is in place through the ODG plan.                                | Head of Planning & Development | A        | Implement the ODG plan – Ongoing                                                                                                                                                                                                                                                                                                       | <b>In progress.</b> The CPP Economy and Lifelong Learning Outcome Delivery Group (ODG) have now been tasked with monitoring progress.           |                                                                                                                                                                                                                               |
| Sustainable development framework in place to manage the impact of plans, programmes and strategies on people, the economy and the environment. | Head of Planning & Development | A        |                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                 |                                                                                                                                                                                                                               |
| <b>Management</b>                                                                                                                               |                                |          |                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                 |                                                                                                                                                                                                                               |
| Economy and Lifelong Learning Outcome Delivery Group (ODG) established.                                                                         | Depute Chief Executives        | A        | Implement the ODG plan – Ongoing                                                                                                                                                                                                                                                                                                       | <b>In progress.</b> A monitoring report on progress against the plan is reporting quarterly to the ODG.                                         |                                                                                                                                                                                                                               |
| City Development Board in place to support delivery of Perth City plan.                                                                         | Head of Planning & Development | A        | Priorities for Perth City being developed in line with the Perth City Plan.<br><br>Project and performance management arrangements in place to monitor Council progress in implementing the City Development Strategy and highlight any issues which may impact on delivery of the strategy in line with the Perth City Plan – Ongoing | <b>Completed.</b>                                                                                                                               |                                                                                                                                                                                                                               |

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| Current Internal Controls                                                                                                                                                                                                                                                    | Control Owner                                                                      | Strength | Improvement action and timescale                                             | Progress update against improvement actions                                                                                                                                                 | Current – as at November 2016                                                                                                          |
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| Participation in Scottish Cities Alliance.                                                                                                                                                                                                                                   | Depute Chief Executive (Sustainability, Strategic and Entrepreneurial Development) | A        | Perth leading on Smart City programme for Scottish Cities Alliance – Ongoing | <b>In progress.</b> Actively working with other cities on developing an ERDF Bid for Smart City Funding to support a wide range of projects.                                                | There is an ongoing work programme in relation to infrastructure delivery, inward investment, low carbon development and smart cities. |
| City Deal opportunities to fund city growth.                                                                                                                                                                                                                                 | Depute Chief Executive (Sustainability, Strategic and Entrepreneurial Development) | B        | Develop a City Deal – Ongoing                                                | <b>In progress.</b> Working in partnership with colleagues in Dundee, Angus and Fife to potentially develop a city plan based on the TAYplan area. A draft bid was submitted in March 2016. |                                                                                                                                        |
| Annual reporting to members and Executive Officer Team on the implications of planning for growth and the impact that growth will have on communities and all services in an integrated and sustainable way. Full analysis of census 2011 and quarterly Economic Bulletins.. | Head of Planning & Development                                                     | B        |                                                                              | <b>Completed.</b>                                                                                                                                                                           |                                                                                                                                        |
| The Housing Land Audit gives details of the housing land supply in Perth and Kinross and is an important source of information for the monitoring of the Perth & Kinross Structure Plan.                                                                                     | Head of Planning & Development                                                     | A        |                                                                              | Council approved the Proposed TAYplan 2016-2036 in February 2015.                                                                                                                           |                                                                                                                                        |

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| Current Internal Controls                                                                                                                                                           | Control Owner                                                                      | Strength | Improvement action and timescale                                                        | Progress update against improvement actions                                                                                                                                                     | Current – as at November 2016 |
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| The Employment Land Audit gives details of the land supply in Perth and Kinross and is an important source of information for the monitoring of the Perth & Kinross Structure Plan. | Head of Planning & Development                                                     | A        |                                                                                         |                                                                                                                                                                                                 |                               |
| Infrastructure planning in place to support anticipated growth.                                                                                                                     | Depute Chief Executive (Sustainability, Strategic and Entrepreneurial Development) | B        | Perth Transport Futures project completion in accordance with anticipated growth – 2020 | In progress. A9/A93/A94 scheme committed for completion in 2020.                                                                                                                                |                               |
| Developer Contributions Policy in place.                                                                                                                                            | Head of Planning & Development                                                     | A        |                                                                                         | Policy effectiveness is being monitored.                                                                                                                                                        |                               |
| Objectives, targets and governance arrangements in place for the Digital Connectivity Projects.                                                                                     | Head of Planning & Development                                                     | A        | Better monitoring of project progress – Ongoing                                         | <b>In progress.</b> Progress is regularly tracked through reports from Ofcom, Scottish Government and internal information which is then reported to the Enterprise & Infrastructure Committee. |                               |

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## CORPORATE RISK 10 Policy and legislative reform agenda

The Scottish Government has embarked upon a programme of public service reform to ensure the public, third sector and private organisations work more effectively in partnership with communities and with each other. The Council responds to changes in policy and legislation to design and deliver excellent public services which meet the needs of local people.

**Relevant Strategic Objectives:** Giving every child the best start in life; Developing educated, responsible and informed citizens; Promoting a prosperous, inclusive and sustainable economy; Supporting people to lead independent, healthy and active lives; and Creating a safe and sustainable place for future generations.

**Risk manager** The Chief Executive Service  
**Risk impact with controls** 5 - Critical  
**Risk probability with controls** 1 - Rare  
**Risk control effectiveness** B - Controls require further development

| Current Internal Controls                                                                                                              | Control Owner   | Strength | Improvement action and timescale                                                                           | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Current – as at November 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------|------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Leadership</b>                                                                                                                      |                 |          |                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Perth and Kinross Council Corporate Plan 2013-18 sets out the vision for the area and the Council's response to public service reform. | Chief Executive | <b>A</b> | <p>Review of Corporate Governance – 30 April 16</p> <p>Review of Corporate Governance – 31 December 16</p> | <p>In progress. A phased programme of review activity is planned.</p> <p>Phase 1:</p> <ul style="list-style-type: none"> <li>Redesign internal Governance Assurance Process</li> <li>Develop governance framework for Integrated Joint Board</li> <li>Review / revise governance arrangements for ALEOs to bring within scope of AGS assurance process</li> </ul> <p>• Develop new Local Code on Following the Public Pound</p> <p>• Revise remit of Policy &amp; Governance Group</p> <p>Phase 2:</p> <ul style="list-style-type: none"> <li>Review of contract commissioning, monitoring and management arrangements</li> <li>Review Following the Public Pound arrangements across all services</li> </ul> <p>Phase 3:</p> <ul style="list-style-type: none"> <li>Review the remit of audit and scrutiny functions to</li> </ul> | <p><b>On target</b> – 31 March 2017. Phase 1 of the review was complete in June 2016. Phase 2 of the review is currently in progress. The review is on target to meet the deadline of 30 March 2017. Phase 2 and 3 are on target. Phase 2 has commenced.</p> <p>Phase 2:</p> <ul style="list-style-type: none"> <li>Review of contract commissioning, monitoring and management arrangements</li> <li>Review Following the Public Pound arrangements across all services</li> </ul> <p>Phase 3:</p> <ul style="list-style-type: none"> <li>Review the remit of audit and scrutiny functions to encompass performance aspect of governance as well as compliance</li> <li>Refresh Council's Local Code of Corporate Governance</li> <li>Review key policies and processes to</li> </ul> |

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**D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                 | Control Owner   | Strength | Improvement action and timescale                                                                                                                                                                                                                                                                           | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Current – as at November 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                           |                 |          | Review of Corporate Governance – 31 March 17                                                                                                                                                                                                                                                               | encompass performance aspect of governance as well as compliance <ul style="list-style-type: none"> <li>• Refresh Council's Local Code of Corporate Governance</li> <li>• Review key policies and processes to align with the principles of the International Framework of Good Governance in the Public Sector</li> <li>• Develop information management strategy</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | align with the principles of the International Framework of Good Governance in the Public Sector <ul style="list-style-type: none"> <li>• Develop information management strategy</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Perth and Kinross Community Plan/ SOA 2013-23 sets out how the Council will work with other Community Planning Partners to deliver public service reform. | Chief Executive | A        | <p>Develop joint resourcing arrangements across the CPP – December 15</p> <p>Implement recommendations from the Community Empowerment Working Group to strengthen community insight to SOA delivery processes – April 16</p> <p>Develop proposals for local Community Planning arrangements – April 16</p> | <p>The joint resourcing pilot in Eastern Perthshire has developed and is implementing an action plan to deliver service improvements for workless households in the locality. Outcome Delivery Plans 2015/16 have been delivered and have provided six monthly updates to CPP Board. These will continue to be delivered in 2016/17 with updates to CPP Board. A series of workshops were held with elected members in November and December to discuss the Community Empowerment Act and plans for Local Community Planning Partnerships. A workshop with elected members and Heads of Service was held on 8 March to carry out scenario planning for the Local Community Planning Partnership arrangements.</p> <p><b>Revised timescale</b> – September 16. Joint resourcing is in progress within Eastern Perthshire, and will be rolled out to the rest of the localities.</p> <p><b>In progress.</b> Plans for Local Community Planning Partnerships are advancing with a start date of April 2016. Initial meetings, which will involve elected members, community reps and services will examine the SOA in relation to the locality and Story of Pace. Governance, Organisational Development and Communications currently being developed and implemented.</p> <p><b>Revised timescale</b> – June 16. Draft statutory guidance for the Community Empowerment Act have been received late March 16, for consultation. A response to the consultation is currently being prepared.</p> | <p>Joint resourcing pilot in Eastern Perthshire has concluded. Further development work has been paused, due to other priority work developing Action partnerships, meeting Community Empowerment Act requirements and, creating the new Local Outcome Improvement Plan.</p> <p>Following the receipt of Scottish Government guidance, a timetable for production of the new Community Plan has been prepared and approved by the CPPEOG. This includes timescales and provision for community engagement.</p> <p>Local Action partnerships have been established in five areas, with initial meetings of each Partnership held in October/November 2016.</p> |

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Strength**

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| Current Internal Controls                                                                                                                                               | Control Owner                                                    | Strength | Improvement action and timescale                                                                                                                                                  | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Current – as at November 2016                                                                                                                                                                                                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Service Business Management and Improvement Plans underpin Council's key strategic documents setting out detailed plans to respond to reforms.                          | Head of Strategic Commissioning and Organisational Development   | A        |                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                   |
| Outcome Delivery Plans underpin the Community Plan/ SOA 2013-23 and set out in detail how Community Planning Partners will deliver on the public service reform agenda. | Head of Public Service Reform, Culture and Community Development | B        | Further develop Outcome Delivery Plans to ensure they reflect latest developments in public service reform – April 16                                                             | <p><b>Revised timescale</b> – June 16. Outcome Delivery Plan improvement recommendations were agreed by CPP Board in February 2015. ODP six monthly reports were presented to CPP Board in December 2015 and are next scheduled to report on 10 June 2016.</p> <p>Due to changes in the Community Planning framework approved by Council and CPP Board in Nov/Dec 2016, a review of the reporting arrangements for the Outcome Delivery Groups will be needed. This is being carried out by the Community Planning Policy Team, and recommendations will be presented to CPP Board on 10 June 2016.</p> | <p>Current performance practice in community planning was reviewed by the Community Planning Policy Team and recommendations for improvements were agreed at EOT, CPPEOG and CPP Board in August/September 2016.</p> <p>The 'Performance Management and Reporting Framework in Community Planning' report laid out a framework to improve the performance culture in the CPP.</p> |
| Health and Social Care Integration Plan details key actions and milestones of the Integrated Health and Social Care Pathfinder Board.                                   | Director (Housing and Community Care)                            | A        |                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                   |
| Medium Term Financial Plan.                                                                                                                                             | Head of Finance                                                  | A        |                                                                                                                                                                                   | This is complete but remains under regular review. Approved by Council on 1 July 2015 and updated by SP&R on 23 September 2015.                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                   |
| Older People Joint Commissioning Strategy prepared as part of the Reshaping Care for Older People partnership in Perth and Kinross.                                     | Director (Housing and Community Care)                            | A        | The Strategy will be incorporated within a new Strategic and Joint Commissioning Plan covering all adult health and social care services in Perth and Kinross 2016-2019 – Ongoing | The final Strategic and Joint Commissioning Plan was submitted to the Integration Joint Board on 23rd March 2016 and to the Scottish Government on 31st March 2016                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                   |

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| Current Internal Controls                                                                                                                                                               | Control Owner                               | Strength | Improvement action and timescale                                                                                                                    | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                               | Current – as at November 2016 |
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| <u>Early Years Strategy (2010)</u> provides overarching approach for everyone working with children in their early years of life.                                                       | Head of Education (Early Years and Primary) | A        | Review and refresh Early Years Strategy to ensure it responds to legislation and incorporates all key strands of early years approach – December 15 | <b>Completed.</b> The Redesign of Early Years – End of Phase 2 Report was approved by ECS SMT and outlined; the impact, significant achievements, lessons learned and what was being carried forward to Phase 3.<br><br>Redesign of Early Years Phase 3 is now being undertaken as a transformational project (19) as part of the PKC transformational programme. The Outline Business Case has been updated accordingly. |                               |
| Strategic and local development plans and policies set out a vision of how Perth and Kinross should develop in a sustainable way.                                                       | Head of Planning & Development              | A        | Work on supplementary guidance – Ongoing                                                                                                            | <b>In progress.</b> Local Development Plan 2 has commenced.                                                                                                                                                                                                                                                                                                                                                               |                               |
| <b>Management</b>                                                                                                                                                                       |                                             |          |                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                           |                               |
| Transformation, Change and Organisational Development Group meet on an 8 weekly basis.                                                                                                  | Chief Executive                             | A        |                                                                                                                                                     | The Group continues to meet every eight weeks.                                                                                                                                                                                                                                                                                                                                                                            |                               |
| The Chief Executive and Executive Officer Team meet every two weeks as the Executive Officer Team.                                                                                      | Chief Executive                             | A        |                                                                                                                                                     | The EOT continues to meet every two weeks.                                                                                                                                                                                                                                                                                                                                                                                |                               |
| Community Planning Partnership Board meets quarterly to monitor CPP progress in delivery of the Perth and Kinross Community Plan/ SOA and has a standing item on public service reform. | Senior Depute Chief Executive               | A        |                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                           |                               |

**Key:**  
**Strength**  
**A** Controls are working effectively  
**B** Controls require further development  
**C** Significant controls not operating effectively  
**D** Significant controls do not exist or have broken down



| Current Internal Controls                                                                                                                                                                                                                                           | Control Owner                                                    | Strength | Improvement action and timescale                                                                                                                                                                                             | Progress update against improvement actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Current – as at November 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Outcome Delivery Groups established to take forward the local outcomes within the Perth and Kinross Community Plan/ SOA 2013/14 and consider impact of public service reform.                                                                                       | Head of Public Service Reform, Culture and Community Development | B        | Performance management arrangements in place to ensure CPP Board receives regular information from Outcome Delivery Groups – Ongoing                                                                                         | <b>In progress.</b> Six monthly reports were presented to CPP Board in December 2015 and are next scheduled to report on 10 June 2016.<br><br>Five new Local Community Planning Partnerships (LCPP) will come into being from April 2016. Over the course of 2016 we will support these LCPPs to develop their own role in reporting performance against local outcomes.                                                                                                                                                  | Current performance practice in community planning was reviewed by the Community Planning Policy Team and recommendations for improvements were agreed at EOT, CPPEOG and CPP Board in August/September 2016.<br><br>The 'Performance Management and Reporting Framework in Community Planning' report laid out a framework to improve the performance culture in the CPP.                                                                                                                                                                                                                                                                                                           |
| Community Empowerment Board feeds into the Perth and Kinross Community Planning Partnership to form a strategic link with Perth and Kinross communities and ensure effective engagement with people and communities is at the heart of local public service reform. | Chief Executive                                                  | A        | The remit of the Community Empowerment Working Group will continue to develop to meet the requirements of the Community Empowerment Act and the CPP's implementation of locality working (from April 2016 onwards) – Ongoing | <b>Updated action.</b> The CEWG continues to deliver the work programme agreed by CPP Board in Feb 2015. This includes piloting participatory budgeting in two localities following the successful Carers event in February 2016, developing Stories of Place to support locality working and piloting participatory research in Tulloch. Members of the CEWG have been on a series of visits in Scotland and North East England to learn how community planning and community empowerment is carried out in other areas. | <b>Ongoing:</b> Following the 1st round of Community Action Partnerships meeting CEWG has provided feedback and recommendations in relation to community engagement and the progress of the Partnerships. These are currently being reviewed and implemented by the Action Partnership Chairs and Leads Group and the Community Planning Policy Team. CEWG is also contributing to the ongoing development of Stories of Place and approaches to Participatory Budgeting. A CEWG sub group is developing recommendations for Community Action Partnerships on effective communication methods and the locality based opportunities for community planning to reach a wider audience. |
| Perth and Kinross Integration Joint Board.                                                                                                                                                                                                                          | Director (Housing and Community Care)                            | A        |                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Directors and Heads of Service meet as the Corporate Management Group which has a key role in the development and implementation of Council strategy and policy.                                                                                                    | Directors                                                        | A        | Corporate Management Group development programme in place – January 16                                                                                                                                                       | <b>Completed.</b> A programme of meetings is in place. Some of these meetings will be used to facilitate the Senior Leadership Development Programme that has been established.                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

**Key:**  
**Strength**  
**A** Controls are working effectively  
**B** Controls require further development  
**C** Significant controls not operating effectively  
**D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                                              | Control Owner                                                                                                                                                             | Strength | Improvement action and timescale                                                                                                                                                                        | Progress update against improvement actions                                                                                                                                                                                                                                                                               | Current – as at November 2016                                                                                                                                                                                                                                                                                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Performance and risk management framework in place against the Corporate Plan and Community Plan/SOA including annual report to Council and monthly reports to EOT.                    | Head of Strategic Commissioning and Organisational Development                                                                                                            | A        |                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                           |
| Budget Review Process in line with Transformation Strategy. Service Revenue Budget proposals are updated to reflect progress on the delivery of the Council's Transformation Strategy. | Head of Finance                                                                                                                                                           | A        |                                                                                                                                                                                                         | The three year Revenue Budget was approved at Council on 11 February 2016.                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                           |
| Budget monitoring process to highlight issues which may prevent Services from delivering within planned budget.                                                                        | Head of Finance                                                                                                                                                           | A        | Continued regular revenue and capital monitoring reporting to the Strategic Policy and Resources Committee and the Executive Officer Team. Reports to Committee - February, April, October and December | <b>In progress.</b> Revenue Monitoring Reports for 2015/16 were considered by SP&R Committee on 23 September 2015, 2 December 2015 and 10 February 2016. The next report to Committee will be on 20 April 2016.                                                                                                           |                                                                                                                                                                                                                                                                                                                           |
| Joint resourcing guidance developed for Outcome Delivery Groups to use as they develop joint resourcing arrangements.                                                                  | Head of Public Service Reform, Culture and Community Development / (Education and Children's Services)/ Finance and Business Support Manager (Housing and Community Care) | B        | Provide support to Outcome Delivery Groups to improve joint use of resources – Ongoing                                                                                                                  | <b>In progress.</b> Joint Resourcing Pilot reported progress to CPP Boards in April and September and the Economy and Lifelong Learning ODG. Recommendations were approved by both and a detailed action plan is being implemented alongside service improvement work with front line workers in Blairgowrie and Rattray. | <b>In progress.</b> Joint Resourcing Pilot reported progress to CPP Boards in April and September and the Economy and Lifelong Learning ODG. Recommendations were approved by both and a detailed action plan is being implemented alongside service improvement work with front line workers in Blairgowrie and Rattray. |

**Key:**  
**Strength**

**A** Controls are working effectively  
**B** Controls require further development  
**C** Significant controls not operating effectively  
**D** Significant controls do not exist or have broken down

| Current Internal Controls                                                                                                                                                                                                                      | Control Owner                 | Strength | Improvement action and timescale                                                                                           | Progress update against improvement actions                                                                                                                                                                                                                              | Current – as at November 2016 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| Mechanisms in place for effective communication/ collaboration with elected members in setting priorities for the future and informing policy.                                                                                                 | Head of Democratic Services   | A        | Review the member development programme to ensure members are fully informed of the public service reform agenda – Ongoing | <b>Completed.</b> Now in implementation phase.                                                                                                                                                                                                                           |                               |
| Ongoing briefings to staff via business breakfasts, manager briefings, delayed office opening and elected member development sessions to raise awareness of current developments in public service reform and potential impact on the Council. | Chief Executive and Directors | A        |                                                                                                                            | All are on-going. Recent examples include a planned programme of locality visits for elected members to hub nurseries with Strong Start 2 provision. Recent service business breakfasts have focused on understanding how LIG is being embedded in service developments. |                               |

**Key:  
Strength**

- A** Controls are working effectively
- B** Controls require further development
- C** Significant controls not operating effectively
- D** Significant controls do not exist or have broken down

**Key**

|  |                                  |
|--|----------------------------------|
|  | Will achieve critical deadlines  |
|  | Monitor                          |
|  | Monitor with concern             |
|  | Won't achieve critical deadlines |

# Service Risks

## Chief Executive's Service Risks 2015 – 2016

| Service Risks                                                                                                 | Risk without controls in place |             | Risk with controls in place |             |
|---------------------------------------------------------------------------------------------------------------|--------------------------------|-------------|-----------------------------|-------------|
|                                                                                                               | Impact                         | Probability | Impact                      | Probability |
| Comply with legal requirements                                                                                | Major                          | Possible    | Minor                       | Unlikely    |
| Communicate effectively with our stakeholders                                                                 | Moderate                       | Likely      | Minor                       | Unlikely    |
| Provide the required level of independent assurance through the internal audit process                        | Critical                       | Possible    | Moderate                    | Unlikely    |
| Ensure the health, safety and wellbeing of Council employees and those who are affected by the Council's work | Critical                       | Possible    | Minor                       | Unlikely    |
| Corporate Risks (managed by Service)                                                                          | Risk without controls in place |             | Risk with controls in place |             |
|                                                                                                               | Impact                         | Probability | Impact                      | Probability |
| Effectively manage changing financial circumstances                                                           | Critical                       | Likely      | Major                       | Possible    |
| Effective corporate governance                                                                                | Critical                       | Unlikely    | Critical                    | Rare        |
| Policy and legislative reform agenda                                                                          | Critical                       | Unlikely    | Critical                    | Rare        |

**Key**

|  |                                  |
|--|----------------------------------|
|  | Will achieve critical deadlines  |
|  | Monitor                          |
|  | Monitor with concern             |
|  | Won't achieve critical deadlines |

## Education and Children's Services Risks 2015 – 2016

| Service Risk                                                                                                                                               | Risk without controls in place |             | Risk with controls in place |             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-------------|-----------------------------|-------------|
|                                                                                                                                                            | Impact                         | Probability | Impact                      | Probability |
| 1. There is a risk that we fail to deliver on the Curriculum for Excellence                                                                                | Major                          | Likely      | Moderate                    | Rare        |
| 2. There is a risk that we do not identify and meet the additional support needs of children and young people                                              | Major                          | Likely      | Moderate                    | Unlikely    |
| 3. There is a risk that we fail to protect vulnerable children and families<br>(Corporate Risk)                                                            | Critical                       | Likely      | Major                       | Rare        |
| 4. Failure to effectively respond to business failure (business continuity)                                                                                | Critical                       | Likely      | Moderate                    | Unlikely    |
| 5. PKC IT service and infrastructure does not meet the needs of users                                                                                      | Critical                       | Likely      | Moderate                    | Unlikely    |
| 6. Failure to deliver the ECS capital programme                                                                                                            | Major                          | Possible    | Moderate                    | Unlikely    |
| 7. There is a risk that we do not effectively engage with our communities                                                                                  | Major                          | Likely      | Minor                       | Rare        |
| 8. There is risk that we do not ensure the health, safety and wellbeing of Council employees and those who are affected by the Council's work <sup>1</sup> | Major                          | Likely      | Major                       | Unlikely    |

<sup>1</sup> Corporate Risk for which Services are required to develop service level controls and mitigating actions

**Key**

|  |                                  |
|--|----------------------------------|
|  | Will achieve critical deadlines  |
|  | Monitor                          |
|  | Monitor with concern             |
|  | Won't achieve critical deadlines |

## Housing and Community Care Service Risks 2015-2016

| Service Risk                                                                                       | Risk without controls in place |             | Risk with controls in place |             |
|----------------------------------------------------------------------------------------------------|--------------------------------|-------------|-----------------------------|-------------|
|                                                                                                    | Impact                         | Probability | Impact                      | Probability |
| Policy and legislative reform agenda (Corporate Risk 10)                                           | Critical                       | Unlikely    | Critical                    | Rare        |
| Deliver the Housing Standard Delivery Plan                                                         | Major                          | Possible    | Major                       | Rare        |
| Support the most vulnerable in our society during welfare reform (Corporate Risk 1)                | Critical                       | Likely      | Major                       | Unlikely    |
| Protect vulnerable adults at risk (Corporate Risk 2)                                               | Critical                       | Likely      | Critical                    | Rare        |
| Provide adequate and affordable social housing                                                     | Major                          | Possible    | Major                       | Rare        |
| Effectively manage changing financial circumstances (Corporate Risk 4)                             | Critical                       | Likely      | Major                       | Possible    |
| Maintain security of information and prevent public sector fraud and corruption (Corporate Risk 6) | Critical                       | Unlikely    | Major                       | Possible    |
| Effective corporate governance (Corporate Risk 8)                                                  | Critical                       | Unlikely    | Critical                    | Rare        |

### Key

|  |                                  |
|--|----------------------------------|
|  | Will achieve critical deadlines  |
|  | Monitor                          |
|  | Monitor with concern             |
|  | Won't achieve critical deadlines |

## The Environment Service Risks 2015-2016

| Service Risk                                                                                                                                                                                                                                | Risk without controls in place |             | Risk with controls in place |             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-------------|-----------------------------|-------------|
|                                                                                                                                                                                                                                             | Impact                         | Probability | Impact                      | Probability |
| Deliver the Council's capital programme ( <b>Corporate Risk</b> )                                                                                                                                                                           | Major                          | Likely      | Major                       | Unlikely    |
| Ensure the health, safety and wellbeing of Council employees and those who are affected by the Council's work ( <b>Corporate Risk</b> )                                                                                                     | Major                          | Likely      | Major                       | Unlikely    |
| Growing the economy ( <b>Corporate Risk</b> )                                                                                                                                                                                               | Major                          | Likely      | Major                       | Unlikely    |
| There is a risk that we do not access appropriate delivery mechanisms for property contracts.                                                                                                                                               | Major                          | Likely      | Major                       | Unlikely    |
| There is a risk that the Service may be subject to significant increase in costs in areas over which it has limited control as a result of prevailing economic or market conditions or the specialist nature of the services being procured | Major                          | Likely      | Major                       | Unlikely    |

The following risks have been deleted from the Service Risk Profile as management of these risks is embedded within service delivery and monitored at team level:

- There is a risk that we fail to deliver on the Waste Management Strategy
- There is a risk that we fail to sustain the supply of serviced land for when the economy turns around





**PERTH AND KINROSS COUNCIL**

**Lifelong Learning Committee – 25 January 2017**  
**Scrutiny Committee – 8 February 2017**

**Standards and Quality Report****Report by Director (Education and Children's Services)****PURPOSE OF REPORT**

Education and Children's Services continue to provide services which support better outcomes for people and communities across Perth and Kinross. The Standards and Quality Report reflects on the activities of the Service over the past year and presents an overview of the Service's key strengths and areas for development and/or improvement.

**1. BACKGROUND**

- 1.1 The Standards in Scotland's Schools etc. Act (2000) places a statutory duty on education authorities to report on standards and quality in schools. In line with this, Perth and Kinross Council have published an annual Standards and Quality Report since 1999 and, since 2003, this has been extended to cover all aspects of Education and Children's Services.
- 1.2 The Standards and Quality Report (Appendix 1) has been collated as part of the Service's approach to self-evaluation, and is a key element of the Council's on-going commitment to public performance reporting.
- 1.3 As the requirements for reporting change nationally in line with the National Improvement Framework for Education and other initiatives, this version of the Standards and Quality Report should be viewed as a transition to new reporting arrangements commencing in 2017.

**2. PROPOSALS**

- 2.1 Education and Children's Services continue to support the delivery of the Community Plan/Single Outcome Agreement by raising achievement for all; supporting vulnerable children and families; improving the quality of life for individuals and communities; and enabling the delivery of high quality public services.
- 2.2 The Standards and Quality Report is an account of some of the diverse work which the Service has delivered over the past year, making a difference to outcomes for children, young people, their families and communities.

- 2.3 The Service uses a range of self-evaluation frameworks including:
- How Good is Our Council?
  - How Good is Our Community Learning and Development?
  - Quality Management in Education;
  - How Good is Our School?
  - How Well Are We Improving the Lives of Children and Young People?
- 2.4 In line with these frameworks, the Standards and Quality Report seeks to address:
- the key outcomes we have achieved;
  - how well the needs of stakeholders are met;
  - how good is our leadership; and
  - what is our capacity to improve?
- 2.5 In summary the Service's key strengths are:
- a strong culture and ethos of improving outcomes through integrated services and partnership working at all levels;
  - well planned, proportionate support and challenge for schools;
  - continued focus on getting it right for every child is to ensure that children receive appropriate support to meet their needs.
  - continued improvement attainment and achievement, with performance in line with or above our comparator average in almost all key measures;
  - a clear strategy for improving equity and closing the attainment gap;
  - unswerving focus on prevention and early intervention through enhancing access to universal services and targeted support as appropriate;
  - a wide range of opportunities for young people to be recognised for their personal contributions both formally and informally;
  - a clear commitment to the development of leadership at all levels; and
  - comprehensive provision and use of high quality data sources and tools to inform performance improvement.
- 2.6 Education and Children's Services recognise the need to review and develop key service areas to ensure continuous improvement and best value. The report will help identify areas for further improvement to inform the development of the Service's forthcoming Business Management and Improvement Plan.

- 2.7 Following approval, the full Standards and Quality Report will be published on the Council's website ([www.pkc.gov.uk](http://www.pkc.gov.uk)) as part of Education and Children's Services on-going commitment to report to the public on the performance of the services we provide.

### 3. CONCLUSION AND RECOMMENDATIONS

- 3.1 Education and Children's Services has a clear focus on supporting the best possible outcomes for our service users, and will be used to inform the development of the Service's forthcoming Business Management and Improvement Plan.

It is recommended that the Lifelong Learning Committee:

- (i) Considers, comments on and accepts the Education and Children's Services Standards and Quality Report 2015/16 (Appendix 1); and
- (ii) Agrees that it is made available on the Council's website to staff, parents, carers, Parent Councils, external agencies and the wider community in Perth and Kinross.

- 3.2 It is recommended that the Scrutiny Committee:

- (i) Scrutinises and comments as appropriate on the Education and Children's Services Standards and Quality Report 2015/16 (Appendix 1).

#### Author(s)

| Name         | Designation                                | Contact Details                                                                       |
|--------------|--------------------------------------------|---------------------------------------------------------------------------------------|
| Paul Davison | Corporate Research and Information Manager | <a href="mailto:ECSccommittee@pkc.gov.uk">ECSccommittee@pkc.gov.uk</a><br>01738 47500 |

#### Approved

| Name          | Designation                                  | Date       |
|---------------|----------------------------------------------|------------|
| Sheena Devlin | Director (Education and Children's Services) | 14/12/2016 |

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You can also send us a text message on 07824 498145.

All Council Services can offer a telephone translation facility.

## 1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

| <b>Strategic Implications</b>                       | <b>Yes / None</b> |
|-----------------------------------------------------|-------------------|
| Community Plan / Single Outcome Agreement           | <b>Yes</b>        |
| Corporate Plan                                      | <b>Yes</b>        |
| <b>Resource Implications</b>                        |                   |
| Financial                                           | <b>No</b>         |
| Workforce                                           | <b>No</b>         |
| Asset Management (land, property, IST)              | <b>No</b>         |
| <b>Assessments</b>                                  |                   |
| Equality Impact Assessment                          | <b>N/A</b>        |
| Strategic Environmental Assessment                  | <b>N/A</b>        |
| Sustainability (community, economic, environmental) | <b>N/A</b>        |
| Legal and Governance                                | <b>N/A</b>        |
| Risk                                                | <b>No</b>         |
| <b>Consultation</b>                                 |                   |
| Internal                                            | <b>N/A</b>        |
| External                                            | <b>N/A</b>        |
| <b>Communication</b>                                |                   |
| Communications Plan                                 | <b>N/A</b>        |

### 1. Strategic Implications

#### Community Plan / Single Outcome Agreement

- 1.1 The proposals relate to the delivery of the Perth and Kinross Community Plan / Single Outcome Agreement through all objectives.

#### Corporate Plan

- 1.2 The Perth and Kinross Community Plan 2013-2023 and Perth and Kinross Council Corporate Plan 2013/2018 set out five strategic objectives:

- (i) Giving every child the best start in life;
- (ii) Developing educated, responsible and informed citizens;
- (iii) Promoting a prosperous, inclusive and sustainable economy;
- (iv) Supporting people to lead independent, healthy and active lives; and
- (v) Creating a safe and sustainable place for future generations.

This report relates to all objectives

### 2. Resource Implications

#### Financial

- 2.1 None

### Workforce

- 2.2 None

### Asset Management (land, property, IT)

- 2.3 N/A

## **3. Assessments**

### Equality Impact Assessment

- 3.1 Under the Equality Act 2010, the Council is required to eliminate discrimination, advance equality of opportunity, and foster good relations between equality groups. Carrying out Equality Impact Assessments for plans and policies allows the Council to demonstrate that it is meeting these duties. Proposals have been considered under the Corporate Equalities Impact Assessment process (EqIA) and assessed as **not relevant** for the purposes of EqIA.

### Strategic Environmental Assessment

- 3.2 The Environmental Assessment (Scotland) Act 2005 places a duty on the Council to identify and assess the environmental consequences of its proposals. However, no action is required as the Act does not apply to the matters presented in this report.

### Sustainability

N/A

### Legal and Governance

- 3.4 N/A

### Risk

N/A

## **4. Consultation**

### Internal

- 4.1 Heads of Service, managers and other staff have contributed to the report appendix.

### External

- 4.2 N/A

**5. Communication**

- 5.1 The Standards and Quality Report will be published on the Council website and publicised thereafter.

**2. BACKGROUND PAPERS**

N/A

**3. APPENDICES**

Appendix 1 – Education and Children’s Services Standards And Quality Report 2015/16



# **Education and Children's Services**

## **Standards and Quality Report**

### **2015/16**

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Education and Children's Services would be happy to receive your comments on this report.  
Please email **[ECSGeneralEnquiries@pkc.gov.uk](mailto:ECSGeneralEnquiries@pkc.gov.uk)**



## Foreword

Education and Children's Services (ECS) provide services which support better outcomes for people and communities across Perth and Kinross. We are focused on delivering outcomes in line with GIRFEC<sup>1</sup>, providing high quality, integrated services and delivering sustainable improvement.

Our Standards and Quality Report is an opportunity to reflect on how we are continuing to deliver national and local outcomes and making a difference to learners, participants, service users, families and communities. As ECS evolves within a changing organisational structure, with a number of services now delivered by partner Trusts, the Standards & Quality report reflects these changes. Also, as the requirements for reporting change nationally in line with the National Improvement Framework for Education and other initiatives, this edition of the Standards and Quality Report should be viewed as a transition to new arrangements.

We continue to **support vulnerable children and families**. The demand for services is growing and we work closely with our partners to address vulnerability and need, minimise risk and improve the life chances of children and young people. Children, young people and families are listened to, understood and respected. Our approach stresses the importance of building strong relationships and ensuring that children and young people are looked after within their extended families and communities wherever possible. We strive to provide the help they need, when they need it and for as long as they need it. We continue to promote early intervention in line with our work on Evidence2Success and the Early Years Collaborative. Priorities are identified and driven forward through the Integrated Children's Services Plan 2013 – 2018, and we continue to progress the priority actions within the plan to improve outcomes for children, young people and families.

**Raising achievement for all** continues to be a key priority. Levels of attainment across Perth and Kinross continue to improve and we continue to make good progress in raising levels of attainment in literacy and numeracy; indicators show a sustained improvement on previous academic year figures. This year saw a further year of the new national qualifications being successfully delivered in all of our secondary schools. The revised School Improvement Framework and associated support and challenge have led to improving evaluations in almost all schools during external inspection.

**Improving the quality of life** for people and communities is central to our aims. We support a wide range of learning opportunities for young people, adults, families and communities which support people into work and develop confident, active citizens.

As with all councils, we face many challenges. Through our Service Change and Improvement team we provide significant support to **enable the delivery of high quality public services** and ensure that we can successfully address both the challenges and opportunities ahead. The implementation of our transformational change projects continues to improve the service we deliver, and our close working relationships with other services and partner organisations enables us to benefit from shared skills, resources and strategies.

We remain committed to achieving meaningful outcomes for the people of Perth and Kinross. We will continue to ensure that our services are responsive to the needs of people and their communities.

**Councillor Bob Band**  
*Convener, Lifelong Learning Committee*

**Sheena Devlin**  
*Director, Education and Children's Services*

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<sup>1</sup> Getting it Right for Every Child is a national programme to improve outcomes for all children.

# Education and Children's Services

Perth and Kinross Community Plan 2013 – 2023 The Council's Corporate Plan 2013-18 sets out five strategic objectives:

- Giving every child the best start in life
- Developing educated, responsible and informed citizens
- Promoting a prosperous, inclusive and sustainable economy
- Supporting people to lead independent, healthy and active lives
- Creating a safe and sustainable place for future generations

Supporting the delivery of these objectives, Education and Children's Services' Statement of Intent and Policy Framework set out four key priorities:

- supporting and protecting vulnerable children and families
- raising achievement for all
- improving the quality of life for individuals and communities
- enabling the delivery of high quality public services.

The Education and Children's Services Business Management and Improvement Plan (BMIP) sets out the key actions which will be delivered by the Service to contribute to the delivery of the Council's strategic objectives. Our Standards and Quality Report is an opportunity to reflect on how we are making a difference to learners, participants, service users, families and communities. In this, it seeks to address:

- How well we deliver on outcomes and support individuals and communities
- How well we improve the quality of our work.

Our on-going focus is to ensure that children and young people are safe, healthy, achieving, nurtured, active, respected and respectful, responsible and included. Key to this is **Getting It Right In Perth and Kinross** and our approaches to ensure that they receive the help they need, when they need it.

In line with both the Scottish Government Programme for Government and the

Government's Public Sector Reform Programme, our clear focus is on prevention and early intervention. Partnership working continues to underpin the delivery of our services, and we also recognise the importance of making connections across services and the contribution of our services to a wide range of outcomes.

The Scottish Government's plan **Delivering Excellence and Equity in Scottish Education: A Delivery Plan for Scotland**, and the **National Improvement Framework** have set us the challenge of raising attainment and achievement for all, as well as closing equality gaps.

Through an ambitious Improvement Plan we continue to plan for, and respond to, the challenges and opportunities presented by a reduction in resources, changing demographics and trends in need and new legislation. Key to this will be how we ensure that we have the right people in place to deliver changing services.

**Demographics:** The estimated population of Perth and Kinross in 2015 was 149,930; an increase of 0.7% from 2014<sup>2</sup>, and this growth is projected to continue. Although it is the 75+ age group which is projected to increase most in size, the population aged under 16 is also projected to increase significantly over the next twenty five years<sup>3</sup>. In the 2015 pupil census there were 7,494 secondary pupils and 10,265 primary pupils attending Perth and Kinross Council schools, an increase of 71 on the previous year. It is anticipated that population growth will continue to place increasing demands on our services, particularly in matching provision to areas of growth.

The population of Perth and Kinross is spread across a large geographical area. Providing access to essential services to a dispersed population over a large geographic area presents particular challenges. For example, primary school sizes vary significantly. Ten primary schools have fewer than 20 pupils whilst two have over 400 pupils<sup>4</sup>.

<sup>2</sup> Source: 2011 Census

<sup>3</sup> Source: <http://www.nrscotland.gov.uk/statistics-and-data/statistics>

<sup>4</sup> Source: 2015 Pupil Census

The care and protection of vulnerable children and young people is our most important responsibility and there is strong leadership and partnership working across public protection.

The number of children placed on the Child Protection Register during the year has fallen from 128 in 2014/15 to 101 in 2015/16, although the complexity of risk factors has become more challenging. Risks associated with parental substance use; parental mental ill health; and domestic abuse continue to be the main factors featuring in the risks to children and young people.

The number of children becoming looked after continues to grow. The number of Looked After Children has increased by 12% to 286 in 2016.

**Delivery:** We deliver services in a range of ways through schools, community learning centres and family centres. In addition, we commission provision through service level agreements, contracts, partnerships and agreements with other providers, agencies and services.

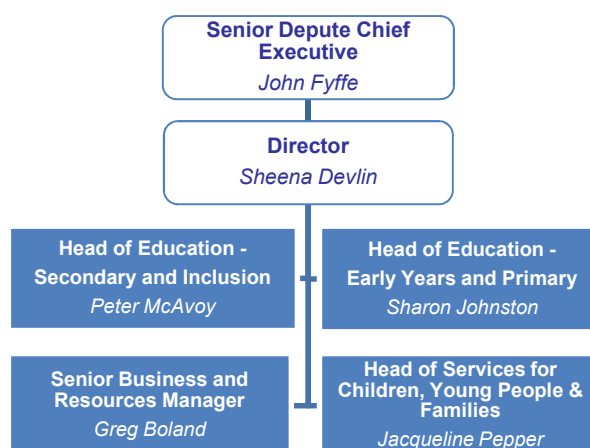
The Council is responsible for 10 secondary schools, 75 primary (some with nursery classes), one special school (nursery, primary and secondary) and one pre-school centre. We also provide services through Neighbourhood and Community Learning Centres. Our six community campuses offer gyms, fitness classes and sports facilities, meeting and conference venues, libraries and catering services.

Almondbank House provides a facility for integrated support to vulnerable children and their families. This includes an education provision for primary children with complex social, emotional and behavioural difficulties. Within the Almondbank campus the Cottages provide residential childcare. *Navigate* at George Inn Lane provides an education and support service for young people between 12 and 16 years working in partnership with Perth and Kinross secondary schools.

There are two residential care homes for children and young people: The Cottages provide residential care for up to 4 children and young people and Woodlea Cottage provides integrated residential respite care for young people with complex, multiple and enduring needs. A wide range of support for families is provided through outreach, supporting more children within their families and promoting greater inclusion in their local communities.

The management of the Service is organised into four service delivery areas each led by a senior officer who provides the strategic leadership in their area of Service. As a collective the Senior Management Team has a clear focus on integrated working.

**Diagram 1: ECS Structure<sup>5</sup>**



Additional input comes from the Chief Social Work Officer who has a statutory as well as a strategic role, particularly in the delivery of services for vulnerable children.

We also work closely with colleagues in other services and partner organisations, to deliver joint work for the mutual benefit of the people that we provide services for.

<sup>5</sup> This model was valid throughout 2015/16. Rodger Hill has since replaced Peter McAvoy from October 2016

# Giving Every Child the Best Start in Life

Improving outcomes for children and young people is the core business of Education and Children's Services. Our continued focus on getting it right for every child is to ensure that children receive appropriate support to meet their needs.

Our commitment to giving every child the best start in life is demonstrated through the delivery of the Early Years Strategy, our engagement with the Early Years Collaborative and the work we are progressing through Evidence2Success.

**Early Learning and Childcare (ELC)** is an important stage in a child's development and helps children to learn as they play. A good quality early learning and childcare experience builds on the valuable learning that takes place in and around the home, before children start primary school. It also develops the learning of other essential skills that they will rely on in later life.

Since August 2014 ELC eligibility has been extended to defined groups of 2 year olds, which in Perth and Kinross we call **Strong Start 2**. Building on the provision established in 2014-15, a further seven local authority nursery classes introduced Strong Start 2 provision in August 2015. To better support children and families at key times of transition, these were located within established hub and extended provision settings. Additionally a brand new nursery provision for 2-5 year olds opened within Methven Primary School to meet the needs of the local community.

In 2015/16 there has been close collaboration with staff in Children and Families social work teams and in January 2016 almost all 2 year old children with a Lead Professional Social Worker were registered in a Strong Start placement, with the exceptions being children who were placed for adoption and who needed more time to bond with their new families at home.

The ELC **Admissions Policy and Guidance** was updated and when registration for session 2016-17 opened, there were full nursery days as an option. Instead of only 5 half days (mornings or afternoons or a mix of both) families could also choose to opt for:

- 2 full days and 1 half day
- 1 full day and 3 half days

with children staying for lunch when attending for a full day.

## Case Study: Play on Pedals

Play on Pedals training provides the learning, skills and resources to promote cycling in a fun and interactive way and is being delivered in 16 local authority Early Learning and Childcare settings in order to close the attainment gap between children from disadvantaged areas, and support children to meet their developmental milestones in their pre-school year.

Children learn about the parts of a bicycle, how to fit a helmet correctly and the basics of looking after their bikes. Through a series of fun and imaginative activities, they are helped to develop their balance and control skills, often using a pedal-less balance bike. When ready, children get the opportunity to move onto a pedal bike. All sessions and games are designed to support confidence, interactive learning and develop physical skills supporting the Early Level within Curriculum for Excellence.

Staff have experienced increased confidence in both cycling skills and language skills of the children involved in Play on Pedals, with children using and extending their vocabulary through naming bike parts, talking about mounting, braking, pedalling etc. and children are developing their core physical skills while building confidence in riding a pedal bike. Play on Pedals parent events offer the opportunity for key messages to be shared with parents and a wealth of positive feedback for this programme has been received.

*"We have seen a huge improvement in most of our children's bike riding - in turn it has boosted their confidence and self-esteem." (Nursery Teacher)*

A **developmental milestones assessment tool** for pre-school children was developed in response to the Early Years Collaborative (EYC); Workstream 3 (30 months to start of primary school). This has a stretch aim of:

*"90% of children will have reached their developmental milestones on entry to primary school by the end of 2017".*

The assessment tool was developed in collaboration with colleagues in Dundee and



Angus. The same 9 developmental areas, as assessed at a child's 27-30 month review by Health Visitors, were assessed by the staff within all Perth and Kinross Council early learning and childcare settings and also partner provider centres; Social, Emotional, Behavioural, Attention, Speech and Language, Gross Motor, Fine Motor, Vision and Hearing.

After collation of findings, it was planned that each school would receive the developmental milestone information about their Primary 1 pupils and be able to use it alongside other information including pre-school reports, to support each child's transition. This was to support the planning of interventions at individual and group level, where appropriate. Parental awareness of the importance of their child achieving their pre-school developmental milestones was raised through the display of posters within each early learning and childcare setting and also through discussion at parent evenings and other parents' meetings, both formal and informal.

Following a review of early years services within Services for Children, Young People and Families, the work of the **Gowan's Family Centre** early years team has been refocused over the last year. Support for vulnerable families with very young children has gradually moved away from centre-based care in Perth. The team now works with a larger number of families from pregnancy up to 3 years and provides targeted support through outreach within the family home and local communities working closely with Health Visitors and early years staff. The aim is to build parental confidence and promote positive family experiences.

The **EarlyBird** support programme for parents of children with **Autistic Spectrum Disorder** has been delivered jointly by the Early Years Inclusion Team with Perth Autism Support and NHS Tayside Speech and Language Therapy. The programme offers advice and guidance on strategies and approaches for dealing with young autistic children, and twelve parents completed the programme.

**We continue to receive positive inspection reports evidencing our commitment to support and protect vulnerable children and families.**

The Care Inspectorate carries out inspections on regulated care services in Scotland using a framework of quality themes.

- Quality of Care and Support;
- Quality of Environment or Information
- Quality of Staffing
- Quality of Management and Leadership

Each theme is graded on a six point scale.

1. Unsatisfactory
2. Weak
3. Adequate
4. Good
5. Very Good
6. Excellent

Inspections are generally unannounced and there are longer intervals between inspections for better performing services and a greater focus on risk-based inspections for poorly performing and high-risk services such as those which provide 24 hour residential care.

We have received very positive inspection reports for our Early Learning and Childcare services with ratings of Good, Very Good or Excellent in almost all quality themes, with the proportion of service themes receiving ratings of Very Good or better showing improvement over the last 3 years.

| Quality Ratings     | 2013/14 | 2014/15 <sup>6</sup> | 2015/16 |
|---------------------|---------|----------------------|---------|
| Good or better      | 95%     | 98%                  | 97%     |
| Very Good or Better | 61%     | 59%                  | 74%     |

*Staff nurtured all children to achieve their potential. Children with additional support needs were well supported through strong relationships with parents and effective links with health care professionals.*

Care Inspectorate Inspection of Tulloch Primary School Nursery, March 2016.

Woodlea Cottage provides planned residential respite care overnight and at weekends for children and young people with complex, multiple and enduring needs to help them gain independence skills and experiences.

The inspection rated the provision at Woodlea as *Very Good* on two key quality indicators and

<sup>6</sup> 2014/15 figures are similar to our comparators. 2015/16 figures not yet available.

*Excellent* on the other two, showing an improvement on the previous inspection report.

*Children and young people receive very high standards of care and support to reach their potential and have positive experiences.*

Care Inspectorate Inspection of Woodlea Cottage, January 2016.

#### Case Study: Intensive Family Support

The Child Health Team and the Woodlea Outreach Team worked together to develop child-centered programmes of individually tailored support for children and young people with complex needs and their families.

By pooling resources and expertise, and working differently, they were able to develop programmes that did not create dependencies on the service, but altered expectations and ambitions, and developed children and families confidence, skills and abilities to manage the challenges of daily life.

The staff work in partnership with parents within the family home to address issues such as sleep, routine and eating which were often challenging in the home environment. The staff brought their skills and experience and intimate knowledge of the child and worked alongside parents to develop consistent approaches at home, school and respite. The number of children and young people receiving a service has been expanded and referrals from other agencies have increased.

The team has shared the good practice of Intensive Family Support with delegations from other local authorities, head teacher groups, and external organisations.

*"Thank you for all the help and guidance that you have given, it really has changed our day to day lives." (Family member)*

The Cottages at Almondbank House was inspected in August 2015. The Cottages provide emergency or respite residential care and support for children and young people. The inspection rated the provision as *Very Good* on three key quality indicators and *Good* on the other.

*There was very good evidence to show that the service was committed to seeking the views of young people, parents and families and partner agencies to help them to evaluate the quality of the service.*

Care Inspectorate Inspection of The Cottages, August 2015.

We have also received very positive inspection reports for our Fostering and Adoption services with ratings of good or very good in all quality indicators. We continue to provide emergency, respite and alternative permanent care arrangements for children and young people who need it.

The outcome of inspections and progress with all recommendations are regularly reported to the Executive Sub Committee of the Lifelong Learning Committee.

**Our continued focus is on prevention and early intervention through enhancing access to universal services and targeted support.**

Working in partnership with Angus and Dundee City Councils, NHS Tayside and colleagues from the independent school sector, we have developed a shared format for a single **Child's Plan** as well as multi-agency guidance to support their effective creation. This format is being used to coordinate plans for all children and young people who need one, including children and young people who are looked after or are in need of protection.

The specific focus of our Child's Plan meetings is now to improve outcomes for children, young people and families. The plan format gathers information about progress made, identifies what needs to be different and better, and details the actions we will put in place to make those improvements. Use of the agreed Child's Plan format is leading to fewer meetings for families and a greater focus on partnership working as we meet the needs of the children, young people and families we serve.

In addition to the multi-agency guidance, Education - specific guidance has been produced and training in the use of the Child's Plan format has been rolled out to all relevant staff in Education Services. The Tayside Child's Plan format and guidance will be evaluated and reviewed by June 2017.

Getting It Right For Every Child (**GIRFEC**) approaches, including use of the Wellbeing Wheel and the Child's Plan format, are well-embedded across our schools and centres. In most schools children, young people, parents and staff are developing a shared understanding of wellbeing. With the

publication of *How Good Is Our School?* 4 we have further strengthened the focus of schools on wellbeing and equality and this is helping to ensure that all our children and young people have appropriate opportunities to develop as successful learners and confident individuals.

As the common language of GIRFEC, the Wellbeing Indicators are also supporting the very effective partnership working between services evident in our area. For example the quality of partnership working between health and education has ensured that schools are better prepared to meet the needs of children, and their families, at the transition from Nursery to Primary 1.

The Perth and Kinross **Child Protection Committee** (CPC) publishes an annual Standards and Quality Report which analyses trends in relation to children at risk of abuse and evaluates the extent to which services to protect children and young people continue to improve. The CPC has continued to develop partnership working; to build a child protection community and to develop a joint approach quality assurance and self-evaluation. Together, we are supporting a partnership approach to create a hostile environment and zero-tolerance to abuse and exploitation.

The number of children and young people for whom there is a child concern is growing, which presents us with a constant challenge to respond at early stage and to ensure that we provide advice, support and assistance to safeguard, support and promote their wellbeing.

Recent trends show that the early identification of children and young people who may be at risk continues to improve and the number of children and young people for whom there is a child concern report has grown year on year. Child Concern Reports and Unborn Baby Referrals are screened through the Multi Agency Screening Group to ensure that children, young people, families and vulnerable pregnant women receive the most appropriate support and intervention.

[Further information: Child Protection Committee Standards and Quality Report 2015/16](#)

For **looked after children** who need permanent placements other than their birth families, we have developed a permanence planning tracking and monitoring process. This is successfully addressing the possible points of delay for securing nurturing placements for children who need them. Over the last year the business of the Fostering and Permanence Panel has more than doubled and decision-making for children in need of permanence is increasingly more efficient, ensuring children are identified quickly and placed with the minimum of delay.

Our commitment to corporate parenting and ensuring the best outcomes for children and young people underpins our approach to implementing the new duties of the Children and Young People (Scotland) Act 2014. This is resulting in greater numbers of young people “staying put” and electing to remain in foster care and full-time education beyond the age of 16 years and strong performance in maintaining contact with young people after they leave care.

The number of children placed with kinship carers continues to grow and we provide a good package of support for **Approved Kinship Carers**, including practical and financial support. In 2015-16 the arrangements for the assessment and approval of kinship carers has been strengthened and a panel established to bring independence in decisions.

Our award winning **Relationships, Sexual Health and Parenting programme**, created in 2014 in partnership with Angus and Dundee Councils and NHS Tayside, is now embedded across all Perth and Kinross schools. In 2015-16 we added in lesson plans covering the key issues of Child Sexual Exploitation and the Prevent agenda. Feedback from teachers in schools shows that related professional development sessions have been evaluated very positively. We have been asked to present at a number of national events and at the Scottish Learning Festival.

A new multi-agency **[Perth & Kinross Young Carers Strategy 2015-2018](#)** was launched November 2015. The number of young people being identified as Young Carers has risen from 49 in 2010 to 272 in 2016 and this strategy aims to embed a sustainable model of support for all Young Carers in Perth &

Kinross. Over half of Perth and Kinross Schools now have a designated worker specifically to support young carers at their school.

**Evidence2Success** is aimed at improving outcomes for children and young people across Perth and Kinross, with the priority outcomes identified being: Healthy Gestation and Birth, School Readiness, Engagement with School, and Emotional Well-Being. Delivery of the 5 phases of Evidence2Success is well progressed and activity is now in the final phase, this includes implementation of the following evidence-based programmes/practice to deliver improvement in the five priorities.

The **Incredible Years** evidence-based programme is improving children's behavioural, social and emotional development. Monitoring of the last three cohorts of groups identified that of the 170 children for whom pre and post evaluations of behaviour were collected, 140 (82%) had an improved behaviour score at the end of the groups; this included 47 children for whom their behaviour had improved to the extent of being in the normal range. Ongoing monitoring of the impact and implementation of this programme will continue to ensure that it is targeted appropriately. Development of the workforce delivering the Incredible Years programme has been strengthened through engagement with the Psychology of Parenting Programme delivered by NHS Education for Scotland which provides free training/professional development and resources.

Implementation of the **Strengthening Families** programme, also with a strong evidence base, has indicated that it is reducing the likelihood of risk-taking behaviour by young people completing the group work programme, building young people and parent's levels of resilience and improving parenting capacity. In particular, parents have identified that it is reducing stress levels in the home and they are using the techniques introduced through the programme to remain calm when managing challenging behaviours.

An expansion of **Infant Massage** classes for targeted families is improving attachment; increasing confidence in parenting; reducing stress and anxiety of babies and/or parents;

and improving sleeping, digestion or circulation problems for babies.

The provision of Infant Massage classes is part the activity of the **Early Years Collaborative** to enhance attachment and communication between babies and parents/carers which will improve children's School Readiness. Other activity also included the introduction of **Treasure Pouches** to initiate communication between babies and care givers. Measures of the impact of using Treasure Pouches all indicate that their use has enabled parents to be more attuned to their babies' needs and able to encourage their baby to engage and communicate. As a result parents are more able to support their babies to gain experiences that aid healthy development.

In 2015/16 a second **School Engagement Action Research** (SEAR2) project was delivered and supported five schools to complete projects. Outcomes from these focus particularly on workforce development. Individual evaluations identified that SEAR 2 led to improvement in staff confidence in action research skills, project management and understanding of areas of influence within school engagement. In addition, a resource will be produced for schools who wish to influence engagement, outlining "what works", based on the experience of Perth and Kinross schools, as well as academic research and a model for supporting generic action research in any area of school improvement activity

To share the learning that has been gained through collecting and analysing data to inform the strategic commissioning, two

**Evidence2Success conferences** were held in November 2015 and March 2016. These conferences were attended by leaders and practitioners from the Scottish Government, other local authorities, health boards and public sector organisations. The learning from Evidence2Success has informed the subsequent roll out of the Scottish Government's Better Outcomes programme and Realigning Children's Services programme which have worked with up to 9 other Community Planning Partnerships to implement similar data gathering and strategic commissioning approaches.



# Developing Educated, Responsible and Informed Citizens

Raising attainment and achievement for all is a key priority for Education and Children's Services. Improving standards is embedded in our approaches to Getting it Right for Every Child, through Curriculum for Excellence (CfE) and into a range of adult learning opportunities.

We continue to provide proportionate support and challenge to schools through the School Improvement Framework leading to positive evaluations in external inspection.

Each year [Education Scotland](#) inspects and reports on the quality of education in schools and pre-school centres (including partner providers). Evaluation of each school's performance is assessed across five quality indicators, including three core quality indicators:

## Core quality indicators

- Improvements in performance
- Learners' experiences/children's experiences
- Meeting learning needs

## Quality indicators

- The curriculum
- Improvement through self-evaluation

## Pre-school Inspections

During academic session 2015/16 five pre-school centres were inspected. The proportion of centres being evaluated as good or better in relation to the quality indicators remains high, with 83% of those inspected achieving these evaluation ratings, well above our comparator authorities<sup>7</sup> (29%) and the national average (64%).

## Errol Nursery Class

<sup>7</sup> Highland, Scottish Borders, Argyll & Bute, Aberdeenshire, Stirling.

## Children's Experiences: **Very Good**

*Children are confident, independent and move between activities with ease. Staff listen very well to children and take very good account of their views.*

Inspection of Errol Nursery Class, January 2016, Education Scotland

## Abernethy Nursery Class

Improvement through self-evaluation: **Very Good**

*Staff work closely with other schools to plan programmes of learning. The Parent Council is fully engaged in the life of the school. The school seeks the views of parents and children to help the school identify areas for improvement.*

Inspection of Abernethy Nursery Class, November 2015, Education Scotland

## Primary Inspections

During academic session 2015/16 five primary schools were inspected. Four of the five schools inspected were evaluated as satisfactory or better in relation to all five quality indicators.

*Detailed statistics on inspection results are included in Appendix 1.*

Analysis of primary inspection performance over the past five years shows that we have consistently performed above our comparator authorities on all quality indicators rated as Good or better, apart from Meeting Learning Needs (60%), which dropped slightly below the Comparator (67%) and the national average (70%).

## Forgandenny Primary School

Meeting learning needs: **Very Good**

*Children understand the purpose of their learning and how it connects to the world of work and their lives beyond school. Their learning connects them to the wider local, national and global community.*

Inspection of Forgandenny Primary School,  
May 2016, Education Scotland

## Kenmore Primary School

The Curriculum: **Very Good**

*The Headteacher and staff are very clear that the curriculum at Kenmore Primary School enables children to develop a sense of identity and should equip them with skills for their future lives. This appropriate vision has been developed and shared successfully with the whole school community.*

Inspection of Kenmore Primary School, April  
2016, Education Scotland

To support the inspection process, feedback is routinely gathered from parents and pupils in each establishment. Following the inspections carried out this year some highlights from the parent surveys included: almost all (97%) parents reported that their child felt safe at school; almost all (95%) stated that their child enjoyed learning at school; and most (92%) were happy overall with the schools inspected. Results for pupils broadly mirrored the parent questionnaires with most (90%) stating they felt safe and cared for in school; most (89%) stating they enjoyed learning at school.

Inspection reports are scrutinised by Members of the Executive Sub Committee of the Lifelong Learning Committee. Twelve months after an inspection a progress report on any key areas for improvement identified at the time of the inspection is provided to the Area Lead Officer (Education Scotland) and parents. Where a school has not been evaluated as good or better, the Executive Sub Committee of the Lifelong Learning Committee may choose to further scrutinise the progress made.

All schools produce School Improvement Plans and School Standards and Quality Reports. The school improvement process is now well established and, in addition to formal inspections, a range of school specific

information is submitted by all schools in relation to performance management, planning for improvement and self-evaluation leading to improvement.

During 2015/16 Education Scotland tested a range of new approaches to inspection. Following evaluation, four new inspection models were introduced in a phased manner from August 2016: full Inspection model, short inspection model, localised thematic model and neighbourhood model.

These new models use How Good is Our School 4th edition quality indicators, which have been aligned with the National Improvement Framework for Scottish Education and the Scottish Attainment Challenge:

- 1.3 Leadership of Change
- 2.3 Learning, Teaching and Assessment
- 3.2 Raising Attainment and Achievement
- 3.1 Ensuring Wellbeing, Equality and Inclusion

School visits provide clear direction about areas for improvement. The results of Extended Learning and Achievement Visits are published on each school's page at [www.pkc.gov.uk/schools](http://www.pkc.gov.uk/schools)

**We continue to make good progress with implementation of Curriculum for Excellence (CfE) in line with our strategic framework *Creating a Curriculum for Excellence*.**

**CfE Levels of Progression:** There is continued improvement in pupils' progress at Early, First, Second and Third levels across the key areas of reading, writing, mathematics & numeracy and listening/talking. All indicators show a sustained long term improvement, although a dip in P4 and P7 performance is indicated in the latest year. P1 performance was measured for the first time. This year, for the first time, this information was submitted at anonymised pupil-level to Scottish Government for analysis and publication.

**Table 1: P1 Curriculum for Excellence**

| P4                     | Pupils making very good progress at Early Level or above |            |
|------------------------|----------------------------------------------------------|------------|
|                        |                                                          | 15/16<br>% |
| Reading                |                                                          | 91.0       |
| Writing                |                                                          | 89.8       |
| Listening & Talking    |                                                          | 92.6       |
| Mathematics & Numeracy |                                                          | 92.3       |

Source: ECS/SEEMIS

**Table 2: P4 Curriculum for Excellence**

| P4                     | Pupils making very good progress at First Level or above |            |            |            |
|------------------------|----------------------------------------------------------|------------|------------|------------|
|                        | 12/13<br>%                                               | 13/14<br>% | 14/15<br>% | 15/16<br>% |
| Reading                | 90.1                                                     | 91.7       | 93.5       | 92.6       |
| Writing                | 87.4                                                     | 89.7       | 91.9       | 90.3       |
| Listening & Talking    | 91.9                                                     | 92.7       | 94.4       | 94.0       |
| Mathematics & Numeracy | 90.6                                                     | 91.3       | 93.6       | 92.8       |

Source: ECS/SEEMIS

**Table 3: P7 Curriculum for Excellence**

| P7                     | Pupils making very good progress at Second Level or above |            |            |            |
|------------------------|-----------------------------------------------------------|------------|------------|------------|
|                        | 12/13<br>%                                                | 13/14<br>% | 14/15<br>% | 15/16<br>% |
| Reading                | 85.2                                                      | 87.0       | 89.9       | 87.1       |
| Writing                | 80.1                                                      | 81.5       | 87.3       | 85.2       |
| Listening & Talking    | 85.0                                                      | 87.5       | 91.5       | 88.3       |
| Mathematics & Numeracy | 84.3                                                      | 86.8       | 88.1       | 86.7       |

Source: ECS/SEEMIS

**Table 4: S3 Curriculum for Excellence**

| S3                     | Pupils secure at Third Level or above |            |            |            |
|------------------------|---------------------------------------|------------|------------|------------|
|                        | 12/13<br>%                            | 13/14<br>% | 14/15<br>% | 15/16<br>% |
| Reading                | 65.8                                  | 69.3       | 73.0       | 76.3       |
| Writing                | 63.1                                  | 67.3       | 72.1       | 73.5       |
| Listening & Talking    | 66.1                                  | 70.8       | 77.6       | 77.4       |
| Mathematics & Numeracy | 68.6                                  | 75.4       | 77.1       | 78.0       |

Source: ECS/SEEMIS

Further information: [Attainment in Perth and Kinross Schools 2016](#)

Clear procedures for monitoring and tracking children and young people's progress of attainment and achievement in Listening and Talking, Reading, Writing and Maths are in place. All schools have access to guidance describing elements of tracking and monitoring in the Broad General Education with a corresponding spreadsheet developed by the Management Information Systems team. This supports sound judgments to be made on a learner's progress, attainment and achievement when a range of information is gathered, analysed and used.

**Literacy and Numeracy:** The Talk, Listen, Communicate (TLC) programme written in partnership with ECS and NHS Tayside Speech and Language Therapy aims to upskill staff to support children's language development. Over the past four years almost all Partner Provider nurseries have completed the TLC accreditation process. Nurseries report an enhanced understanding of children's language development and increased confidence in identifying and supporting children with speech and language needs and better partnership with working with Speech and Language Therapy.

Literacy Coordinators and Numeracy Coordinators hold regular meetings, to enable effective and mutually supportive relationships to develop across schools. This has strengthened transition and a shared understanding of literacy and numeracy standards. There is a clear focus on driving forward the responsibility of all staff in literacy and numeracy developments. Coordinators have a very good knowledge of local and national priorities and direction, and share this in their schools and Local Management Groups (LMG).

**This year's SQA results demonstrate that we are continuing to make very good progress in raising the attainment of pupils in Perth and Kinross.**

This year saw Perth and Kinross schools present entirely for the new national qualifications as part of CfE which are now fully established.

As CfE continues to mature, the measures used to show progress have been adapted. *Insight* is the Scottish Government senior phase benchmarking tool that assists the

Service and schools support the key principles and purpose of CfE.

Insight utilises a Virtual Comparator, which takes the characteristics of each Perth and Kinross pupil and matches them to 10 similar pupils from across Scotland. This benchmark is an effective way to help understand the authority strengths and areas for improvement.

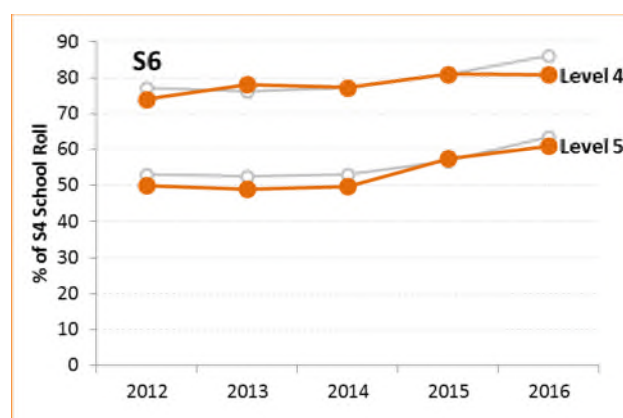
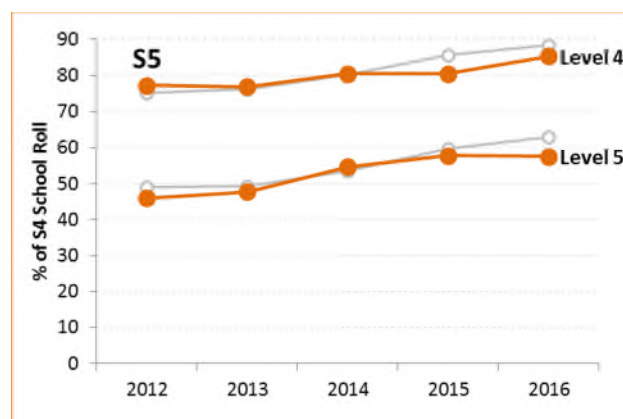
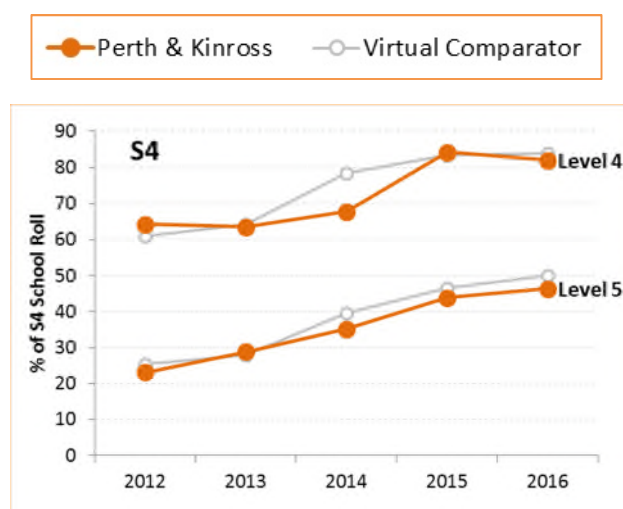
Comparison of Insight measures over time should currently be viewed with some caution as earlier figures relate to different qualifications and situations where individual course units were not recognised as they currently are, or where pre-S4 presentation took place. As new qualifications establish further, the reliability of time series trends will improve.

### Improving Attainment in Literacy and Numeracy

Literacy and numeracy are vital in wider success in learning, life and work in the modern world and workplace. This indicator includes attainment from a range of courses including English, Gaidhlig, ESOL, Literacy, Mathematics, Lifeskills Mathematics and literacy and numeracy units.

Results at SCQF Levels 4 and 5 for S4, S5 and S6 pupils achieving both literacy and numeracy are shown in Figure 1. Time series information provided by Insight shows long-term improvements at Levels 4 and 5 for all years, although the virtual comparator has generally exceeded PKC performance.

**Figure 1**



### Case Study: Closing the Communication Gap

Research tells us that at age three the average vocabulary scores for children from low-income households are significantly below that of children from high-income households and at Primary 1 there is an 18 months difference which then has a significant impact on learning throughout school.

Working collaboratively with Speech and Language colleagues, Talk Listen and Communicate training was delivered to early years staff in 18 local authority schools and centres identified as having high levels of poverty, to support children's language and communication development and early reading skills. Brunch and Blether sessions and home link Blether Bags were introduced to further support parents in their children's learning. All settings have developed plans for improvements in closing the communication gap.

The investment in staff development had a positive impact on how staff approached the project and staff engagement with set homework activities showed an improvement in staff practice. The personal invitation from the children inviting parents to the Brunch and Blether resulted in higher attendance than previous parent group sessions

*"Reminded me that there are so many fun activities with little resources to enhance vocabulary and language" (Early Childhood Practitioner)*



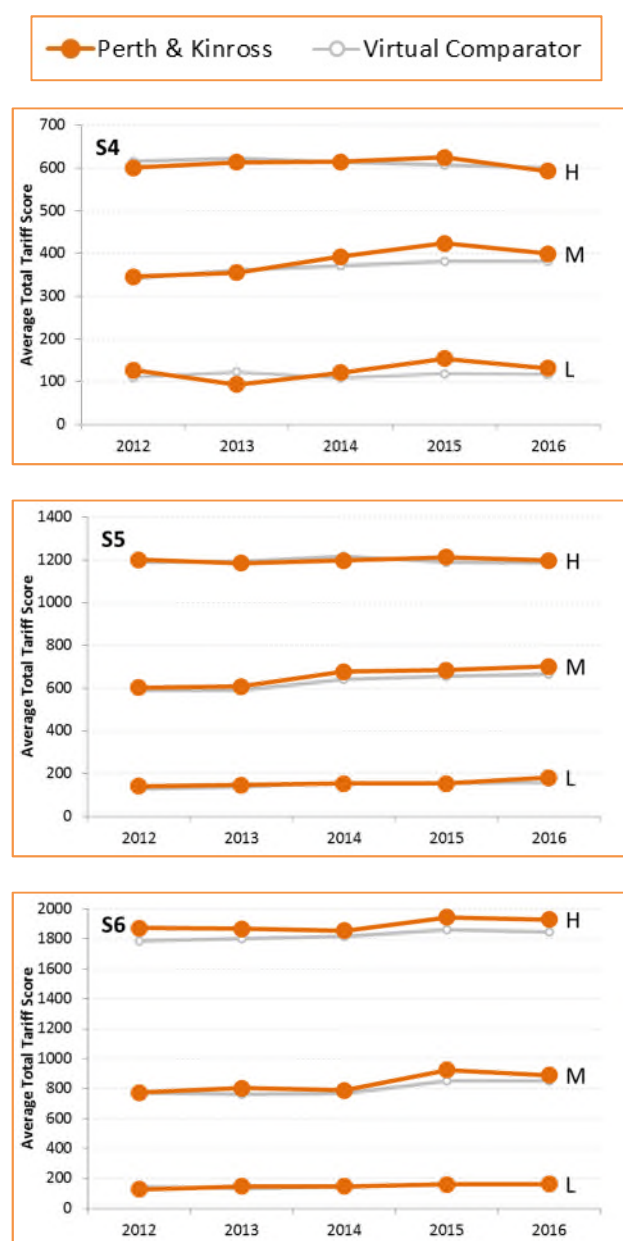
## Improving Attainment for All

The overall aim of this measure, together with the subsequent one involving deprivation is to understand how pupils attain as highly as possible 'across the board' by considering the average total tariff score of the top-attaining 20%, middle-attaining 60% and lowest-attaining 20% groups of pupils.

At S4, average tariff scores have decreased slightly at all levels of attainment, whereas at S5 and S6 achievement at all levels is largely unchanged.

**Figure 2**

**H – Highest 20%**  
**M – Middle 60%**  
**L – Lowest 20%**

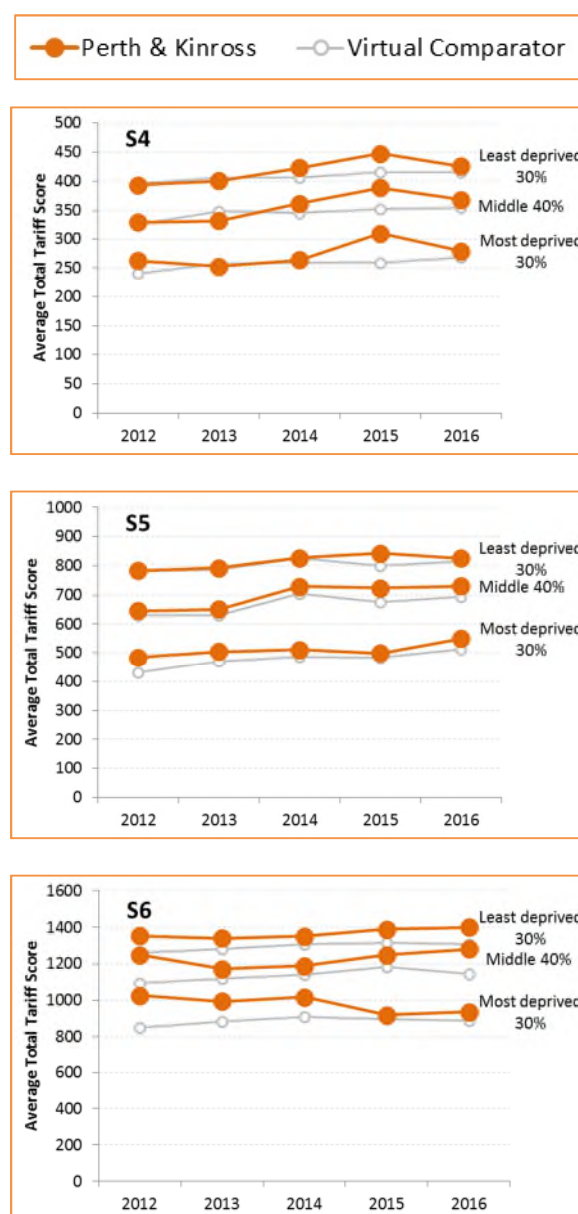


## Attainment and relationship with deprivation

This measure aims to show how pupils attain by considering attainment across deprivation deciles. This has an important role in helping understand and challenge the 'attainment gap' between pupils from the most and least deprived areas.

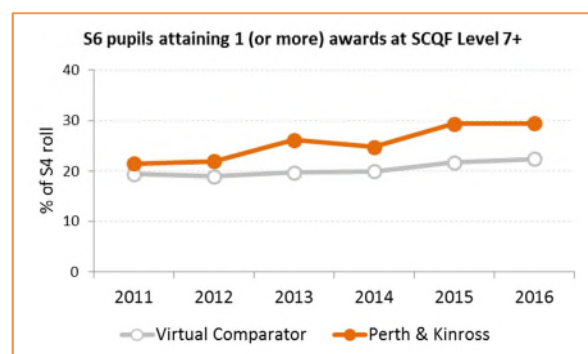
Looking at how tariff scores have changed by broad groups of deprivation (Figure 3) indicates that while all have shown some long-term improvements, improving the attainment pupils from more deprived areas remains a key challenge, including in measurement as smaller numbers mean greater year-on-year variation.

**Figure 3**



**Supporting high achievers:** Almost one in three S4 pupils (29%) left school at the end of S6 with at least one Advanced Higher Grade. Results at this level continue to show a strong performance, improving and performing higher than the comparator.

**Figure 4**



More complete details on attainment can be found in the report [Attainment in Perth and Kinross School 2016](#).<sup>8</sup>

**Gaelic Education:** Gaelic Medium Education (GME) is currently provided in two primary schools; Goodlyburn Primary School and Breadalbane Academy. The number of children receiving primary GME has increased to 36 at the 2016 pupil census (up from 25 in 2015).

The service employs a Gaelic Development Officer to promote and support Gaelic Medium Education and deliver and commission Adult and Family learning opportunities.

Gaelic is delivered through the Gaelic Language in Primary Schools (GLPS) initiative within primary schools and nurseries in Highland Perthshire. There are currently 650 primary pupils across 6 schools that benefit from GLPS, and 2 further teachers participated in GLPS training during 2015/16.

2015/16 performance in Gaelic literacy and numeracy for GME learners was gathered and reported to Scottish Government as part of its wider CfE collection.

**Looked After Children:** We continue to support the achievement and attainment of Looked After Children. Table 5 shows there has been an increase in the attainment of Looked After Children. Although attainment of

Looked After Children remains below the Perth and Kinross average, care should be taken in interpreting these figures given the small number of pupils and the individual nature of their needs and circumstances. The Education Additional Support Officer, together with the Looked After Co-ordinators in schools, track the attendance and achievement of looked after young people on an individual and on-going basis and ensure that appropriate support packages are in place.

**Table 5: Children Leaving Care**

| Indicator                                                                       | 13/14 | 14/15 | 15/16 |
|---------------------------------------------------------------------------------|-------|-------|-------|
| % of children leaving care who attained at least one subject at SCQF Level 3    | 79%   | 76%   | 100%  |
| % of children leaving care who achieved English and Mathematics at SCQF Level 3 | 67%   | 56%   | 68%   |
| Number of children/young people ceasing to be looked after                      | 19    | 25    | 19    |

Source: LAC SQA Attainment 2015/16

**English as a Second Language:** Schools continue to be successful in supporting the learning of young people for whom English is a second language.

In S4 last year, 40% of 62 pupils achieved at least five awards at Level 5 or better.

In S5, of the 53 pupils, 53% have achieved at least five awards at Level 5 or better and 72% attained at least one Higher Grade.

In S6, of 25 pupils, 68% have achieved at least five awards at Level 5, 92% achieved at least 1 award at Higher or better and 56% achieved at least one Advanced Higher or better.

**Equity and Excellence:** Education and Children's Services recognise the need to raise attainment for all and close the poverty-related attainment gap. Development of this priority throughout 2015/16 culminated in the Perth & Kinross [Raising Attainment Strategy 2016-2019](#) being approved in August 2016. This work also sets a range of [actions](#) to address the National Improvement Framework priorities.

In January 2016, ECS identified 16 primary schools and 4 secondary schools where 16% or greater of children and young people live

<sup>8</sup> Further school-level information on attainment is also available on [Parentzone](#), provided by Education Scotland.

within areas of deprivation. Led by the Educational Psychology Team, the Closing the Gap programme of support was designed to provide embedded, sustainable and flexible developments within each school.

Primary schools are encouraged to consider areas of evidence-based intervention such as:

- Literacy
- Peer Tutoring
- Parental Coaching
- Self-regulation
- Early Years Vocabulary

Secondary schools are encouraged to consider:

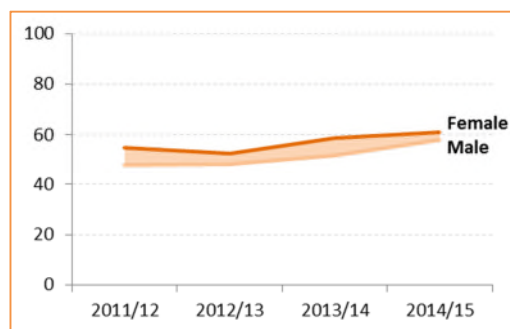
- Peer Tutoring
- Mentoring
- Problem-solving approaches

The interventions planned through the Closing the Gap programme are supported by the attainment advisor for Perth and Kinross, through Education Scotland, and subject to an action research model led by the Educational Psychology team. This will ensure that appropriate evidence is gathered on the impact of these interventions.

**Attainment by gender:** In line with the national picture, girls continue to outperform boys in SQA attainment; however the performance of boys is on a continued upward trend.

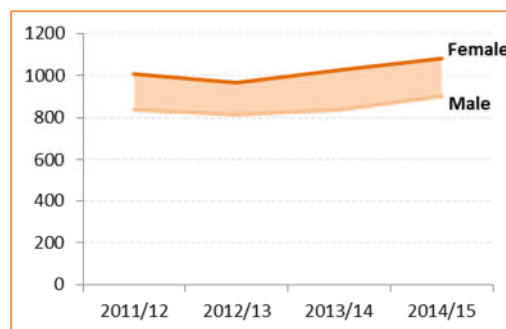
The gender gap between attainment in literacy and numeracy has reduced slightly in the last 4 years, and is now at 3.4%, below both the Virtual Comparator (7.1%) and the National average (6.4%).

**Figure 5: % leavers achieving Literacy and Numeracy @ SCQF Level 5 or above**



In terms of average total tariff points, the gap has remained largely the same, and in percentage terms is now at 17%, the same as the Virtual Comparator and the National average.

**Figure 6: Average total tariff points for school leavers**



### Case Study: Pause Prompt Praise

Letham Primary School identified a need to improve literacy, and as part of a review of their literacy provision and progression for children, they also identified a need to engage parents in supporting reading. Pause, Prompt, Praise is named as an effective intervention for supporting parents to help their children's reading by the Joseph Rowntree Foundation in their study of what works in closing the attainment gap.

Educational Psychologists met with the Letham Primary School Primary 1 teacher, literacy teacher and class teacher to plan the intervention to work with parents to develop materials to support parents with literacy approaches to use with their children. The support material was further adapted in consultation with parents and staff, and this approach will form part of ongoing development.

Evaluative discussion with parents found that children were more willing to read at home, look forward to doing home activities, enjoyed being involved and looked forward to the sessions. There was also a positive impact on their writing and spelling. Involving children in the sessions provided some family fun, practice and reinforcement of concepts, and also acted to encourage parents to attend.

*"Homework is not a chore anymore." (Parent)*

A Pan-Tayside partnership was established between Angus, Dundee City and Perth and Kinross Councils to ensure readiness to meet the 2020 implementation of Language Learning in Scotland: A 1+2 Approach, which envisages every child having an opportunity to learn two languages in addition to their first language.

A 1+2 approach was a feature of all primary school Improvement Plans for session 2015-16. All primary schools delivered Language 2 (L2) French to Primary 1 at a minimum. Most schools have exceeded the requirements and are delivering L2 across all primary stages.

A total of 450 members of staff have now received training using the Power Language Platform (PLP) resource, which supports schools by linking language learning with other areas of the curriculum. All schools now have some or all staff trained to use the PLP. 26 teaching staff (including secondary) have undertaken Modern Language Co-ordinator (MLC) training to support a sustainable model of training at school and Local Management Group level. Further training will continue in 2016/17.

**Learning and Teaching Approaches:** The Education Psychology Service ran two projects over the course of the session to support staff with development of good self-regulation skills for children and young people. Sixteen staff completed the project with participants reporting a significant increase in their ability to help children develop self-regulation and classroom impact.

Seven schools were involved in the second year of the 'School Engagement Action Research', arising from Evidence2Success. Participants rated very positive impact for the skill development in school engagement factors, project management and action research.

In the second phase of the Tapestry Programme, Teacher Learning Community (TLC) leaders engaged in four support sessions involving around 150 teachers. Across our primary schools TLCs have proved to be effective in promoting professional collaboration and professional dialogue. This has been facilitated by the sharing of good practice peer observations and constructive feedback.

Evaluations have been positive, with 91% of Tapestry Leaders seeing an impact on learners in their classrooms and 100% being confident in supporting the development of TLCs in their establishment. The success of the TLCs is evident through the continued use of the model. A number of schools are using the approach for collegiate working in taking

forward their school improvement agenda including the 1+2 approach to language learning, Growth Mindset, Outdoor Learning and Literacy.

**Developing the Young Workforce:** Aimed at linking employers with schools to support positive career paths for young people, the Career Ready Programme continues to grow. Kinross and Breadalbane were the final High Schools to join this year, and 60 pupils joined the programme this session making a total of 147 pupils who have engaged with the programme since its launch. Six new employers also signed up to support the programme during 2015/16 bringing the total number of employers up to 30.

Workshops for mentors and a new programme of master classes were delivered by local employers. Additional funding has been awarded to the programme to scope out a pre-career ready programme for piloting in 2017/18.

**Employer Engagement:** We held our second employer engagement conference called "Employer Engagement Works!" where good practice workshops were delivered to school staff, employers and the 3rd Sector showcasing progress from the previous conference. The Developing the Young Workforce regional chair was the keynote speaker at the conference and officially launched the regional board with their future plans. We continue to review the quantity and quality of meaningful work placements for all young people.

**Careers Education:** During the audit of 2015/16, schools were tasked to review their Careers Education Programme mapping the activities against the Career Education Standard. Early in 2016/17 schools will be required to benchmark pupils' entitlements against the Career Education Standard and any actions for improvement to be included in their school improvement plans. In 2016/17 an audit in Primary Schools will baseline existing employer engagement.

**Additional Support Needs:** Navigate is an off-site service for S1-S4 pupils offering support to young people with social, emotional and behavioural difficulties. Navigate provides an individual package of additional support and education for young people whilst they remain



on the school roll. While care needs to be taken in interpreting figures given the small number of pupils and the individual nature of their needs, in 2016, 88% of Navigate attendees achieved SQA literacy and numeracy awards by the end of S4, compared to 69% in 2015. Just over half (56%) achieved other awards. During 2015-16 Navigate worked with 59 young people, always working towards supporting young people back into full-time education or positive post-16 destinations.

Navigate continues to seek views from all stakeholders for self-evaluation and improvement to ensure that we are able to improve the outcomes of the most vulnerable young people in Perth and Kinross.

The Educational Psychology Service provided consultation with key school professionals for 365 children and young people. The focus of these consultations included anger, aggression, bereavement and loss, transition, wellbeing and sexualised behaviours. The most commonly reported immediate impact was consultees feeling that they had a plan to meet their need.

**We continue to provide a good range of opportunities for young people to achieve awards and participate in activities that lead to increased self-confidence and resilience.**

**Wider Achievement:** In 2015/16 Education and Children's Services produced the **Perth and Kinross Wider Achievement Standard** for young people in the Broad General Education and Senior Phase of a Perth and Kinross secondary school. The Standard is a set of entitlements ranging from experiences which support skills for work to those which support skills for leadership. It encourages schools to be both ambitious and realistic in terms of defining a set of entitlements representing equity of opportunity for all Perth and Kinross pupils, irrespective of the secondary school they attend.

The new standard sets out to complement the existing profiling process, where pupils record their best achievements in line with the Perth and Kinross Skills Framework as well as take into consideration the new Career Education Standard. Gathering all the evidence of achievements in one place allows pupils to

begin to build the foundation of their first CV. Engaging in regular learning conversations provides them with valuable opportunities to practise talking about their skills in preparation for the supporting statements and interviews required to move into a positive destination post-school.

Aligned with a Curriculum for Excellence, the Council continues to recognise the achievement of young people through a variety of awards, with an emphasis on the development of young people to be successful learners, confident individuals, effective contributors and responsible citizens. Young people participating within the awards have to plan and identify personal goals leading to an increase in confidence, an increase in skills and an increase in independent thinking.

In 2015/16, young people participated in the Duke of Edinburgh Award, Youth Achievement Awards, Dynamic Youth Awards and the Saltire Award. Participation rates are increasing, and reflect a more targeted approach to achievement awards and a slight change of emphasis to working with young people who need more intensive support to complete achievement awards.

In primary schools there are a variety of opportunities for personal achievement. For example, a number of schools utilise Visible Planning which requires teachers to identify planned learning in the context of personal achievement. Some schools have developed wider achievement programmes linked to the four capacities or skills articulated in the PKC Skills framework - Successful learner, confident individual, responsible citizen and effective contributor.

Learners' achievements are being recognised and shared in a number of ways, including the use of achievement walls, portfolios of learning, the P7 profile and social media. This not only values learners' achievements, but also enables teachers and schools to monitor and track participation in wider achievement in order to provide opportunities and support where required.

Across all Perth & Kinross secondary schools, S5 pupils have an opportunity to take part in the **Sports Coaching** Project. In June, new intake S5 pupils gain coaching and first aid qualifications in a chosen sport, supported by Active Schools and the Gannochy Trust. They then volunteer throughout the year to deliver extra-curricular activities for younger pupils or

at local sports clubs. The experience also counts towards the Sports Leader, Duke of Edinburgh and Saltire Awards.

**Attendance:** We work in partnership with parents, children and other stakeholders to ensure that, wherever possible, all children enrolled in our schools receive an education that offers the opportunity for children to maximise their potential. All schools monitor the attendance of children and young people within their establishments, and effective systems are in to identify patterns of absence and act appropriately to address emerging issues.

Attendance levels have dropped slightly since last year, though the difference is less than 1%. Compared to the secondary sector, attendance over the past three years has been consistently higher in the primary and special sectors.

**Table 6: % Attendance**

|                  | 2013/14     | 2014/15     | 2015/16     |
|------------------|-------------|-------------|-------------|
| <b>Primary</b>   | 95.7        | 95.4        | 95.3        |
| <b>Secondary</b> | 92.5        | 91.8        | 91.5        |
| <b>Special</b>   | 94.2        | 95.6        | 95.3        |
| <b>Total</b>     | <b>94.3</b> | <b>93.9</b> | <b>93.7</b> |

Source: SEEMIS

We recognise that in order to raise attainment for all and close the poverty-related attainment gap we must work with our families and communities, including ensuring greater attendance at school for more young people facing adversity.

Key to improving attendance are positive relationships, a sense of belonging and a meaningful participation through the curriculum. Identifying and addressing issues early is critical. Schools are also proactively working with a range of partners and other agencies to improve attendance at school.

**Exclusions:** Exclusions from primary schools have increased compared to last year with a continued decrease in secondary schools. The overall number of incidents continues to drop. The rate of exclusion in the secondary sector is consistently higher than in the primary sector.

**Table 7: Number of Exclusion Incidents**

|                  | 2013/14    | 2014/15    | 2015/16    |
|------------------|------------|------------|------------|
| <b>Primary</b>   | <b>96</b>  | <b>94</b>  | <b>111</b> |
| <b>Secondary</b> | <b>397</b> | <b>386</b> | <b>362</b> |
| <b>Total</b>     | <b>493</b> | <b>480</b> | <b>473</b> |

Source: SEEMIS

The number of pupils involved in exclusions is small, and represents a small proportion of the overall school roll.

**Table 8: Pupils excluded (% of roll)**

|                  | 2013/14           | 2014/15           | 2015/16           |
|------------------|-------------------|-------------------|-------------------|
| <b>Primary</b>   | 60 (0.6%)         | 60 (0.6%)         | 77 (0.8%)         |
| <b>Secondary</b> | 235 (3.1%)        | 221 (2.9%)        | 205 (2.7%)        |
| <b>Total</b>     | <b>295 (1.7%)</b> | <b>221 (1.2%)</b> | <b>205 (1.2%)</b> |

Exclusion is an important, but infrequently used measure. We continue to support the on-going development of approaches to ensuring the social and emotional wellbeing of children and young people.

Development of restorative approaches across schools has continued. Working collaboratively with Education Scotland and local consultants, six champions training opportunities were delivered resulting in over 100 champions able to deliver training to staff in their schools. The training, using locally adapted materials and resources, was evaluated as being very high quality.

To support longer-term sustainability of the approach, training was also delivered to others working with children and young people, such as Youth Services and Intensive Support team staff. A needs analysis was undertaken in relation to other staff groups and training will be provided during 2016-17 as well as further networking sessions and ongoing support for champions.

Support has been provided to a pilot school to develop restorative peer mediation, with a view to sharing practice during 2016-17. A short life working group of relevant staff has been identified to consider adaptation of restorative approaches for use with the full range of children with additional support needs, and this group will produce guidance and materials during 2016-17.

Self-evaluation of implementing Restorative Approaches has taken place in schools, as well as evaluation information gathered through the champions' networks, and this will be repeated in 2016-17.

Partners from Education Scotland and University of Edinburgh have recognised the planning and implementation of Restorative Approaches in Perth and Kinross as an example to other authorities.

**Lifelong Learning:** Development of adult literacies skills in Perth and Kinross currently focuses on employability and work, financial skills, learning for families and for wellbeing.

In 2015/16 the Adult Literacy & Numeracy Partnership delivered 5,811 session hours to 929 adults who learned new literacies skills, strengthened the existing ones or decided what else they might want to learn in order to understand and shape the world they live in.

Lifelong Learning is delivered within Perth & Kinross by the Adult & Family Learning Team which includes the Learning Curve and P&K Adult Literacies Workers.

Our approach is informed most recently by Adult Learning in Scotland: Statement of Ambition (2014) which has 3 core principles: that learning should be lifelong, that adult learning should be life wide, and adult learning should be learner centred. A key feature of provision is to empower and support adults to develop the knowledge, skills, confidence and creativity needed to make positive life choices, support economic growth, enhance health and wellbeing, participate in their local communities and take social action. Activities are planned in localities, respond to local needs and are delivered with both internal and external partners.

In 2015/16 we worked with 201 people involved in Family Learning; 309 people involved in Parenting programmes; 290 Adult Learners; 221 Employability Skills learners; 371 Adult Literacies learners; 380 ESOL learners.

The Learning Curve in AK Bell Library is an administrative centre for Adult Literacy and Numeracy (ALN) Partnership and the English for Speakers of Other Languages (ESOL) Network. Their key objective is to provide

adult literacies and ESOL learning opportunities so that "every citizen in Scotland has literacies capabilities necessary to bridge the poverty gap, to understand and shape the world they live in, and to enjoy the rich knowledge and benefits that being able to read, write and use numbers can bring" (Strategic Guidance for Adult Literacies in Scotland 2020)

In 2015/16 the project's main focus was to support individuals in development of their skills for employment, managing finances, family learning and learning for wellbeing. In 2015/16 the organisations which form the ALN Partnership collectively delivered 5,811 session hours to 929 adults, 60% of whom were age 25-50 and 26% age 50+.

#### Case Study: Intergenerational Practice

##### South Perth Community Partnership and Perth High School IT Project

This project brought together Perth High School pupils and members of the South Perth community to work together and share relevant skills. S6 School pupils shared knowledge relating to new technologies, social media and IT whilst the community members shared skills in baking and craft making.

11 group sessions were held in total when everyone worked together and another was held to evaluate the project and agree proposals for the next year's activities. The long term plan is to run this project with school pupils every academic year. It is hoped that in time this will assist in challenging isolation for certain older community members, help challenge stereotypes between older and younger people and promote positive images of people of all ages.

The project won an award at the Generations Working Together national recognition award ceremony 2016.

*"I think it's a great idea to have young people working with elderly people to try to get rid of assumptions and stereotypes about both generations." (Pupil)*

*"Every one of the folks from Craigie and Moncreiffe has spoken very highly of their experience and don't really want to stop" (Participant)*

# Supporting People to Lead Independent, Healthy and Active Lives

Improving the quality of life for individuals and communities remains a key priority. Education and Children's Services have a key role in supporting children, young people and families to make positive choices in relation to their health and wellbeing.

**We deliver a broad range of activities which help children, young people and families make positive choices in relation to their health and wellbeing.**

**Wellbeing:** Evidence2Success surveys conducted in 2013 identified that almost 10% of young people aged between 11-15 years reported issues relating to poor emotional wellbeing. When interrogated further this data showed that 15% of the girls and 4% of boys between 11-15 years reported these issues. In response to the need to improve this outcome the **Emotional Wellbeing Collaborative** was launched at a Learning Session in Perth in June 2016. This initiative, the first improvement collaborative approach focused on emotional wellbeing in Scotland, will deliver the improvement sought by:

- Building resilience and coping skills in young people;
- Up-skilling parents, carers and practitioners to support young people to have positive emotional wellbeing and manage minor mental health issues, enabling more young people to live happy and healthy lives in the community and at home; and
- Positively influencing culture change across services for children and young people in Perth and Kinross to increase the promotion of good health and wellbeing for all.

The Collaborative uses an evidence-based improvement methodology to bring together services and local people to work collectively and increase the impact of improvement in prevention and response to the concerns of young people. Members of the Collaborative include staff from Education, Services for Children, Young People and Families, Health services such as School Nursing and Child and Adolescent Mental Health Services, and a range of third sector agencies. As well as drawing together this group of professionals,

work is underway to engage young people, parents and carers to engage with and inform the activity that the collaborative will focus on. Key areas currently being developed as improvement projects include Peer Support, use of Growth Mindset theory and Family Learning programmes.

The uptake of **Free School Meals** is at an all-time high of 64% in Primary and 58% in Secondary, up from 44% and 32% respectively in recent years. The introduction of universal Free School Meals for P1-P3 has resulted in an uptake of 81% in P1-P3. Development of meal provision has continued, including the introduction of a fourth menu option, the replacement of the main food servery at Blairgowrie High School, reconfiguration of the kitchen at Inchture and the introduction of online payments for school meals.

28 Primary schools in Perth and Kinross currently take part in the **Daily Mile**, an initiative to encourage children to go out for around 15 minutes each day and run/walk in the fresh air, to improve children's physical and mental health and wellbeing.

The benefits include improved fitness, reductions in obesity, improved focus in the classroom, sociable benefits from a new social environment and an awareness of health and wellbeing among children. Parents report that children, sleep better, eat better and do more exercise with the family.

**Family Clubs** offer parents/carers and children the opportunity to take part in activities designed to enable them to build positive relationships and to learn together. Through a programme of activities families learn about healthy lifestyles, eating choices, the importance of play and being physically active together, as well as developing more supportive family relationships and appreciating the opportunity to spend quality time together.

Family Clubs also assist with reducing social isolation by enabling families to develop the skills to establish and maintain support networks within their own community. Families establish relationships with local staff who provide them with support, information and signposting to other services and learning opportunities or support them in their journey into volunteering or employment. Many parent/carers go on to access other learning programmes which will help them to support their child's learning including: literacies and core skills groups, Parents groups, Parents Early Education Partnership (PEEP) Groups, Incredible Years and Strengthening Families programmes.

This year has seen significant progress in delivering high quality **physical education** in Primary schools. Supported by Career-Long Professional Learning sessions, teachers have been able to broaden and enhance their skills, knowledge and confidence. There has been a focus on schools with pupils from areas of deprivation, developing pupil confidence, self-esteem and engagement through an enhanced quality P.E. experience.



## Engaging with Service Users

This section of the report presents an overview of how Education and Children's Services engages with stakeholders to inform service development and improvement.

Education and Children's Services are engaged in a number of **transformation** projects aimed at improving services that are delivered and the efficiency of how this happens. **Consultation** with a broad range of stakeholders is crucial to the success of these projects, including with parents, children and young people, staff, partner organisations and communities/ citizens.

A variety of processes are used to engage with children, young people, their families and carers around vulnerability and protection, including the annual ***How Good is Our School at Helping Me to Stay Safe Survey***. This year over 4,800 primary and secondary pupils took part, from across Perth and Kinross schools. This is the largest number ever to take part and shows a significant increase over the number taking part in 2015 (1,740). The results clearly demonstrate that children and young people have a good awareness and understanding about keeping themselves safe; a good knowledge of where and when to seek help and a confidence that they would get the help when they needed it.

Schools use a variety of techniques to gather views from pupils, parents and carers. We actively engage with the parents of children in schools. Parents are involved in Extended Learning and Achievement visits and a range of partners are involved in locality evaluations around the learning community.

Buiding on consultation undertaken in 2014, work continued in 2015/16 to plan for further consultation with parents/carers on current and future **early years and childcare** provision. This has recently been completed.

Feedback from school **Extended Learning and Achievement Visits** reflect many positive messages, with children commenting that they are proud of their school, that they feel safe, and that they enjoy the range of activities that they are involved in. Parents comment positively on communication and the responsiveness of school staff.

In addition, Elected Members are invited to attend all public meetings held after the publication of an inspection report. Parent's views are sought before, during and after all Additional Support Needs (ASN) meetings to determine satisfaction in process and procedures and parents views are also sought during *Navigate* reviews.

In March 2016, the **recruitment** process for Headteacher and Depute Headteacher posts was reviewed and provided the opportunity for Elected Members, parents and previous candidates to comment on the different models that were being tested and provide feedback to shape the recruitment process.

The involvement and contributions of Elected members and Parent Council Representatives was identified as strengthening the recruitment process.

The Council's **Complaints Handling Procedure** involves a two stage process: Frontline Resolution (FLR) and Investigation. Most FLRs are dealt with at the point of service delivery and usually concern issues around dissatisfaction with the service delivered or a member of staff. Investigations are usually concerned with more serious matters or where an FLR has not been resolved. 2015/16 has seen another rise in the recording of FLRs, mainly due to further embedding of the recording of complaints within our schools. Only 8% of FLRs were escalated to Stage 2, indicating the effective early resolution of complaints by ECS staff at the FLR stage.

ECS complaints are activity scrutinized and monitored by Heads of Service through weekly reports for Stage 2 Investigations and monthly reports for Stage 1 FLRs.

Improvements identified through complaints investigation are dealt with by the senior manager responsible for that service area. This is an important part of the process, as it can help us learn from a complaint, reduce the possibility of a similar complaint arising and can lead to improved customer satisfaction with our services. Complaints performance is reported to Education & Children's Services Senior Management, who monitor compliance

with timescales and examine any emerging trends within areas of our Service.

### **Social Work Complaints**

The Public Services Reform (Social Work Complaints Procedure) (Scotland) Order 2016 brought social work complaints handling into line with other local authority complaints handling by bringing it under the remit of the Public Services Reform (Scotland) Act 2010. Under the Act, the SPSO has the authority to lead the development of model complaints handling procedures (CHPs) across the public sector. Therefore, from 1 April 2017, Social Work complaints handling will be brought into line with the existing Local Authority Complaints Handling Procedures, with the aim of implementing a consistent process for customers to follow which makes it easier to complain, ensures staff and customer confidence in complaints handling and encourages making best use of lessons learned from complaints. The new Social Work CHP will have timescales of: Stage 1 FLR (5 working days and up to 15 working days in exceptional circumstances) and Stage 2 Investigation (20 working days).

*More detailed information on complaints is contained in Appendix 2.*

# How Well Do We Improve the Quality of Our Work?

This section of the report presents an overview of Education and Children's Services' capacity for improvement.

## Developing, managing and improving partnerships

We have a strong focus on developing, managing and improving partnerships at both strategic and operational levels. This is based on a long history of our Community Planning Partnership organisations working together to deliver better outcomes for children, young people and families through a joint approach to the strategic planning and commissioning of children's services. Over the years this has been evident in our effective delivery of improvement in areas such as early years, child protection, managing transitions for children and young people with complex disabilities and parenting.

Delivering improvement through partnership working and use of improvement science has been integral to enhancing outcomes for children and young people through Evidence2Success and the Early Years Collaborative. This will be further developed in the newly formed Emotional Wellbeing Collaborative established to improve the emotional wellbeing outcomes of young people in Perth and Kinross. This initiative builds on existing relationships between the Educational Psychology Service and Child and Adolescent Mental Health Services (CAMHS) from NHS Scotland who meet to review working links to ensure effective practice in working with children, young people and families.

The leadership and commitment of the Children, Young People and Families Partnership has been integral to our robust partnership achievements and supports a strong joint health and social care approach within services for children and young people in Perth and Kinross.

## Inclusion, equality and fairness in service delivery

The ECS **Equality Working Group** is chaired by the Director (Education and Children's Services), and meets regularly to discuss a range of equality issues including health inequalities, LGBTI, Corporate Parenting, and

attainment. ECS is a member of Stonewall's Education Champions Programme which has enabled training sessions to be delivered for teaching staff, Train the Trainer courses, attendance by group members to Education Conference and advice on our anti-bullying strategy. The Working Group is also using Stonewall's Education Equality Index as a self-evaluation tool.

Information and good practice is shared across services with representation also at the Community Equality Advisory Group and Equality and Diversity Member Officer Working Group.

A Review of **Inclusion Services** is underway aiming to ensure that children and young people with additional support needs are provided with the most effective service within a reduced budget with a focus on preventative spend. The review aims to reduce duplication of services, to improve integrated working and to improve holistic outcomes for children, young people and families through GIRFEC principles.

**AllStars** is a specialist educational provision that aims to transform the lives of children and families affected by severe social, emotional and behavioural difficulties. It enables children who are significantly disadvantaged by life circumstance to divert their futures towards positive outcomes.

A revised service model of Allstars has resulted in the team providing support to a larger number of children, rising from 8 children in 2014-15 to 13 children in 2015-16. The service reports increased engagement with school and increased self-confidence among the young people that they work with, and the development of support skills for the staff involved.



## Leadership

We have a clear commitment to the development of leadership at all levels within schools and within this; the specialist role of Headteachers is recognised as significant in the development and performance of a school.

Aspiring and new Headteachers are supported to develop and continue to build the necessary knowledge, skills and understandings required of senior leaders through the **Into Headship Programme**. This offers masters level learning in liaison with Dundee University and Scottish Centre for Education Leadership.

There are currently four staff studying within the first cohort and six within the second cohort.

We look forward to cohort one successfully completing their studies this session having developed their strategic leadership and management competencies as specified within the Standard for Middle Leaders and Head Teachers.

Since 2013, all newly appointed Headteachers (HTs) have undertaken the ECS **Leadership Development and Induction Programme** (LDIP). The programme supports HTs to better understand and develop their role, responsibility and accountability as a senior officer within the Council and leaders of their communities. The LDIP also encourages experienced HTs to opt-in to relevant aspects of the core programme to revisit and enhance their leadership practice. The Programme was awarded the Scottish College for Educational leadership (SCEL) Endorsement in October 2015.

The new Perth and Kinross **Strategic Leadership Development Programme** (SLDP) was developed through 2016 for launch in October, and presents Senior Executives with the relevant knowledge and strategic thinking to enable them to provide a clear and future focused direction for Perth & Kinross Council. The philosophy of the programme is based on the Learn, Innovate, Grow approach. A blended learning approach will include 4 Masterclasses, Reflective Conversations, Action Learning Sets, a 360° diagnostic and an Organisational Raid.

The Organisational Raid will take place with a selected organisation that is experiencing or has experienced similar challenges to those of Perth and Kinross Council and will provide

learning and insights that can be transferred. The programme will help to “future proof” the organisation by contributing to the leadership development of Senior Managers.

## Workforce / Professional development

In order to build **workforce** capacity at a time of significant demand both locally and nationally across the early years and childcare sector the post of Play Assistant was introduced within local authority nurseries. Play assistants support Early Childhood Practitioners and teachers in their daily work with children and with ancillary tasks. This ensures staff/child ratios are met at all times and supports different models of delivery of Early Learning and Childcare.

The recruitment of these play assistants opened up employment opportunities across Perth and Kinross and attracted both qualified staff and also entrants to the early years and childcare sector who wished to gain paid work with the Council, at the same time as studying towards a professional work-based qualification. This has reinforced career development opportunities for existing PKC employees who undertook career changes.

In January 2016, The **Learn to Teach Programme** saw 12 Council employees begin on an 18-month professional graduate programme delivered by the University of Dundee. The programme comprises of two main components (academic and professional) for primary education and certain subjects for secondary education which are expected to be in the hard to fill subjects.

The professional component has been undertaken in Perth & Kinross Council schools through three 6-week student placements which are supported and assessed. Once the programme has been successfully completed, individuals will be assigned a probationary teaching position within the Perth and Kinross area.

The aim of the programme is to give Council employees already committed to working in Perth and Kinross the opportunity to become teachers in schools across Perth and Kinross. We look forward to welcoming these employees into teaching on successful completion.

The **Future Leaders and Managers Programme** involved 11 candidates in its first year. The Programme is open to all Education

and Children's Services staff who aspire to move into a leadership in the future. The programme focusses on the role of the leader and includes information about leadership styles, values and how to motivate your team. Each candidate is involved in undertaking a work based project to exemplify their learning in the workplace.

On successful completion of this programme, candidates are awarded the Chartered Management Institute certificate at SCQF Level 6 in Leadership and Management from Perth College UHI. Building on the success of the first year, 21 candidates are now involved in the second year of running.

*I found the day both informative and enjoyable. I could correlate almost every part of the discussions and topics during the day to my current job. I think I am going to find this course a worthwhile tool to enable me to become a better leader.*  
Future leaders programme participant

Throughout the year, comprehensive learning sessions for **Headteacher, Deputes and Principal Teachers** are held. These help give information and support regarding current national developments, priorities and expectations, updates on key PKC support resources, and also provide time for colleagues to reflect and discuss their learning and further develop connections and networks.

In 2015/16 the following topics have been covered in these sessions, amongst others:

- Closing the Attainment Gap / Raising Attainment Strategy 2016-2019
- Tracking and monitoring
- Children and Young People's Act 2014/ Child's Plan/ GIRFEC
- Exclusion & Restorative Approaches
- Locality Working
- National Improvement Framework
- School Improvement Planning & HGIOS4
- Leadership for Learning
- Literacy and Numeracy
- The Daily Mile
- HT/ DHT Recruitment

School Improvement Services have supported schools to prepare to engage positively with the inspection process. Headteacher and Depute Headteacher/Principal Teacher Development Days have provided information,

support and guidance about changing expectations, processes and themes of Education Scotland Inspections. Since 2012, an additional day has been held to support HTs to lead and manage the inspection process.

Colleagues from schools recently inspected are invited to share specific actions, evidence and strategies that were evaluated as very good or better. Headteachers and Improvement Services Officers who are Education Scotland Associate Assessors share the key themes arising from their work with inspection teams.

Head teachers across Perth and Kinross, Angus and Dundee Councils joined together in Triad groups for a second year, sharing effective approaches and good practice across Councils.

Eight Head teachers from Perth and Kinross participated in the groups, which supported their own career-long professional development and also the improvement work of their schools. The Triad groups found areas of similarity or interest to focus on and then worked together to share their schools' and Councils' approaches and practice. Head teachers also recommended literature and research to share with school teams. School visits allowed Headteachers to see improvement work in action.

*I found working in the inter-authority triads very inspirational. The experience has broadened my experience and my capacity to support other head teachers in my new role.*  
Head teacher participant

## Continuous Improvement

**Online payments** through ParentPay were introduced during the session, to provide parents and carers with more convenient and flexible methods of payment for all school related products and services, to reduce the administrative burden of cash handling, processing and reconciliation, to improve security for pupils and staff members and to improve reporting and audit processes.

The costs of processing cash and cheque transactions are around three times the costs of processing online transactions so introducing an online school payments solution

offers the opportunity for the Council to reduce these costs by a significant amount.

Self-evaluation continues to inform improvement and planning using a range of 'How Good is...' tools. Our continuing focus will be on evaluating: *How well do we deliver on outcomes? How well do we support individuals and communities? How well do we improve the quality of our work?*

The school improvement process is well established and is delivered through our School Improvement Framework. All schools evaluate the quality of their provision against the quality indicators in How Good Is Our School?<sup>9</sup>.

In March 2016 the Education Psychology Service underwent a [Validated Self-Evaluation](#) with Education Scotland. The EPS found this to be a very useful process that supported authentic dialogue with stakeholders.

Education Scotland validated the service's self-evaluation, stating 'has a very comprehensive and rigorous self-evaluation process which is used very effectively to inform practice and ensure continuous improvement. It has the management capacity to continue to make significant contributions to improving learning and teaching and reducing inequality'.

The Service recognises the need to continue to embed self-evaluation as a systematic, continuous process and to continue to improve evidence, ensuring that evaluations are focused on outcomes.

All schools now have access to an **Attainment Suite**, which provides a variety of data sources and tools which enable school teams to interrogate, analyse and compare their performance at year group, school, Local Management Group (LMG) and authority level. This information can be filtered in many different ways, for example, by SIMD, ACORN, gender and curriculum areas. School Senior Management Teams report that they find this extremely useful, in particular for use in moderation activities and for presenting performance information in a range of ways to a variety of audiences.

The service is undertaking an ambitious programme of **transformation projects**, based on innovation, creativity and flexibility in service delivery and incorporating service design, workforce development, asset management and stakeholder engagement. The transformation approach sets out a path which will allow the organisation to achieve required modernisation and efficiencies to meet the financial challenge and future service demand.

In addition to our involvement in a number of corporate transformation projects covering all council services, Education and Children's Services have a number of key service projects which include:

- Expansion of Family Based Care
- Securing the Future of the School Estate
- Review of Community Campuses
- Review of Inclusion Services
- Review and remodelling of Residential Care Services (Children and Young People)
- Review of Working Week Arrangements in Schools

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<sup>9</sup> A new inspection regime was introduced by Education Scotland in August 2016, at the end of the reported session.

# Appendices

## Appendix 1: Education Scotland Inspection of Schools, Overview by Performance Indicators

| Pre-School                          | Satisfactory or Better |     |         |     |         |     |         |     |         |     |
|-------------------------------------|------------------------|-----|---------|-----|---------|-----|---------|-----|---------|-----|
|                                     | 2011/12                |     | 2012/13 |     | 2013/14 |     | 2014/15 |     | 2015/16 |     |
|                                     | No.                    | %   | No.     | %   | No.     | %   | No.     | %   | No.     | %   |
| Improvements in performance         | 5                      | 100 | 7       | 100 | 5       | 100 | 3       | 100 | 5       | 83  |
| Children's experiences              | 5                      | 100 | 7       | 100 | 5       | 100 | 3       | 100 | 6       | 100 |
| Meeting learning needs              | 5                      | 100 | 7       | 100 | 5       | 100 | 3       | 100 | 6       | 100 |
| The curriculum                      | 5                      | 100 | 6       | 86  | 5       | 100 | 3       | 100 | 6       | 100 |
| Improvement through self-evaluation | 4                      | 80  | 5       | 71  | 5       | 100 | 3       | 100 | 6       | 100 |
| Total Number of Quality Indicators  | 25                     | -   | 35      | -   | 25      | -   | 15      | -   | 30      | -   |
| Total Number of Inspections         | 5                      | -   | 7       | -   | 5       | -   | 3       | -   | 6       | -   |

|  | Good or Better |     |         |     |         |     |         |     |         |    |
|--|----------------|-----|---------|-----|---------|-----|---------|-----|---------|----|
|  | 2011/12        |     | 2012/13 |     | 2013/14 |     | 2014/15 |     | 2015/16 |    |
|  | No.            | %   | No.     | %   | No.     | %   | No.     | %   | No.     | %  |
|  | 5              | 100 | 7       | 100 | 5       | 100 | 3       | 100 | 5       | 83 |
|  | 5              | 100 | 7       | 100 | 5       | 100 | 3       | 100 | 5       | 83 |
|  | 5              | 100 | 7       | 100 | 5       | 100 | 3       | 100 | 5       | 83 |
|  | 4              | 80  | 5       | 71  | 4       | 80  | 3       | 100 | 5       | 83 |
|  | 4              | 80  | 4       | 57  | 4       | 80  | 3       | 100 | 5       | 83 |
|  | 25             | -   | 35      | -   | 25      | -   | 15      | -   | 30      | -  |
|  | 5              | -   | 7       | -   | 5       | -   | 3       | -   | 6       | -  |

| Primary                             | Satisfactory or Better |     |         |     |         |     |         |     |         |     |
|-------------------------------------|------------------------|-----|---------|-----|---------|-----|---------|-----|---------|-----|
|                                     | 2011/12                |     | 2012/13 |     | 2013/14 |     | 2014/15 |     | 2015/16 |     |
|                                     | No.                    | %   | No.     | %   | No.     | %   | No.     | %   | No.     | %   |
| Improvements in performance         | 5                      | 100 | 6       | 100 | 3       | 100 | 4       | 100 | 4       | 80  |
| Learners' experiences               | 5                      | 100 | 6       | 100 | 3       | 100 | 4       | 100 | 5       | 100 |
| Meeting learning needs              | 5                      | 100 | 6       | 100 | 3       | 100 | 4       | 100 | 5       | 100 |
| The curriculum                      | 5                      | 100 | 5       | 83  | 3       | 100 | 4       | 100 | 5       | 100 |
| Improvement through self-evaluation | 4                      | 80  | 5       | 83  | 3       | 100 | 4       | 100 | 5       | 100 |
| Total Number of Quality Indicators  | 25                     | -   | 30      | -   | 15      | -   | 20      | -   | 25      | -   |
| Total Number of Inspections         | 5                      | -   | 6       | -   | 3       | -   | 4       | -   | 5       | -   |

|  | Good or Better |     |         |    |         |     |         |     |         |    |
|--|----------------|-----|---------|----|---------|-----|---------|-----|---------|----|
|  | 2011/12        |     | 2012/13 |    | 2013/14 |     | 2014/15 |     | 2015/16 |    |
|  | No.            | %   | No.     | %  | No.     | %   | No.     | %   | No.     | %  |
|  | 5              | 100 | 5       | 83 | 3       | 100 | 3       | 75  | 4       | 80 |
|  | 5              | 100 | 5       | 83 | 3       | 100 | 4       | 100 | 4       | 80 |
|  | 5              | 100 | 4       | 67 | 3       | 100 | 4       | 100 | 3       | 60 |
|  | 4              | 80  | 5       | 83 | 3       | 100 | 4       | 100 | 4       | 80 |
|  | 4              | 80  | 4       | 67 | 3       | 100 | 4       | 100 | 4       | 80 |
|  | 25             | -   | 30      | -  | 15      | -   | 20      | -   | 25      | -  |
|  | 5              | -   | 6       | -  | 3       | -   | 4       | -   | 5       | -  |

| Secondary                           | Satisfactory or Better |     |         |     |         |     |         |   |         |   |
|-------------------------------------|------------------------|-----|---------|-----|---------|-----|---------|---|---------|---|
|                                     | 2011/12                |     | 2012/13 |     | 2013/14 |     | 2014/15 |   | 2015/16 |   |
|                                     | No.                    | %   | No.     | %   | No.     | %   | No.     | % | No.     | % |
| Improvements in performance         | 2                      | 100 | 2       | 100 | 2       | 100 | 0       | 0 | 0       | 0 |
| Learners' experiences               | 2                      | 100 | 2       | 100 | 2       | 100 | 0       | 0 | 0       | 0 |
| Meeting learning needs              | 2                      | 100 | 2       | 100 | 2       | 100 | 0       | 0 | 0       | 0 |
| The curriculum                      | 2                      | 100 | 1       | 50  | 2       | 100 | 0       | 0 | 0       | 0 |
| Improvement through self-evaluation | 1                      | 50  | 1       | 50  | 2       | 100 | 0       | 0 | 0       | 0 |
| Total Number of Quality Indicators  | 10                     | -   | 10      | -   | 10      | -   | 0       | - | 0       | - |
| Total Number of Inspections         | 2                      | -   | 2       | -   | 2       | -   | 0       | - | 0       | - |

|  | Good or Better |     |         |    |         |     |         |   |         |   |
|--|----------------|-----|---------|----|---------|-----|---------|---|---------|---|
|  | 2011/12        |     | 2012/13 |    | 2013/14 |     | 2014/15 |   | 2015/16 |   |
|  | No.            | %   | No.     | %  | No.     | %   | No.     | % | No.     | % |
|  | 2              | 100 | 1       | 50 | 2       | 100 | 0       | 0 | 0       | 0 |
|  | 2              | 100 | 1       | 50 | 2       | 100 | 0       | 0 | 0       | 0 |
|  | 2              | 100 | 1       | 50 | 2       | 100 | 0       | 0 | 0       | 0 |
|  | 1              | 50  | 1       | 50 | 2       | 100 | 0       | 0 | 0       | 0 |
|  | 1              | 50  | 1       | 50 | 2       | 100 | 0       | 0 | 0       | 0 |
|  | 10             | -   | 10      | -  | 10      | -   | 0       | - | 0       | - |
|  | 2              | -   | 2       | -  | 2       | -   | 0       | - | 0       | - |

Source: Education Scotland Inspection Reports. Inspections analysed above by date of inspection.

## Appendix 2: Complaints

**Table 1: Stage 1 - Frontline Resolutions (FLRs) complaints**

| Number of FLR complaints                                |  | 2015/2016 |         |
|---------------------------------------------------------|--|-----------|---------|
| Total                                                   |  | 437       |         |
| Resolved at Stage One                                   |  | 403       |         |
| FLR Complaints by Category                              |  |           |         |
| Communication                                           |  | 35        | (8%)    |
| Employees                                               |  | 90        | (20.5%) |
| Equalities                                              |  | 2         | (0.5%)  |
| Other                                                   |  | 79        | (18%)   |
| Policy and Procedure                                    |  | 78        | (18%)   |
| Service Provision                                       |  | 153       | (35%)   |
| FLR Response Rate                                       |  |           |         |
| % complaints given full response within 10 working days |  | 78%       |         |
| FLR Outcome                                             |  |           |         |
| Not Upheld                                              |  | 168       | (38%)   |
| Partially Upheld                                        |  | 61        | (14%)   |
| Upheld                                                  |  | 131       | (30%)   |
| Not Disclosed                                           |  | 77        | (18%)   |
| Ongoing                                                 |  | 0         | 0       |

**Table 2: Stage 2 – Investigations**

| Number of Investigations                                            |    | 2015/2016 |  |
|---------------------------------------------------------------------|----|-----------|--|
| Total                                                               |    | 36        |  |
| Number of Investigations by Category                                |    |           |  |
| Communication                                                       | 2  | (5.5%)    |  |
| Employees                                                           | 5  | (14%)     |  |
| Equalities                                                          | 0  | 0         |  |
| Other                                                               | 5  | (14%)     |  |
| Policy and Procedure                                                | 22 | (61%)     |  |
| Service Provision                                                   | 2  | (5.5%)    |  |
| Investigations Response Rate                                        |    |           |  |
| % complaints given full response within timescale (20 working days) |    | 25%       |  |

Formal complaints can take longer than 20 working days to investigate and respond to. This is primarily due to the complexity of the complaint and school holidays. For example, complaints can involve multiple interviews (teachers, pupils, support staff, complainants and other witnesses) and the gathering of information from a range of sources. During the process, the complainant is kept fully informed of the progress of the investigation, the reason(s) for any delay and the revised response date. Whilst the Service endeavours to meet the response timescale, priority is given to a full and robust investigation with an emphasis on resolving the complaint where possible.

| Total number of Investigations<br>Complaint Points | Outcome    |                  |           |                  |               |
|----------------------------------------------------|------------|------------------|-----------|------------------|---------------|
|                                                    | Not Upheld | Partially Upheld | Upheld    | Not Investigated | No Conclusion |
| 142                                                | 87 (61%)   | 22 (15.5%)       | 12 (8.5%) | 4 (3%)           | 17 (12%)      |

**Table 3: Formal Complaints: Social Work**

Number of Complaints escalated to Stage 2

| 11/12 | 12/13 | 13/14 | 14/15 | 15/16 |
|-------|-------|-------|-------|-------|
| 2     | 5     | 5     | 3     | 10    |

Complaints by Category

| Category of Complaint                             | Complaints per category |       |       |       |       |
|---------------------------------------------------|-------------------------|-------|-------|-------|-------|
|                                                   | 11/12                   | 12/13 | 13/14 | 14/15 | 15/16 |
| Service Delivery                                  | 1                       | 1     | 0     | 0     | 3     |
| Staff attitude / performance                      | 1                       | 2     | 5     | 2     | 2     |
| Service Delivery and Staff attitude / performance | 0                       | 2     | 0     | 0     | 1     |
| Customer Service Standards                        | 0                       | 0     | 0     | 0     | 1     |
| Inadequate Service                                | 0                       | 0     | 0     | 1     | 2     |
| Disputed Decision                                 | 0                       | 0     | 0     | 0     | 0     |
| Failed Service request                            | 0                       | 0     | 0     | 0     | 0     |
| Policy / Procedure                                | 0                       | 0     | 0     | 0     | 0     |
| Refusal of Service                                | 0                       | 0     | 0     | 0     | 0     |
| Disputed Assessment                               | 0                       | 0     | 0     | 0     | 0     |
| Officers' conduct                                 | 0                       | 0     | 0     | 0     | 1     |

Response Rate - % of complaints acknowledged within timescale

| 11/12 | 12/13 | 13/14 | 14/15 | 15/16 |
|-------|-------|-------|-------|-------|
| 100%  | 100%  | 100%  | 100%  | 90%   |

Number of complaints escalated to Complaints Review Committee

| 11/12 | 12/13 | 13/14 | 14/15 | 15/16 |
|-------|-------|-------|-------|-------|
| 1     | 0     | 1     | 0     | 1     |

*Social Work complaints have a response timescale of 28 calendar days. This will change to 20 working days from April 2017 when social work complaints come into line with Local Authority complaint handling procedures.*



**PERTH AND KINROSS COUNCIL**

**Housing and Health Committee – 25 January 2017**  
**Scrutiny Committee – 8 February 2017**

**REPORT ON SOCIAL CARE AND SOCIAL WORK  
 IMPROVEMENT SCOTLAND INSPECTIONS (SCSWIS)**

**Report by Director (Housing and Social Work)**

**PURPOSE OF REPORT**

This report advises Committee of the key findings of 11 inspections carried out in Perth and Kinross by the Care Inspectorate in the past year. These have focused on all four quality themes: Quality of Care and Support, Environment, Staffing and Management and Leadership. The report highlights some excellent performance and grades awarded by the Inspectorate across the majority of services, as well as some areas for improvement.

**1. BACKGROUND / MAIN ISSUES**

- 1.1 Care and support services provided for vulnerable members of society are registered and inspected by the Social Care and Social Work Improvement Scotland (SCSWIS) to make sure they are of a high standard and provide quality care and support. SCSWIS is the unified independent scrutiny and improvement body for care and children's services, known as the Care Inspectorate. They regulate services, carry out inspections and award grades based on the findings of their inspections.
- 1.2 The Scottish Government's statutory minimum frequency of inspections means that all services registered in the following categories will receive, as a minimum, an annual unannounced inspection, no matter how well the service has been performing:
  - Care homes for older people
  - Care homes for adults
  - Care homes for children and young people
  - Support services – care at home
  - Housing support services, but only those which are combined with care at home services
  - Secure accommodation
- 1.3 There are 14 services across Perth and Kinross Council which are subject to inspection:
  - Adults with Learning Disabilities (St Catherine's)
  - Beechgrove House
  - Blairgowrie Adult Resource Centre
  - Dalween Care Home
  - Gleneagles Day Opportunities

- Home Care
- Homeless Housing Support
- Kinnoull Day Opportunities
- Lewis Place Resource Centre
- New Rannoch Day Services
- Older People's Housing Support Service
- Parkdale Care Home
- Parkdale Day Support Service
- Strathmore Day Opportunities

1.4 The Care Inspectorate inspect and grade elements of care under quality themes:

- Quality of Care and Support
- Environment
- Staffing
- Management and Leadership

Under each quality theme are 'quality statements' which describe what a service should be doing well under that theme. The Inspectorate then awards grades which reflect how the service is performing in each of the quality themes and statements.

- 1.5 SCSWIS use six grades. Grades of Excellent (Level 6), Very Good (Level 5) and Good (Level 4) represent increasingly better levels of performance. The Adequate (Level 3) grade represents performance SCSWIS find acceptable but which could be improved. Weak (Level 2) indicates concern about the performance of the service and that there are things which the service must improve. Unsatisfactory (Level 1) represents a more serious level of concern.
- 1.6 SCSWIS inspections are proportionate, meaning they spend less time with services they are satisfied provide consistently high standards of care, and these are classed as low intensity inspections. Services where there is more concern receive more intense inspections and are classed as medium or high intensity inspections.

## **2. SUMMARY OF FINDINGS**

- 2.1 Since the last report (Report No. 15/518 in November 2015), 11 of the 14 services have been inspected: Adults with Learning Disabilities Housing Support Service, Beechgrove House, Dalweem Care Home, Homecare, Homeless Housing Support, Lewis Place Resource Centre, Kinnoull Day Opportunities, Parkdale Care Home and Day Care Services, New Rannoch Day Centre and Older People's Housing Support Service.
- 2.2 This report provides an overview of the findings, the details of which are included in the Appendix.



- 2.3 The table below provides a summary of the performance across all services. Levels awarded are based on the services last inspection, and grades awarded are presented as a % of the total number of inspections carried out across the four quality themes.

*Table 1: Overall summary on performance for all PKC services (inspections were carried out between February 2015 and June 2016)*

| Overall Summary on all PKC Services |                                           |                   |                   |                 |             |                       |                  |
|-------------------------------------|-------------------------------------------|-------------------|-------------------|-----------------|-------------|-----------------------|------------------|
| Quality Themes                      | Gradings Awarded by the Care Inspectorate |                   |                   |                 |             |                       | Total            |
|                                     | Excellent<br>(6)                          | Very Good<br>(5)  | Good<br>(4)       | Adequate<br>(3) | Weak<br>(2) | Unsatisfactory<br>(1) |                  |
| Care & Support                      | 3                                         | 8                 | 2                 | 1               | 0           | 0                     | 14               |
| Environment                         | 1                                         | 4                 | 2                 | 0               | 0           | 0                     | 7                |
| Staffing                            | 2                                         | 8                 | 3                 | 0               | 0           | 0                     | 13               |
| Management & Leadership             | 2                                         | 7                 | 3                 | 0               | 0           | 0                     | 12               |
| <b>Total</b>                        | <b>8 (17.4%)</b>                          | <b>27 (58.7%)</b> | <b>10 (21.7%)</b> | <b>1 (2.2%)</b> | <b>0</b>    | <b>0</b>              | <b><u>46</u></b> |

*Source: Care Inspectorate Website as at 25th November 2016*

- 2.4 Of the 11 services inspected, 46 quality themes were assessed for the quality of Care and Support, Environment, Staffing and Management and Leadership. 17% (8) received Excellent, 80% (37) received Very Good/Good grade; all of which represent increasingly better levels of performance. Quality of Care and Support received an Adequate which represents performance that is acceptable to the Care Inspectorate but which could be improved.

No services were awarded grades for Weak or Unsatisfactory, indicating the inspectorate had no concerns about any of the services' performance.

- 2.5 Out of the 11 services inspected, 9 received unannounced inspections and two were announced at short notice.
- 2.6 If the Care Inspectorate is concerned about some aspect of a service, or think it could do more to improve its service, they make a requirement or recommendation. If requirements and recommendations are made, the service must submit an appropriate action plan within the required timescale.

Beechgrove House and Home Care received requirements and recommendations. As a result, they developed action plans outlining improvements and submitted these to the Care Inspectorate. These are detailed in Appendix 1.

- 2.7 The attached report in Appendix 1 provides details on individual inspections. Under each service information is provided for grades awarded for these inspections. The report also highlights strengths identified at the time of inspection, requirements and/or recommendations and improvement actions. The overall assessment is that the vast majority of services have performed consistently well and been graded as Good, Very Good and Excellent.

### 3. CONCLUSION AND RECOMMENDATIONS

- 3.1 This report demonstrates that care and support services across Perth and Kinross in the vast majority of cases continue provide excellent services to some of our most vulnerable people. This is reflected in the external inspection and evaluation by Social Care and Social Work Improvement Scotland and their findings which highlight high standards and quality of care which is informed and acknowledged by people who use the services, their families and carers and staff.
- 3.2 It is recommended the Housing and Health Committee note the contents of this report with regard to Care Inspectorate inspections.
- 3.3 It is recommended the Scrutiny Committee scrutinises and comments as appropriate on the contents of the report.

#### Authors

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|--------------------------------|-----------------------------------|----------------------------------------------------------------------------------------------------|
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| Alan Taylor                    | Head of Corporate IT and Revenues |                                                                                                    |

#### Approved

| Name          | Designation                        | Date                          |
|---------------|------------------------------------|-------------------------------|
| Bill Atkinson | Director (Housing and Social Work) | 12 <sup>th</sup> January 2017 |

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## 1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

| <b>Strategic Implications</b>                       | <b>Yes / None</b> |
|-----------------------------------------------------|-------------------|
| Community Plan / Single Outcome Agreement           | <b>Yes</b>        |
| Corporate Plan                                      | <b>Yes</b>        |
| <b>Resource Implications</b>                        |                   |
| Financial                                           | <b>None</b>       |
| Workforce                                           | <b>None</b>       |
| Asset Management (land, property, IST)              | <b>None</b>       |
| <b>Assessments</b>                                  |                   |
| Equality Impact Assessment                          | <b>Yes</b>        |
| Strategic Environmental Assessment                  | <b>Yes</b>        |
| Sustainability (community, economic, environmental) | <b>None</b>       |
| Legal and Governance                                | <b>None</b>       |
| Risk                                                | <b>None</b>       |
| <b>Consultation</b>                                 |                   |
| Internal                                            | <b>Yes</b>        |
| External                                            | <b>None</b>       |
| <b>Communication</b>                                |                   |
| Communications Plan                                 | <b>None</b>       |

### 1. Strategic Implications

- 1.1 The Community Plan / Single Outcome Agreement 2013-2023 and the Council's Corporate Plan 2013-2018 both set out five objectives which provide clear strategic direction, inform decisions at a corporate and service level and shape resources allocation. The two most relevant objectives are as follows:-

- iv) Supporting people to lead independent, healthy and active lives
- v) Creating a safe and sustainable place for future generations

#### Corporate Plan

As above

### 2. Resource Implications

#### Financial

- 2.1 None

#### Workforce

- 2.2 None

#### Asset Management (land, property, IT)

- 2.3 None

### 3. Assessments

#### Equality Impact Assessment

- 3.1 Under the Equality Act 2010, the Council is required to eliminate discrimination, advance equality of opportunity, and foster good relations between equality groups. Carrying out Equality Impact Assessments for plans and policies allows the Council to demonstrate that it is meeting these duties.
- 3.2 The proposals have been considered under the Corporate Equalities Impact Assessment process (EqIA) with the following outcome:

(i) Assessed as **not relevant** for the purposes of EqIA;

However, the findings of this report will have a positive impact on people's wellbeing as they demonstrate excellent care and support for some very vulnerable people.

#### Strategic Environmental Assessment

- 3.3 The Environmental Assessment (Scotland) Act 2005 places a duty on the Council to identify and assess the environmental consequences of its proposals. However, no action is required as the Act does not apply to the matter presented in this report. The matters presented in this report were considered under the Environmental Assessment (Scotland) Act 2005 and no further action is required as it does not qualify as a PPS as defined by the Act and is therefore exempt.

#### Sustainability

- 3.4 None

#### Legal and Governance

- 3.5 The Head of Legal Services has been consulted and there are no direct legal implications of this report.

#### Risk

- 3.6 The Housing and Community Care Senior Management Team regularly reviews complaints and identifies areas for action.

### 4. Consultation

#### Internal

- 4.1 The Chief Social Work Officer has been consulted in the preparation of this report. He has considered the improvement plans and he is satisfied that these are robust and appropriate

The Heads of Finance and Legal Services have been consulted on this report.

External

None

**2. BACKGROUND PAPERS**

None

**3. APPENDICES**

Appendix 1: Report on Social Care and Social Work Improvement Scotland Inspections (SCSWIS)



## Appendix 1

### Report on Social Care and Social Work Improvement Scotland Inspections (SCSWIS)

#### 1. INTRODUCTION

- 1.1 This annual report provides details of individual inspections of registered care services. The findings show a range of care and support services which perform to a very high standard, offering excellent personalised support which is informed by user, carer and staff engagement and developed as part of a wider commitment to continuously improve. The report also gives examples of where services need to improve in order to achieve higher grades in specific inspection areas. The report highlights strengths identified at the time of inspection, requirements and/or recommendations and improvement actions.
- 1.2 14 services across Perth and Kinross Council are now subject to external inspection. The table below provides an overall summary on performance for all services. Levels awarded are based on the services last inspection, and grades awarded are presented as a % of the total number of inspections carried out across the four quality themes.

*Table 1: Overall summary on performance for all PKC services (inspections were carried out between February 2015 and June 2016)*

**Overall Summary on all PKC Services**

| Quality Themes          | Gradings Awarded by the Care Inspectorate |                   |                   |                 |             |                       | Total            |
|-------------------------|-------------------------------------------|-------------------|-------------------|-----------------|-------------|-----------------------|------------------|
|                         | Excellent<br>(6)                          | Very Good<br>(5)  | Good<br>(4)       | Adequate<br>(3) | Weak<br>(2) | Unsatisfactory<br>(1) |                  |
| Care & Support          | 3                                         | 8                 | 2                 | 1               | 0           | 0                     | 14               |
| Environment             | 1                                         | 4                 | 2                 | 0               | 0           | 0                     | 7                |
| Staffing                | 2                                         | 8                 | 3                 | 0               | 0           | 0                     | 13               |
| Management & Leadership | 2                                         | 7                 | 3                 | 0               | 0           | 0                     | 12               |
| <b>Total</b>            | <b>8 (17.4%)</b>                          | <b>27 (58.7%)</b> | <b>10 (21.7%)</b> | <b>1 (2.2%)</b> | <b>0</b>    | <b>0</b>              | <b><u>46</u></b> |

*Source: Care Inspectorate Website as at 25<sup>th</sup> November 2016*

- 1.3 Of the 11 services, 46 quality themes were assessed for the quality of Care and Support, Environment, Staffing and Management and Leadership. The results were:
- 17% (8) Excellent
  - 80% (37) Very Good/Good grade.

According to the Care Inspectorate the above grades represent increasingly better levels of performance. Quality of Care and Support received an Adequate which represents performance that is acceptable to the Care Inspectorate but which could be improved. No services were awarded grades for Weak or Unsatisfactory indicating the inspectorate had no concerns about any of the services performance.

Out of the 11 services inspected, 9 received unannounced inspections and two were announced at short notice.

1.4 Since the last report to Committee in November 2015 (Report No 15/518), 11 services have been inspected:

- Beechgrove House
- Dalweem Care Home
- Kinnoull Day Opportunities
- Lewis Place Resource Centre
- New Rannoch Day Centre
- Parkdale Care Home and the Support Service
- Adults with Learning Disabilities Housing Support Service
- Homecare
- Homeless Housing Support Service
- Older People Housing Support Service

This report provides detail on these inspections and the key findings.

1.5 If the Care Inspectorate are concerned about some aspect of a service, or think it could do more to improve its service, they make a requirement or recommendation. If requirements and recommendations are made the service must submit an appropriate action plan within the required timescale.

Beechgrove House and Homecare received requirements and recommendations. Action plans were developed as required and submitted to the Care Inspectorate. Full details are provided under Sections 2 and 6 of this report.

1.6 Inspections by the Care Inspectorate provide information on the standards and quality of the services and establishments provided by Community Care and Housing Services in Perth and Kinross. The findings outlined in this report demonstrate the commitment to continuous improvement in the standards and quality of these services.

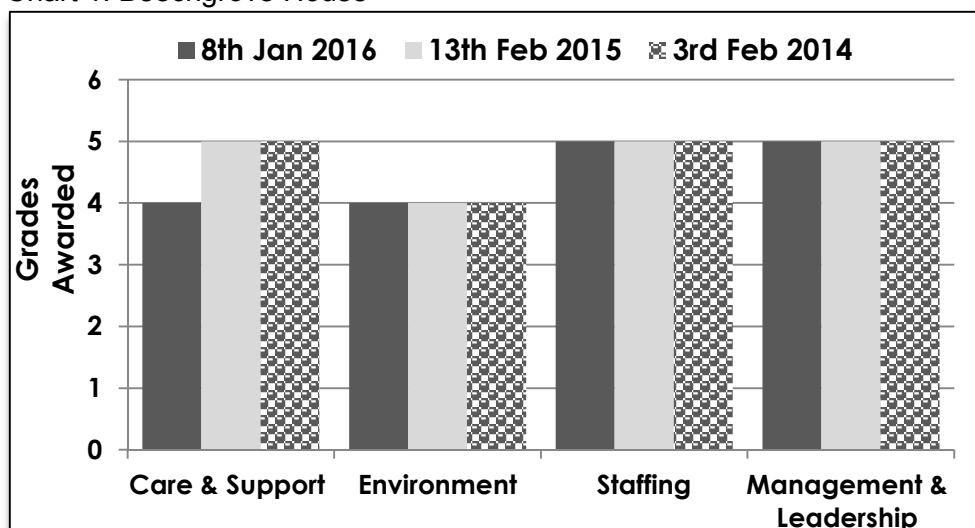
## **2. BEECHGROVE HOUSE**

2.1 The Care Inspectorate carried out an unannounced inspection on 8 January 2016 at Beechgrove House. Beechgrove House provides permanent and respite accommodation to support people who, because of their age or disability, are no longer able to live fully independent lives in the community.



- 2.2 Overall the Inspectorate found that the Beechgrove House staff team work in partnership with people who live in the home and their families to plan and agree personalised plans of care and support. They saw a caring and compassionate group of staff who worked well together to support people who lived in the home. People the Inspectorate spoke to confirmed that they were happy with the care they received living in Beechgrove House.
- 2.3 The level of inspection carried out was of low intensity and the chart below shows the grades awarded for the last 3 inspections:

Chart 1: Beechgrove House



At the latest inspection carried out in 2016 the Quality of Staffing and Management and Leadership received Very Good (*Level 5*), Care & Support, and Environment received Good (*Level 4*). The Chart above highlights that Quality of Environment, Staffing and Management and Leadership all maintained performance over the last three inspections. Quality of Care and Support has slipped from Very Good to Good; two recommendations were made at time of inspection. Full details are provided in para 2.6.

- 2.4 The Inspectorate assessed 8 quality statements in total and awarded 6 Very Good and 2 Good across the four quality themes.
- 2.5 The inspection identified strengths throughout the service including the following:
- ✓ The service continued to consult with a range of people on a regular basis. Evidence provided demonstrated a structured and regular approach to consultation with people where feedback was valued and used to help develop and improve the service.
  - ✓ A new care plan format was being introduced. These provided good person centred information about the person which was important when developing plans of care and support.

- ✓ An 'All About Me' had been completed with people. This document provided a summary of people's care and support needs and is a useful tool to support people who may have to go to hospital.
- ✓ People were generally happy in the environment, bedrooms had been personalised to provide a warm and homely space for people to enjoy.
- ✓ The Care Inspectorate received feedback from some family members during this inspection who confirmed that they were always made to feel welcome when visiting their relative and that staff kept them up to date in relation to the wellbeing of their relative.
- ✓ Overall staff demonstrated that they had very good person centred values that were embedded in day-to-day practice and said they were happy with the support they received from staff.

2.6 Two recommendations were made at the time of inspection. An action plan is in place to take forward recommendations and improvements identified by the Care Inspectorate:-

- Quality of Care and Support - Recommendation 1: The manager should ensure that information pertaining to people's care and support is readily available for staff to refer to and is stored securely.
  - ✓ *A review of archived files was carried out in January this year, all support plans have been transferred onto new files keeping all service user information in the one file and easily accessible. The archiving of files is part of the 'support plan audit' which is carried out before supervision takes place. This ensures that relevant and in date documents are kept on file. The service also carries out internal quality assurance audits every 3 months.*
- Quality of Environment – Recommendation 1: The Provider should take appropriate action to address the recommendations made within the recent fire inspection.
  - ✓ *The procurement process to take forward the identified works is currently underway. The Corporate Health, Safety and Wellbeing Consultative Committee are kept up to date by the Head of Property regarding programming of these works.*

2.7 There are no outstanding requirements or recommendations from the previous inspection.

2.8 Clients and carers spoke highly of the staff and all respondents in the inspectorate questionnaires were overall happy with the care provided and said they felt treated with respect. Some of the comments residents made were:

- *"I am very happy with the care I receive here."*
- *"I attend residents meetings, I can voice my opinion."*
- *"We are very well cared for here."*

Staff worked well together as a team which helped to maintain good outcomes for people and demonstrated a very good knowledge about the care and support that people who lived in the home needed. The Inspectorate observed that staff responded to people's needs discretely and in a manner that preserved their dignity and privacy.

2.9 Beechgrove House continuously improves its services and has an action plan in place to progress the above recommendations and further improvements including:

- Quality assurance system is in place and audits take place every 3 months to maintain high standards of quality care and meet the needs of individual service users.

### 3. DALWEEM CARE HOME

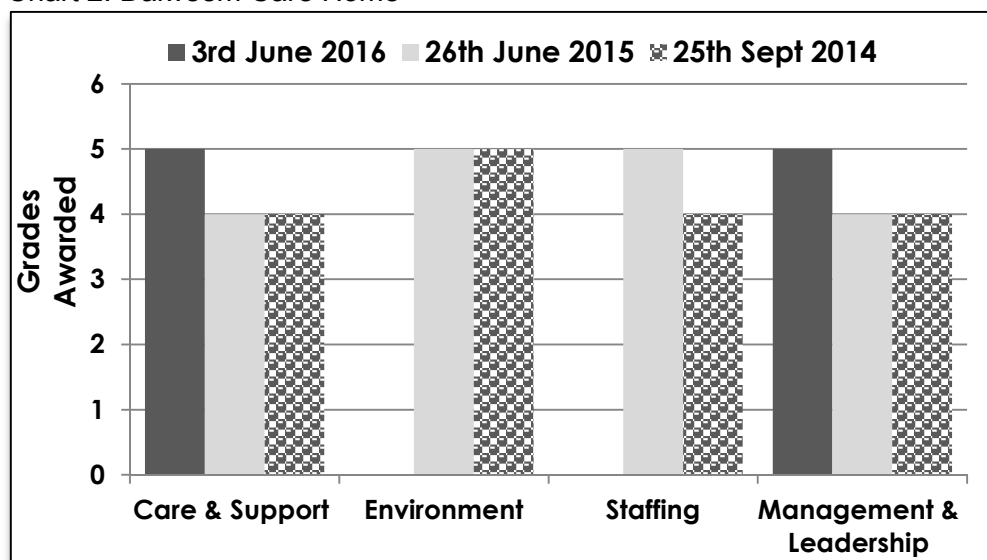
3.1 The Care Inspectorate carried out an unannounced inspection on 3 June 2016 at Dalweem Care Home. The care home is registered to provide care for up to 16 older people and aims to provide high standard care services, enabling all older people to remain as independent as possible.

3.2 During inspection the Inspectorate found that Dalweem care home provides a very good service to residents and relatives. There are very good levels of satisfaction with the quality of the overall service. A high priority is given to making sure residents feel safe, listened to and well supported in a way that meets their needs in accordance with their individual choices and preferences. Staff and management work hard to provide a person-centred model of care in a homely atmosphere.

Residents said that they were supported in their preferred way and there was a good range of activities available.

3.3 The level of inspection carried out at the Care Home was of low intensity. The following chart provides grades awarded for the last 3 inspections:

Chart 2: Dalweem Care Home



Please Note that Quality of Environment and Staffing were not inspected in 2016

At the latest inspection carried out in June 2016 the Quality of Care and Support and Management and Leadership received Very Good (*Level 5*). The Chart above shows that Quality of Care and Support and Management and Leadership have both improved from Good to Very Good since last inspection.

- 3.4 The inspectorate assessed 4 quality statements in total and awarded Very Good for Quality of Care and Support and Management and Leadership.
- 3.5 The inspection identified strengths throughout the service including the following:
- ✓ The Care Inspectorate observed staff supporting residents with dignity, respect and compassion. Staff demonstrated very good values in their work with residents and each other. Their evaluation was that this ethos was developed throughout the home by the management team.
  - ✓ The Inspectorate carried out a medication check to ensure that residents were receiving their prescribed medication. They were satisfied that safe procedures were in place for the management and administration of medication.
  - ✓ During inspection the Care Inspectorate observed lunchtime dining experience and found that residents were actively engaged and encouraged by staff to make choices from the menu and were given the appropriate level of assistance to eat their lunch.
  - ✓ The Inspectorate audited money held by the service securely for residents who may be unable to manage their money themselves. They found that residents' finances were very well managed and clearly accounted for at the service.
- 3.6 There were no requirements or recommendations made at the time of inspection, however, previous requirements from the last inspection on 26 June 2015 included:
- The provider must ensure that the information and guidance in residents' care plans and risk assessments is clear, consistent and accurately reflects their current health and support needs.
  - The provider must develop and implement a safe and effective system for the management and administration of medication.
- ✓ *The Inspectorate were satisfied that both requirements had been met.*
- 3.7 The Inspectorate spoke with residents and relatives during their visit and also observed a mealtime experience. Some of the findings included:
- Residents told the Inspector that they liked the meals and thought the quality of food and the presentation was good.
  - The Inspectorate was satisfied overall that the staff at Dalweem were attentive to residents, knew their main needs, responded to health changes and provided a relaxed and caring atmosphere.

- Residents said they were very happy living at Dalweem and staff were happy to work at the home. The environment was welcoming and homely.

3.8 Dalweem Care Home works to continuously improve services and has an action plan to progress key improvements including:

- 'Talking Mats' training is to be undertaken by all staff to ensure that those service users with communication difficulties can also participate in the consultation and review process.
- Quality assurance audits are undertaken in the 3 Council-run homes (cross audits) which has supported consistency across the three homes in the service and quality that they provide.
- A development plan is being compiled showing how staff suggestions are considered through Employee Review and Development (ERD) /Supervision and how these suggestions can contribute to the development of the service.

#### **4. PARKDALE CARE HOME and SUPPORT SERVICE**

4.1 The Care Inspectorate carried out an unannounced inspection on 13 January 2016 at Parkdale Care Home and Day Care Support Service. Parkdale provides permanent and respite accommodation to support people who, because of their age or disability, are no longer able to live fully independent lives within the community.

The Day Care Support Service for older people is also provided on the premises. This service is registered separately with the Care Inspectorate and is subject to a separate inspection.

4.2 Overall the Inspectorate found that Parkdale Care Home performs very well and is supported by a manager and staff who are committed to the development and improvement of the service for people who live in the home. The staff team worked in partnership with people who lived in the home and their relatives to plan and agree personalised plans for care and support.

The Inspectorate found the environment for the Day Care Service warm and welcoming and the staff enthusiastic and caring. People who use the service told them they enjoyed attending the activities that are available.

- 4.3 The level of inspection carried out was of low intensity. Table 2 provides grades awarded for the last 3 inspections for the Care Home and Day Care Service, which shows consistently high performance and grade:

Table 2: Parkdale Care Home and Support Services

| Quality Theme             | Parkdale Care Home                                  |          |          | Parkdale Support Service                            |          |                      |
|---------------------------|-----------------------------------------------------|----------|----------|-----------------------------------------------------|----------|----------------------|
|                           | 13/01/16                                            | 23/01/15 | 09/01/14 | 13/01/16                                            | 06/02/13 | 24/05/10             |
| Care & Support            | Very Good (Level 5) over the last three inspections |          |          | Very Good (Level 5) over the last three inspections |          |                      |
| Environment               | Very Good (Level 5) over the last three inspections |          |          | Very Good (Level 5) over the last two inspections   |          | Not Assessed in 2010 |
| Staffing                  | Very Good (Level 5) over the last three inspections |          |          | Very Good (Level 5) over the last three inspections |          |                      |
| Management And Leadership | Very Good (Level 5) over the last three inspections |          |          | Very Good (Level 5) over the last two inspections   |          | Not Assessed in 2010 |

At the latest inspection carried out in 2016 all quality themes received Very Good (*Level 5*) for both Care Home and Day Care services. The table above highlights that over the last three inspections services have maintained a Very Good level of performance.

- 4.4 The inspectorate assessed 8 quality statements in total and awarded all statements Very Good across the four quality themes for the Care Home and the Day Care Services.
- 4.5 The inspection identified strengths throughout the service including the following:
- ✓ The service continued to consult regularly with a range of people. This was carried out in a structured manner to make sure regular opportunities were available for people to express their views and opinions and contribute to the development of the service.
  - ✓ A new care plan format had been introduced. These provided good person centred information about the person which was important when developing plans of care and support.
  - ✓ The environment was clean, comfortable and welcoming. Staff carried pagers that enabled the team to summon assistance from staff in other areas of the home if necessary. This helped make sure people were supported safely.
  - ✓ People who used the Day Care service were included in residents' meetings within the care home. It was observed from the minutes that day care was discussed and there were opportunities for people to talk about activities as well as the environment and the food.

4.6 There were no recommendations or requirements made at the time of inspection and none outstanding from the last inspection for both Care Home or Day Care Services.

4.7 The Inspectorate spoke informally with residents living in the home, who told them that they were happy living at Parkdale. Some of the comments included:

- *"I am always made welcome by staff. They treat me and my (relative) with great respect."*
- *"I can rest easy knowing (my relative) is in excellent hands."*
- *"Staff are very good', 'I can go to staff if I need to."*
- *"As a family we are very happy with the care my (relative) is receiving."*

Staff knew people well and responded to their needs discretely and with respect. Staff were observed to be warm and caring when supporting people and this was confirmed by people who lived in the home and relatives.

People said they enjoyed coming along to the day service. They enjoyed the company and the activities that were offered, staff were very good and that they enjoyed the food.

4.8 Although no requirements or recommendations were made at the time of inspection, Parkdale Care Home and Day Care Support continue to improve the services they deliver. They have an action plan in place to progress improvements including:

- Parkdale have been working to improve the methods of consultation with service users using the 'My Home Life resource'
- The service is looking at ways to improve the environment for residents who have dementia using the 'Kings Fund' audit tool.
- Further development is underway of the existing Activity Planner to include more physical activity and to support residents to make and maintain links with the local community.

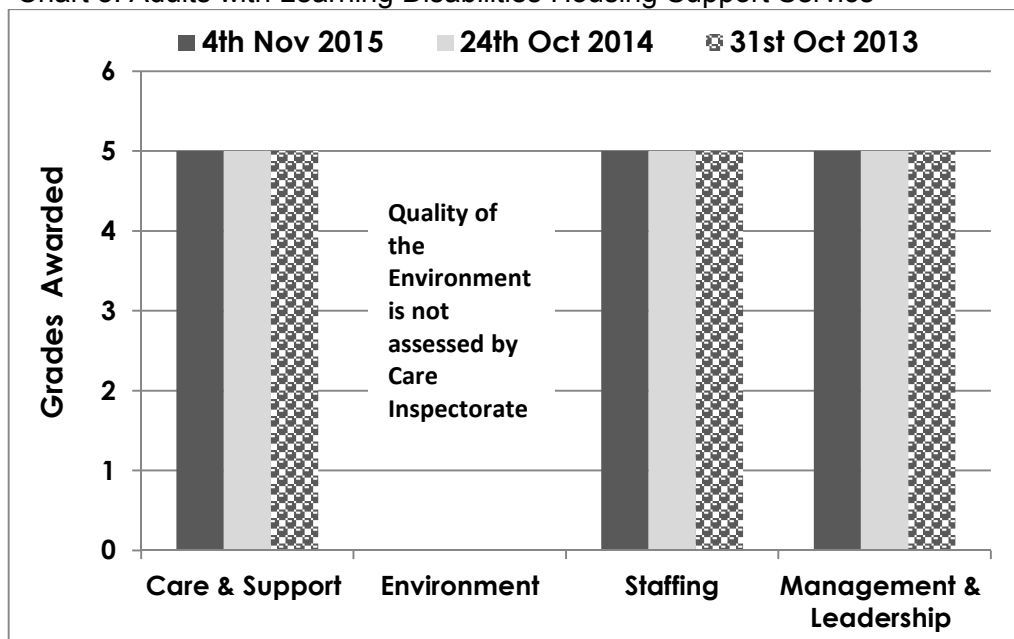
## **5. ADULTS WITH LEARNING DISABILITIES HOUSING SUPPORT SERVICE**

5.1 The Care Inspectorate carried out an unannounced inspection on 4 November 2015 for the Adults with Learning Disabilities Housing Support Service. This service supports adults with a learning disability who need care and housing support services in their own home. The service aims to develop and encourage decision-making skills and involvement in the planning for all aspects of their lives.

5.2 Overall the Inspectorate found that the service works hard to involve service users in the development of the service, particularly in identifying how they would like to receive their own care. Service users said they got on well with the staff who provided them with support, and they felt comfortable that they could complain or raise any issues which concerned them.

- 5.3 The level of inspection carried out was of low intensity. The following chart provides grades awarded for the last 3 inspections:

Chart 3: Adults with Learning Disabilities Housing Support Service



*Please note that Quality of Environment is not assessed by the Care Inspectorate*

At the latest inspection carried out in 2015 Quality of Care and Support, Staffing and Management and Leadership all received Very Good (Level 5). The Chart above highlights that the service has maintained Very Good levels of service over the last three inspections which shows consistently high grades and performance.

- 5.4 The Inspectorate assessed 6 quality statements in total and awarded Very Good (Level 5) for Quality of Care and Support, Staffing and Management and Leadership.
- 5.5 The inspection identified strengths throughout the service including the following:
- ✓ During inspection a sample of service users' support plans were reviewed. It was found that support plans were generally very person-centred, with information which had obviously been provided by service users.
  - ✓ Records sampled as part of the inspection were seen to be respectful with evidence that staff treated service users with dignity and respect.
  - ✓ Staff had a good knowledge of relevant good practice, such as the National Care Standards, and the Scottish Social Services Council codes of conduct.
  - ✓ All service users had worked with staff to complete an 'All About Me', which recorded a variety of useful information which could be used if the service user was, for example, admitted to hospital. During the inspection the Inspectorate saw that this worked well when one person



was admitted to hospital on an emergency basis, and the information had been available to nursing staff.

- 5.6 There were no recommendations or requirements made at the time of inspection and none outstanding from the previous inspection.
- 5.7 During the inspection the Inspectorate visited people in their own homes and spoke to them about the service they received. All service users were happy with the service they received and were able to tell them about how staff supported them to be as independent as possible and make good use of local facilities. They made comments such as:

- *“I like (staff member), they help me get organised and do my shopping.”*
- *“I can knock on the door of the staff flat if I need extra help.”*
- *“I know who is coming in to help me, they tell me who to expect.”*

During the inspection it was observed that staff interacted well with service users, had a good knowledge of their individual needs and how best to communicate with them.

- 5.8 Although no requirements or recommendations were made at the time of inspection, Adults with Learning Disabilities Housing Support Service continuously improve their services and have an action plan in place to progress improvements including:
- A Service Newsletter has been implemented and is being shared with all tenants supported, parents, and carers quarterly. This informs all parties of current service delivery, general information, “What’s On”, etc. For 2017 the service aims to distribute the tenants’ newsletters in a more appropriate and effective Easy Read format.
  - Increased use of Social Stories, Guidelines, and Procedures in an Easy Read format for tenants.
  - Improved learning and development with tenants through the use of approved well-being training and educational methods such as “Healthy Eating, Healthy Living”, “Keeping Safe”, Adult Protection”, and “Josephine” (to help women with learning disabilities explore a range of issues, in a confidential and supportive environment).

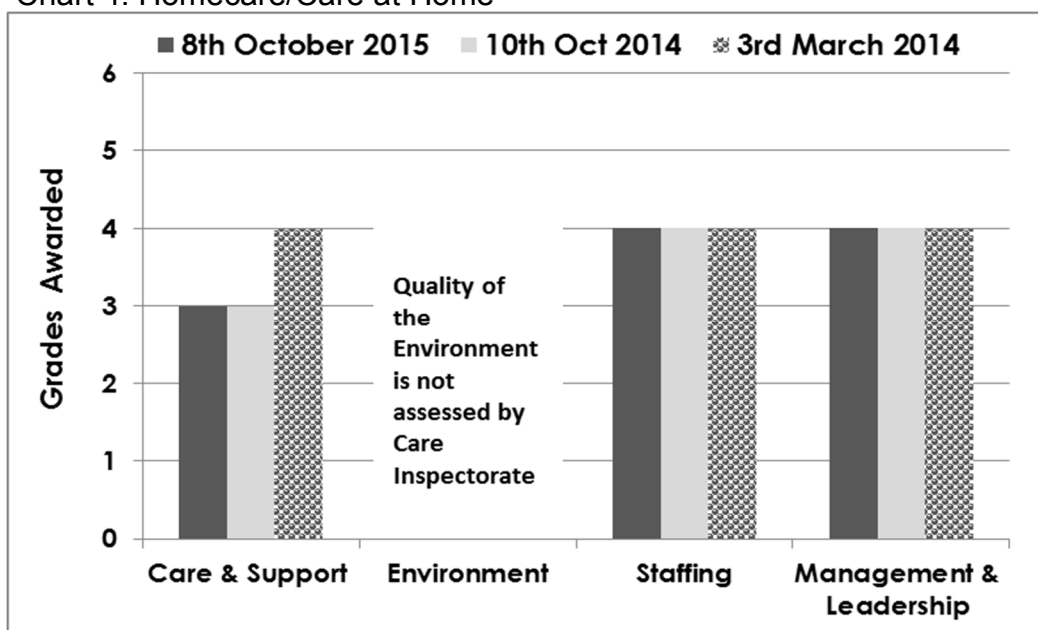
## **6. HOME CARE (CARE AT HOME)**

- 6.1 The Care Inspectorate carried out an announced inspection at short notice on 8 October 2015. The service provides a combined Care at Home and Housing Support Service and also includes a Reablement Service, which aims to help people who use the service to regain skills needed to feel confident about living independently at home.
- 6.2 At the time of inspection, the Inspectorate were confident of good outcomes for service users through our discussions with them, their relatives and managers.

Service users who spoke to the Inspectorate during inspection, and those who completed the Care Standard Questionnaire prior to the inspection, spoke positively about the service. Staff also spoke positively about their jobs and worked well to meet the needs of individuals.

- 6.3 The level of inspection carried out was of low intensity. The following grades were awarded:

Chart 4: Homecare/Care at Home



*Please note that Quality of Environment is not assessed by the Care Inspectorate*

At the latest inspection carried out in 2015 the Quality of Staffing and Management and Leadership received Good (*Level 4*), the Quality of Care and Support Adequate (*Level 3*). The quality of Staffing and Management and Leadership has remained at a Good level of performance over the last three inspections. The quality of Care and Support received three requirements and two recommendations at the time of inspections. Full details are provided in paragraphs 6.8 and 6.9.

- 6.4 The Inspectorate assessed 6 quality statements across Care and Support, Staffing and Management and Leadership. Two received Very Good (Level 5), 3 at Good (Level 4) and one Adequate (Level 3).
- 6.5 The Inspectorate during their visit reviewed requirements and recommendations that were made at the previous inspection in October 2014:
- Recommendation 1: Staff should have access to regular supervision according to the service's agreed policy and procedures
  - Recommendation 2: All staff should receive up to date training in adult support and protection to ensure that they are aware of local policies and procedures

- ✓ *The Inspectorate were satisfied that there was evidence to demonstrate staff receive regular supervision in accordance with the services agreed policy and receive up-to-date training as per recommendations.*

6.6 The inspection identified strengths throughout the service including the following:

- ✓ Evidence that managers and staff engage with local groups within the community through venues such as the dementia café, to make sure local people are aware of the service, and have the opportunity to give their views on how the service can be developed to meet local needs.
- ✓ The service is supporting staff to develop their knowledge and understanding of working with people with learning disabilities.
- ✓ The Inspectorate visited service users at home and looked at their hand-held records. The records contained good information about the service provider along with the individual's care plan.
- ✓ Staff were courteous and respectful to the service users and worked with them at a pace which allowed tasks to be carried out in a person-centred manner.

6.7 Service users had the opportunity to comment on their experience of using the service in Care Standard Questionnaires (CSQs), during inspection visits to their homes, and telephone calls. During the inspection, the Inspectorate also looked at a wide range of feedback from them provided through surveys and questionnaires carried out by the service. They made comments such as:

- *"I am really happy with the service, all carers are really helpful and understand my needs."*
- *"Thank you to all the carers - they were excellent, just what I need to get back to normal".*
- *"They are very cheery and particular, and they inform me of the outside world."*

Relatives commented on their experience of using the service during inspection, telephone calls and visits. Some of the comments included:

- *"Carers are very good and my relative is happy with what he gets."*
- *"The carer helps my husband to have a shower at his own pace."*

It was observed during inspection that staff were enthusiastic about their job and said they were well supported by managers of the service.

6.8 The Inspectorate made two recommendations at the time of the October 2015 inspection, details as follows:

- Quality of Care and Support - Recommendation 1: It was recommended that the service develops a Participation Strategy and that an Audio and Easy Read version of the strategy is made available to service users.

- ✓ *The Council has a wider Engagement Strategy which covers all our Homecare and Reablement participation work. In 2015 as part of the development of the Joint Strategic Commissioning Plan for Health and Social Care, an ambitious consultation and engagement survey “Join the Conversation” was carried out with service users, carers and the public. The resources required for this survey meant that all teams, including the Access and Reablement team contributed to this activity.*

*Recent engagement activities include:*

- *coffee morning organised with service users to share their experiences of the service to support improvements and it is hoped that some of those who participated would be willing to support future staff recruitment.*
- *Service users and carers workshop held to look at future commissioning of Care at Home Services. Topics for discussion included challenges facing people who need support to manage in their homes and how services can be shaped to respond effectively to the increasing demand in future years. The learning from this day is informing our future commissioning strategy.*
- Quality of Care and Support - Recommendation 2: The provider should routinely carry out skin assessments to identify service users at risk of pressure ulceration.
  - ✓ *The “Adults at Risk of Pressure Ulcers” Health Improvement Scotland guide has been circulated to all staff and added to all handheld records for client and staff reference. All Coordinators have discussed the guide with staff at team meetings. Information will also be included in the Staff Newsletter in early January 2017.*
  - ✓ *Our Skin Policy is being reviewed and updated with support from the Community Nursing link. The updated policy will include clearer processes for acting on concerns about skin integrity and be in place by January 2017.*
- The Care Inspectorate highlighted the service ‘Champions for Falls’ as best practice, and the Preliminary Pressure Ulcers Risk Assessment (PURRA) was taken into account in making this recommendation as an example of good practice.
  - ✓ *“Preventing Pressure Ulcers” Health Improvement Scotland Guide for practice and suggested the service replicate this in other areas. The service will identify ‘Skin Champions’ as suggested and provide relevant training in early 2017.*

6.9 Three requirements were made at the time of the 2015 inspection, details as follows:

- Quality of Care and Support - Requirement 1: The provider must develop and implement an effective system to ensure that all reviews are carried out at a minimum of six monthly intervals and that records are kept of these reviews (carried forward from previous inspection).

- ✓ *A new management structure has now been implemented with the introduction of three reviewing officers and three Quality Monitoring Officers based within the locality teams. The Reviewing Officers main responsibility is to ensure that all reviews are completed as required for all service users across Perth & Kinross which will address the outstanding requirement.*
- Quality of Care and Support - Requirement 2: The provider should resolve matters relating to the administration of medication so that service users are given appropriate support to take prescribed medication safely and in accordance to their preferences.
  - ✓ *Service managers met with pharmacy leads, two 'train the trainer' sessions have now been delivered to the Reablement Coordinators and In-house Quality Monitoring Officers. Training materials are currently being amended and updated before they can be delivered to frontline staff which will address the outstanding requirement. The Community Pharmacist who is delivering the training is in talks with Service Managers regarding arrangements for sign off of staff once they have completed training. The first training of staff is planned to be delivered to Rapid Response and Immediate Discharge Service in early 2017.*
- Quality of Care and Support - Requirement 3: The provider must ensure that staff are provided with the necessary training regarding falls prevention and that appropriate assessment of the risk of falls, including how the service can support service users to reduce the risk, are made and reviewed (carried forward from previous inspection).
  - ✓ *All staff within Reablement have undertaken the falls training and are able to complete level 2 falls screening which has helped identify and manage the risk of falls, enabling the person to remain independent. In addition, Falls Champions has been identified within the Care at Home/ Reablement Service. The recording processes have been reviewed and amended to support the monitoring of this work.*
  - ✓ *Staff in Perth City Reablement Team have been trained in Strength and Balance exercises to encourage older people to stay active and reduce likelihood of falls. The aim is to encourage people to make this part of their daily routine.*

6.10 The Care Inspectorate upheld one complaint since the last inspection. The complaint was in relation to clients/families not being informed of staff running late or visit times being changed. The service reviewed the existing procedure and actions taken forward included:

- ✓ *A note on all client's schedule to alert clients to the fact that "due to the nature of and demands of the Care At Home and Reablement Services, scheduled home visits are sometimes subject to change at short notice, where there is likely to be a variation of 30 minutes or more to the scheduled time of your visit, we will always try to contact you in advance".*

- ✓ *The new procedure which was implemented to resolve the issue highlighted in the complaint also ensures that staff let the office know if they are running late and have contacted clients to let them know.*

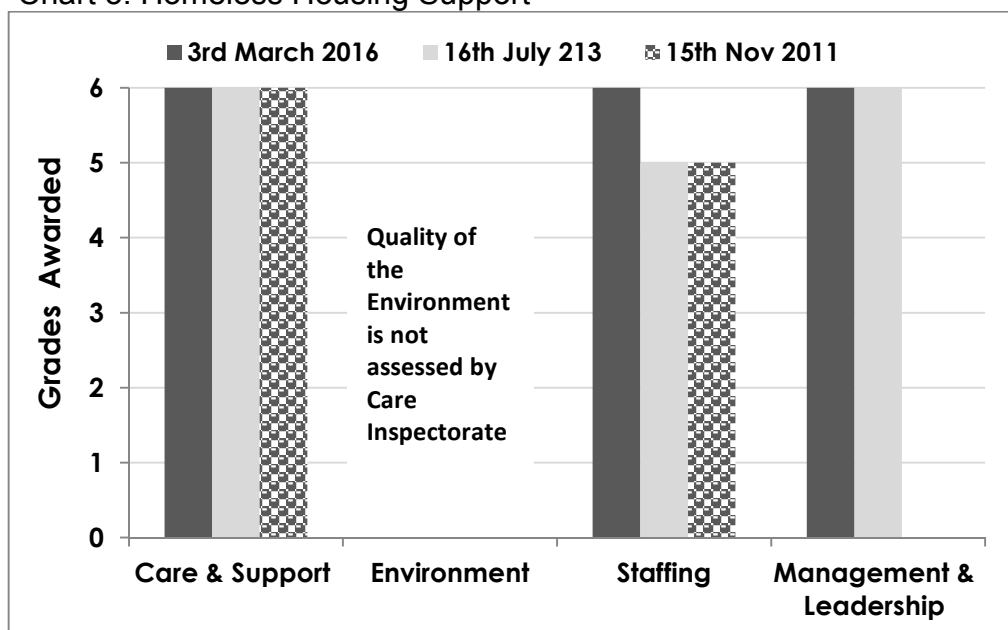
6.11 The Homecare service is focussing on the improvement areas detailed within the requirements and recommendations highlighted by the Care Inspectorate. Other areas of improvement include:

- As part of a training review a new reablement interactive workbook has been developed based on a tool developed by Argyle and Bute and NHS Highland. The interactive workbook will also be made available as an online module for staff.
- Monitoring and disseminating information on ongoing reviews of National Care Standards and Codes of Practice to make sure all staff are fully aware of developments.
- New locality managed Care at home Services are now in place, and it is anticipated that locality working will support closer working relations between in-house and external providers, more effective use of informal local resources, and integrated working.

## **7. HOMELESS HOUSING SUPORT**

- 7.1 The Care Inspectorate carried out an unannounced inspection on 3 March 2016. The Homeless Service offers a housing support service. Support includes advice, residential provision and support to people in tenancies in the community. Residential provision included RIO House, Tayview and Greyfriars Hostel and inspectors spent time with residents from Greyfriars and RIO house during their visit.
- 7.2 Overall the Inspectorate found that Service users are actively involved in the development and review of the service in a wide variety of meaningful ways. Their opinions, views and ideas are regularly sought and are clearly valued. The staff team are committed and enthusiastic about their role in supporting homeless people.
- 7.3 The level of inspection carried out was of low intensity. All three areas were awarded Excellent grades.

Chart 5: Homeless Housing Support



Please note that the Quality of Environment is not assessed by the Care Inspectorate

At the latest inspection carried out in 2016 the service received Excellent (Level 6) for the Quality of Care and Support, Staffing and Management and Leadership. The Chart above highlights consistently excellent services being delivered by the Homeless Housing Support Service, reflected in the last three inspections.

7.4 The Inspectorate assessed 6 quality statements in total and awarded Excellent for all statements across Quality of Care and Support, Staffing and Management and Leadership.

7.5 The inspection identified strengths throughout the service including the following:

- ✓ Homeless housing support service provides an excellent service to homeless people. The staff team are committed to providing a high level of support to service users and are continually developing innovative ways to involve people and to develop the service.
- ✓ During inspection it was evident that people who used the service were central to their support planning and that plans were reflective of their needs.
- ✓ The organisation was committed to a well-trained and qualified team with most of the staff already having completed, or in the process of completing, the necessary qualifications for registration without condition with the Scottish Social Services Council, despite the required registration date being by 2020.

7.6 There were no recommendations or requirements made at the time of inspection and none outstanding from the previous inspection.

7.7 During the inspection the inspector spoke to service users who were attending that day. They were all happy with the level of care and support they received at the service.

- *“My housing support worker has been very supportive and applied things quickly. Very easy to talk to and understanding. All the staff at Rio house have been terrific and supportive, cannot thank them enough.”*
- *“Great service. I’m back on my feet with the support of my support worker.”*
- *“I’m happy with what I get at the service. I know I can talk to any member of staff and they listen and comment/advise if they can.”*

Throughout the inspection staff were observed to interact with service users in a warm, friendly manner. They were considerate to their wishes and needs and promoted their opportunities to make choices and be involved in purposeful activity.

7.8 Although no requirements or recommendations were made at the time of inspection. Homeless Housing Support continue to improve their services and have an action plan in place to progress improvements including:

- Revising the support assessment consent form based on feedback from the Inspector and examples of good practice
- Evaluating the feasibility and benefits of Support Officers undertaking the “Step into Leadership” course provided by Scottish Social Services Council (SSSCS)

## **8. OLDER PEOPLE HOUSING SUPPORT (SHELTERED HOUSING)**

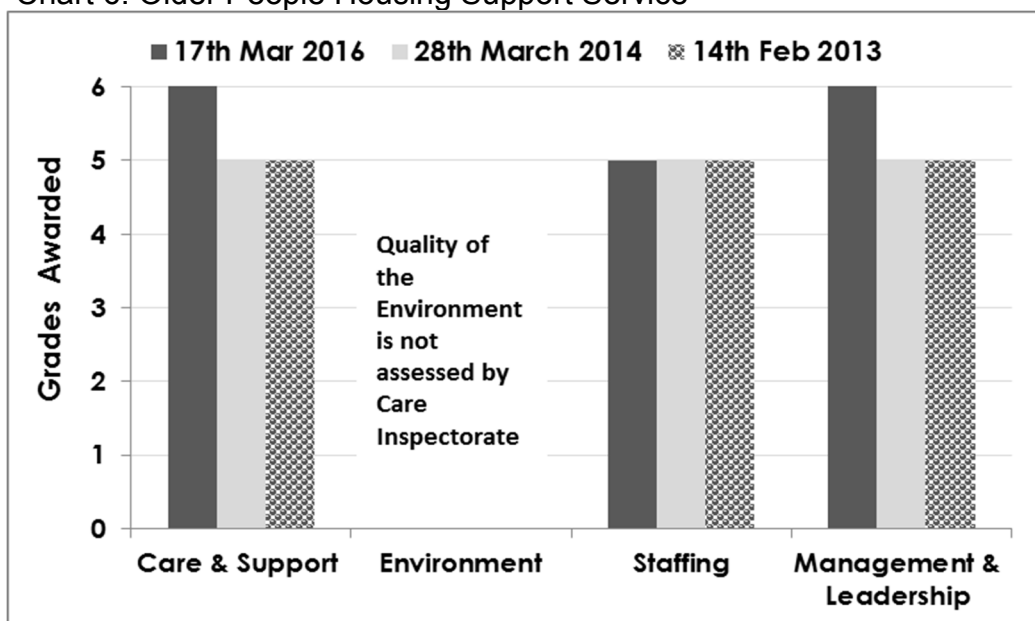
8.1 The Care Inspectorate carried out an announced inspection at short notice on 17th March 2016. Housing Support is provided to Older People within sheltered housing accommodation provided by Perth and Kinross Council. The aims of the service is to provide an environment, which actively promotes and encourages individual independence and enables people to live as normal and satisfying a life as possible within their own homes.

8.2 The Inspectorate concluded that the Older People Housing Support provides an excellent service in meeting the housing needs of older people, people with a disability and other complex needs. The service actively promotes and encourages the independence of the individual, enabling people to live as normal and satisfying a life as possible.

8.3 The level of inspection carried out was of low intensity. The following high grades were awarded:



Chart 6: Older People Housing Support Service



Please note that the Quality of Environment is not assessed by the Care Inspectorate

At the latest inspection carried out in 2016 the Quality of Care and Support and Management and Leadership received Excellent (Level 6), Staffing Very Good (Level 5). The Chart above highlights that Quality of Care and Support and Management and Leadership have both improved in grading since last inspection, improving from Very Good to Excellent. The Quality of staffing has been maintained at Very Good over the last three inspections.

8.4 The Inspectorate assessed 6 quality statements and awarded 5 Excellent (Level 6) and one received Very Good (Level 5).

8.5 The inspection identified strengths throughout the service including the following:

- ✓ The service strives to meet the outcomes of the people they support while keeping people at the heart of the service. They have a committed and skilled staff team who offer an excellent package of support.
- ✓ Personal plans had been signed off by the person who owns it and where appropriate signatures from advocates. This was highlighted as excellent practice as it ensures people know and agree with the content and are helped to find it a meaningful document which enhances their quality of life and meet their outcomes.
- ✓ The Service User Review Team (SURE) team (supporting tenant participation and scrutiny) has representation from people who use the service who look at assessing and improving the service delivery. The Inspectorate highlighted this as excellent practice and demonstrated that the service value people views and contributions.
- ✓ As a result of the latest service user survey, photographs of staff have been laminated and put on the office door so that people can instantly know who is on shift that day. This helped people who have poor memories or dementia they have a constant reminder of who is in and what day it is.

- 8.6 There were no recommendations or requirements made at the time of inspection and none outstanding from the previous inspection.
- 8.7 Staff and tenant questionnaires returned to the Care Inspectorate were all very positive which contributed to evidence that Older People Housing Support provide an excellent service along with effective management and leadership. They made comments such as:
- *"I like staying here, it makes me feel secure"*
  - *"The staff are good here, they listen to us"*
  - *"We are lucky to have the staff in our complex, if we have a problem it is dealt with"*
  - *"I like living in Carpenter Court, the staff are helpful and friendly, I enjoy the social activities".*

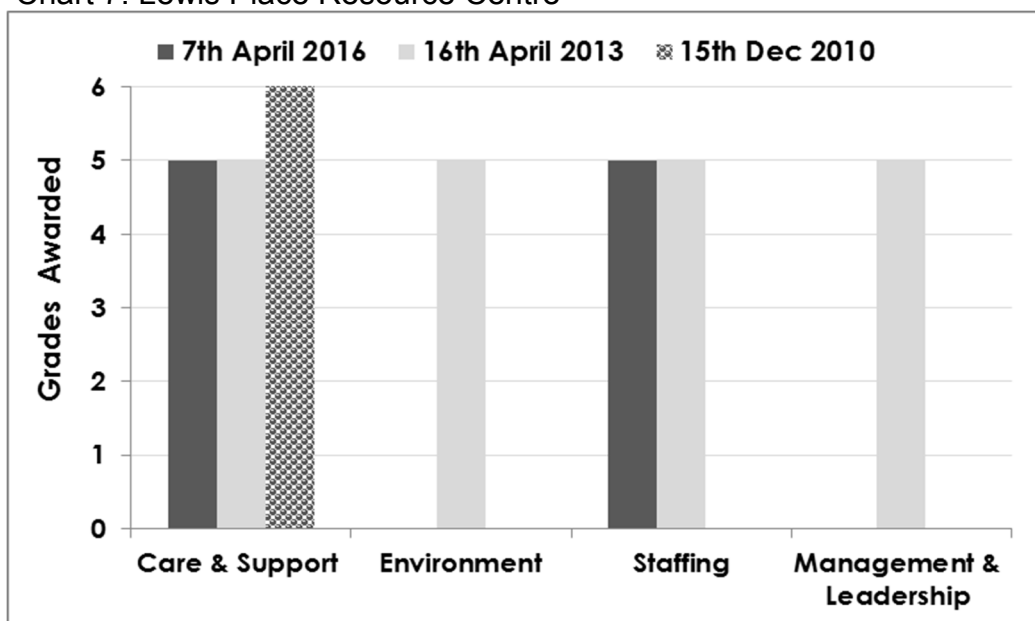
During the inspection it was observed that the staff are a very motivated team who are supportive of each other and committed to what they do. This was confirmed by people who lived in the complex.

- 8.8 Although no requirements or recommendations were made at the time of inspection. Older People's Housing Support continue to improve their services and have an action plan to progress improvement, including:
- Developing a service user profile page to be included at the beginning of all support files.
  - Continuing to develop the staff team through planned supervision and reflective practice.

## **9. LEWIS PLACE RESOURCE CENTRE**

- 9.1 The Care Inspectorate carried out an unannounced inspection on 7th April 2016. The centre provides day places for up to 40 people and has a range of communal facilities including a large multi-purpose dining room, hairdresser studio, adapted kitchen and activities rooms.
- 9.2 During the inspection it was found by the Inspectorate that service users spoke very highly of the service and said that they enjoyed attending the centre. Staff and service users had very good relationships with each other. People commented that they enjoyed the range of activities offered and the company of others.
- 9.3 The level of inspection carried out was of low intensity. The following grades were awarded:

Chart 7: Lewis Place Resource Centre



Please note the Quality of Environment and Management and Leadership were not inspected in 2016

At the latest inspection carried out in 2016 the Quality of Care and Support and Staffing received Very Good (Level 5). The Chart above highlights that Lewis Place has maintained Very Good levels of service over the last two inspections for Care and Support and Staffing.

- 9.4 The Inspectorate assessed 4 quality statements under Quality of Care and Support and Staffing, 2 received Excellent and 2 received Very Good.
- 9.5 The inspection identified strengths throughout the service including the following:
- ✓ People using the service and their carers spoke very highly of the support they received. The staff team demonstrated a high level of commitment to providing a quality service in the ways people preferred.
  - ✓ Support plans were seen to be very informative and person-centred. Life histories had been completed. This helped the service to make sure each day care package was built around the person, taking into account their preferences and hobbies.
  - ✓ During their visit the Inspectorate examined medication practices and was overall satisfied that these were being managed safely.
  - ✓ Staff spoke very positively about the support and training opportunities they received. Recent training had been provided tailored to the support needs of service users. These included Parkinson's and Speech and Language Therapy input for communication and specialised diets.
- 9.6 There were no recommendations or requirements made at the time of inspection and none outstanding from the previous inspection.

9.7 During inspection the views of service users and carers are taken into account. Their comments included:

- *"I feel I get all the help and care I need."*
- *"I find the management team very approachable, friendly and helpful. My mother has settled well into Lewis Place."*
- *"If I didn't come here it would just be another day staring at the four walls at home. I like meeting the people and there is always something to do."*
- *"This place is a lifesaver for us and that's thanks to the manager and staff. I can leave and know they are safe and happy."*

It was observed that the manager and care staff spoke very respectfully about the people supported. This included the person living with dementia and their family carers. They demonstrated an ethos of respect towards each individual and they worked with people to make sure they were meeting their needs and wishes.

9.8 Although no requirements or recommendations were made at the time of inspection. Lewis Place Resource Centre continues to improve its services and has an action plan to progress improvements, including:

- Dementia Ambassadors are linking in with local schools, churches and shops to enable the service to achieve our objective of Perth becoming a dementia-friendly city.
- Community and outreach developments being explored to create a more flexible service.
- Staff are undertaking in-house Cognitive Stimulation Therapy Training to enhance the experience for individuals during group activities.

## **10. NEW RANNOCH ROAD DAY CENTRE**

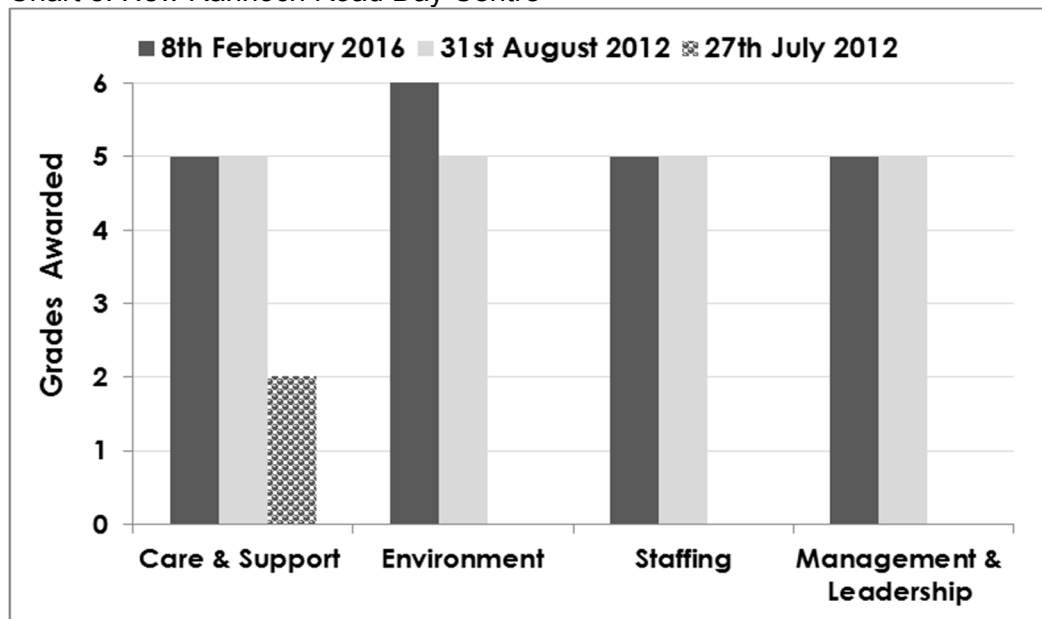
10.1 The Care Inspectorate carried out an unannounced inspection on 8th February 2016. The service provides support for a maximum of 20 older people each day. Breakfast is served on arrival and service users also receive a hot meal at lunch time. People who use the service are transported to and from the Centre by minibus or volunteer drivers.

10.2 The Inspectorate concluded that the service provides a stimulating environment for people who use the service who have dementia. All the evidence they evaluated indicated that people who use the service were very happy with the support they received. The service has built an excellent facility since the last inspection and has kept up to date with some of the latest developments such as promoting excellence and identifying causes of stress and distress.

The service and carers representatives had visited the dementia-friendly specialised services such as the Iris Murdoch Centre at Stirling University for advice and guidance and this was taken into account when planning and building the new centre. Perth and Kinross were congratulated by the Inspectorate for this innovative step.

- 10.3 The level of inspection carried out was of low intensity. The following grades were awarded:

Chart 8: New Rannoch Road Day Centre



At the latest inspection carried out in 2016 the Quality of Environment received Excellent (Level 6), Care and Support, Staffing and Management and Leadership all received Very Good (Level 5). The Chart above highlights that high levels of service are being maintained with Excellent for the Environment as an improvement on last year.

- 10.4 The inspectorate assessed 8 quality statements across the four quality themes, 5 received Excellent (Level 6) and 3 Very Good (Level 5).
- 10.5 The inspection identified strengths throughout the service including the following:
- ✓ The service had a Participation Strategy and a Partnership Plan, which had been produced following a joint carer and staff workshop, as well as consultation with people who use the service.
  - ✓ During inspection there were some very good examples of positive outcomes which were in place to help reduce service users' distress and agitation e.g. hanging out the washing, doing some dusting.
  - ✓ The Inspectorate found very good evidence of 'Talking Mats' being used to capture the views of those service users who had difficulty in expressing their views.
  - ✓ The range of facilities at New Rannoch was of an excellent standard. The facilities were dementia-friendly with appropriately design features in line with best practice. All staff have been trained in 'Promoting Excellence' for all social services staff working with people with dementia.

- 10.6 There were no recommendations or requirements made at the time of inspection and none outstanding from the previous inspection.
- 10.7 Everyone who completed a Care Inspectorate questionnaire, or completed one on behalf of a service user, strongly agreed or agreed that overall they were happy with the quality of care and support this service gave them. All indicated that they knew they could make a complaint to the Care Inspectorate. Their comments included:

- *"Staff always friendly welcoming and professional. Always have time to speak with carers which helps alleviate anxieties. They also encourage families to attend social events. Lovely environment safe, secure but not restrictive".*
- *"They aim to please", "Staff are very good", "I like coming here".*
- *"I feel my relative is very happy going to the centre and is well cared for by the friendly helpful staff who care for my relatives every need".*

During inspection the Inspectorate spoke with staff. Staff felt that they had good opportunities to make sure they had all the necessary information to provide a good service. They felt well supported in their work, and said that the manager was approachable and very effective, and they felt involved in the development of the service.

- 10.8 Although no requirements or recommendations were made at the time of inspection. Rannoch Road Day Centre continues to improve its services and has an action plan in place to progress improvements, including:
- Staff undertaking in house Cognitive Stimulation Therapy Training to enhance the experience for individuals during group activities.
  - Community and outreach developments being explored to create a more flexible service.
  - Re introduction of Community Monthly coffee mornings and the development of 3:16 weekly café based within the Salvation Army building in St John's Street, Perth.

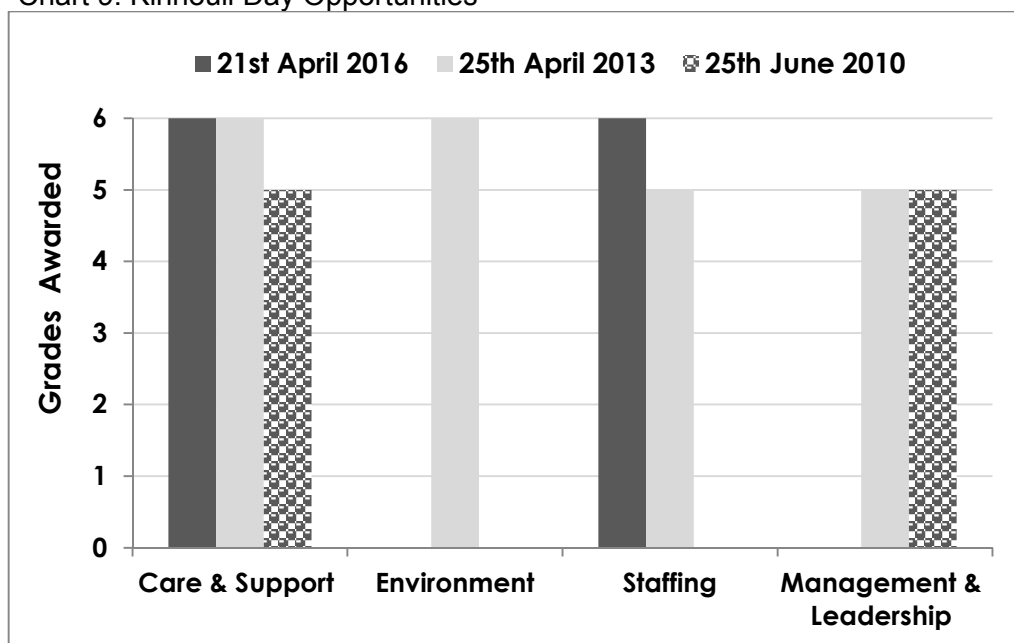
## **11. KINNOULL DAY OPPORTUNITIES**

- 11.1 The Care Inspectorate carried out an unannounced inspection on 21 April 2016. Kinnoull Day Opportunities is a community based service which supports individuals with a learning disability to make use of local services and take part in activities/hobbies which they enjoy.

The service aims to support and encourage people who use the service to make use of a range of community facilities such as sport, libraries and social activities. The service also aims to encourage people to access educational and developmental activities as well as employment opportunities.

- 11.2 During their visit the Inspectorate found that the service makes good use of facilities in local communities across Perth and Kinross. This has resulted in service users maintaining, and making new contacts in their own local communities. Service users told the Inspectorate they felt staff worked hard to support them to try new activities and listened to them when they commented on the activities they experienced.
- 11.3 The level of inspection carried out was of low intensity. The following excellent grades were awarded:

Chart 9: Kinnoull Day Opportunities



*Please note that the Quality of Environment and Management and Leadership were not assessed at the April 2016 inspection*

At the latest inspection carried out in 2016 the Quality of Care and Support and Quality of Staffing received Excellent (Level 6). The Chart highlights that the service has maintained excellent levels of service for Care and Support over the last two inspections and improved in grading for Quality of Staffing.

- 11.4 The inspectorate assessed 4 quality statements across the four quality themes and awarded Excellent (Level 6).
- 11.5 The inspection identified strengths throughout the service including the following:
- ✓ The service had good links with associated professionals, such as the local Community Learning Disability Nursing Team, and psychiatry services.
  - ✓ Service users' plans, clearly showed that people who use the service have a range of options to allow them to make individual choices.
  - ✓ The service had comprehensive risk assessments in place and these led to clear protocols being put in place to minimise any identified risks. This was particularly important in relation to the environment as the service

did not operate from a static base and made good use of community facilities.

- ✓ The service had been part of a national task group dementia pilot for Perth and Kinross, which looked at ways of early detection and screening of those adults with a learning disability who may be showing early signs of an additional cognitive impairment or dementia.

11.6 There were no recommendations or requirements made at the time of inspection and none outstanding from the previous inspection.

11.7 During the inspection the Inspectorate spoke with service users while visiting four community groups. All service users they spoke with were very happy with the service they received. They made comments such as "I can speak to my key worker about anything", "I enjoy trying baking, (the staff member) keeps me right" and "I would speak to the staff if I wasn't happy about something".

Service users knew who their key worker was, and that they were confident that if they had an issue, then their key worker would help them deal with it.

11.8 Although no requirements or recommendations were made at the time of inspection. Kinnoull Day Opportunities continue to improve their services and have an action plan in place to progress improvements including:

- FUN (Friends Unlimited Network) – in April 2016 Kinnoull Day Opportunities took over the running of this service from ENABLE. FUN empowers people with learning disabilities to enjoy social activities and events, make new friends and be involved in new experiences and opportunities in line with other members of the community.
- Improved learning and development with service users through the use of approved well-being training and educational methods such as "Healthy Eating, Healthy Living", "Keeping Safe", "Adult Protection", and "Josephine" (e.g. to help women with learning disabilities explore a range of issues, in a confidential and supportive environment).
- Currently the Learning Disability service has evolved a new communication forum which encompasses a variety of communication methods e.g. Talking Mats, Easy Read, Boardmaker, I-pads etc. Staff are now using this method of communication to prepare for reviews, initiate choice and ensure that personal outcomes are achieved a future development will see the use of Talking Mats APPS via I-pads and interactive Smart Boards at community Campuses.



## PERTH AND KINROSS COUNCIL

Housing and Health Committee 25 January 2017

Scrutiny Committee 8 February 2017

### Housing and Community Care Complaints and Customer Feedback

#### Report by Director (Housing and Social Work)

#### PURPOSE OF REPORT

This report summarises the complaints received between 1 April 2015 and 30 September 2016 (18 months) relating to housing services and community care services. It includes examples of actions taken to improve services as a result of complaints and information on other feedback received through customer satisfaction surveys.

#### 1. BACKGROUND

- 1.1 Perth and Kinross Council values feedback from people about the services and support they receive as an important way for services to be responsive to customers and to continuously improve. Services are committed to providing high quality, flexible and responsive services, and when this doesn't happen, it is very important that issues are resolved promptly and lessons learned to prevent them recurring.
- 1.2 The Council has a statutory responsibility to establish and maintain a formal procedure for receiving and considering complaints by, or on behalf of, people who use services. This is enshrined in social work legislation as well as government guidance which asks local authorities to report annually on the complaints investigated and the outcomes of these. Across housing, community care and community safety, the service also reports on non-social work areas, including those relating to finance, local taxes and business support.
- 1.3 The findings of complaints are shared with the relevant managers and across management teams to address any specific or cross- service issues, recommendations or improvement actions.
- 1.4 Handling complaints effectively is an important part of good customer care. It demonstrates that services listen to their service users' and stakeholders' views, which in turn helps improve services.
- 1.5 A new way of handing complaints was introduced by the Council in April 2013 for all complaints other than those relating to social work services. As a result, they are now dealt with in two stages, with the aim of resolving as many complaints at the front line (stage 1 front line resolution) to try and reduce the need for more formal investigations. Only more complex cases are dealt with as a stage 2 investigations.

- 1.6 There will be further changes introduced from April 2017 when a new way of handling complaints about social work services will be introduced across Scotland, which will bring the social work procedure more in line with the procedure already used across the rest of the Council. This will mean that all complaints will be included in the Council's Annual Complaints Performance Report in accordance with the requirements of the Scottish Public Services Ombudsman. In addition, changes are being made to align NHS complaints and social work complaints to support services and improvements within the Perth and Kinross Health and Social Care Partnership.

## 2. ANALYSIS OF COMPLAINTS

- 2.1 Services have been undergoing significant transformational change to improve and alter the way they are delivered to meet rising demand, public expectation and challenging financial times for public services. This all has a bearing on the number and type of complaints the service receives.
- 2.2 Social work services had a reduction in the number of complaints received during 2015/16 compared to the year before, although this had increased slightly in the first six months of 2016/17. There has been a increase in non social work complaints over the period. The level of complaints received and dealt with by frontline services and during investigations is a very small proportion of the total services provided, as summarised in Appendix 1. The areas that receive the highest number of complaints include housing repairs, council tax and Finance /Charging which reflect the large number of people who use these services.
- 2.3 Across Scottish local authorities around 50% of complaints are upheld and this is the situation locally. Some complaints have various elements to them but if one of these is upheld and other areas partially or not upheld, the complaint is classed overall as being upheld.
- 2.4 The vast majority of complainants (73-100%) involved in stage two social work complaints (investigations) were are satisfied with outcome of their complaint

**Table 1: Complaints received**

|                                 | <b>14/15<br/>(12 mnths)</b> | <b>15/16<br/>(12 mnths)</b> | <b>16/17<br/>(6 mnths<br/>April-Sep)</b> |
|---------------------------------|-----------------------------|-----------------------------|------------------------------------------|
| <b>Social work services</b>     |                             |                             |                                          |
| Stage 1                         | 69                          | 46                          | 32                                       |
| Stage 2                         | 19                          | 13                          | 13                                       |
| <b>Non social work services</b> |                             |                             |                                          |
| Stage 1                         | 339                         | 406                         | 264                                      |
| Stage 2                         | 26                          | 26                          | 30                                       |

Note: not all stage 2 complaints follow on from stage 1. Some are reported directly into stage 2 and then investigated.

### Social work complaints (community care)

- 2.5 The table above shows that the majority of complaints about community care services were resolved at the first point of contact by frontline services. Between April 2015 and 31 March 2016, 13 complaints were investigated (stage 2). The main reason for the complaint related to provision of services. The issues ranged across teams, with no specific team having more of a focus. Three Complaints Review Committees were held during this period carried over from the previous year.
- 2.6 In the six months between April and September 2016, 32 complaints were dealt with by frontline staff, with a smaller number being investigated (13) at stage 2. The main area of complaint related to learning disabilities (3), Perth City team (3) and care at home services (2). The reasons were primarily due to provision of services. Three Complaints Review Committees were held in the 6 months period.

### Other service complaints (non-social work) received

- 2.7 The majority of complaints about housing, finance and business support services were also resolved at the first point of contact by frontline services. Between 1 April 2015 and 31 March 2016 there were 406 complaints which were dealt with and resolved by frontline services and 26 complaints which were investigated under stage 2. Of those investigated:-
- Housing Repairs Service had the largest number (8) of the 26 stage 2 complaints, followed by Local Taxes (4), which reflects the volume of services provided in these two areas
  - The main reason for the complaints was to do with provision of services or issues with employees
  - 95% (25) were acknowledged within the target time of 3 working days
  - 50% (13) received their response within the 20 working days target and where responses were delayed, complainants were given information about a new target date
- 2.8 Between April 1 2016 and 30 September 2016 there were 264 complaints dealt with by frontline staff as stage 1 and 30 complaints investigated at stage 2 of which:-
- Housing Repairs Service (6) and the housing north locality team (6) had the highest number of the 30 complaints, followed by housing Letham (5) and Perth City (5) areas
  - The main reason for the complaints was to do with provision of services or issues with employees
  - 97% (29) were acknowledged within the target of 3 working days
  - 82% (23) received their response within the 20 working days target, which was improved on the 2015/16 performance. Where responses were delayed, complainants were given information about a new target date

- 2.9 The increase in stage 1 complaints may be a reflection of the considerable training carried out across the service to emphasise the importance of accurately recording complaints activity.

### **3. KEY ISSUES AND LEARNING FROM COMPLAINTS**

- 3.1 A number of issues have been raised by customers and people who use housing, finance, business support and community care (social work) services which have been used by the services to improve their customer care, processes and communication. Some of these are summarised below.
- 3.2 Issues of poor customer care and communication have been raised by some complainants as the reasons for their complaint. For example, issues around charging for community care services and the delay in sending out invoices to individuals was raised, which have now been improved and complaints in this area reduced.
- 3.3 To address issues of communication and customer care and focus, refresher training was organised for groups of staff to promote customer care and more effective communication with customers and service users, particularly to resolve issues at an earlier stage and prevent them escalating to more formal investigation.
- 3.4 Demand for services and high customer expectation have, however, been a challenge for services as they manage new ways of working and transformation of services in times of challenging financial budgets.
- 3.5 Further work will continue across services to make sure all staff and teams manage and handle complaints effectively and efficiently.
- 3.6 Some actions have already been carried out and improvements made, for example:-
- Processes have been improved to calculate charges for services, as has information available for service users and their families about the process
  - Customer service training continues to be organised when a need for training is identified and staff have been reminded of their responsibilities in relation to customer care standards in returning calls, and answering correspondence
  - There is improved wording on paperwork explaining Council Tax reductions when a property is under reconstruction
  - Housing staff have been reminded about the need to keep tenants up to date with the status of their repairs and the system changed to support this
  - Staff and contractors have been reminded about the requirement to carry their ID badges with them at all times
  - The importance of parking appropriately and safely, especially when travelling in Council vehicles, has been stressed to staff
  - Options are being investigated to avoid tenants awaiting emergency repairs potentially having to wait in all day for staff to attend

- A new procedure has been introduced at the Joint Equipment Loan Store (JELS) so that if they are unable to uplift equipment within the target of 10 days, they will contact customer and arrange a new date
- Signage and the process for dealing with customers have been improved in one rural office

### **What else do our customers tell us about the services they receive?**

- 3.7 Feedback from complaints is one important source of information from services users, tenants and other customers about their experience of services. There are others too, which give an indication of satisfaction levels with services, and some of these are included below.

| <b>Service area</b>                                                                                               | <b>2015-16</b> |
|-------------------------------------------------------------------------------------------------------------------|----------------|
| % overall satisfaction levels with community care services                                                        | 90%            |
| % of community care service users that felt they were supported to live as independently as possible              | 85%            |
| % respondents who felt they had been involved in making decisions about the help, care and support they received. | 85%            |
| % who felt that they were supported to live as independently as possible                                          | 85%            |
| % of respondents agreed that their services improved or maintained the quality of life they enjoy                 | 90%            |
| % of tenants satisfied with Perth and Kinross Council as a landlord                                               | 84.5%          |
| % of tenants who have had a repair completed in the last year satisfied with the service they received            | 90%            |
| % of service users satisfied with the management of our Gypsy/ Travellers site                                    | 69%            |
| % of tenants who think the rent for their property represents good value for money?                               | 84%            |
| % of tenants satisfied with the quality of their home                                                             | 85%            |

Sources: Community care service users' survey 2016; Tenant Satisfaction Survey 2016

## **4. ACTIONS TO IMPROVE SERVICES**

- 4.1 As mentioned above, the service has introduced a number of actions as a result of receiving complaints and feedback from users and customers and will continue to:

- Monitor improvement actions across the service and where appropriate share the learning
- Work to introduce the new social work procedure
- Work with health colleagues to look at ways of working together on "joint" complaints

- Monitor decisions made by the Scottish Public Services Ombudsman (SPSO) concerning other public bodies and share the learning where appropriate

## 5. CONCLUSION AND RECOMMENDATIONS

- 5.1 Complaints and feedback from people who use services is an important way of learning, improving and providing quality services. This report summarises the complaints received about housing and community care services over the past 18 months, as well as other sources of feedback about the nature and quality of services provided. It highlights areas for improvement and action taken as a result of feedback on services.
- 5.2 The Housing and Health Committee is asked to note the contents of the report.
- 5.3 The Scrutiny Committee is asked to scrutinise the performance and outcomes in the report.

### Author

| Name            | Designation                    | Contact Details                                                                      |
|-----------------|--------------------------------|--------------------------------------------------------------------------------------|
| Joy Mayglothing | Team Leader – Customer Liaison | <a href="mailto:hcccommittee@pkc.gov.uk">hcccommittee@pkc.gov.uk</a><br>01738 475000 |

### Approved

| Name          | Designation                        | Date            |
|---------------|------------------------------------|-----------------|
| Bill Atkinson | Director (Housing and Social Work) | 12 January 2017 |

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You can also send us a text message on 07824 498145.

All Council Services can offer a telephone translation facility.

## 1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

| <b>Strategic Implications</b>                       | <b>Yes / None</b> |
|-----------------------------------------------------|-------------------|
| Community Plan / Single Outcome Agreement           | <b>Yes</b>        |
| Corporate Plan                                      | <b>Yes</b>        |
| <b>Resource Implications</b>                        |                   |
| Financial                                           | <b>None</b>       |
| Workforce                                           | <b>None</b>       |
| Asset Management (land, property, IST)              | <b>None</b>       |
| <b>Assessments</b>                                  |                   |
| Equality Impact Assessment                          | <b>None</b>       |
| Strategic Environmental Assessment                  | <b>None</b>       |
| Sustainability (community, economic, environmental) | <b>None</b>       |
| Legal and Governance                                | <b>Yes</b>        |
| Risk                                                | <b>Yes</b>        |
| <b>Consultation</b>                                 |                   |
| Internal                                            | <b>Yes</b>        |
| External                                            | <b>Yes</b>        |
| <b>Communication</b>                                |                   |
| Communications Plan                                 | <b>None</b>       |

### 1. Strategic Implications

#### Community Plan/Single Outcome Agreement

- 1.1 The Perth and Kinross Community Plan/Single Outcome Agreement 2013-2023 and Perth and Kinross Council Corporate plan 2013-18 have five outcomes which provide clear strategic direction, inform decisions at a corporate and service level and shape resources allocation. All are relevant to this report.

#### Corporate Plan

As above

### 2. Resource Implications

#### Financial

- 2.1 None

#### Workforce

- 2.2 None

#### Asset Management (land, property, IT)

2.3 None

### **3. Assessments**

#### Equality Impact Assessment

3.1 Under the Equality Act 2010, the Council is required to eliminate discrimination, advance equality of opportunity, and foster good relations between equality groups. Carrying out Equality Impact Assessments for plans and policies allows the Council to demonstrate that it is meeting these duties.

3.2 The proposals have been considered under the Corporate Equalities Impact Assessment process (EqIA) with the following outcome:

(i) Assessed as **not relevant** for the purposes of EqIA

#### Strategic Environmental Assessment

3.3 The Environmental Assessment (Scotland) Act 2005 places a duty on the Council to identify and assess the environmental consequences of its proposals. However, no action is required as the Act does not apply to the matter presented in this report. The matters presented in this report were considered under the Environmental Assessment (Scotland) Act 2005 and no further action is required as it does not qualify as a PPS as defined by the Act and is therefore exempt.

#### Sustainability

3.4 None

#### Legal and Governance

3.5 The Head of Legal Services has been consulted and there are no direct legal implications of this report.

#### Risk

3.6 The Housing and Community Care Senior Management Team regularly reviews complaints and identifies areas for action.

### **4. Consultation**

#### Internal

4.1 The Heads of Finance and Legal Services have been consulted on this report.



## External

- 4.2 The Tenant Committee Reporting Panel was consulted on the report. They commented that the “report emphasises the need for complaints to be dealt with and recorded in a clear and precise way.”

## **5. Communication**

- 5.1 None

## **2. BACKGROUND PAPERS**

None

## **3. APPENDICES**

Detailed complaints monitoring



## Appendix 1

### Number and types of complaints by total services users and tenants.

| Service or team    | No. service users at 31 Mar 15 | No. service users at 31 Mar 16 | No. service users at 30 Sept 16 | No. & % complaints 2014-15                      | No. & % complaints 2015-16                   | No & % complaints 2016 (Apr-Sept)             |
|--------------------|--------------------------------|--------------------------------|---------------------------------|-------------------------------------------------|----------------------------------------------|-----------------------------------------------|
| Comm Care          | 9,354                          | *10,681                        | *10,619                         | 69 frontline resolution (0.7% of service users) | 46 frontline resolution (0.4% service users) | 32 frontline resolution (0.3% service users)  |
|                    |                                |                                |                                 | 19 investigations (0.2% of service users)       | 13 investigations (0.1% service users)       | 13 investigations (0.1% service users)        |
| Housing Repairs    | 24,528                         | 24,401                         | 16,120                          | 149 frontline resolution (0.6% tenants)         | 169 frontline resolution (0.7% tenants)      | 123 frontline resolution (0.8% service users) |
|                    |                                |                                |                                 | 10 investigations (0.04% service users)         | 9 investigations (0.04% tenants)             | 9 investigations (0.05% service users)        |
| Area Housing Teams | 7,412 Council houses           | 7,457 Council houses           | 7,494                           | 55 frontline resolution (0.7% tenants)          | 118 frontline resolution (1.6% tenants)      | 83 frontline resolution (1.1% service users)  |
|                    |                                |                                |                                 | 4 investigations (0.05% tenants)                | 4 investigations (0.1% tenants)              | 17 investigations (0.2% service users)        |

\*The way this figure is compiled has now changed and now includes all people on our system who are open to a service or are involved.



## Appendix 2

### Community Care formal complaints (Stage 2)

1 April 2015 – 30 September 2016

#### Community care complaints

##### Stage 1: dealt with by frontline services

Between April 2015 and Mar 2016 there were 46 complaints dealt with at stage 1 primarily by the teams and sometimes by the Customer Liaison Team. Of these 29 were upheld (63%).

Between April 2016 and Sep 2016 there were 32 complaints dealt with at Stage 1 of which a smaller percentage (56%, 18) were upheld.

The main area dealing with complaints informally was the Care at Home Service and the Learning Disability Team, which reflects the immediate and personal nature of these services and the large number of service users and carers involved.

The other area identified, which was reflected in the formal complaints data, concerned staff conduct / attitude and service users feeling that they received a poor quality or reduced service. Many of these issues were dealt with to the complainants' satisfaction when a member of staff made prompt contact and clarified the situation and also gave an apology, where this was required.

##### Stage 2: investigations

**Table 1 Stage 2 complaints activity and performance**

| No. investigations (stage 2 complaints) | No. & % acknowl by target date | No. & % responded to by target date | No. & % upheld | No. & % satisfied with response | No. progressing to Complaints Review Committee |
|-----------------------------------------|--------------------------------|-------------------------------------|----------------|---------------------------------|------------------------------------------------|
| 19 (2014/15)                            | 18 (95%)                       | 16 (84%)                            | 14 (74%)       | 14 (74%)                        | 5 (only 2 heard)                               |
| 13 (2015/16)                            | 10 (77%)                       | 7 (64%)                             | 4 (36%)        | 11 (100%)                       | 0                                              |
| 13 (2016/17 Apr-Sep)                    | 13 (100%)                      | 8 (73%)                             | 2 (18%)        | 8 (73%)                         | 3                                              |

**Table 2 Teams involved**

| Team                       | No. investigations (stage 2) (2014/15) | No. investigations (stage 2) (2015/16) | No. investigations (stage 2) (2016/17 Apr - Sep) |
|----------------------------|----------------------------------------|----------------------------------------|--------------------------------------------------|
| Assessment Care Management | 5                                      | 0                                      | 0                                                |
| Social Work North          | 3                                      | 1                                      | 0                                                |
| Social Work Perth City     | 1                                      | 2                                      | 3                                                |
| Social Work South          | 1                                      | 0                                      | 1                                                |

| <b>Team</b>                              | <b>No.<br/>investigations<br/>(stage 2)<br/>(2014/15)</b> | <b>No.<br/>investigations<br/>(stage 2)<br/>(2015/16)</b> | <b>No.<br/>investigations<br/>(stage 2)<br/>(2016/17<br/>Apr - Sep)</b> |
|------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------------|
| Social Work Access Team                  | 0                                                         | 1                                                         | 0                                                                       |
| Social Work North/Care at Home           | 0                                                         | 1                                                         | 0                                                                       |
| Community Mental Health Team             | 2                                                         | 1                                                         | 0                                                                       |
| Learning Disabilities                    | 1                                                         | 0                                                         | 3                                                                       |
| Hospital Discharge Team                  | 2                                                         | 1                                                         | 0                                                                       |
| Re ablement                              | 0                                                         | 0                                                         | 0                                                                       |
| Care at Home                             | 2                                                         | 0                                                         | 2                                                                       |
| Occupational Therapy                     | 0                                                         | 1                                                         | 0                                                                       |
| Out-of- Hours                            | 1                                                         | 0                                                         | 0                                                                       |
| Comm Alarm- Telecare                     | 1                                                         | 0                                                         | 0                                                                       |
| Social Work South/Finance Charging       | 0                                                         | 1                                                         | 1                                                                       |
| Social Work Perth City/ Finance Charging | 0                                                         | 0                                                         | 1                                                                       |
| Finance Charging                         | 0                                                         | 1                                                         | 1                                                                       |
| Criminal Justice Service                 | 0                                                         | 0                                                         | 0                                                                       |
| Safer Communities                        | 0                                                         | 0                                                         | 1                                                                       |
| Area North/ Safer Communities            | 0                                                         | 2                                                         | 0                                                                       |
| Area South/ Safer Communities            | 0                                                         | 1                                                         | 0                                                                       |
| <b>Total</b>                             | <b>19</b>                                                 | <b>13</b>                                                 | <b>13</b>                                                               |

**Table 3 Nature of the complaints**

|                           | <b>Issue with<br/>employee</b> | <b>Issue with<br/>service<br/>provision</b> | <b>Communication<br/>issue</b> | <b>Policy<br/>and<br/>procedure</b> | <b>Other</b> | <b>Equalitie<br/>s</b> |
|---------------------------|--------------------------------|---------------------------------------------|--------------------------------|-------------------------------------|--------------|------------------------|
| 2014/15                   | 7                              | 9                                           | 0                              | 3                                   | 0            | 0                      |
| 2015/16                   | 2                              | 8                                           | 0                              | 3                                   | 0            | 0                      |
| 2016/17<br>(Apr -<br>Sep) | 0                              | 11                                          | 0                              | 2                                   | 0            | 0                      |

(Some complaints cover more than 1 area)

## Appendix 3

### Complaints dealt with under Corporate Complaints Procedure (Housing and Finance and Support Services)

#### Housing and Finance and Support Services)

#### Complaints dealt with by frontline services (Stage 1)

In 2015-16 staff in Housing and Finance and Support Services dealt with 406 frontline complaints (Stage 1) and of these 249 were upheld (61%). In the six months April to September 2016 staff dealt with 264 frontline complaints, of which 152 were upheld (57%). Of these complaints, the numbers escalating to investigation was very small indicating that staff are dealing with these complaints well, and to the customer's satisfaction.

#### Stage 2: investigations

**Table 1 stage 2 complaints activity and performance**

| Number of Stage 2 complaints | No. & % ack by target date | No. & % responded to by target date | No. & % of complaints upheld |
|------------------------------|----------------------------|-------------------------------------|------------------------------|
| 26 (2014-15)                 | 24 (92%)                   | 13 (50%)                            | 14 (54%)                     |
| 26 (2015-16)                 | 25 (95%)                   | 13 (50%)                            | 19 (73%)                     |
| 30 (Apr – Sep 2016 )         | 29 (97%)                   | 23 (82%)                            | 14(50%)                      |

**Table 2 Teams involved**

| Team                             | No. investigations (Stage 2) (2014/15) | No. investigations (Stage 2) (2015/16) | No. investigations (Stage 2) (2016/17 Apr - Sep) |
|----------------------------------|----------------------------------------|----------------------------------------|--------------------------------------------------|
| Housing Repairs and Improvements | 9                                      | 8                                      | 6                                                |
| Housing access/allocations       | 2                                      | 2                                      | 3                                                |
| Area Team North                  | 1                                      | 2                                      | 6                                                |
| Area Team South                  | 1                                      | 1                                      | 1                                                |
| Area Team City                   | 1                                      | 0                                      | 5                                                |
| Area Team Letham                 | 1                                      | 0                                      | 5                                                |
| Area Housing Team City           | 0                                      | 1                                      | 0                                                |
| Housing                          | 1                                      | 0                                      | 1                                                |
| Homeless services                | 1                                      | 1                                      | 0                                                |
| Local Taxes                      | 2                                      | 4                                      | 0                                                |
| Finance Charging                 | 3                                      | 0                                      | 0                                                |
| Benefits                         | 2                                      | 0                                      | 0                                                |
| Welfare Rights                   | 1                                      | 0                                      | 0                                                |
| Scottish Welfare Fund            | 1                                      | 0                                      | 1                                                |
| CSC/HRIS                         | 0                                      | 0                                      | 2                                                |
| Area Housing Team North/Benefits | 0                                      | 1                                      | 0                                                |

| <b>Team</b>                     | <b>No.<br/>investigations<br/>(Stage 2)<br/>(2014/15)</b> | <b>No.<br/>investigations<br/>(Stage 2)<br/>(2015/16)</b> | <b>No.<br/>investigations<br/>(Stage 2)<br/>(2016/17<br/>Apr - Sep)</b> |
|---------------------------------|-----------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------------|
| Area Housing Team<br>North/HRIS | 0                                                         | 1                                                         | 0                                                                       |
| Customer Service Centre         | 0                                                         | 2                                                         | 0                                                                       |
| Finance Charging                | 0                                                         | 3                                                         | 0                                                                       |
| <b>Total</b>                    | <b>26</b>                                                 | <b>26</b>                                                 | <b>30</b>                                                               |

**Table 3 Nature of the complaints**

|                        | <b>Employee<br/>issue</b> | <b>Service<br/>provision</b> | <b>Communication</b> | <b>Policy and<br/>procedure</b> | <b>Other</b> | <b>Equal</b> |
|------------------------|---------------------------|------------------------------|----------------------|---------------------------------|--------------|--------------|
| 2014/15                | 9                         | 17                           | 0                    | 1                               | 0            | 1            |
| 2015/16                | 3*                        | 21                           | 0                    | 3*                              | 0            | 0            |
| 2016/17<br>(Apr - Sep) | 2                         | 28                           | 0                    | 0                               | 0            | 0            |

\* - Covers more than one category



**PERTH AND KINROSS COUNCIL**

**Scrutiny Committee**

**8 February 2017**

**COUNCIL COMPLAINTS PERFORMANCE REPORT FOR 2015/16**

**Report by Head of Legal & Governance Services**

**PURPOSE OF REPORT**

To provide the Scrutiny Committee with assurance that the Council has an adequate and effective Complaints Handling Procedure (CHP) in place.

To satisfy public performance reporting requirements in accordance with the Scottish Public Services Ombudsman's performance measures for Local Authorities.

**1. EXECUTIVE SUMMARY**

- 1.1 The Council's Complaints Handling Procedure is appropriate and effective; performance is within acceptable limits and in line with the Scottish Public Services Ombudsman's (SPSO's) requirements.
- 1.2 The subject matter of complaints does not identify any particular trend or pattern that indicates a particular risk within any specific service or illustrate a corporate issue or concern.
- 1.3 The number of complaints received in the year increased by 21%. Leaving aside an increase in "missed" bin reports (which the SPSO class as a complaint) the increase is due to better and more accurate recording of complaints in schools following training.
- 1.4 Data gathered through the CHP and provided by the SPSO shows that :-
  - 95.5 % of complaints received were resolved at Stage 1 of the CHP
  - 3% of complaints were resolved at Stage 2 of the CHP
  - 1.5% of total complaints progressed to the SPSO for consideration
  - Of the 1.5% (42 cases) which were progressed to the SPSO only 2 resulted in the complaints being upheld in full or in part. This represents 0.08% of all complaints received in the year.
- 1.5 72% of Stage 1 complaints were processed within the 5 day timescale as compared with 80% in 2014-15. This is due to the increase in volume and complexity of complaints received. The average processing time is 4 days.
- 1.6 58% of Stage 2 complaints were processed within the 20 day timescale. The same as 2014-15. The average processing time reduced from 24 to 22 days.

- 1.7 A feedback Survey was issued to all Stage 2 complainants, but the response rate was poor (10%) and the results were considered inconclusive.
- 1.8 Recommendations from Stage 2 complaints resulted in additional training being given on 24 occasions and new or amended procedures being implemented on 11 occasions.

## **2. BACKGROUND**

- 2.1 The CHP was introduced on 1 April 2013 and is based on the model developed by the SPSO in conjunction with all Scottish Local Authorities. It seeks to resolve as many complaints as possible at the point of delivery and reflects the Council's commitment to valuing complaints as a means of identifying areas for service improvement.
- 2.2 The CHP is a 2 stage procedure. If an individual remains dissatisfied at the conclusion of Stage 2 of the CHP, he or she can refer the complaint to the SPSO.
- 2.3 The CHP does not cover Social Work complaints as there is a separate statutory complaints procedure for these. Accordingly, these complaints are not included in this report. Following a change in legislation as of April 2017, these complaints will come under the CHP and will therefore be reported on in the report from 2017/18 onwards.
- 2.4 As the CHP seeks to resolve complaints at the point of service delivery, individual Services are responsible for responding to complaints and issuing their own findings. To ensure consistency across the organisation, the Corporate Complaints Team conducts a quality assurance review of each complaint scope and final response.
- 2.5 Good practice is shared through the Local Authority Complaints Handlers Network, established in conjunction with the SPSO, which meets regularly and all Service complaint co-ordinators are given the opportunity to attend.
- 2.6 National recording and reporting systems have been established and performance indicators have now been agreed. It is expected that these performance indicators will allow Local Authorities to benchmark, identify and address emerging trends.
- 2.7 Further information on the Complaints Handling Procedure can be found [here](#).

## **3. PERFORMANCE INDICATORS**

- 3.1 The SPSO, in conjunction with local authorities, has developed eight high-level performance indicators against which local authorities should assess and monitor their complaints handling performance. The Council is required to publish complaints performance information using these indicators on a quarterly basis. The Council's figures for these indicators for 2015/16 are shown in Appendix 1.

- 3.2 A complaint is defined as “an expression of dissatisfaction by one or more members of the public about the local authority's action or lack of action, or about the standard of service provided by or on behalf of the local authority”.
- 3.3 It should be noted that “missed” bin uplifts are considered by the SPSO to satisfy the definition of a complaint and, consequently, have to be included in the total number of complaints.
- 3.4 Anecdotal evidence suggests that in the majority of these “missed” bin complaints the customer had simply failed to put their bin out for collection, but it is not possible to differentiate between those and genuine service failures which would actually merit being classed as complaints. Given that all “missed” bin complaints are dealt with by simply instructing a further uplift, as complaints they have 100% stage 1 resolution.

#### **4. SPSO INFORMATION**

- 4.1 The Scottish Public Services Ombudsman Act 2002 and the Public Services Reform (Scotland) Act 2010 give the Scottish Public Services Ombudsman (SPSO) the authority, in defined circumstances, to investigate complaints about Scottish public authorities, including local authorities.
- 4.2 The SPSO reports on complaints in two different ways. If he considers that a complaint he has investigated is of national significance he lays the report before the Scottish Parliament. All other complaints are reported by decision letters sent to public authorities and published on the SPSO website; they can be found at <http://www.spsso.org.uk/our-findings>. The SPSO did not lay any reports before the Scottish Parliament in relation to Local Authorities during 2015/16.
- 4.3 The SPSO received a total of 56 complaints in respect of the Council in 2015/16. Of these cases, 42 had been dealt with under the CHP. The SPSO could not consider the other 16 complaints as these were premature. Of the 42 complaints the SPSO could consider, he determined :-
- 11 were not duly made or were withdrawn
  - 7 sought an outcome which was not achievable
  - 17 were outwith SPSO jurisdiction
  - 1 was resolved in the interim by the Council

The remaining 6 were fully investigated with the following outcomes:-

- 1 complaint fully upheld – 5 recommendations
  - 1 complaint partially upheld – 2 recommendations
  - 4 complaints not upheld
- 4.4 A summary of the SPSO's dealings with the Council in the year 2015/16 is shown in Appendix 3.

- 4.5 A note of the recommendations received by the SPSO is shown in Appendix 4.
- 4.6 The SPSO also publishes summarised information about complaints received about local authorities. The information for 2015/16 is shown in Appendix 5.
- 4.7 For local authorities overall, the SPSO issued 891 decision letters compared to 898 from the previous year and did not issue any reports during 2014/15 or 2015/16.

## **5. CUSTOMER FEEDBACK**

- 5.1 The SPSO requires an indicator of customer satisfaction with the CHP. A survey was piloted for Stage 2 complainants as these complaints are centrally co-ordinated. 54 survey questionnaires were issued with a response received from 7 (13%) Of those who responded 75% expressed dissatisfaction. As this only represents approx. 10% of the survey group, the data was considered inconclusive.
- 5.2 The validity of a Stage 2 survey is questionable as, at that stage, the individual is dissatisfied not with necessarily the process, but with the fact that they have not received their desired outcome. The SPSO statistics evidence the fact that where cases can be resolved, in the main they are done so within the CHP. Where they are not, the SPSO statistics also evidence that in very few cases, any alternative outcome for the customer is possible (NB: only 2 cases out of 2631 resulted in any further SPSO recommendations).
- 5.3 If the customer is dissatisfied with the outcome of their complaint and expresses this in a feedback mechanism, the statistical evidence would therefore suggest that any such feedback would serve no purpose in terms of improving the CHP or the customer experience as the outcome of the complaint would unlikely be different.
- 5.4 As Stage 1 complaints are dealt with at the point of service and in many cases are resolved by informal means to provide a quick resolution for the customer, using a survey to gain customer feedback may not be the most effective mechanism. Consideration needs to be given as to how meaningful customer feedback can be obtained.

## **6. PROPOSALS**

- 6.1 The Corporate Complaints Group will continue to review the CHP throughout the year to ensure that the process and procedure remains adequate and fit for purpose.
- 6.2 The Corporate Complaints Team will continue to provide a range of training for staff who deal with complaints to support them to effectively resolve matters at stage 1. Should any complaint outcome identify a need for more focussed training this will be provided as required.

- 6.3 The Corporate Complaints Team will work to identify a more effective mechanism for measuring customer feedback.

## 7. CONCLUSION AND RECOMMENDATIONS

This is the third report in regard to the Councils Complaints Handling Procedure.

It is recommended that the Scrutiny Committee:

- (i) Consider and comment on this report.
- (ii) Note that the performance of the CHP will continue to be monitored and reviewed throughout the year.
- (iii) Note that further work is to be undertaken to assess customer satisfaction with the CHP

### Author(s)

| Name        | Designation                       | Contact Details                            |
|-------------|-----------------------------------|--------------------------------------------|
| Pam Dickson | Complaints and Governance Officer | Email: <a href="#">Customer Complaints</a> |

### Approved

| Name         | Designation                         | Date            |
|--------------|-------------------------------------|-----------------|
| Lisa Simpson | Head of Legal & Governance Services | 12 January 2017 |

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## 1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

| <b>Strategic Implications</b>                       | <b>Yes / None</b> |
|-----------------------------------------------------|-------------------|
| Community Plan / Single Outcome Agreement           | <b>No</b>         |
| Corporate Plan                                      | <b>No</b>         |
| <b>Resource Implications</b>                        |                   |
| Financial                                           | <b>No</b>         |
| Workforce                                           | <b>No</b>         |
| Asset Management (land, property, IST)              | <b>No</b>         |
| <b>Assessments</b>                                  |                   |
| Equality Impact Assessment                          | <b>No</b>         |
| Strategic Environmental Assessment                  | <b>No</b>         |
| Sustainability (community, economic, environmental) | <b>No</b>         |
| Legal and Governance                                | <b>No</b>         |
| Risk                                                | <b>No</b>         |
| <b>Consultation</b>                                 |                   |
| Internal                                            | <b>Yes</b>        |
| External                                            | <b>No</b>         |
| <b>Communication</b>                                |                   |
| Communications Plan                                 | <b>No</b>         |

### 1. Strategic Implications

Community Plan / Single Outcome Agreement - N/A

Corporate Plan - N/A

### 2. Resource Implications

Financial - N/A

Workforce - N/A

Asset Management (land, property, IT) – N/A

### 3. Assessments

Equality Impact Assessment – N/A

Strategic Environmental Assessment – N/A

Sustainability – N/A

Legal and Governance – N/A

Risk – N/A

#### **4. Consultation**

##### Internal

- 4.1 This report has been reviewed by the Policy and Governance Group and the Corporate Complaints Group. Both comprise representatives from all Services.

##### External – N/A

#### **5. Communication**

None

#### **2. BACKGROUND PAPERS**

None

#### **3. APPENDICES**

Appendix 1 – SPSO Performance Indicators

Appendix 2 - What was complained about?

Appendix 3 – SPSO decision letters

Appendix 4 - Recommendations made by the SPSO in 2015/16

Appendix 5 – Local Authority Complaints received by the SPSO in 2015/16

## SPSO PERFORMANCE INDICATORS

### Indicator 1 - The total number of complaints received per thousand of the population.

This indicator records the total number of complaints received by the Council. The 2011 Census gives the population of the Council area to be approximately 148,000.

| Year    | Total number of complaints received | Total complaints closed at Stage 1 | Stage 1 escalated to Stage 2 | Total number of complaints closed | Number of complaints per 1,000 population |
|---------|-------------------------------------|------------------------------------|------------------------------|-----------------------------------|-------------------------------------------|
| 2015/16 | 2631                                | 2513                               | 118                          | 2631                              | 18                                        |
| 2014/15 | 2185                                | 2085                               | 100                          | 2185                              | 15                                        |

For information, the figures excluding “missed bin complaints are as follows: -

| Year    | Total number of complaints received | Total complaints closed at Stage 1 | Stage 1 escalated to Stage 2 | Total number of complaints closed | Number of complaints per 1,000 population |
|---------|-------------------------------------|------------------------------------|------------------------------|-----------------------------------|-------------------------------------------|
| 2015/16 | 1450                                | 1332                               | 118                          | 1450                              | 10                                        |
| 2014/15 | 1203                                | 1103                               | 100                          | 1203                              | 8                                         |

The comparable figures for “missed” bin complaints are: -

| Year    | Total number of complaints received | Total closed at Stage 1 | Stage 1 escalated to Stage 2 | Total number of complaints closed | Number of complaints per 1,000 population |
|---------|-------------------------------------|-------------------------|------------------------------|-----------------------------------|-------------------------------------------|
| 2015/16 | 1181                                | 1181                    | 0                            | 1181                              | 8                                         |
| 2014/15 | 982                                 | 982                     | 0                            | 982                               | 7                                         |

The term “closed” refers to a complaint to which a customer has had a response and no further action is required or process available within the Council’s CHP.

### Indicator 2 - Complaints closed at Stage 1 and Stage 2 as a percentage of all complaints closed.

| Year    | Total number of complaints closed | Stage 1 complaints closed as a % of all complaints | Stage 2 complaints closed as a % of all complaints |
|---------|-----------------------------------|----------------------------------------------------|----------------------------------------------------|
| 2015/16 | 2631                              | 95.5% (2513)                                       | 4.5% (118)                                         |
| 2014/15 | 2185                              | 95% (2085)                                         | 5% (100)                                           |



**Indicator 3 - The number of complaints upheld, partially upheld or not upheld at each stage as a percentage of complaints closed in full at each stage.**

This indicator records the formal outcome recorded for each complaint. Stage 1 complaints generally have one point of complaint whereas Stage 2 complaints generally have multiple points.

**Complaints closed at Stage 1**

| Year    | Number of complaints closed | % upheld   | % partially upheld | % not upheld | % no conclusion** |
|---------|-----------------------------|------------|--------------------|--------------|-------------------|
| 2015/16 | 2513*                       | 62% (1554) | 9% (231)           | 27% (686)    | 2% (42)           |
| 2014/15 | 2085*                       | 60% (1238) | 10% (208)          | 24% (505)    | 6% (134)          |

\*These figures include 1181 missed bin uplifts for 2015/16 and 982 for 2014/15. It should be noted that there are in excess of 5 million bin lifts carried out successfully every year.

\*\* A complaint may be recorded as “no conclusion” when there are two differing opinions on an issue and no independent witnesses.

**Complaints closed at Stage 2**

| Year    | Number of complaints closed | % upheld | % not upheld |
|---------|-----------------------------|----------|--------------|
| 2015/16 | 118                         | 60% (71) | 40% (47)     |
| 2014/15 | 100                         | 63% (63) | 37% (37)     |

The SPSO indicator as detailed above requires that an overall outcome is recorded for each complaint. If any aspect of the complaint is upheld then the overall outcome is recorded as “upheld”. By way of explanation, if a complaint comprises five points, of which two are upheld, two not upheld and one partially upheld, then the overall outcome would be upheld.

The table below shows a breakdown of findings in respect of each complaint point at stage 2 consideration.

| Stage 2 | Number of complaints closed | Number of points within complaints | % points of complaint points upheld | % points of complaint points partially upheld | % points of complaint points not upheld | % No conclusion ** |
|---------|-----------------------------|------------------------------------|-------------------------------------|-----------------------------------------------|-----------------------------------------|--------------------|
| 2015/16 | 118                         | 495                                | 14% (71)                            | 11% (54)                                      | 71% (352)                               | 4 % (18)           |
| 2014/15 | 100                         | 407                                | 20% (81)                            | 11% (45)                                      | 61% (248)                               | 8 % (33)           |

**Indicator 4 - The average time, in working days, for a full response to complaints at each stage.**

This indicator represents the average time in working days to close complaints at Stage 1 and at Stage 2.

SPSO procedures specify Stage 1 complaints to be resolved within 5 working days.

| <b>Stage 1</b> | Number of Complaints. | Total number of working days taken to close complaints | Average time to respond to complaints |
|----------------|-----------------------|--------------------------------------------------------|---------------------------------------|
| 2015/16        | 2513                  | 8865                                                   | 4 days                                |
| 2014/15        | 2085                  | 8504                                                   | 4 days                                |

SPSO procedures specify Stage 2 complaints should be resolved within 20 working days.

| <b>Stage 2</b> | Number of Complaints. | Total number of working days taken to close complaints | Average time to respond to complaints |
|----------------|-----------------------|--------------------------------------------------------|---------------------------------------|
| 2015/16        | 118                   | 2533                                                   | 22 days                               |
| 2014/15        | 100                   | 2392                                                   | 24 days                               |

**Indicator 5 - The number and percentage of complaints, at each stage, which were closed in full within the set timescales of 5 and 20 working days.**

This indicator presents the number and percentage of complaints closed within 5 working days at Stage 1 and 20 working days at Stage 2.

| <b>Stage 1</b> | Number of complaints closed | Number of complaints closed within 5 working days | Number of complaints closed within 5 working as % of complaints closed |
|----------------|-----------------------------|---------------------------------------------------|------------------------------------------------------------------------|
| 2015/16        | 2513                        | 1816                                              | 72%                                                                    |
| 2014/15        | 2085                        | 1664                                              | 80%                                                                    |

| <b>Stage 2</b> | Number of complaints closed | Number of complaints closed within 20 working days | Number of complaints closed within 20 working days as % of complaints closed |
|----------------|-----------------------------|----------------------------------------------------|------------------------------------------------------------------------------|
| 2015/16        | 118                         | 69                                                 | 58%                                                                          |
| 2014/15        | 100                         | 58                                                 | 58%                                                                          |

**Indicator 6 - The number and percentage of complaints, at each stage, where an extension to the 5 or 20 working days timeline has been authorised.**

The Council's CHP allows for an extension to the timescales to be authorised in certain circumstances. An example would be where a key member of staff is on annual leave or when during school holidays.

| <b>Stage 1</b> | Number of complaints closed | Number of complaints closed where an extension had been authorised | Number of complaints closed as % of all complaints closed where an extension had been authorised |
|----------------|-----------------------------|--------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| 2015/16        | 2513                        | 697                                                                | 28%                                                                                              |
| 2014/15        | 2085                        | 421                                                                | 20%                                                                                              |

| <b>Stage 2</b> | Number of complaints closed | Number of complaints closed where an extension had been authorised | Number of complaints closed as % of all complaints closed where an extension had been authorised |
|----------------|-----------------------------|--------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| 2015/16        | 118                         | 49                                                                 | 42%                                                                                              |
| 2014/15        | 100                         | 42                                                                 | 42%                                                                                              |

**Indicator 7 - A statement to report customer satisfaction with the complaints service.**

A Complaints Handling Customer Feedback Survey commenced on 1 April 2016 and has been issued to date to a total of 54 Stage 2 complainants. Seven (13%) responses have been received of which 75% of respondents were not happy overall with the way that the Council handled, responded and resolved their complaints.

However, as this represents less than 10% of the stage 2 complainants, this is not considered to indicate any systemic problem.

**Indicator 8 - A statement outlining changes or improvements, to services or procedures, as a result of the consideration of complaints.**

This qualitative indicator is intended to identify service improvements/learnings from complaints that were derived from complaints during the reporting period.

The Council aims to record all service improvements arising from complaints. Complaints performance information, including improvement actions, are considered routinely at Departmental Management Team meetings and as part of Head of Service ERD's.

In the 118 stage 2 complaints recorded in 2015/16:-

- 24 recommendations were made highlighting the need for additional staff training on processes or procedures, which were accepted and implemented by the Services.
- 25 recommendations were made highlighting the need to review Council and Service policies and procedures. These were accepted by Services and new procedures were initiated in 11 cases.
- The Council is keen to understand the types of “expressions of dissatisfaction” being received and records the types of complaints received under the seven headings agreed by the SPSO. This approach provides the opportunity for identifying emerging trends and pinpointing areas for staff development and training. This information is detailed within Appendix 2

## WHAT WAS COMPLAINED ABOUT?

### Complaints by Service

| Stage 1                         | 2014/15            | 2015/16            |
|---------------------------------|--------------------|--------------------|
|                                 | Number (%)         | Number (%)         |
| Corporate & Democratic          | 16 (1)             | 22 (1)             |
| Education & Children's Services | 159 (8)            | 370 (15)           |
| Housing & Community Care        | 401 (19)           | 417 (17)           |
| The Environment Service         | 1509 (72)          | 1704 (67)          |
| <b>Total Stage 1</b>            | <b>2085 (100%)</b> | <b>2513 (100%)</b> |

| Stage 2                         | 2014/15           | 2015/16           |
|---------------------------------|-------------------|-------------------|
|                                 | Number (%)        | Number (%)        |
| Corporate & Democratic          | 8 (8)             | 10 (8)            |
| Education & Children's Services | 29 (29)           | 32 (27)           |
| Housing & Community Care        | 25 (25)           | 29 (25)*          |
| The Environment Service         | 38 (38)           | 47 (40)           |
| <b>Total Stage 1</b>            | <b>100 (100%)</b> | <b>118 (100%)</b> |

\*Includes 3 that were subsequently withdrawn

## Complaints by Category

| Stage 1              | 2014/15            | 2015/16            |
|----------------------|--------------------|--------------------|
|                      | Number (%)         | Number (%)         |
| Missed Bins          | 982 (47)           | 1181 (46)*         |
| Service Provision    | 502 (23)           | 591 (24)           |
| Employee             | 209 (10)           | 247 (10)           |
| Policy & Procedure   | 105 (5)            | 154 (6)            |
| Communication        | 123 (6)            | 159 (6)            |
| Equality             | 2 (1)              | 3 (1)              |
| Other                | 162 (8)            | 178 (7)            |
| <b>Total Stage 1</b> | <b>2085 (100%)</b> | <b>2513 (100%)</b> |

\*It should be noted that there are in excess of 5 million actual bin lifts carried out successfully every year.

| Stage 2              | 2014/15           | 2015/16           |
|----------------------|-------------------|-------------------|
|                      | Number (%)        | Number (%)        |
| Service Provision    | 63 (63)           | 69 (58)           |
| Employee             | 8 (8)             | 10 (9)            |
| Policy & Procedure   | 25 (25)           | 27 (23)           |
| Communication        | 2 (2)             | 4 (3)             |
| Equality             | 0 (0)             | 0 ( )             |
| Other                | 2 (2)             | 8 (7)             |
| <b>Total Stage 2</b> | <b>100 (100%)</b> | <b>118 (100%)</b> |

## SPSO DECISION LETTERS

| SPSO Ref. | Description                                       | Complaints | Complaint Points | Complaint Points Upheld |
|-----------|---------------------------------------------------|------------|------------------|-------------------------|
| N/A       | Complaints to the SPSO not duly made or withdrawn | 11         | 11               | 0                       |
| N/A       | Outcome of complaints not achievable by the SPSO  | 7          | 7                | 0                       |
| N/A       | Out of SPSO jurisdiction (discretionary)          | 8          | 8                | 0                       |
| N/A       | Out of SPSO jurisdiction (non-discretionary)      | 9          | 9                | 0                       |
| N/A       | Resolved                                          | 1          | 1                | 0                       |
| N/A       | Premature complaints to SPSO                      | 14         | 14               | 0                       |
| 201306027 | TES – Enforcement Issues                          | 1          | 5                | 0                       |
| 201401233 | HCC – Tenancy Issues                              | 1          | 3                | 0                       |
| 201402322 | TES – Planning Application                        | 1          | 1                | 0                       |
| 201405142 | ECS – Campus Issues<br><b>5 Recommendations</b>   | 1          | 1                | 1                       |
| 201407057 | ECS – School Issues                               | 1          | 2                | 0                       |
| 201501727 | TES – Road Issues<br><b>2 Recommendations</b>     | 1          | 2                | 1                       |
|           | <b>Total</b>                                      | 56         | 64               | 2                       |

## RECOMMENDATIONS MADE BY THE SPSO IN 2015/16

The table below lists the 7 recommendations made by the SPSO in regard to Decision Letters issued against the Council between April 2015 and March 2016.

| Case Ref. | Complaint Description                                                                                                                                                                                                                                                                                                                   | Decision Issued | SPSO Recommendation                                                                                                                                                                                                                                                                                                                                                                                                                                       | Council Action                                                                                                                                                                                                                                        |
|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 201501727 | <p>TES</p> <p>The Council failed to take reasonable steps when the complainant reported concerns about safe road access to the A911.</p> <p><b>Upheld by the SPSO</b></p> <p>The Council failed to take reasonable steps when you raised concerns about the premature removal of the old road.</p> <p><b>Not Upheld by the SPSO</b></p> | 11/01/2016      | <p>Recommendation 1</p> <p>The Council issue the complainant with an apology for the failings identified in his complaint.</p> <p>Date due: 11/02/2016</p> <p>Recommendation 2</p> <p>The Council should further ensure that the terms of the SPSO Decision Letter are brought to the attention of those members of staff in the Roads and Planning departments who were involved in the planning applications concerned.</p> <p>Date due: 11/02/2016</p> | <p>Apology letter sent.</p> <p>Date completed: 17/02/2016.</p> <p>Email with attached SPSO Decision Letter brought to the attention of staff.</p> <p>Date completed: 19/02/2016.</p>                                                                  |
| 201405142 | <p>ECS</p> <p>The Council failed to take reasonable steps since December 2013 to address the complaints of continued noise nuisance.</p> <p><b>Upheld by the SPSO</b></p>                                                                                                                                                               | 06/11/2015      | <p>Recommendation 1</p> <p>The Council issue a written apology to the complainant for the failure to timeously issue an abatement notice in line with the relevant legislation.</p> <p>Date due: 04/12/2015</p> <p>Recommendation 2</p> <p>The Council ensure that relevant staff are aware of their statutory duties in terms of the requirement to serve abatement notices when a statutory nuisance is</p>                                             | <p>The Council asked for an extension as officers wished to respond in detail regarding whether or not an abatement notice in line with the relevant legislation should have been issued.</p> <p>The Council rejected Recommendations 1 2 3 and 4</p> |



| Case Ref. | Complaint Description | Decision Issued | SPSO Recommendation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Council Action                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|-----------|-----------------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|           |                       |                 | <p>confirmed.</p> <p>Date due: 04/12/2015.</p> <p>Recommendation 3<br/>The Council actively investigate the noise from the campus that is affecting your property, including the antisocial behaviour aspect of swearing.</p> <p>Date due: 04/12/2015.</p> <p>Recommendation 4<br/>The Council should consider on the basis of the established situation at the complainants home and without further delay, whether an abatement notice should be issued in line with the relevant legislation.</p> <p>Date due: 18/12/2015.</p> <p>Recommendation 5<br/>The Council should consider whether there is any other formal action available to deal with audible swearing, if this issue persists.</p> <p>Date due: 18/12/2015</p> | <p>as officers did not agree that an abatement notice should have been issued.</p> <p>Response issued to the SPSO on 20/01/2016.</p> <p>SPSO stated that this view was incorrect in a letter dated 29 March 2016 and that the recommendations should now be implemented by the Council forthwith. Council accepted this decision.</p> <p>Recommendation 1<br/>Apology letter from Chief Executive issued 6 May 2016, and a second letter of apology incorporating changes suggested by the SPSO issued 3 June 2016.</p> <p>Recommendation 2<br/>Relevant staff verbally informed and issue discussed at Team meeting held on 24 June 2016.</p> <p>Recommendation 3 and 4<br/>Although these recommendations were not originally accepted by the Council a range of measures had already been implemented by the</p> |

| Case Ref. | Complaint Description | Decision Issued | SPSO Recommendation | Council Action                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|-----------|-----------------------|-----------------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|           |                       |                 |                     | <p>time the Council agreed to fully implement Recommendations 3 and 4 including as follows;</p> <ul style="list-style-type: none"> <li>• Reduction in teams on pitches at any one time</li> <li>• Facility opening times curtailed</li> <li>• Updated Management Plan</li> <li>• Further noise monitoring undertaken.</li> </ul> <p>The noise monitoring showed that at this time there was no Statutory Noise Nuisance and subsequently a Noise Abatement Notice was not issued. However noise monitoring will continue when required.</p> <p>Recommendation 5 Agreed and measures implemented. However after discussions with all relevant staff approaches in terms of the Anti-Social Behaviour (Scotland) Act 2004 were deemed to be not appropriate for this set of circumstance.</p> <p>Date SPSO informed of actions undertaken and ongoing by the Council: 20/01/2016</p> |

## LOCAL AUTHORITY COMPLAINTS RECEIVED BY THE SPSO 2014/15

| PKC Service                            | SPSO Category           | PKC                |           |             |             | All Local Authorities |             |             |             |
|----------------------------------------|-------------------------|--------------------|-----------|-------------|-------------|-----------------------|-------------|-------------|-------------|
|                                        |                         | Complaints to SPSO |           | %           |             | Complaints to SPSO    |             | %           |             |
|                                        |                         | 14/15              | 15/16     | 14/15       | 15/16       | 14/15                 | 15/16       | 14/15       | 15/16       |
| Chief Exec / CS                        | Personnel               | 0                  | 1         | 0           | 2.1         | 10                    | 9           | 0.6         | 0.5         |
|                                        | Finance                 | 3                  | 4         | 6.4         | 8.5         | 174                   | 179         | 9.3         | 10.4        |
|                                        | Legal & Admin           | 0                  | 1         | 0           | 2.1         | 76                    | 61          | 4.0         | 3.5         |
|                                        | <b>Total</b>            | <b>3</b>           | <b>6</b>  | <b>6.4</b>  | <b>12.7</b> | <b>260</b>            | <b>249</b>  | <b>13.9</b> | <b>14.4</b> |
| ECS                                    | Education               | 8                  | 7         | 17.1        | 15          | 174                   | 173         | 9.3         | 10          |
|                                        | Recreation & Leisure    | 1                  | 0         | 2.1         | 0           | 24                    | 32          | 1.4         | 1.9         |
|                                        | <b>Total</b>            | <b>9</b>           | <b>7</b>  | <b>19.1</b> | <b>15</b>   | <b>198</b>            | <b>205</b>  | <b>10.7</b> | <b>11.9</b> |
| HCC                                    | Housing                 | 16                 | 6         | 34.0        | 12.9        | 468                   | 423         | 24.9        | 24.6        |
|                                        | Social Work             | 1                  | 7         | 2.1         | 14.9        | 253                   | 231         | 13.5        | 13.4        |
|                                        | <b>Total</b>            | <b>17</b>          | <b>13</b> | <b>36.1</b> | <b>27.8</b> | <b>721</b>            | <b>654</b>  | <b>38.4</b> | <b>38</b>   |
| TES                                    | Building Control        | 1                  | 0         | 2.1         | 0           | 61                    | 54          | 3.2         | 3.1         |
|                                        | Consumer Protection     | 0                  | 0         | 0           | 0           | 8                     | 4           | 0.4         | 0.2         |
|                                        | Env. Health & Cleansing | 2                  | 2         | 4.3         | 4.2         | 148                   | 126         | 7.9         | 7.3         |
|                                        | Land & Property         | 1                  | 1         | 2.1         | 2.1         | 29                    | 20          | 1.5         | 1.2         |
|                                        | Planning                | 10                 | 11        | 21.3        | 23.4        | 217                   | 172         | 11.5        | 10          |
|                                        | Roads & Transport       | 3                  | 4         | 6.4         | 8.5         | 119                   | 120         | 6.3         | 7           |
|                                        | Economic Development    | 0                  | 0         | 0           | 0           | 8                     | 11          | 0.4         | 0.6         |
|                                        | <b>Total</b>            | <b>17</b>          | <b>18</b> | <b>36.2</b> | <b>38.2</b> | <b>590</b>            | <b>507</b>  | <b>31.2</b> | <b>29.4</b> |
| Fire & Police Boards                   |                         | 0                  | 0         | 0           | 0           | 4                     | 5           | 0.2         | 0.3         |
| National Park Authorities              |                         | 0                  | 0         | 0           | 0           | 3                     | 6           | 0.2         | 0.4         |
| Other                                  |                         | 0                  | 1         | 0           | 2.1         | 21                    | 17          | 1.1         | 1           |
| Welfare Fund - Grants                  | Community Care & Crisis | 1                  | 0         | 2.1         | 0           | 26                    | 40          | 1.3         | 2.3         |
| Valuation Joint Boards                 |                         | 0                  | 0         | 0           | 0           | 6                     | 6           | 0.3         | 0.4         |
| Subject Unknown or Out of Jurisdiction |                         | 0                  | 2         | 0           | 4.2         | 51                    | 33          | 2.7         | 1.9         |
| <b>Total</b>                           |                         | <b>47</b>          | <b>47</b> | <b>100</b>  | <b>100</b>  | <b>1880</b>           | <b>1722</b> | <b>100</b>  | <b>100</b>  |

