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Council Building
2 High Street
Perth
PH1 5PH

17/04/2024

A hybrid meeting of the **Scrutiny and Performance Committee** will be held in the **Council Chamber** on **Wednesday, 24 April 2024** at **09:30**.

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

THOMAS GLEN
Chief Executive

Those attending the meeting are requested to ensure that all notifications are silent on their device and other devices are in silent mode.

Please note that the meeting will be broadcast online and recorded. The recording will be publicly available on the Council's website following the meeting.

Members:

Councillor Colin Stewart (Convener)
Bailie Alasdair Bailey (Vice-Convener)
Councillor Keith Allan
Councillor Steven Carr
Councillor Angus Forbes
Councillor Michelle Frampton
Councillor Ian Massie
Councillor Willie Robertson
Councillor Caroline Shiers
Councillor Frank Smith
Councillor Jack Welch

Scrutiny and Performance Committee

Wednesday, 24 April 2024

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 | |
| 2 | DECLARATIONS OF INTEREST | |
| 3 | MINUTE OF MEETING OF SCRUTINY AND PERFORMANCE COMMITTEE OF 31 JANUARY 2024 FOR APPROVAL
(copy herewith) | 5 - 12 |
| 4 | OUTSTANDING BUSINESS STATEMENT (OBS)
(copy herewith 24/122) | 13 - 16 |
| 5 | WEATHER EVENTS - IMPROVEMENT PLAN
(copy herewith 24/123) | 17 - 22 |
| 6 | TAYSIDE CONTRACTS | |
| 6(i) | TAYSIDE CONTRACTS ANNUAL PERFORMANCE REPORT 2022/23
(copy herewith 24/124) | 23 - 74 |
| 6(ii) | SUPPORTED SELF ASSESSMENT OF TAYSIDE CONTRACTS - OUTCOME
(copy herewith 24/125) | 75 - 108 |
| 7 | SUMMARY REPORT ON CARE INSPECTORATE AND EDUCATION SCOTLAND INSPECTIONS
Report by Strategic Lead - Education and Learning (copy herewith 24/126) | 109 - 124 |
| 8 | ARMS LENGTH EXTERNAL ORGANISATIONS - UPDATE ON FINANCIAL PERFORMANCE AND BUSINESS TRANSFORMATION
Report by Head of Culture and Community Services (copy herewith 24/127) | 125 - 144 |

**9 PERTH AND KINROSS HEALTH & SOCIAL CARE
PARTNERSHIP (HSCP) CLINICAL AND CARE GOVERNANCE
ASSURANCE REPORT**

145 - 200

Report by Chief Officer, Perth and Kinross HSCP (copy herewith
24/128)

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SCRUTINY AND PERFORMANCE COMMITTEE

Minute of hybrid meeting of the Scrutiny and Performance Committee held in the Council Chambers, 2 High Street, Perth, on Wednesday 31 January 2024 at 09.30am.

Present: Councillor C Stewart, Bailie A Bailey, Bailie C Ahern (substituting for Councillor K Allan), A Forbes, K Harvey (substituting for Councillor S Carr), M Frampton, I Massie, W Robertson, C Shiers, F Smith, and J Welch.

In Attendance: T Glen, Chief Executive; C Mailer (Director – Strategy, People and Resources); B Renton (Executive Director (Communities)); S Devlin (Executive Director (Education and Children’s Services)); F Robertson, K Johnston, E Ritchie, M Butterworth, F Crofts, A Brown, H Hope and S Skene (Communities); K Ogilvy and M Dickson (HSCP); L Simpson, A Taylor, L Dott, K Molley, A Brown, and M Pasternak (Strategy, People and Resources).

Also in attendance: C Glasgow and C Hood, PTCH; P Cromwell and D McElhose, LAL Ltd; and H Smout, Culture P&K

Apologies: Councillors K Allan and S Carr

Councillor C Stewart, Convener, Presiding.

The Convener led discussion on Items 1- 5 & 7-8 and the Vice-Convener led discussion on item 6.

1. WELCOME AND APOLOGIES

The Convener welcomed all those present to the meeting and apologies were noted above.

2. DECLARATIONS OF INTEREST

No declarations of interest were made in terms of the Councillors’ Code of Conduct.

THE COMMITTEE AGREED TO VARY THE ORDER OF BUSINESS AT THIS POINT.

3. MINUTES

3(i) MINUTE OF SPECIAL MEETING OF THE SCRUTINY AND PERFORMANCE COMMITTEE OF 22 NOVEMBER 2023

The minute of special meeting of the Scrutiny and Performance Committee of 22 November 2023 was submitted and approved as a correct record.

3(ii) MINUTE OF MEETING OF SCRUTINY AND PERFORMANCE COMMITTEE OF 11 DECEMBER 2023

The minute of meeting of the Scrutiny and Performance Committee of 11 December 2023 was submitted and approved as a correct record.

4. OUTSTANDING BUSINESS STATEMENT

Resolved:

The status of actions in the Outstanding Business Statement, be noted and completed actions removed accordingly.

5. UPDATE BY ARM'S LENGTH EXTERNAL ORGANISATIONS

(i) Perth Theatre and Concert Hall

C Glasgow, Chief Executive and C Hood, Chairman, Perth Theatre and Concert Hall provided a brief update on PTCH's contribution so far, in supporting the delivery of the Cultural Strategy's Year 1 Action Plan. The report was shared with members in advance of the meeting.

(ii) Live Active Leisure Ltd

P Cromwell, Chief Executive and D McElhose, Chairman, Live Active Leisure provided a brief update on LAL's contribution so far, in supporting the delivery of the Physical Activity & Sport Strategy's Year 1 Action Plan. The report was shared with members in advance of the meeting.

(iii) Culture P&K

H Smout, Chief Executive provided a brief update on Culture P&K's contribution so far, in supporting the delivery of the Cultural Strategy's Year 1 Action Plan. The report was shared with members in advance of the meeting.

Members questions were answered. Councillor C Stewart thanked representatives for their attendance and they left the meeting.

THERE FOLLOWED A SHORT RECESS AND THE MEETING RECONVENED AT 1055AM.

6. REVIEW OF EXTEREME WEATHER EVENTS IN PERTH AND KINROSS IN OCTOBER 2023

There was submitted a report by Chief Executive (24/45) considering the remainder of the report presented to Scrutiny and Performance Committee on 22 November 2023 22 November 2023 (Report No 23/232 refers).

In response to a question from the Vice-Convener regarding the number of housing properties that experienced internal flooding in Invergowrie during storm Babet, M Butterworth advised that 7 residential properties had been reported in November with internal flooding. However, through further engagement with residents it had been confirmed that 49 residential properties and 5 businesses struggled with internal funding. M Butterworth confirmed that those affected had received grant funding from the Scottish Government. B Renton added that residents in the village of Invergowrie

were leafleted and asked to provide feedback which created more contact with the Council regarding the weather event.

In response to a question from Councillor A Forbes, B Renton confirmed that the in her experience the link with the Local Resilience Partnership across Tayside had been very useful in ensuring that all partners are aware of the issues occurring across all three local authority areas and then would link back into the Incident Management Team.

In response to a question from Councillor J Welch regarding the involvement of External Agencies and how they work together, B Renton advised that nationally resilience had been established in Scotland by several category one and category two responders and the Local Resilience Partnership are made of those organisations. B Renton highlighted the strength of the Local Resilience Partnership and the national collective work in managing incidents. B Renton confirmed that since the weather incidents in October 2023 there are strong discussions ongoing with SEPA on the telemetry of the river Tay which should help for future preparedness.

The Convener suggested that the protocol that had been created following the weather events in October 2023 on how information would be cascaded from SSE to SEPA and then through to the Council be shared with members. Councillor C Stewart referred to the storm at the end of December and queried if the protocol had been effective as a member had contacted staff to alert them of a potential release of water. B Renton confirmed that the Council were in regular contact with SEPA and SSE Renewables throughout the weather events in December. B Renton advised that the Council had not been clear on the impact of the snow melt over the Tay catchment area and discussions are being held with agencies as different information had been received throughout the December events. However, B Renton confirmed that relationships are strong between the agencies to be able to question and ask for more information.

Councillor C Shiers raised concerns over a change of personnel across agencies and knowing that processes remain followed. B Renton advised that there had not been conversations held yet with other agencies in terms of suggested changes to the Flood Protection Scheme. B Renton confirmed that as part of future planning the Council need to ensure that all agencies are aware of any changes made to the Flood Protection Scheme.

In response to a question from the Convener regarding engagement with businesses at Friarton in closing the flood gates at the appropriate time, A Brown confirmed that the Council are in contact with businesses regarding when the gates are due to be closed and reopened. M Butterworth added that as part of the Improvement Plan, officers are looking to extend training to other Council employees, so further support can be made available to the Roads Maintenance Partnership in the event of an emergency.

In response to a question from Councillor A Forbes regarding the action included in the Improvement Plan on developing a protocol to share vulnerable people lists during emergencies, H Hope provided assurance that the Council have contacted SSEN for a list of their vulnerable customers to help share information regarding future weather events. The Convener asked members to encourage their local Community

Groups and Community Councils to form Community Resilience Teams which would help reach all vulnerable people in the event of an emergency.

In response to a question from Councillor J Welch regarding how we are going to work collaboratively across the Council through other committees such as E,I&ED, Climate Change and Planning to mitigate issues within a catchment level, B Renton advised that a report would be brought to the next E,I&ED Committee on the officer response to a consultation that the Scottish Government are operating in relation to water, waste water and drainage policy. B Renton advised that as part of the response officers would emphasise what would the impact be on climate change and how do we collectively tackle it.

In response to a question from Councillor C Shiers regarding equipment for operative employees, M Butterworth advised that staff are given the correct protective clothing to wear out on site. M Butterworth added that regular meetings are held with trade union representatives to check that employees are safe at work. M Butterworth assured members that he had not been aware of any issues and that the necessary arrangements are in place to protect staff.

In response to a question from Councillor I Massie regarding the number of Community Reliance Groups that have formed since the weather events in October 2023, S Skene advised that 20 groups have been created. S Skene confirmed that the Council are looking to support groups to develop and have been flexible at arranging meetings out of work hours. S Skene confirmed that next steps include developing Local Resilience Plans for each of the Community Resilience Groups.

Councillor C Shiers raised concerns over poor mobile coverage in rural areas in the event of a weather emergency. Officers agreed that the action would be included in the Improvement Plan.

B Renton suggested that a tour of the Flood Protection Scheme be provided to members.

Members thanked B Renton and her teams for their ongoing work towards the actions outlined in the Improvement Plan.

Resolved:

- (i) The findings of the review into the Council's preparedness, response, and recovery activity during each of the three October weather events from Section 7 of Report 23/232 onwards, be considered.
- (ii) The updated improvement actions identified within Appendix 1 of Report 24/45, be considered.

THERE FOLLOWED A SHORT RECESS AND THE MEETING RECONVENED AT 12.20PM.

7. DRAFT CORPORATE DELIVERY AND IMPROVEMENT PLAN 2024/25

There was submitted a report by Chief Executive (24/44) presenting the draft Corporate Delivery and Improvement Plan (CDIP) for 2024/25 for consideration, with

updated baseline data where this has become available since the plan was presented to Council.

In response to a question from Councillor A Forbes regarding further information on direct tourism expenditure and economic impact of tourism, L Dott confirmed that information would be shared following committee.

In response to a question from Councillor C Shiers regarding the Cost of the School Day toolkit, S Devlin advised that all schools in Perth and Kinross are using the Cost of the School Day toolkit. S Devlin confirmed that a session had recently been held for all school Headteachers on the toolkit at the Headteacher Development Day. In response to a supplementary question from Councillor C Shiers, C Mailer confirmed that all benchmarking information would continue to be reported in the Annual Performance Report and online in terms of wider benchmarking data.

Councillor C Stewart queried the same baseline data for the number of community asset transfers and community groups applying for community asset opportunities. Officers agreed to relook at the data.

In relation to those experiencing and at risk of poverty, the Vice-Convener suggested changing the monitoring to see how many individuals are helped by cash first partnerships instead of measuring success in the number of cash first partnerships. C Mailer confirmed that the suggestion would be taken on board and factored into the final version of the CDIP.

In relation to the decarbonisation of the fleet which would be measured by the increase in number of council vehicles with electric or other zero direct carbon fuel technologies, the Vice-Convener suggested increasing the goal by including a percentage increase target. C Mailer confirmed that the suggestion would be fed back to officers but would be driven by the availability of resources.

The Vice-Convener referred to the figure of 20% reduction of vehicle kilometres within a year. L Dott advised that the figure had been taken from the Climate Change Action Plan but would be confirmed with members following Committee.

In response to a question from Councillor A Forbes regarding distressing behaviour by pupils at school, S Devlin advised that there are several pieces of work underway to ensure that children and staff are safe when attending school. S Devlin confirmed the Anti-bullying Strategy had recently been reviewed in full consultation with staff across all schools. S Devlin added that several measures and supports are being looked at for children who find it difficult to attend and engage in school. S Devlin confirmed that robust processes are in place and encourage staff to report distressed or violent behaviour. Following a further question from Councillor A Forbes, S Devlin advised that those results are monitored, and data would be reported to the Employees Joint Consultative Committee on a quarterly basis. S Devlin confirmed that the objective would be to reduce the number of incidents in schools across Perth and Kinross where possible.

In relation to the previous question, the Vice-Convener referred to measuring success by schools having robust procedures to reduce bullying in line with improving relationships and suggested that when undertaking the next review of the CDIP to include objective measures.

In response to a question from Councillor A Forbes regarding affordable housing and how success would be measured by maintaining the 53% / 47% split across urban and rural areas, C Mailer confirmed that the percentage split between urban and rural areas had been based on the housing need for local communities. Councillor A Forbes also referred to the baseline data of 71 buybacks/empty homes and queried if a target had been set for improving results over the next year, C Mailer advised that within the Local Housing Strategy a target had been set for the delivery of affordable homes and buybacks. C Mailer confirmed that data would be shared with members following the meeting.

Resolved:

The draft CDIP and available baseline measures outlined in Report 24/44, be considered.

8. PERTH AND KINROSS HEALTH & SOCIAL CARE PARTNERSHIP (HSCP) CLINICAL AND CARE GOVERNANCE ASSURANCE REPORT

There was submitted a report by Chief Social Work Officer (24/46) providing assurance to Perth & Kinross Council's Scrutiny and Performance Committee on the Clinical Care and Professional Governance of the Perth and Kinross HSCP.

Bailie C Ahern raised concerns over issues of recruitment within the mental health workforce and queried if the redesign of services should be considered. K Ogilvy confirmed that several options are being looked at to help recruit mental health professionals within Perth and Kinross. K Ogilvy advised that that in terms of redesign, the Health and Social Care Partnership are looking at alternative roles such as Advanced Nurse Practitioners to take on some of the lower end roles that consultants have traditionally undertaken to allow current consultants to focus on more complex areas. K Ogilvy added that as well as the wider mental health redesign across Tayside, discussions are being held locally on the redesign of the Community Mental Health teams to make better use of the resources and services that are currently in place.

In response to a similar question from the Vice-Convenor on recruitment in adult social work and social care and the lack of care at home capacity especially around rural Perth and Kinross, K Ogilvy advised that anyone could apply without experience or qualifications as the appropriate training would be provided.

In response to a question from Councillor I Massie regarding clinical and care governance arrangements, K Ogilvy confirmed that there are Locality Governance Groups for North, South and Perth City. There are also several Professional Governance Groups which meet regularly. A Mental Health Governance Group had been recently established to focus on mental health services, which refers to substance use, learning disabilities and autism. K Ogilvy added that professional meetings are also held for social workers and nurses to look at specific governance arrangements within those professions. K Ogilvy confirmed that issues are addressed where possible at the locality and professional level before being escalated to the Perth and Kinross Care and Professional Governance Forum which covers all of Perth and Kinross. K Ogilvy added that in addition, the Health and Social Care Partnership focus on exception reporting, learning reviews, and risk monitoring.

COUNCILLOR A FORBES LEFT THE MEETING DURING THIS ITEM.

Resolved:

- (i) The contents of Report 24/46, be scrutinised.
- (ii) The Committee agreed to the level of Reasonable Assurance provided.

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**SCRUTINY AND PERFORMANCE COMMITTEE**

**OUTSTANDING BUSINESS STATEMENT (OBS)**

(Report No. 24/122)

Please note that this statement sets out outstanding decisions of this committee along with an update and estimated completion date. Actions which are overdue are shaded for ease of reference. Where an update reflects that an action is complete then the Committee's agreement will be sought to its removal from the OBS.

| <b>No</b> | <b>Minute Reference</b> | <b>Subject Title</b>   | <b>Outstanding Action</b>                                                            | <b>Update</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Lead Officer /Service</b>                                     | <b>Action due</b> | <b>Action Expected</b> |
|-----------|-------------------------|------------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|-------------------|------------------------|
| 15.       | February 2023           | Scrutiny Review Topics | Progress with discussions on Additional Support Needs Provision in Perth and Kinross | <p>Meeting was arranged with the Convener/Vice-Convener and lead officers in February.</p> <p>Officers to prepare a report to the S&amp;P Committee in September 2024 on Topic 1: Applying Adjustments - How effective are we as a council at ensuring that adjustments made for ASN pupils are:</p> <ol style="list-style-type: none"> <li>1. Applied properly and consistently over time in practice.</li> <li>2. Communicated well when pupils move schools or transition from nursery to primary.</li> <li>3. Applied in a way that means that</li> </ol> | Education and Children's Services/ Legal and Governance Services | July 2024         | July 2024              |

| No  | Minute Reference           | Subject Title                                                         | Outstanding Action                                                                                    | Update                                                                                                                                                                                                                                                       | Lead Officer /Service | Action due     | Action Expected |
|-----|----------------------------|-----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|----------------|-----------------|
|     |                            |                                                                       |                                                                                                       | <p>we and the child benefit from having made interventions early.</p> <p>Case studies will be included in the report.</p> <p>The draft of the report will be shared with the Convener and Vice-Convener by the end of July 2024.</p> <p><b>COMPLETED</b></p> |                       |                |                 |
| 30. | 22 November 2023<br>Item 3 | Review of Extreme Weather Events in Perth and Kinross<br>October 2023 | Invite representatives from SEPA, SSE and SW to attend a future Scrutiny and Performance Committee.   | Representatives will attend the September Committee.<br><br><b>COMPLETED</b>                                                                                                                                                                                 | Fraser Crofts         | September 2024 | September 2024  |
| 31. | 31 January 2024<br>Item 6  | Review of Extreme Weather Events in Perth and Kinross<br>October 2023 | Protocol on cascading information from SSE to SEPA and then to the Council to be shared with members. | Email response was circulated to members.<br><br><b>COMPLETED</b>                                                                                                                                                                                            | Fraser Crofts         | 24 April 2024  | 24 April 2024   |
| 32. | 31 January 2024<br>Item 6  | Review of Extreme Weather Events in Perth and Kinross<br>October 2023 | A session on the Flood Protection Scheme be delivered to members.                                     | A session has been arranged on 22 May 2024.                                                                                                                                                                                                                  | Fraser Crofts         | May 2024       | May 2024        |
| 33. | 31 January 2024<br>Item 7  | Draft Corporate Delivery and                                          | Further information to be shared with members on direct tourism expenditure                           | Email response was circulated to members.                                                                                                                                                                                                                    | Clare Mailer          | 24 April 2024  | 24 April 2024   |

| No  | Minute Reference          | Subject Title                                         | Outstanding Action                                                                                                                              | Update                                                            | Lead Officer /Service | Action due    | Action Expected |
|-----|---------------------------|-------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-----------------------|---------------|-----------------|
|     |                           | Improvement Plan 2024-25                              | and economic impact of tourism.                                                                                                                 | <b>COMPLETED</b>                                                  |                       |               |                 |
| 34. | 31 January 2024<br>Item 7 | Draft Corporate Delivery and Improvement Plan 2024-25 | Further information to be shared with members on monitoring usage of active travel measures resulting in a 20% reduction of vehicle kilometres. | Email response was circulated to members.<br><br><b>COMPLETED</b> | Clare Mailer          | 24 April 2024 | 24 April 2024   |
| 35. | 31 January 2024<br>Item 7 | Draft Corporate Delivery and Improvement Plan 2024-25 | Targets on the delivery of affordable homes and buybacks be shared with members.                                                                | Email response was circulated to members.<br><br><b>COMPLETED</b> | Clare Mailer          | 24 April 2024 | 24 April 2024   |





Weather Events - Improvement Plan

| Theme                                        | Ref. no. | Activity                                                                                                                                                                                                                                                                                 | Responsible Officer                                     | Timescale               | Comments                                                                                                                                                                                                                                                             |
|----------------------------------------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|-------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Notifications and preparedness               | 1        | Report to EI&ED on resource requirements to support year-round resilience.                                                                                                                                                                                                               | Strategic Lead – Environment & Infrastructure           | No later than June 2024 | Proposals being developed with various options being considered and costed in conjunction with other inter-related actions below.                                                                                                                                    |
|                                              | 2        | Officers to review and put in place new minimum staffing/standby-levels at command and operational levels to ensure resources are available to successfully coordinate and deploy all flood defence measures within timescales set within the to be revised protocols (action 8 refers). | Roads Maintenance Partnership Manager                   | By June 2024            | As above, various options being considered and costed in conjunction with other inter-related actions. Consideration also being given to changing the flood gate closure procedure to provide greater community reassurance, reduce risks and resource requirements. |
| Incident Management, Resourcing and Response | 3        | Undertake further training in terms of emergency planning across the wider leadership team to ensure                                                                                                                                                                                     | Strategic Lead – Strategic Planning, Policy & Resources | By March 2024           | Arrangements are in place to provide both external and internal training/ awareness sessions as well as accredited online training. Currently liaising with                                                                                                          |

|  |   |                                                                                                                                                                                        |                                               |                                                                  |                                                                                                                                                                                                                                                                                                                                              |
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|  |   | resilience to deal with incidents                                                                                                                                                      |                                               |                                                                  | colleagues in Local Resilience Partnership (LRP) regarding further training for Gold and Silver command including Crisis Management training.                                                                                                                                                                                                |
|  | 4 | The Council's Out of Hours Standby arrangements be reviewed to include exploring the opportunities for expanding the remit of staff from other Council services.                       | Strategic Lead – Environment & Infrastructure | By March 2024                                                    | Being undertaken in conjunction with other inter-related actions. Internal discussions on-going regarding what resources are available across PKC and how these can better support/ increase any response to an emergency, including flood gate closures. Focus on Parking Services team who already have out of hours standby arrangements. |
|  | 5 | Continue to work with current Community Resilience Groups and build on the success of these models, reflecting that public agencies including the Council are unable to respond to all | Strategic Lead – Housing & Communities        | This is an ongoing action which is monitored within the service. | Word of mouth marketing including by elected members has generated a very healthy appetite for creation of new Community Resilience Groups with support available from PKC. A CRG conference is planned for mid 2024 where established and new CRGs can come together to network, share learning and seek further support                    |

|  |            |                                                                                                                                                                                |                                                               |               |                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  |            | impacts across the authority                                                                                                                                                   |                                                               |               | from PKC, including financial support.                                                                                                                                                                                                                                                                                                                                                                                              |
|  | New action | Appropriate allocation of the approved funding to communities to support resilience in terms of both training and equipment<br><br>(Scrutiny and Performance Committee action) | Service Manager – Community Resilience and Emergency Planning | By June 2024  | It is anticipated funding will largely be disbursed after the CRG conference as both existing and new groups establish their specific needs at a local level.                                                                                                                                                                                                                                                                       |
|  | 6          | Review how the logging and sharing of information between partner agencies is undertaken, building upon the conversations which have taken place to date with SSE and SEPA     | Strategic Lead – Environment & Infrastructure                 | By March 2024 | Discussions have taken place with SEPA and agreement reached on new way forward. Revised operational protocols have been agreed which will provide for better communication and data sharing between organisations.<br><br>SEPA have updated their guidance and provided a copy to PKC.<br><br>SEPA triggers on the Tummel/Garry scheme require SSE checks by SEPA (page 31 of the guidance refers).<br><br><b>Action complete.</b> |
|  | 7          | Undertake a review of the handling of                                                                                                                                          | Strategic Lead – Environment                                  | By March 2024 | We have reviewed the Contact Centre arrangements for both                                                                                                                                                                                                                                                                                                                                                                           |

|  |   |                                                                                                                                   |                                                                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|--|---|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  |   | calls to the Out of Hours contact centre, as well as a further review of the Council's out of hours customer contact arrangements | & Infrastructure<br><br>Strategic Lead – Customer & Digital Services |              | <p>Aberdeen City Council (ACC) and Perth &amp; Kinross Council (PKC).</p> <p>We have listened to a sample of calls from ACC during the weekend of 7<sup>th</sup>/8<sup>th</sup> October and the standard was as expected of a contact centre advisor – no concerns in the way calls were handled by ACC's Contact Centre out of hours staff.</p> <p>There remains a limitation to the service that ACC can provide in a severe weather event therefore several proposed actions require to be implemented to reduce the call volumes being made to ACC during instances of severe weather. This will reduce pressure in the system and provide improved capacity for dealing with genuine emergency calls.</p> |
|  | 8 | Review the Perth Flood Scheme Gate Closure                                                                                        | Strategic Lead – Environment                                         | By June 2024 | Various options being considered in conjunction with action 2 above to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |

|  |            |                                                                                                                                                                                |                                                               |              |                                                                                                                                                                                                                                                                                                                                                       |
|--|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  |            | Operational Procedure document with SEPA                                                                                                                                       | & Infrastructure                                              |              | increase resilience and community reassurance whilst minimising the need for additional stand-by resources.<br>Consideration of what gates can be left closed/sealed up with limited amenity impact. Modernisation of Promontory and Queens Bridge barriers being costed that are lighter and require less specialised knowledge/vehicles to install. |
|  | New action | This review to include a clearer and better tested 'plan B' for when something does go wrong with a piece of infrastructure<br><br>(Scrutiny and Performance Committee action) | Strategic Lead – Environment & Infrastructure                 | By June 2024 | Plan being developed which creates less reliance on the use of heavy equipment and the use of alternative protection measures. Modern/lightweight contingency barrier ordered – delivery late April.                                                                                                                                                  |
|  | New action | Develop a protocol to share vulnerable people lists during emergencies<br><br>(Scrutiny and Performance                                                                        | Service Manager – Community Resilience and Emergency Planning | By June 2024 | Officers are liaising with colleagues in SSEN and the NHS regarding the sharing of relevant information. The key issue being data protection and GDPR. It is hoped this can be completed by summer 2024.                                                                                                                                              |

|                     |            |                                                                                                                                                                |                                                                                 |                     |                                                                                                                                                                             |
|---------------------|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                     |            | Committee action)                                                                                                                                              |                                                                                 |                     |                                                                                                                                                                             |
| Impact and Recovery | 9          | Review of welfare response protocols and engagement with those directly impacted, including follow up with affected individuals in Perth City and Invergowrie. | Head of Environmental & Consumer Services<br><br>Senior Service Manager Housing | By 23 December 2023 | A welfare response protocol has been developed and was put in place which worked well during the flooding event at the end of December 2023.<br><br><b>Action complete.</b> |
|                     | 10         | Establish formal feedback mechanisms from community resilience groups to take on board learning and develop future response arrangements                       | Strategic Lead – Housing & Communities                                          | By March 2024       | Feedback mechanisms are currently in place although a formal debrief process/ protocol will be produced by officers by the end of summer 2024.                              |
|                     | New action | Representatives from SEPA, SSE and SW to attend a future Scrutiny and Performance Committee<br><br>(Scrutiny and Performance Committee action)                 | Chief Executive/ Executive Director (Communities)                               | By June 2024        | SEPA, SSE and SW to attend September Scrutiny & Performance Committee meeting.                                                                                              |



# Tayside contracts

## ANNUAL PERFORMANCE REPORT



2022/23

# Contents

|                                                       | Page             |
|-------------------------------------------------------|------------------|
| <b>Introduction</b>                                   | <b><u>3</u></b>  |
| <b>Corporate Leadership Team</b>                      | <b><u>5</u></b>  |
| <b>Tayside Contracts - Who We Are, and What We Do</b> | <b><u>6</u></b>  |
| <b>Plan on a Page</b>                                 | <b><u>8</u></b>  |
| <b>Our 5C's:</b>                                      |                  |
| • <b>Confidence, Trust and Relationships</b>          | <b><u>9</u></b>  |
| • <b>Commercial Approach</b>                          | <b><u>15</u></b> |
| • <b>Collaboration and Sharing</b>                    | <b><u>20</u></b> |
| • <b>Continuous Improvement and Performance</b>       | <b><u>29</u></b> |
| • <b>Communities, Councils and Customers</b>          | <b><u>40</u></b> |
| <b>Summary of KPI's and Targets</b>                   | <b><u>50</u></b> |







# Introduction

Thank you for taking the time read our Annual Performance Report. This report summarises the work undertaken across all Tayside Contracts' activities during 2022/23, to deliver the best possible services, and achieve the best possible outcomes, for the communities of Tayside. We are proud of what we do, and the report presents us with an opportunity to celebrate our successes, and highlights our strengths, whilst also reflecting on the challenges we have faced, and those areas where we need to make further improvements.

The period covered in this report represents one of the most difficult and unpredictable periods in the organisation's 27-year history, as we emerged from the last of the COVID lockdowns, and faced the impacts of the post pandemic recovery, including severe shortages of goods and services, coupled with essential items – such as gas, electricity, diesel and bitumen – increasing at rates, far higher than general inflation. With inflation at record levels during the year, this resulted in unprecedented pay costs. With pay awards weighted to lower paid workers, this was especially expensive for Tayside Contract. We also experienced low school meal uptake following the pandemic, as well some of our highest levels of sickness absence, turnover, and skills shortages during the year, reflecting similar national trends across the public and private sector.

These pressures on our people – both at work and in their home lives – have had a substantial bearing on our employees and it is no surprise that

stress, work-related stress and depression now account for 43% of the total days lost through sickness absence.

Our Annual Performance Report highlights the proactive measures we have taken to help deal with these physical and mental health challenges, to keep our people safe.

Despite these challenges, we achieved a range of successes. For example;

- the success of our School Meals Action Plan delivered an increase of 14% in average daily meal uptake over the year.
- we generated an additional income from other public bodies and external customers of £1.2m (an increase of 26% from the previous year).
- the launch of our new Community Fund, which enabled us to support 29 groups deliver local community empowerment.
- Despite the ongoing challenges of recruitment difficulties and higher than normal sickness levels, we continued to deliver services across all Council areas with no service failure.

The success of Tayside Contracts relies on our employees. This has been no exception during the last 12 months, with our employees working tirelessly, under the most difficult circumstances, to deliver the essential services needed by our communities across the area. Without their commitment and dedication, many of the core services that our stakeholders have been required to deliver to support to our schools and communities, as well as keeping the road network serviced and maintained in all weather conditions, would not have been possible.



The greatest challenge we continue to face will be the significant financial pressures arising from government budget restrictions, record levels of inflation, and unprecedented increases in costs such as pay awards. These will put a substantial pressure on meeting our budgets and delivering our essential services, for 2023/24 and beyond.

To achieve our aims, teamwork is essential, and we would like to thank members of the Tayside Contracts Joint Committee, colleagues from our three constituent Councils, our affiliated Trade Unions, and our selfless and hardworking people within Tayside Contracts, for their contribution to working together to deliver the actions contained in this Annual Performance Report and to deliver vital services to the communities of Tayside.

We have set out our 2022/23 achievements under the '5C themes' of the current 2021/24 Business Plan. These themes are:

- Confidence, Trust and Relationships
- Commercial Approach
- Collaboration and Sharing
- Continuous Improvement & Performance
- Communities, Councils and Customers



**Bailie Mike Williamson**  
Convener of Tayside Contracts



**Keith McNamara**  
Managing Director



# Our Corporate Leadership Team



**Keith McNamara**  
Managing Director



**Frank Reilly**  
Head of FM and  
Human Resources



**Dougie Mckay**  
Head of Operations



**Ibukun Strachan**  
Facilities Business Improvement  
and Development Manager



**Leanne Reilly**  
HR Manager



**Diane Kidd**  
Service Lead  
Finance and Governance



# Who We Are and What We Do



## Who We Are

For the past 27 years, Tayside Contracts has been the collaborative and commercial operating arm for the three Councils in Tayside (our constituent Councils):

- **Angus Council**
- **Dundee City Council**
- **Perth & Kinross Council**

We are not a private company. We are governed by a Joint Committee of 18 Elected Members from the three Councils.

## What We Do

We are very proud of what we do in Tayside Contracts;

- We are the largest civil engineering construction organisation in Tayside - carrying out **£45 million** of road repairs, maintenance and construction, winter maintenance, and street lighting improvements each year.
- Our Facilities Management team keep **over 400 buildings** clean and well maintained and help ensure all the occupants are safe.
- During the winter we treat over 355,000 kilometres of roads, to protect the travelling public
- Our Quarry at Collace in Perthshire produces over 110,000 tonnes of coated and dry roadstone materials each year, to keep Tayside's roads well maintained.

We provide essential public services to the 400,000 residents in Tayside on behalf of the three Councils.

We currently  
have  
**3,200**  
posts.



Our annual  
Turnover is around  
**£89m**



- We are also Tayside's largest catering organisation – serving over **5 million meals every year** to schools and community customers – that's **28,000 meals each day**.
- Our School Crossing Patrollers help to keep the children of Tayside safe when travelling to and from the 175 schools in Tayside.
- We operate a fleet of 600 Tayside Contracts vehicles and plant. Through the Angus Fleet Partnership, we also manage and maintain a further 370 vehicles and plant on behalf of Angus Council.
- We have 4 recycling depots strategically placed within the Tayside area, ensuring waste from our construction activities is reprocessed into saleable products.

All of these activities are supported by our highly professional Human Resources, Safety and Training, IT, Finance, Communications, Equalities and Business Support teams – who are invaluable to our success.

We operate as a business and carry out work for other public bodies, private firms and the wider public. **Every pound we make through our commercial activities is reinvested in our public services and local communities.**

By doing what we do and making sure we provide high quality and cost-effective services, we are enhancing the communities of Tayside.

To view a short video on who we are and what we do, [click here](#).





# Tayside Contracts Business Plan 2021 - 2024

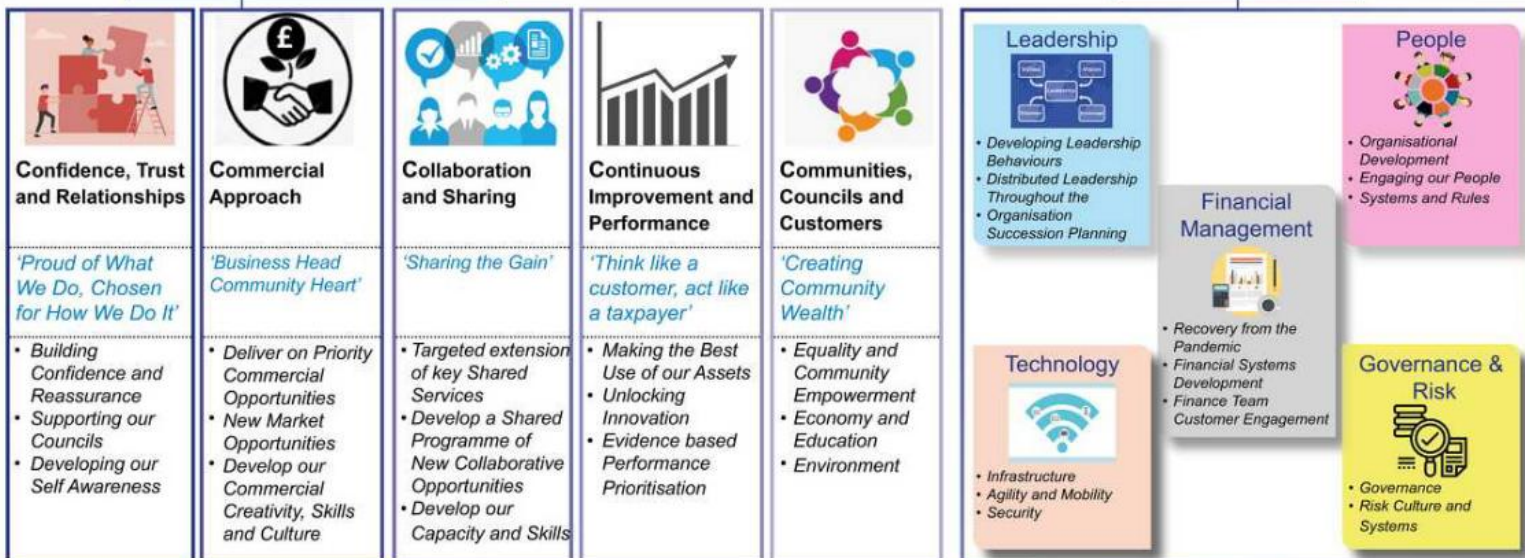
## 'Plan on a page'

**Our Vision:** (what we want to be) - A high performing and expanding shared service: proud of what we do and chosen for how we do it

**Our Mission:** (what we exist to do) - Enhancing our communities through excellent services

### Our Priorities: The 5C's

### Enablers:



### Our Values: the 4 P's



**People**



**Performance**



**Partnership**



**Perception**

### Introduction

Tayside Contracts can only survive and thrive if we have the strongest possible relationship of transparency, honesty, mutual respect and trust with the Elected Members and officers of our constituent Councils. We rely on Councils to trust us to deliver shared services on their behalf, based on their confidence in our ability to deliver excellent services.

Our Vision is to grow our organisation by taking on greater business opportunities beyond the Councils in Tayside. Therefore, we also want these other prospective customers to choose Tayside Contracts, for how we do things - for anticipating their needs, providing high quality services, and delivering best value for them.

Here are some of our highlights during 2022/23: -

- The financial stability of Tayside Contracts is essential to maintain the confidence of our constituent Councils. For the year 2022/23, despite the unprecedented trading conditions, **we achieved an overall distributable surplus of £977k**. This surplus was achieved through the positive performance and contribution by all parts of the organisation, as well as close working with our constituent Councils, which had to incur additional costs, as we passed on increased charges to cover the impact of record levels of pay awards.
- The statutory trading surpluses achieved over the last three years are **£3.4m for the Construction Division and a break-even position for the Facilities Services Division**- with all surpluses being distributed to the constituent Councils.
- Over the past 27 years, Tayside Contracts has performed well in terms of operational and financial performance, returning over £31m to the constituent Councils in surpluses, to allow reinvestment in public services.
- Despite the various challenges of supply chain shortages of essential materials, accompanied by significantly higher than inflation costs for many materials and services, **our Construction Division increased its turnover by £1.5m (3.1%) to £51.2m** in 2022/23, compared to £49.7m in 2021/22. Income from the constituent Councils increased by £305k to £46.5m. **Work from other public bodies and external customers increased by £1.2m (a 26% increase) to £4.6m**. This was achieved through additional Scottish Government- funded active travel projects, and significant additional income from private customers and other new constituent Councils' works, combined with a saving in various overheads, helping to maximise both workloads and income.



➤ Overall, the organisation achieved a **5.4 % increase in income of £92,265k** which is a £4,753k increase on the 2021/22 figure of £87,512k (and above budget expectations by £8,620k).

➤ The Facilities Services Division comprises the Facilities Management (FM) and Catering Units. The underlying operational and financial performance of the Division remained sound. However, 2022/23 saw the consequences of the pandemic having an opposite impact on the two units within the Division. The FM Unit achieved a significantly higher surplus, due to the greatly increased amount of cleaning required across the school estate and in non-school premises - **showing an increase of £1.3m compared to budget**, and a £708k increase on the 2021-22 surplus.

➤ However, due to change in habits formed as a result of COVID-19, meal uptake has not reverted to pre-pandemic levels (a situation reflected within school catering services throughout Scotland). This has severely impacted on the financial outcomes of the Catering Unit, although, more encouragingly, meal numbers did increase steadily during the financial year (average daily meal numbers increased by 14% over the year).

➤ Despite the challenges, Facilities Services Trading Account for 2022/23 shows an **increase in income of £3.2m (8.5%)**, to £41m compared with 2021/22 (£37.8m), with a distributable surplus of £367k achieved for the Facilities Division.

➤ We also benchmark with other organisations to learn about areas we can improve, and we celebrate our successes through the award nominations we receive. 2022/23 was another successful year for Tayside Contracts, where we were proud to be nominated for the following UK-wide APSE Performance Networks awards:

- **Street Lighting Partnership (Dundee) - nomination for Street Lighting 'Best Performer' and 'Most Improved' finalist.**
- **Transport Services – nomination for Transport Operations and Vehicle Maintenance- 'Most Improved' finalist**
- **Angus Council – nomination for Roads, Highways and Winter Maintenance - 'Most Improved' finalist**



The fact that we were nominated for these national awards is evidence of the quality of services we provided during the year.

➤ With the significant challenges facing Scottish Councils over the next few years, it is more vital than ever to be reassured that public services are being provided through the most appropriate service delivery models; and that the greatest focus is given to ensuring efficiencies, transformation and income generation, to mitigate against reductions in public service delivery - as well as maximising the advantages of the greater collaboration that Tayside Contracts offers. We have worked with our Council colleagues or the Governance and Strategy Group on a shared development of transformational actions that maximise the delivery of service, whilst minimising costs – this is known as our 'Change Plan'.

These developments have been informed in part by the outcomes from joint workshops held with colleagues in our constituent Councils in 2022 on Roads Maintenance and Facilities Services, to identify transformational options, to meet the challenges.

➤ As part of our drive to reassure our constituent Councils that we are as cost-efficient as we can possibly be, and that our future plans to maximise sharing services and expand our business to other customers are effective, in March 2023, the Chief Executives of the three constituent Councils and the Managing Director of Tayside Contracts commissioned a Supported Self-Assessment by an independent reviewer into the activities of Tayside Contracts.

The outcomes of this review work will help strengthen our approach to the challenges ahead.

➤ We are committed to sound governance and the effective delivery of services. The effectiveness of our governance framework is reviewed annually by the Managing Director and the Corporate Leadership Team, through use of a self-assessment scoring mechanism as part of our Annual Governance Statement. **This assessment showed that Tayside Contracts had 68 items (91%) fully compliant with the existing guidelines (exceeding our 80% target).** This objective evaluation provides reassurance over Tayside Contracts' governance arrangements.

➤ Confidence in our activities can also be gained by the independent assurance on our performance, provided by our Internal Auditors. For their 2022/23 annual report, Internal Audit concluded that *'Tayside Contracts had adequate and effective risk management, control and governance processes to manage the achievement of its objectives, and that Tayside Contracts has proper arrangements to promote and secure value for money'*.

➤ Internal Audit provided a **'Strong'** level of assurance that the organisation had implemented their Auditor's recommendations. In addition, Internal Auditors awarded Tayside Contracts with a **'Strong'** level of assurance relating to our Procurement arrangements, identifying 7 areas of good practice. A similar **'Strong'** level of assurance was given for the organisation's Communications and Social Media functions, with Auditors highlighting 13 areas of good practice within the organisation.

➤ Tayside Contracts continues to retain 'High Confidence' centre accreditation to enable us to deliver a wide range of training, qualifications and awards. We are proud to be accredited as approved providers/trainers with the following organisations:



Royal Environmental Health Institute of Scotland (**REHIS**)

Scottish Qualification Authority (**SQA**)

The Institution of Occupational Safety and Health (**IOSH**)

Highway and Construction Training Association (**HCTA**)

DVSA Training Accreditation (**DVSA**)

Street Works Qualifications Register (**SWQR**)

Public Health Scotland – Scotland's Mental Health First Aid (**SMHFA**)



### **Confidence and trust in our High Performing Employees**

In early 2023, our Training and Development Adviser, Susie Newton was recognised by the Royal Environmental Health Institute of Scotland (REHIS), by being awarded the prestigious REHIS 'President's Award' for an **'individual who has significantly contributed to the improvement and protection of health and wellbeing in Scotland'**. This award was given for the REHIS courses delivered both in-house, externally to other groups, and to the local charity, Dundee Bairns In addition Susie developed and piloted a new national course in the important area of food nutrition; and she was also recognised for her selfless volunteering work with local soup kitchen, 'Graham's Kitchen'.



*pictured here L to R is Ron McCabe, Safety & Training Manager, Susie Newton and Evonne Bauer, REHIS President*



## Award Winning Response to Successful Operation Unicorn

Following the sad announcement of HM Queen Elizabeth passing on 8 September 2022, longstanding plans were activated for 'Operation Unicorn', for the funeral cortege passing through the country, including Dundee on Sunday 11 September.


Tayside Contracts played a key part in the multi-agency planning and assisting with the delivery and resources of within the Dundee and Angus.


With global media attention on Dundee section of the cortege route, there was no room for oversights or mistakes which could affect the cortege's safety or delay free passage through the city. Planning was of vital importance given the city's roads were expected to be overwhelmed by an estimated 75,000 members of the public expecting to pay their final respects.


Volunteers from throughout the Dundee Roads Maintenance Partnership (DRMP) and Dundee Street Lighting Partnership (DSLIP) planned for and implemented over 30 closures only minutes before HM cortege passed through the city. The cortege passed through the city of Dundee trouble-free and immediately closures began to be removed by the DRMP and DSLIP volunteers to allow well-wishers and the residents of Dundee to return back to their normal day to day. Tayside Contracts Facilities Team also supported this event by providing 700 welcome meals and drinks for the volunteers attending the route of the cortege.


The efforts of these partnerships, as part of the greater Dundee City Council Operation Unicorn delivery team, was recognised at Dundee City Councils annual awards ceremony (the OSCAs) by winning the '**Above and Beyond Award**' from the Leader of Dundee City Council.

## Challenges

 Without doubt the greatest challenge has been the post-pandemic supply chain and cost of living crisis, with resulting financial consequences. International supply chain pressures meant that the lead times for supply (and occasionally zero supply) of essential goods such as replacement vehicles, flood and bitumen for roads surfacing caused significant disruption to the organisation.

 Record levels of inflation has hit Tayside Contracts in two main ways. Firstly, the spiralling price of goods and services has hit Tayside Contracts with certain key items greatly exceeding inflation (in many cases over 50% and sometimes up to 150%) - this has impacted on the organisation's costs and profitability, as we attempted to absorb these costs wherever we can rather than charge these to our constituent Councils. Additional costs such as labour, materials, plant and sub-contractors have resulted in our surplus of £977k being lower than originally budgeted a (£1,634k).

 Record inflation has also greatly impacted on costs through the local authority pay award. As 73% of Tayside Contracts employees are on the Scottish Government Living Wage level (compared to 0% in our constituent Councils), these costs have disproportionately affected Tayside Contracts. The costs of the 2022/23 pay award added an extra £4.5m cost to the organisation (approximately 10% increase on pay costs), which was £3m higher than budgeted. This created both a pressure for Tayside Contracts and the constituent Councils during 2022/23, but these increases also add to the baseline of costs for 2023/24 budget and beyond.

 The other significant challenge in 2022/23 related to school meal numbers. The meal number targets were set with each of the Councils, at levels prior to the pandemic. However, the changes in behaviours of school pupils, developed during lockdown and restricted meal service (where pupils brought their own lunches or went out with the school to buy food) has carried forward into the year. This also impacted on Tayside Contracts' financial performance.

## Next Steps:



The financial issues facing Tayside Contracts and Councils are both complex and challenging, and further engagements with Joint Committee members will be needed to share information on the scale of the financial challenges, as well as options to address these, to help inform Councillors when developing both Council budgets and Tayside Contracts budget, as well as the development of Tayside Contracts Medium Term Financial Strategy.

We have engaged with the Joint Committee members and the Governance & Strategy Group, to ensure we provide the right performance information, at the right time and in the right format, for these groups and also, to our Council partners and our citizens. We are currently developing this into a dashboard approach, where performance information will be presented more clearly and pictorially, and will be accessible to stakeholders at any time, rather than needing to wait for scheduled update reports.

The involvement of the Joint Committee and other key stakeholders will be essential in building a shared view of the future priorities for Tayside Contracts, New Business Plan which will set the agenda for the next 3 years, from 2024 onwards.

We build confidence and trust in our services through our participation in national benchmarking exercise such as APSE (Association of Public Service Excellence) performance networks, the largest voluntary public sector benchmarking service across the UK, which is used by over 200 local authorities. Due to delays at APSE, the 2022/23 figures have not yet been released. Once these are issued we will use the data to compare our performance and target our prioritised areas for improvement.

We will be incorporating the outcome and recommendations of the independent Supported Self-Assessment review into our future Improvement Plans.

### Introduction

**The need for Tayside Contracts to extend our commercial approach is more vital than ever. We recognise that increasing our commercial income protects us from making savings in jobs and services. This safeguards public services from declining funding experienced in recent years, and likely to continue, as the economy recovers from the global pandemic.**

**Expanding on our commercial portfolio is an essential part of our vision for the growth of the organisation.**

Here are some of our highlights during 2022/23: -

### Commercial Business Achievements

Our successful commercial activities delivered £4.6m of income from commercial customers and other public bodies, outwith our three constituent Councils in 2022/23 an increase of 26% (£1.2m) over the previous year. Highlights include.

- Providing winter maintenance services and sharing our depots with the new North East Trunk Road operator, Amey – as part of our ongoing partnering arrangements (see case study).
- Provision of 134,500 tonnes of roadstone materials to the contractor in the construction of the Cross Tay Link Road (see case study on page 18).
- Delivery of roads improvement services to Fife Council, as part of their preparations for the 2022 Open Golf Championship at St Andrews.
- Provision of the Community meals teatime service for Angus Health & Social Care Partnership.





**North East Trunk Road Partnership with AMEY**

Tayside Contracts' successful commercial approach can be demonstrated through our partnership working with the national infrastructure services and engineering company, Amey, to develop a bid to operate the maintenance of the strategic trunk roads in Scotland. This responsibility for roads in Scotland is split between local Councils for the majority of the roads - other than the main Trunk Roads, which are the responsibility of the Scottish Government, which tenders for providers to carry out all maintenance and management of these roads.

Our hard work with AMEY was rewarded when in April 2022 Amey were awarded the North East Operating and Maintenance contract. This contract covers roads from the River Forth to the Moray Coast.

Working in partnership with Amey, we are providing Depot facilities, fuel services and Stores at Forfar, Dundee and Perth, as well as providing a Winter Maintenance service on behalf of Amey. As the Trunk Road contract duration is 8 years with an additional 4 year option, this provides a substantial and sustained income to Tayside Contracts. We look forward to building on the commercial and partnership opportunities with Amey throughout the duration of the contract.



**Providing Secure Supplies of Road Materials, and Commercial Opportunities, by Extending the Future Life of Collace Quarry**

Our shared quarry at Collace is located in the Sidlaw hills between Dundee and Perth and is therefore well placed relative to the Council areas it serves. It provides the three Councils and Tayside Contracts with an assured reasonably priced supply of roadstone materials to keep Tayside roads maintained. The quarry also generates income by providing its materials to other customers. The quarry produces more than 100,000 tonnes of material each year, and generates a turnover of £7.6 million.



Under the current planning approval, the remaining stone we are permitted to extract is estimated to be exhausted by 2025. To increase the operational life at Collace, to ensure long term security of supply, and expand commercial opportunities, during 2022/23 we invested in the detailed investigatory work, regulatory processes, and extensive community consultation to extend the quarry. If successful this will increase our stone reserves by over 3 million tonnes, 30-year extra life, increasing the area of the quarry by 2.2 hectares.



**Maximising our Commercial Activity - Cross Tay Link Road**

The Cross Tay Link Road is one of the largest infrastructure projects ever undertaken by Perth & Kinross Council. It involves the construction of a new 3-span bridge over the River Tay and a six kilometre stretch of new carriageway.

The project will improve the local transport network and traffic flow and reduce journey times. It will also enhance pedestrian and cycle safety, increase network capacity as well as significantly reducing traffic congestion and related pollution in Perth city centre.

The project is being delivered by engineering and construction group BAM Nuttall (BAM). During 2022/23 we worked with BAM to assist in the delivery of this key project.

The location of Tayside Contracts and our Quarry at Collace in Perth & Kinross, are instrumental in helping to achieve a key objective of the project - to spread the benefits to the local community, and minimise the impact on the environment, using locally available resources where possible.

As part of a formal procurement process, Tayside Contracts successfully bid to provide capping materials (dry stone) for the project. In May 2022 an order was placed for more than 200,000 tonnes of stone.

This is a great achievement for everyone at the quarry, as this material has been blasted, crushed, loaded, and transported to the project by the existing team on site. At the end of financial year 2022/23 this equated to 134,852 tonnes of material. Putting this into context, Collace averages 30,000 tonnes of capping sales per annum, so our production output had to increase by 450%.

Not only does this give a boost to the quarry income it has the added advantage of accelerating the development of the southern rock faces within Collace. These faces have the “Red” rock conglomerate, which are not suitable for our normal asphalt road construction products, however this is, perfect rock for capping material, required for the Cross Tay project.

In addition to the dry stone provision, Tayside Contracts, in partnership with Breedon Group, have also provided asphalt products for the contract. The provision of this service is ongoing and it is anticipated that Collace quarry will have supplied approximately 8,000T of coated material by the time the contract is completed.








## Provision of Community Meals Teas for Angus Council


In August 2022, Tayside Contracts was asked by Angus Health & Social Care Partnership to temporarily provide a Cold Teas service, 7 days per week, for its Community Meals' service users in Angus, due to supply issues with the Partnership's current supplier. We were able to swiftly put arrangements in place to meet their needs, and the meals were freshly prepared daily by our Community Meals team based at Sidlawview Primary School in Dundee, who currently provide the meals for the Community Meals service in Dundee.

We continued to provide these meals until October 2022. By that time our client decided to extend the arrangement due to the high quality of our service and product, and we are still providing this service.



## Challenges

- 

Mirroring national trends in 2022/23 following the pandemic, we experienced historically higher than average sickness absence rates and vacancy levels - with both these factors reaching the highest level in Tayside Contracts for several years. This challenged our ability to pursue external income in some cases, because with shortages in employees across the organisation, we did not have the confidence to deliver additional work, when staffing shortages were already impacting on our existing core services for our constituent Councils.
- 

Exploring further opportunities to provide meals and catering services for other councils were constrained by uncertainties across Scotland, as councils struggled to reach pre-pandemic levels of meal uptake. This also combined with uncertainties from the Scottish Government over the timescale for the introduction of the next phase of Universal Free School Meals (UFSM) in primaries (for P6 and P7), which would boost meal number demands on all councils. This made strategic planning very challenging for the councils we were keen to provide services for, as they prioritised the recovery of their existing services. With the Scottish Government now confirming the implementation of USFM by the end of 2025, this gives greater certainty for Councils future planning, and engagement with Tayside Contracts over how we can provide services to them.

## Next Steps:



Despite the above challenges our main target continues to be building on the investment made by our constituent Councils in our innovative cook freeze unit at Tay Cuisine. This project has been one of the largest initiatives ever embarked upon by Tayside Contracts, with an investment of £1.9m and years of planning and development. This creates excellent commercial opportunities. The unit is currently scheduled to produce around 5 million meals for nurseries, schools and community meals but has the potential capacity to produce up to 10 million meals per year. Therefore, we can offer the extra production capacity at the facility to other potential customers. We are currently engaging with several organisations which need school and community meals service, and are attracted by the low cost, high quality and consistency model offered by Tay Cuisine.

We will continue to maximise the opportunities to generate more commercial income for Tayside Contracts so the financial benefits can be shared by our constituent Councils. We have a targeted list of commercial opportunities and are working through these with our teams, and prospective customers.

We continue to tackle recruitment and sickness absence through implementation of our Wellbeing Strategy and Recruitment and Retention Strategy and their action plans, to ensure we have the workforce in place to meet the commercial opportunities which arise.



## Introduction

**Greater collaboration between our constituent Councils offers a proven route to reducing costs whilst maintaining service quality. If savings are not found through innovations such as sharing services, then our Councils will need to find these savings by other means, including service reductions.**

**Sharing services also offers other benefits, such as**

- **being more attractive to recruit and retain staff;**
- **offering improved innovation opportunities by pooling investment across partners;**
- **providing the scale to access best practice and create centres of expertise;**
- **ensuring a large, flexible workforce available to deploy to priorities such as extreme weather events; and**
- **having access to specialist staff that individual partners would struggle to supply, if operating independently.**

Here are some of our highlights during 2022/23: -

- Our innovative cook freeze unit at Tay Cuisine (also known as the Central Production Unit, or CPU), had a first successful year of operation, including the incorporation of the primary school meals service for Perth & Kinross Council in 2022, which was a significant implementation project. Not only will this deliver year on year cost reductions of nearly £1m to the three Councils, and protects catering jobs and services long into the future, it also 'future proofs' the participating Councils from the advent of Universal Free School Meals for primary pupils - which will require an estimated 1.5 million extra meals to be produced across Tayside to meet demand.
- In 2022/23, we continued to expand the services we provide to our constituent Councils, generating additional income, and delivering more efficient services. Examples include:
  - Gutter Cleaning service for Perth & Kinross Council schools now delivered in house, rather than outsourced.
  - School window cleaning service for all three Councils now delivered in house, rather than outsourced.
  - Providing Facilities Management services for Dundee City Council Community Centres, by transferring of 16 Resource Assistants to Tayside Contracts

These additional activities contributed to the additional 5.4% income achieved by Tayside Contracts during the year.



## Window and Gutter Cleaning Minor Works Team

Our Facilities Services Division (FSD) is always looking for innovative ways to improve and expand the services we provide to our constituent Councils. The close working relationship with Perth and Kinross' Property Maintenance team highlighted an opportunity for our Business Improvement section to provide a service which was a significant departure from the kind of services we usually provide.

The regular maintenance of flat roofs, gutter and down pipes is a cost-effective way to avoid the huge costs associated with repairing a building which has been damaged by roof leaks. Tayside Contracts and Perth and Kinross Council have already achieved a number of successes in providing minor works teams for property related works in schools and other buildings. Following a period of research and investigation, the gutter cleaning team was set up, to deliver this service for PKC to mitigate the risk of costly roof leaks.

Taking up an opportunity to diversify and expand our business portfolio and further enhance the cost-efficiency of our services, we identified an opportunity to provide an 'in-house' window cleaning service for schools and other buildings in all three Council areas.

This service was previously delivered by a private window cleaning contractor but could now be amalgamated with our gutter cleaning service, given their synergies.

In addition to the savings and improvement in quality achieved by providing these services 'in-house', the environmental credentials of the service were improved by implementing a 'Smart Water' window cleaning system which avoids the use of harsh chemicals in the delivery of these services. Further environmental benefits were realised in the reduction of road miles by providing the two services simultaneously from the same vehicle.

The successful implementation of this initiative opens up the opportunity for the Facilities Services Team to expand into other minor works at schools and other sites, when our people are based at these locations, rather than pay expensive callout charges for private contractors.



## Partnerships in Practice

We have continued to build positive trust and confidence through the successful formal partnerships we have with our constituent Councils. There is great value in the partnership approach to sharing staff and resources, as it saves considerable costs from having separate 'Client' and 'Contractor' roles in each organisation. The Partnerships we share with our Councils are:

- ▶ Roads Maintenance Partnerships in both Dundee City and Perth & Kinross, where we share Partnership Managers, who report jointly to both Tayside and Contracts and the Councils.
- ▶ Tayside wide Street Lighting Partnership. This partnership now includes all three Councils, so this one team provides an effective and integrated service across all of Tayside.
- ▶ Partnering arrangements with each of the three Councils for Facilities Management.
- ▶ The strong working relationship between Angus Council colleagues and our vehicle workshop maintenance staff is vital as we provide the Council's Fleet Maintenance Service, keeping their staff on the move. The partnership is due for renewal in April 2024, as part of the process an overarching review will be undertaken, assisted by APSE, to review the benefits achieved to date and the areas where opportunities exist for further improvement.
- ▶ We are part of the shared Procurement Board with our three Councils (formerly known as Tayside Procurement Consortium).





## **Financial Benefits of Partnering with Tayside Contracts in Perth & Kinross**

Working in partnership with Tayside Contracts enables a readily available workforce to be retained to deliver essential services such as Winter Maintenance and an Out of Hours response to weather events such as flooding, but also remains flexible enough to adjust workforce levels to accommodate fluctuations in road maintenance budgets. This gives our Councils confidence in being able to manage and maintain the road network, to meet statutory requirements, whilst providing reactive responses to assist local communities, when needed.

As part of the partnership arrangement in Perth & Kinross, for example, a road maintenance framework contract is used by the Council to procure works both from Tayside Contracts and external contractors. This is one of the processes used to demonstrate 'Best Value' is being provided. An updated framework was issued for pricing in May 2022. Only 18 private sector contractors across 11 work activities submitted rates. Tayside Contracts were the only contractor to submit prices across all activities, ensuring Perth & Kinross has a trusted supplier which could fulfil the full range of works required by the Council.

Through the period of the previous framework contract (2017-2022) there was a request via the Partnering Board to focus potential savings back to the service, in addition to providing the agreed level of surplus. A key area of where this could be achieved was by not claiming additional contractual entitlements such as contract inflation allowed for by construction industry indices uplifts (BERR). In effect, this means that Tayside Contracts did not charge the Council for certain tasks, which we were entitled to do. Private sector contractors, however, would have claimed these contracted costs, irrespective of profit levels, with no returns to the Council.

Over the course of the partnership period, (April 2019 to March 2023) this resulted in a **total of just under £2m not being claimed by Tayside Contracts. Instead, this money was reinvested back in the road network** – equivalent to almost 9 km of A Class road being resurfaced that wouldn't otherwise have been done, thereby demonstrating a clear benefit to the Council of partnering with Tayside Contracts.





## **Tri Council and Tayside Contracts Collaborative Service Delivery**

There is a history of collaboration of the three roads authorities across Tayside which has led to extensive close working arrangements, information sharing and joint procurement over the years.

Tayside Contracts are fundamental to this collaboration, with the benefits of people and vehicle/equipment resources, which can be shared across the three authorities, as well as delivering the economies of scale in procurement for roads maintenance materials, and the ability to share specialist plant. With quarrying and bituminous plant capability provided by our Quarry at Collace, Tayside Contracts influence the market in the region, so competitors have to be wary about increasing their prices.

The Tri-Council Maintenance Strategy Group (TCMSG) has worked on a range of projects initiated by the needs of its constituent councils to develop a joint understanding an approach to roads maintenance, with the common service provided by Tayside Contracts. This approach has been further strengthened in 2022/23 following conclusion of a 'Test of Change' review commissioned by the Chief Executives of the three Councils, and 'Innovation Workshops' between partners. Examples of the benefits achieved include:

- ▶ Salt financial savings achieved by moving to the use of indigenous "Rock Salt" away from the much more expensive 'Marine Salt'.
- ▶ Reduced road surfacing material types, with a standardised material guide, reducing Tayside Contracts costs.
- ▶ GPS tracking of Tayside Contracts vehicles to maximise fuel and vehicle maintenance economy.
- ▶ Shared training events.
- ▶ Winter forecasting contract procured across eight councils.
- ▶ Winter Policy alignment: cross boundary routes, to provide more standardisation and cost reductions.





## Sharing Good Practice on Salt Use Reduces Council Costs

Each winter Tayside Contracts procures road salt for the constituent Councils. There are two types of salt, marine and rock, with marine coming mainly from Spain and rock from England.

There has always been a price differential between rock and marine salt with marine salt historically being substantially more expensive. Rock salt can potentially deteriorate when stored outside for prolonged periods and therefore Councils have traditionally purchased the more expensive marine salt for areas which had no storage cover.

For winter 2022/23, an additional increase in prices for haulage was applied and the cost for marine salt increased again. For Perth and Kinross this would equate to an increased cost of £120k. A trial approach was taken, purchasing rock salt and storing it outside. This was closely monitored, and the assessment indicated that service was not compromised by this different approach.

Sharing this experience through the Tri Council Maintenance Strategy Group has resulted in Angus Council also moving to rock salt use, in areas where externally stored, for winter 2023/24, which will also provide savings for that Council.



## Roads Maintenance Partnerships: Collaborating to Deliver Improvements

### Perth Road Maintenance Partnership (PRMP)

Investment in road resurfacing has continued to be a priority of Perth and Kinross Council again in 2022/23, and through the high quality works carried out by Tayside Contracts, the national Road Condition Indicator (RCI) has improved. This was a key objective of Perth and Kinross Council, when allocating additional funding to road maintenance.

Over the three-year period to the end of 2022/23, this investment has resulted in 160km of the road network being in a better condition. The value of operating our own quarry at Collace contributed substantially, by supply 40,965 tonnes of coated material through a collaborative planning and programmed approach to ensure maximum efficiency and delivery. The key highlights from 2022/23:

- Road Condition Figure (RCI) improved by 0.9% meaning 22km of network in better condition.
- Safety Inspections again achieved the target of 95%.
- The number of potholes repaired in total (Category 1 to 4) was 10,443 which is significantly lower than the previous year, suggesting the investment by PKC is having a positive impact on both RCI and pothole numbers.
- First Time Permanent (FTP) repairs achieved the 80% target with 81% (8489) receiving a 1st time fix.



## Dundee Road Maintenance Partnership (DRMP).

Performance is monitored and reported to the Dundee Road Maintenance Partnership Board Quarterly, with an annual report summarising the overall performance in June each year. The key highlights from 2022/23:

- Safety Inspection performing above target at 96% against a target of 95%
- Defect repair compliance was very positive. with Category 1, 2 & 3 road repairs all completed within target times for 2022/23 with response rates of Cat 1 (100% compared to target 90%), Cat 2 (94% compared to target 85%) and Cat 3 (97% compared to target 80%)
- First Time Permanent (FTP) repairs significantly increased year on year with 43.6% (30% target) of all defects repaired by permanent methods, an improvement compared to 15.1% as recorded last year.
- Gully cleansing - the rolling 2-year average of 35,116 remains above targeted level of 33,200 cleans.

## Angus Operations – Collaborative Roads Maintenance Service Delivery

Tayside Contracts has been delivering the core infrastructure service for Angus Council since it was established, the service provision is discussed and monitored at an Angus Headquarters meeting, quarterly. The key areas monitored for 2022/23 are:

- Percentage of jobs with works information received from Angus Council prior to works starting (2 weeks baseline), Target 60%, Actual 67%. The receipt of this info is crucial in the planning and programming of works.
- Percentage of jobs started on (agreed) time, Target 90%, Actual 70%. This is an area that is influenced by when work information is received, when previous works are completed and available resources to undertake. It was agreed to look at this collectively with an aim to improve for 2023/24.
- Percentage of jobs completed in (agreed) duration, Target 80%, Actual 74%. This can be influenced when additional works have been commissioned. Although the outcome was close to the intended target, it was agreed to look at this collectively with an aim to improve for 2023/24.
- First Time Permanent fix repairs completed for the year was 3325 m2. There is no formal target for this and is based on the requirements set out in the specification.
- Gully cleansing for 2022/23 – cleaned 32,596 (102%) of the targeted 32,000 gullies per annum.





## Tayside-wide Collaboration in Practice Street Lighting Partnership

Street Lighting is a core service delivered by Tayside Contracts, maintaining a large scale illuminated asset to keep people safe – this includes 72,000 illuminated columns, 4,560 illuminated signs and 1,380 illuminated bollards. The Partnership also undertakes a variety of electrical and lighting commissioned for private sector clients and developers. Our recently expanded tri-Council Partnership for Street Lighting now includes Angus Council, which now benefits from our collaborative approach to service provision.

The Street Lighting Partnership is an excellent example of collaborative success in practice, and this can be evidenced through performance information, which is monitored through the Tri Street Lighting Partnership Board which meet on a quarterly basis as part of the formal governance arrangements.

The performance data used are a combination of information made available through the Society of Chief Officers of Transportation in Scotland (SCOTS)/Association of Public Service Excellence (APSE) annual return and internal indicators. A summary of some of our highlights are detailed below.

### Angus



Faults repaired over the year.



Faults completed within 7 days for the year.

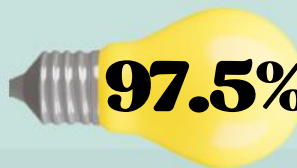


Average days to repair within the target of 7 days.

### Dundee



Faults repaired over the year.



Faults completed within 7 days for the year.



Average days to repair within the target of 7 days.

### Perth & Kinross



Faults repaired over the year.



Faults completed within 7 days for the year.



Average days to repair within the target of 7 days.

# Challenges

-  The opportunities available for collaboration greatly exceed our capacity to deliver, and we need to ensure that our collaborations are prioritised and have the appropriate levels of staffing resources and funding, to provide the capacity to be successful. If we expect these major initiatives to be delivered as an add-on to peoples' busy operational jobs, we run the risk of failure. Therefore we, have implemented an 'Innovation and Improvement Fund' of £200,000 to ensure we have the capacity to support more collaboration, through funding projects which will further the objectives of our Business Plan.
-  The past year has been a challenge for the Street Lighting Partnership in retaining and recruiting staff. Like most businesses, it has been difficult to recruit qualified staff leading to shortages in some areas. The strength in the Partnership arrangement has been evident in the ability to flexibly deploy staff, between Council areas, where resources have been required - rather than have gaps in service provision, if these services were 'standalone' functions within Councils.
-  We acknowledge challenges in delivery within Angus Construction Operations. There is a desire to build on the long-standing collaborative arrangement between both parties to address the challenges of reducing budgets and also to address some concerns around the service delivery. A working group consisting of Senior Officers from both organisations has been established to progress this agenda.

## Next Steps:



We have identified opportunities for further collaborative service delivery using a criteria-based priority programme of collaborative opportunities, and we will work with our councils to develop an agreed programme of collaborations, for the next 3 years and beyond.

The Scottish Government's National Roads Maintenance Review has stressed the importance of the benefits of a collaborative approach to roads-related functions, Our work in Tayside between our Councils, and now with Amey as the trunk road operator, places us much further ahead than most areas in Scotland, however, there are greater opportunities for fuller integration, and a real opportunity to build on the willingness from the three Councils to pursue greater levels of roads service collaboration. We look to build on the improvements already identified and implemented by the Tri-Council Roads Maintenance Strategy Group (detailed in the Highlights section).

We will take forward the collaborative opportunities with our constituent Councils for our Facilities Management (FM) service to focus on expanding by diversifying further into what is known as Hard FM (e.g., building maintenance, etc) in addition to Soft FM (the traditional janitorial and cleaning services currently provided by Tayside Contracts), to achieve cost and efficiency benefits for our Councils.

### Introduction

The need to make sure we are delivering excellent public services at the right time, in the right way, and to the right people and communities, has never been greater.

- **The future sustainability of public services requires us all to be more innovative and open to change; we must be more entrepreneurial and innovative, in order to make the best use of the limited resources that we have and provide the best service to our customers and communities. The more efficient and effective we are, the more competitive we will be.**

Here are some of our highlights during 2022/23: -

- Recognising the financial pressures on Tayside Contracts and our constituent Councils we engaged with our wider group of senior managers to stress the financial challenges, the pressures ahead, and the steps we collectively need to take to reduce costs and maximise income. From this we established a 3-year Change Plan. Of the targeted £3.5m efficiencies and service reductions, **we have achieved £1.7m by the end of 2022/23** with an additional £2.8m income generated during the year. The following examples highlight how we achieved these results.
- At the start of 2022/23 we reduced the number of funded posts on our Facilities Services Division (FSD) Establishment by 193 posts, **reducing labour costs in 2022/23 by £1.35m**. We were able to achieve these reductions through robust vacancy management, thereby ensuring our existing employee's jobs were not at risk as we reduced the posts.
- During the year we continued to manage labour costs in accordance with our Establishment Control and Vacancy Management Policy to achieve the highest level of slippage possible without unduly risking service failure. Our full Establishment during the year totalled 3,270 posts, however, only 3,069 of these posts were occupied. These proactive measures carried out provided some mitigation of the significant pay costs and inflation increases that the organisation and to constituent Councils had to incur during the year.



## Continuous Improvement by Building Rationalisation and Sharing Buildings

Our Business Plan gave a commitment to 'Make Best Use of Our Assets' in our drive to reduce costs. We targeted our property portfolio, and through working with Councils and other partners, we have extended our sharing of facilities (and sharing costs) in our offices and depots across Tayside. The following summarises activities:

### Angus



#### Carnie Depot Arbroath

Shared with Angus Council Waste Management and Roads Infrastructure teams.



#### Forfar Depot

Shared between Street Lighting Partnership, Angus Education Mini Bus Services and Amey PLC (Trunk Road, Contractor).

### Dundee



#### Marchbanks Depot

Shared with Amey PLC (North East Trunk Road operator)



#### Fairmuir Depot

Shared between \*DRMP & Street Lighting Partnership and now Dundee City Council Construction Services

### Perth & Kinross



#### Ruthvenfield Depot

Shared between PRMP, Street Lighting Partnership, Perth Housing repairs team and Amey PLC



#### Blairgowrie Depot

Shared with \*PRMP and sharing depot space to facilitate a potential review of waste management services on the adjacent Perth & Kinross Council site



#### Blair Atholl to Aberfeldy move

We moved to a more modern and better located site in Aberfeldy. Gritting routes have been redesigned, improving efficiency, as we no longer need temporary cabins and loading equipment to be situated at satellite depots. P&K Council Grounds Maintenance team are also sharing the site, freeing up their previous location for commercial rent.

**The net effect of reducing our building footprint, and sharing accommodation and costs with partners, will reduce our annual costs for property by £500k per annum.**

\*DRMP = Dundee Roads Maintenance Partnership

\*PRMP = Perth Roads Maintenance Partnership



## **Sharing Headquarters Accommodation and Sharing Costs**

In March 2023, significant changes were made within our Headquarters at Contracts House, following the successful implementation of a 'Home & Hybrid Working Policy', using learning from the COVID pandemic, where homeworking became much more common. This resulted in Contracts House having spare capacity, and following a review, we decided we could accommodate both our existing staff within Contracts House as well as operational staff from the adjacent Fairmuir Depot office i.e. Dundee Roads Maintenance Partnership (DRMP) and Dundee Street Lighting Partnership (DSLPL), into the Contracts House building.

By rationalising the office space and people from two buildings into one, this not only enabled Tayside Contracts to make significant savings in running costs by reducing its asset portfolio by one building, but also enabled the vacated office building to be occupied by Dundee City Council's Construction Services, which allowed them to relocate from their unsuitable existing accommodation, and avoid them incurring substantial costs to refurbish their building or relocate elsewhere.



## **Investment in New Weighbridges Delivering Partnering and Efficiency Opportunities**

As part of our ongoing investment in plant and equipment to maximise efficiency, three new operator-free weighbridges were installed in Arbroath, Forfar and Dundee during 2022/23.

These weighbridges, replaced end of life weighbridges at each site, increasing reliability and thus availability, but also offering the facility to access weighbridge information 'real time' remotely allowing management staff to carefully manage winter de-icing stock levels through specialist software to give a better public service. This facility is of huge benefit given all three sites are now shared with the Trunk Road operator AMEY, and allows shared stock utilised by both parties to be correctly allocated to each end user.

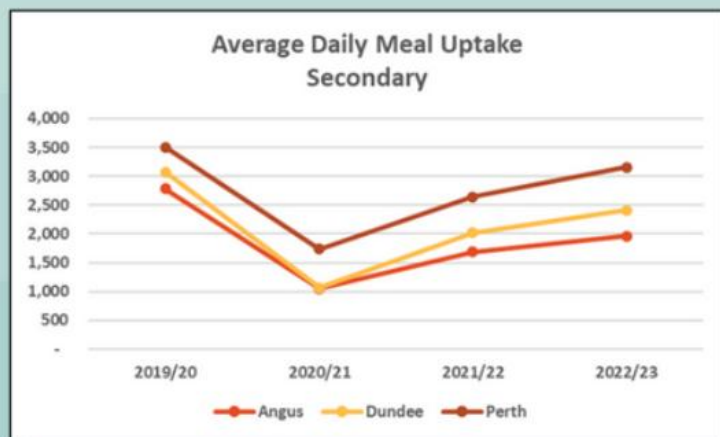
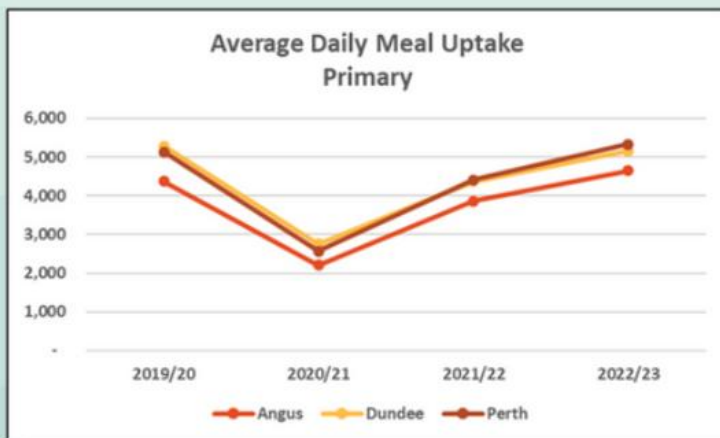
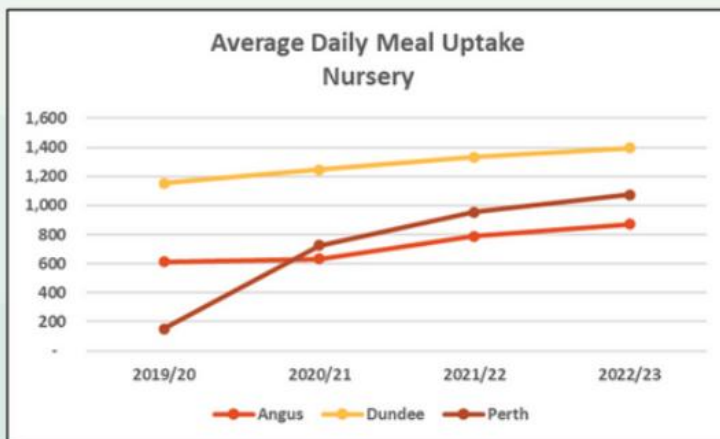


## School Meal Review and Action Plan

Following a review of our school meals service, an Action Plan was developed in partnership with our constituent Councils, to increase the uptake of school meals to support the Scottish Government’s agenda to tackle poverty, reduce childhood obesity and support learning, through school meals.

Daily average meal uptake was significantly impacted by the Covid pandemic, however 2022/23 saw an encouraging and continued steady recovery in meal uptake, heading towards pre Covid levels, and - in the case of primary uptake - exceeding these levels.

**Average daily meals increased by 14% over the year**, as the following charts demonstrate.



Part of our Action Plan was a more visible presence on social media, including a regular electronic newsletter for parents and pupils. The following positive feedback shows the impact of this new development:

***‘I just wanted to let you know that I think your recent newsletter is excellent. Clearly lots of research has been done surrounding food and nutrition. Teachings/language including ‘good’ or ‘healthy’ and ‘bad’ or ‘unhealthy’ options and age-appropriate explanations of eating in moderation and how certain foods help and fuel the body.***

***The visual menus are a fantastic idea and may help my child to look forward to picking her meals and encourage her to eat what she has chosen. It’s lovely that the research is being put into practise resulting in old beliefs and habits dying out. Ultimately resulting in a positive change and healthier children.’***



## Transport/Fleet Performance Maintaining High Standards for Reliable Service Delivery

2022/23 was another outstanding year from the Fleet Maintenance team maintaining their performance well above the national average performance. This not only demonstrates a high level of performance it also provides the assurance that a reliable fleet is managed and maintained to meet the needs of our vehicle users.

The annual test pass rate for 'first time pass' was 97.2%, this remains an exceptionally high score, compared to the national average of 89.15%. Our high score at annual test is attributed to regular staff training, good workshop practice, regular vehicle inspections and quality control checks on maintenance staff.



Currently Tayside Contracts Operator Compliance Risk Score remains at 'G00' for both Roadworthiness and Traffic which is the best score that can be achieved and has never been below this rating since the introduction of the system in October 2012.





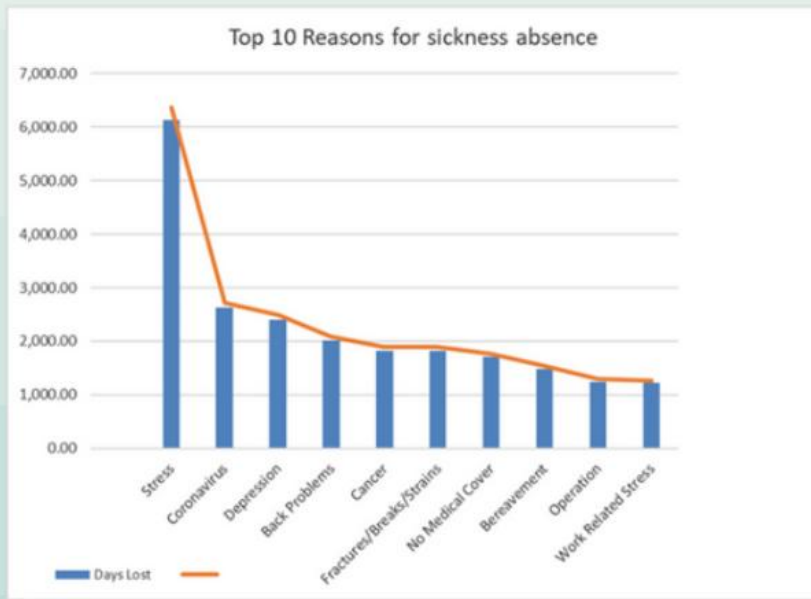
## Supporting our People and Tackling Absences Through our Wellbeing Strategy



National data has highlighted significantly higher levels of absence in workplaces across the UK. The UK [Office for National Statistics](#) (ONS) reported that 2022, saw the highest level of working days lost due to sickness or injury across all employment sectors, since 2004. The Improvement Service [National Benchmarking Overview Report](#) published in March 2023 highlighted that staff absence levels were the highest ever reported for local authorities in Scotland. A recent survey by [ACAS](#) found that the mental health of nearly half (47%) of British workers has suffered due to the cost-of-living crisis.

Tayside Contracts values the contribution of its employees and recognises that their health, motivation and wellbeing is essential to the delivery and maintenance of quality services to the community. We believe that supporting, encouraging and enabling employees to maintain a healthy balance between their work and other interests and responsibilities in their life is the core principle underpinning our Wellbeing Strategy.

The top ten reasons for sickness absence within Tayside Contracts for 2022/2023 are detailed below:



Stress has moved to the top reason for sickness absence in 2022/2023. Stress, work-related stress and depression now account for 43% of the total days lost through sickness absence.

Several initiatives have been identified as part of Tayside Contracts Wellbeing Strategy and Action Plan which aims to promote and encourage good physical and mental health as well as providing support mechanisms to help deal with physical and mental health problems.

During 2022, we teamed up with the expert mental health organisation 'Headtorch' to roll out training on mental health in the workplace to all managers and employees. All managers were invited to attend online training called Headtorch Aware. This was designed to provide them with the skills to better understand mental health and how this can impact on them and their teams.

Following this success, we moved our focus to providing training to our front-line employees through 'Head Start' - a televisual online learning programme which is an introduction to mental health with hints and tips on how employees can look after their own mental health and wellbeing, as well as spotting the signs that others around them might be struggling and what they can do about that. **Since February 2022, approximately 1,100 employees have completed HeadStart online training.**

cont/...



With the significant shift towards social media as the main communications means for millions of people, we have focussed on developing our approach to ensure that Tayside Contracts is maximising the benefits from engaging with employees, stakeholders and the public across multiple social media platforms. The following analytics overview provides examples of the effectiveness of our social media campaigns, audience engagement, and overall social media presence. It provides valuable insights that will guide our decision-making and help to optimise our future social media strategies.

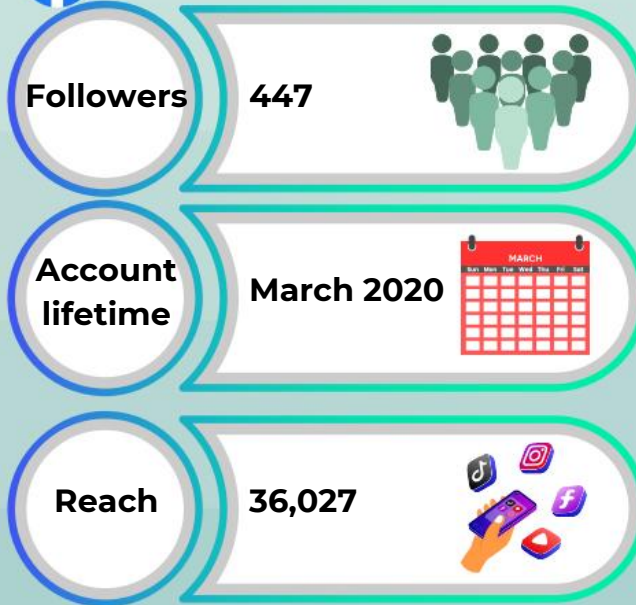
## Facebook Jobs



The highest reaching posts were for the pre-launch of the Apprentice Roadworker applications in March 2023. These initiatives and their successful reach supports the organisation tackling the challenges we are facing with recruitment

| Content                                                                                                                                                                                                   | Last 90 days | Post reach | Engagement |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------------|------------|
| <b>*OUR APPRENTICE ROADWORKER APPLICATIONS WILL OPEN IN APRIL*</b> Exciting news! Applications will open at the <b>beginning of April</b> for anyone interested in joining our Apprenticeship Roadwork... | Fri, 10 Mar  | 37,628     | 3,335      |
| 🌟Apprenticeship Programmes at Tayside Contracts!🌟 We're kicking off Scottish Apprenticeship Week by introducing you to our exciting apprenticeship programmes. Across this week, you'll find out more...  | Mon, 6 Mar   | 35,816     | 2,762      |
| <b>APPRENTICE ROADWORKER – APPLICATIONS OPEN</b> We're excited to announce that we're now accepting applications for our Apprentice Roadworker programme! Find out more by visiting here ...              | Fri, 7 Apr   | 27,145     | 1,548      |

## Facebook




The highest reaching post in the last 90 days of 2022 was the School Meals Parents Information Newsletter, which also had the highest 'reactions'. This is part of our approach to promoting school meals to parents and pupils. Tayside Contracts' Procurement Team attending the 'Meet the Buyer' event received the highest number of comments, which were all positive.

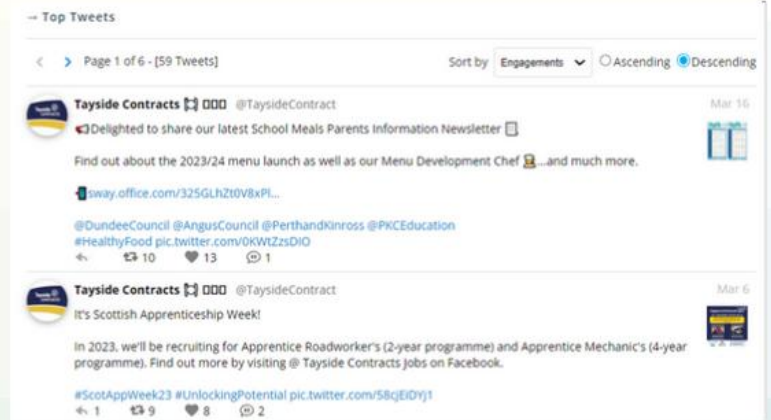
| Top Tweets                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>Page 1 of 6 - [59 Tweets]</p> <p>Sort by Engagements</p> <p>Tayside Contracts @TaysideContract</p> <p>Delighted to share our latest School Meals Parents Information Newsletter</p> <p>Find out about the 2023/24 menu launch as well as our Menu Development Chef ...and much more.</p> <p>sway.office.com/325GLhZt0V8xPL...</p> <p>@DundeeCouncil @AngusCouncil @PerthandKinross @PKCEducation #HealthyFood pic.twitter.com/0KWTZzsDiO</p> <p>10 13 1</p> |  |

# X (previously known as Twitter)

**Followers** 1,536



The top tweets were for the School Meals Parents Information newsletter and the Scottish Apprenticeship Week.



# LinkedIn

**Followers** 155




**Account lifetime** April 2022



# Instagram

**Followers** 153




**Account lifetime** August 2022



# Youtube Channel

**Subscribers** 119



**Channel lifetime** April 2018



# Challenges

Despite all the actions we have taken, the recruitment challenges Tayside Contracts, (and employers in the UK and indeed globally), faced in 2021/22 have continued into 2022/23.

During 2022/23, the percentage of days lost due to sickness absence for the organisation as a whole was 6.4%, an increase of 0.5% compared to 2021/22. This resulted in the organisation failing to achieve our Business Plan Performance Indicator of 6.1%. This is the first time we have not met this target.

| YEAR                              | 2017/18 | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 |
|-----------------------------------|---------|---------|---------|---------|---------|---------|
| <b>ORGANISATIONAL % DAYS LOST</b> | 5.9%    | 6%      | 6.2%    | 3.6%    | 5.9%    | 6.4%    |

Tayside Contracts continues to explore all available options in relation to improving absence rates and managing this cost area.

Employee turnover for the organisation as a whole during 2022/23 was 14.5%, an increase of 1.6% on the previous year and 3% higher than the KPI target. Our turnover is at its highest level in the last ten years:

| Financial Year      | 2013/14 | 2014/15 | 2015/16 | 2016/17 | 2017/18 | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 |
|---------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| <b>Turnover (%)</b> | 9.1     | 10.6    | 11.8    | 10.8    | 11.6    | 12.3    | 11.5    | 9.6     | 12.9    | 14.5    |

Issues with high turnover are not confined to Tayside Contracts. Price Waterhouse Cooper's national benchmarking study (June 2023) noted that, *'the competition for talent and the risk of high employee churn persists. Even amid recessionary pressures, rising interest rates, and record-high inflation, employee turnover increased in 2022.'*

Tayside Contracts has been addressing the ongoing employee turnover concerns through our Recruitment and Retention Strategy Action Plan and we continue to explore other ways to improve employee turnover and retention.

However, despite this intense activity, high turnover rates continue to remain a challenge, with pay and conditions being identified as the main reason for people leaving the organisation.

## Next Steps:



We have been reviewing our organisational structure as per of our 'Future Thinking' programme with a view to significantly reshaping our management and support services costs and will be bringing forward proposals to ensure the organisations structure is fit for purpose.

Positive and evident progress has been made with the Wellbeing Strategy Action Plan, especially in relation to manager and employee mental health awareness training and policy development. There is some evidence that these interventions may have reduced stress, depression and anxiety related absences in 2022, but further work is required around this, and benchmarking conducted, before any formal conclusions can be drawn.

**Investors in People (IIP) re-accreditation** IIP is a nationally recognised standard for people management, defining what it takes to lead, support, and manage people effectively to achieve sustainable results. To ensure we maximise the benefits for our employees, and maintain our IIP accreditation, we have developed an IIP Action Plan, which summarises where the organisation believes it currently sits, and where it aspires to be to achieve its organisational ambition. This includes a comprehensive survey of all our employees taking place in the latter half of 2023.

Our focus on technology has great potential to release capacity, with transformation projects in areas such as mobile working, working from home, streamlining former paper-based processes, and moving to 'digital by default' – all of which are capable of delivering great improvements. During 2022/23, we invested in new systems for Financial Management and Human Resources and are implementing these to deliver both productivity and efficiency improvements.



## Introduction

**As one of the largest employers in the area with a firm commitment to corporate social, ethical and environmental responsibility, we are in a strong position to support the wider ambitions of our constituent Councils and our communities, to enhance the lives of everyone in Tayside.**

**As part of its Business Plan's objectives, Tayside Contracts stated its commitment to support the wider strategic aims of our constituent Councils, and their respective Community Planning Partnerships, to share in delivering the Councils' strategic aims around community empowerment; equality and fairness; economy and education; employability; tackling climate change and building community wealth.**

Here are some of our highlights during 2022/23: -

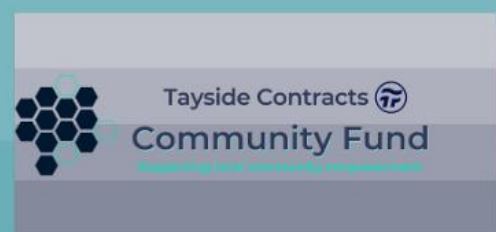
### Community Empowerment

Tayside Contracts provides a range of services, which could potentially be beneficial to local community groups and charities, Examples include: -

- ▶ Carrying out roads/footway improvements and repairs to community facilities such as community hall car parks, or a local pathway.
- ▶ Providing Catering for a community/charity event.
- ▶ Provision of signage via our Sign Shop for a range of community needs.
- ▶ Provision of Traffic Management for a community event.

In January 2023, we successfully launched our Community Fund, where we support local community and charity groups, by carrying out these types of works for these groups. The costs are paid by the Community Fund, with the income for the Fund provided by Brakes, (one of our major national food suppliers), as part of their own community benefit commitment.

In 2022/23 we approved nine Fast Track (lower cost) applications. We have also had a positive 27 applications for full funding (up to £3,000) for community groups across Tayside. We were able to say 'yes' to the vast majority of applications – some examples of successful applications were: -



Provision of a pathway round the building for a charity for the elderly in Blairgowrie.

Laying a slabbed area for a charity for children with complex needs in Rumbling Bridge.

Ground works to help a community garden in Dundee.

Seated shelter for a Stroke Club in Montrose.

The following comment from one of the successful applicants shows how much this help means to local groups:

“*Thank you for the fantastic news – the works will make a significant difference to us, and more importantly the children and families who use the service!*”

## Education and Employability

- ▶ The Tay Cities deal sets out an ambitious agenda to increase employability and skills. In 2022 we teamed up with Council employability teams and Skills Development Scotland to create pathways to give job seekers guidance, training and employment opportunities with Tayside Contracts. We also worked with [Developing the Young Workforce](#) (Tay City Deals) to support young people to prepare for work and the transition needed with support from schools, colleges, and our managers.
- ▶ In 2022 we achieved recognition as an approved official [Young Person's Guarantee](#) Employer which is a commitment to connect every 16 to 24 year old in Scotland to an employment opportunity. This shows the commitment the organisation has to developing and engaging with young people.
- ▶ Since June 2022, we've attended 12 recruitment events hosted by local employability teams across Tayside. By attending job fairs we're increasing the public awareness of Tayside Contracts and showcasing our organisation as a local employer of choice. Each job fair is a great way to inform individuals of current job opportunities, answer queries about our roles, the application process and finally to encourage applications.
- ▶ During the year, we participated in the Developing the Young Workforce's social media campaign ['#NoWrongPath'](#) which provides inspiration and reassurance to young people receiving their exam results. The campaign aims to demonstrate that many people in interesting job roles may not have taken a straight, obvious, or traditional path to get there - that there is [#NoWrongPath](#). Tayside Contracts will continue to participate in this annual campaign to promote Tayside Contracts as a local employer of choice.
- ▶ We also attended careers events at Barnardos: Employability4All, Remploy and Jobcentres in Angus, Dundee and Perth, Skills Development Scotland, Tayside Pace Team and held our own event at Street Soccer Dundee.
- ▶ Tayside Contracts' success in working with partners in employability led to recognition in Remploy's case study: ['The importance of working with Living Wage Employers, like Tayside Contracts across Scotland'](#).



“*We have been working with Tayside Contracts in Dundee, Perth and Angus for the last year. They have been in credibly supportive of our participants and everyone who has secured work with them has loved it. They are a fantastic employer to work with.*”

Amy Wilson, Regional Account Manager, Remploy



- ▶ We produced video employee testimonials and now have a [Cleaning](#), [Catering](#), [Construction](#) and [Transport](#) testimonials published on our YouTube channel. Quotes and photographs have also been published for a [Facilities Assistant](#), [Apprentice Roadworkers](#) and [Erika](#) and [Debbie](#) both School Crossing Patrollers. Weblinks to our employee testimonials are available on our [website](#), [Facebook Jobs page](#) and our [Indeed employer page](#).
- ▶ An [Apprenticeship webpage](#) is now available on our website highlighting our successful Apprentice Roadworker and Apprentice Mechanic programmes.



### **Working with Education Partners to Support Employability**

Our Business Plan commits the organisation to work with Councils' Education Services, as well as local schools and universities, to add value to the education experience, support career paths and positive destinations, and potentially attract a new generation of local talented people to work with us.

Tayside Contracts continues to work closely with our constituent Councils' Education Services, to offer work experience placements - 18 placements were offered during 2022/23.

During 2022/23 we attended nine school/career events, delivered talks, and targeted supporting six local schools, working in partnership with Education Services of the three Councils. We worked with Brechin High School, Arbroath High School, Braeview Academy and St Johns High School in Dundee, and Bertha Park and Blairgowrie High School in Perth and Kinross. In addition, we were also invited to attend school career events and attended Arbroath Academy, Brechin Campus, Forfar Academy and Monifieth High School in Angus. Grove Academy and Braeview Academy in Dundee and Blairgowrie High School and Breadalbane Academy in Perth and Kinross.



### **Working with Education Partners to Support Employability**

Tayside Contracts continued to engage with community and further education establishments during 2022/23. One such example of this was John Curran, the Dundee Roads Maintenance Partnership Manager acting as an industry expert assessor for the Engineering Development trust. This involved spending a day assessing eight very well prepared and presented projects at the Tayside region Industrial Cadets assessment day for S2 level pupils held at Abertay University.

The event encourages participants to consider future careers in STEM subjects (Science, Technology, Engineering and Mathematics) and cannot run without the support of volunteers with STEM knowledge and the financial support of external industry. The patron of Industrial Cadets is HRH Charles the 3rd and is directly comparable to the Duke of Edinburgh scheme.

This positive engagement not only encourages pupils to enter into an engineering profession but also promotes the career opportunities available at Tayside Contracts.

# Climate Change and Sustainability



- ▶ Our first Climate Change Plan was introduced in 2021, setting out how the organisation will move towards net zero, influence others to take action on climate change. Good progress has been made with 12 items in the Climate Change Action Plan, with some progress being made on 16 actions.
- ▶ Transport is the biggest contributor to greenhouse gases in Scotland, and reductions in emissions can only be achieved through significant changes to our reliance on fossil fuel powered vehicles and plant. Although there were further miles travelled in 2022/23 compared to 2021/22 by Tayside Contracts (this is heavily dependent on work locations), our **overall fuel consumption performance improved by 3.2%**. Given that fuel prices increased by 19% over the period, our proactive management of consumption and driver behaviour offset the impact of fuel increases in the year by £31k. This has also benefitted the environmental impact of our fleet by reducing our average CO2 emissions per mile from 1.0 to 0.9.

| Fuel Used (L) | Miles Travelled | Fuel Spend (£) | Overall MPG | Year    |
|---------------|-----------------|----------------|-------------|---------|
| 700.7K        | 2,000K          | £992.5K        | 12.9        | 2022/23 |
| 688.8K        | 1,919K          | £761.4K        | 12.5        | 2021/22 |

- ▶ In 2022 the Transport Services Team took the lead in reducing vehicle idling across Tayside Contracts with our "TURN IT OFF" campaign. This campaign is aimed at encouraging drivers to turn off their engines while parked, with the goal of reducing emissions, improving air quality, and achieving substantial savings. The campaign messaging was based on the following key facts, and was a key part of the reduced fuel consumption in 2022/23

**TURN  
IT  
OFF!**



### DID YOU KNOW?

- 2,700,000** **CO<sub>2</sub> emitted (kg)** Every litre of fuel that is needlessly burned by idling vehicles contributes to the 2.7 million kg of CO<sub>2</sub> that Tayside Contracts fleet emits every year.
- 1,400,000** **Spend** Tayside Contracts spent £1.4 million on fuel during the 2022/23 year.
- 1,000,000** **Litres of fuel** That's equivalent to 1 million litres of fuel.
- 100,000** **Idling CO<sub>2</sub> (kg)** With your help we can prevent 100,000 kg of CO<sub>2</sub> from being emitted into the atmosphere during idling.
- 40,000** **Idling fuel (L)** 40,000 litres of fuel are unnecessarily burned during idling every year.
- 35,000** **Hours of idling** Tayside Contracts fleet spends 35,000 hours needlessly idling every year.
- 12.8** **Average MPG** On average, Tayside Contracts' road-going fleet gets 12.8 miles per gallon. By turning off the engine when the vehicle is parked and not in use, you can help to improve fuel efficiency and reduce emissions.

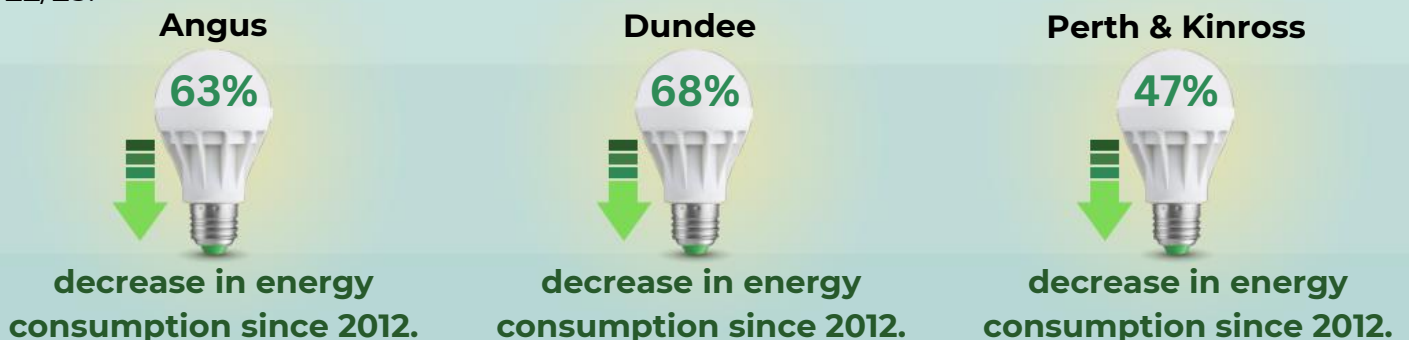
- ▶ A key element in our transition to net zero will be to move our 250 commercial vehicle fleet away from dependency on diesel fuel. In 2022/23 we developed a strategy for the introduction of alternative fuelled vehicles and plant to Tayside Contracts fleet, which was approved by the Joint Committee in November 2022.
- ▶ We worked with constituent Councils, and partners including the Energy Savings Trust and TACTRAN to explore electric and hydrogen fuelled alternatives for our fleet, including sharing electrical charging points at depots. **We now have 27 Electric Vehicle (EV) small panel vans** on the fleet and a further 6 on order.
- ▶ During the production of road construction materials at Collace Quarry, raw aggregates are heated through a drying drum. We switched the fuel for this heating process in the asphalt plant from the heavy polluting diesel to a cleaner burning liquid gas (LPG) in May 2019. Since that time up to March 2023 this switch has reduced the Quarry's emissions by over 1.7 million kilograms of carbon dioxide. This is equivalent to:



**Case study**

**Street Lighting Partnership Leads the Way with Tackling Climate Change**

Over the last 10 years, the Street Lighting Partnership teams have been working to install LED lighting throughout the Council areas drive down energy consumption and reduce the Councils' carbon footprints. Our teams have achieved the following by the end of 2022/23.



In totality, across the three council areas, we have achieved a saving of 13,500 tonnes of CO2 This is the equivalent to;



Health data shows that over one third of pupils in Primary 1 in the most deprived areas of Scotland are overweight and at risk of obesity. Dundee is one of the Scottish Government's Early Adopter areas for its 'Whole Systems Approach to Diet and Healthy Weight'. Tayside Contracts was part of a Multi-Agency Health Weight Partnership, including Dundee City Council Children and Families Service, NHS Tayside's Public Health Directorate, working together to tackle this issue.

In October 2022, Rosebank Primary School launched their Best Foot Forward initiative which links with the ambitions of the local Child Healthy Weight Strategy 'Helping Tayside's Children and Young People to Feel Great and Ready to Learn'. The 'Best Foot Forward' was a whole school approach to an inclusive and health promoting environment, which aims to help families take positive steps towards a healthier and sustainable lifestyle.

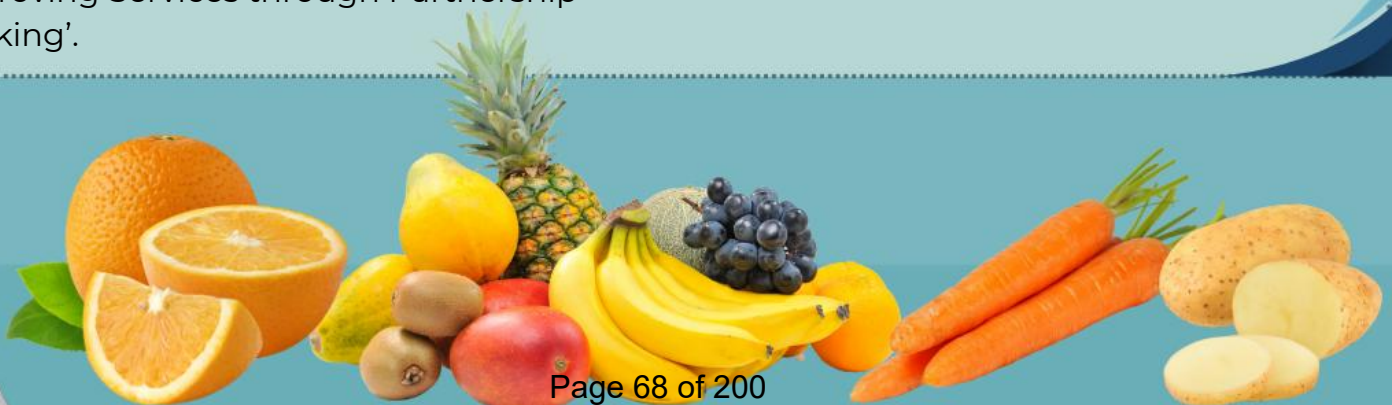
Families were invited to join the 15-week programme with a series of interactive workshops to develop knowledge around all aspects of health and wellbeing, including screentime, sleep, regular physical activity and the development of a healthy eating and snack policy whereby only fruit and water could be consumed as snacks during the school day. Tayside Contracts delivered practical cookery sessions, including a 'Fakeaway vs Takeaway' event. We provided recipes for batch cooking and freezing and gave advice on healthy snacks at home.

We were proud to have contributed to this fantastic initiative, which should have substantial community benefit. It is especially encouraging to note that school meal uptake at Rosebank Primary School has increased since the start of the project with average meals increasing from 127 to 174.

The Best Foot Forward project was nominated for an award at the Dundee City Council OSCA's (Outstanding Service & Commitment Awards) in June 2023 for 'Improving Services through Partnership Working'.



*Norrie, our Menu Development Chef sharing his skills with parents*



## Broughty Ferry to Monifieth Active Travel (BFMAT) Route Upgrades

Throughout 2022/23, Tayside Contracts has been involved in delivering various phases of the Broughty Ferry to Monifieth Active Travel Route Upgrades. The works, which have a total budget of £18million, aim to deliver transformational improvements for active travel in the area, creating a high quality and fully inclusive walking and cycling route, with associated public realm, biodiversity and landscape enhancements.

The project, all of which falls within the National Cycle Route 1, spans from Castle Approach, Broughty Ferry to Marine Drive, Monifieth. The section of route going westwards from Castle Approach to Douglas Terrace was also upgraded, as part of the Broughty Ferry Flood Protection Scheme.

Tayside Contracts are proud to have assisted Dundee City Council as one of the contractors of choice in the delivery of this exciting and ambitious project. Following an open tender procurement process, the Dundee Road Maintenance Partnership (DRMP) have delivered two phases of the project. Phases 2A, a value of £1.7M, was delivered in conjunction with supply chain partners Kilmac Construction and most recently, Phase 3, a value of £800k was delivered using internal resource. These works have allowed the entire workforce to demonstrate the breadth of skills, knowledge and adaptability within the DRMP, given the extremely varied and complex work types involved.

Future phases are planned throughout 2023/24 and Tayside Contracts will seek to assist further in the delivery of this project.



Tayside is recognised - both nationally and internationally - as a place that produces the finest food and drink, and as the largest catering organisation in the Tayside area providing over 5 million meals to schools and communities every year, we are committed to using as much locally sourced produce as possible.

Tayside Contracts in partnership with NFU Scotland, hosted an event in November 2022 that brought together local food producers across Tayside, to explore working together to support Tayside businesses, and increase the levels of locally grown and produced food served in school lunches. Several local food producers already supply produce for school and community meals; however, we are looking to extend that to ensure that we continue to provide sustainable, high quality, healthy, nutritious, and delicious meals, whilst generating more income for local businesses. The event was very successful with presentations by our suppliers Total Produce, Brakes, Campbells Prime Meats, looking to take on local producers as part of their supply chain.



In addition:

- ▶ We also established a dedicated webpage to help local food producers become suppliers to Tayside Contracts – [click here](#)
- ▶ Market research is conducted prior to any procurement exercise to engage with local suppliers. We hold a database which records all supplier enquiries to maximise opportunities to local enterprises where possible.
- ▶ We hold our annual Meet the Buyer event in conjunction with the Supplier Development Programme to network with local suppliers.
- ▶ We also worked with Perth & Kinross Councils Good Food Project, Eat and Drink Dundee to share and collaborate with groups such as Nourish Scotland, GrowBiz Scotland, to attract local suppliers.



### Working with local food suppliers

Information regarding working with local food suppliers.

## Supporting Dundee Bairns

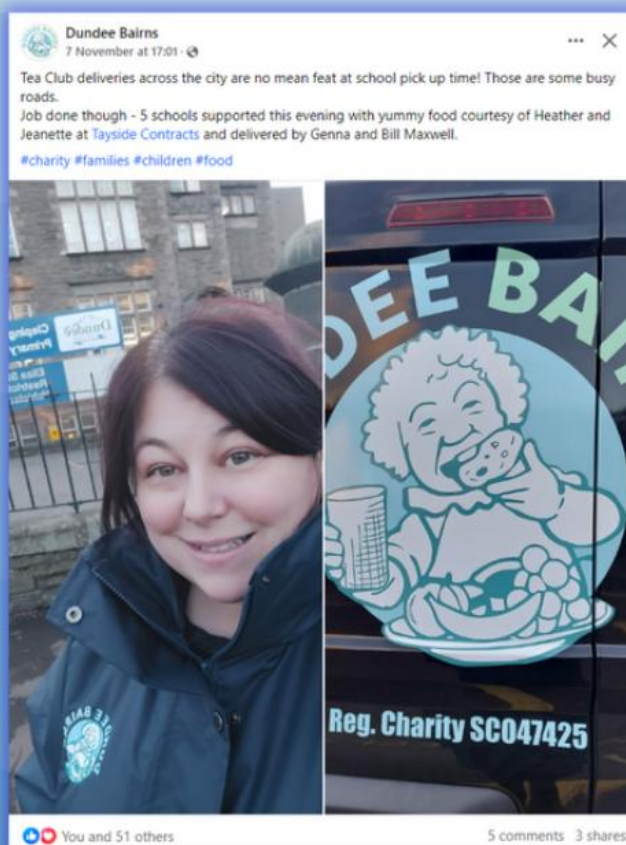
We are proud to have work in partnership with the Dundee Bairns Fun and Food Programme since April 2016. During that period, we have supported the provision of more than 300,000 meals to children who need additional support, across the city of Dundee.

Children who received and indeed rely on free school meals during school term time, often have no such provision during school holiday periods. It was this that inspired the aptly named Dundee Bairns Fun & Food Programme, with our involvement. The activities extended to include the provision of a Tea Club which is an after-school homework club that runs between 3.30 and 5.00pm and includes a 2-course hot evening meal provided by the hard-working Tayside Contract catering teams.


We have been able to evidence that, even within a short time frame, an after-school study club with a hot meal provided, can have a positive impact on attainment, pupil perceptions of health and happiness, and teachers' perceptions of pupil confidence and engagement with learning.


Genna Miller of Dundee Bairns pictured below stated:

“**I would like to thank you and all of the staff at Tayside Contracts for the provision of our Tea Club meals. The 15 projects we delivered to over the course of the 5 month period were very grateful for the meals, which fed children in football clubs, homework clubs, and 'cosy spaces' around the city who might not have otherwise had access to a hot evening meal.**”



# Challenges

 Although good progress has been made with some Climate Change actions, several others are still in progress. We had to prioritise attention to dealing with challenges, and major supply chain shortages in essential goods and services. In addition, lengthy recruitment challenges in filling vacant posts which were essential for taking forward many of the actions in the Plan also contributed to implementation delays. All key vacant posts have been filled, so we are in a much better position to progress the actions that have not advanced as far as originally explained.

 Despite our actions to attract local food producers to become suppliers for Tayside Contracts, the uptake of local producers providing to Tayside Contracts has not reached our target level for 2022/23. Further engagement is needed to understand the barriers to local producers, and how these can be overcome.

## Next Steps:



We are reviewing our Procurement Strategy to ensure that sufficient weight is given to fair work, local producers, community benefit and procurement equality duties. We will support this by reviewing our community benefit clauses on our tender documentation, considering best practice from other organisations - to demonstrate the power of effective procurement to lever social, economic and environmental benefits to the local community, including building local community wealth.

Our Training team is currently working on a project with the three Councils' employability teams, to pull together the employability information relevant to Tayside Contracts (such as the various schemes available, funding available, and contact/application details) into a central resource to share with our managers, so they can take advantage of the opportunities to provide learning/training experiences for people needing employment support within the Tayside area. This will be available in 2023/24.



The table below details the target KPIs for 2022/23 from our Business Plan and the actual results.

| SUMMARY OF KPIs AND TARGETS |                                 |      |                                                                                                                                                |      |                                                                                         |      |                                                                |
|-----------------------------|---------------------------------|------|------------------------------------------------------------------------------------------------------------------------------------------------|------|-----------------------------------------------------------------------------------------|------|----------------------------------------------------------------|
| Strategic Goals             | KPIs                            |      | TARGET 2021/22                                                                                                                                 |      | ACTUALS                                                                                 |      |                                                                |
|                             | EXCELLENCE IN SERVICE DELIVERY  | 1.0  | Increase the level of stakeholders satisfaction                                                                                                | 1.1  | Achievement of a satisfaction level of Community Meals >90% School Meals >70% IFMS >70% | 1.2  | Surveys suspended following COVID 19. TO be reinstated 2023/24 |
|                             | EXCELLENCE IN CHANGE MANAGEMENT | 2.0  | Increase the number of employees who are rated in terms of management performance as competent or excelling in current role                    | 2.1  | >85% rated competent or excelling                                                       | 2.2  | 86% (Achieved)                                                 |
|                             | EXCELLENCE IN COMMERCIALISATION | 3.0  | Increase income as a proportion of cost                                                                                                        | 3.1  | 101%                                                                                    | 3.2  | 101% (Achieved)                                                |
| Enablers                    | KPIs                            |      | TARGET 2020/21                                                                                                                                 |      | ACTUALS                                                                                 |      |                                                                |
|                             | LEADERSHIP                      | 4.0  | Positive leadership results from either Investors in People or employee survey                                                                 | 4.1  | >80%                                                                                    | 4.2  | Survey next scheduled for Nov 2023                             |
|                             | PEOPLE                          | 5.0  | Reduce number of days lost due to sickness absence                                                                                             | 5.1  | <6.2%                                                                                   | 5.2  | 6.4% (not achieved)                                            |
|                             | FINANCE                         | 6.0  | Achieve the greater of the required rate of return or the required budgeted surplus by the constituent Councils                                | 6.1  | >£750k surplus                                                                          | 6.2  | £978k (Achieved)                                               |
| Strategic Themes            | KPIs                            |      | TARGET 2020/21                                                                                                                                 |      | ACTUALS                                                                                 |      |                                                                |
|                             | CORPORATE GOVERNANCE            | 7.0  | Improving our Corporate Governance standing in accordance with CIPFA/Solace 'Delivering Good Governance in Local Government: Framework (2016)' | 7.1  | >80% compliance                                                                         | 7.2  | 91% (Achieved)                                                 |
|                             | COMMUNITY BENEFITS              | 8.0  | Increase where possible local (Tayside and surrounding area) procurement spend                                                                 | 8.1  | >50%                                                                                    | 8.2  | 40% (not achieved)                                             |
|                             | BUSINESS DEVELOPMENT            | 9.0  | Increase diversity of our business activities                                                                                                  | 9.1  | 1 or more new business streams                                                          | 9.2  | 3 new business streams (achieved)                              |
|                             | PARTNERSHIP                     | 10.0 | Increase the % of partnership and collaborative turnover                                                                                       | 10.1 | 50%                                                                                     | 10.2 | 58% (Achieved)                                                 |
|                             | SOCIAL RESPONSIBILITY           | 11.0 | Achieve and retain accreditation of a Living Wage employer                                                                                     | 11.1 | During 2022/23                                                                          | 11.2 | Achieved                                                       |
|                             | EQUALITY & DIVERSITY            | 12.0 | Completion of an Equal Pay Audit and publication of an Equal Pay Statement                                                                     | 12.1 | Achievement of a satisfactory outcome from audit                                        | 12.2 | Completed                                                      |



If you require any further information or you would like this document in another language or format, please contact [communications@tayside-contracts.co.uk](mailto:communications@tayside-contracts.co.uk)



We are a  
**Young  
Person's  
Guarantee  
Employer**

**REPORT TO: TAYSIDE CONTRACTS JOINT COMMITTEE – 20 NOVEMBER 2023**

**REPORT ON: SUPPORTED SELF ASSESSMENT OF TAYSIDE CONTRACTS - OUTCOME**

**REPORT BY: MANAGING DIRECTOR**

**REPORT NO: JC35/2023**

## **1. PURPOSE OF REPORT**

1.1 The Chief Executives of Angus, Dundee City and Perth & Kinross Councils, jointly with the Managing Director of Tayside Contracts, commissioned a Supported Self-Assessment by an independent assessor into the activities of Tayside Contracts. This report provides the outcome of that review work, and the actions arising in response to the findings.

## **2. RECOMMENDATIONS**

2.1 It is recommended that the Joint Committee:-

- a) notes the independent report into the Supported Self-Assessment of Tayside Contracts,
- b) Agrees to follow up engagement with Joint Committee members on the future measures that Tayside Contracts will need to make, working in partnership with the constituent Councils, to respond to the significant financial pressures in the current year, and in future years.

## **3. FINANCIAL IMPLICATIONS**

3.1 There are no direct financial implications arising from this report.

## **4. BACKGROUND**

4.1 With the significant challenges facing Scottish Councils, it is more vital than ever to be reassured that public services are being provided through the most appropriate service delivery models; and that maximum focus is given to ensuring efficiencies, transformation and income generation, to mitigate against reductions in public service delivery, as much as possible - as well as maximising the advantages of greater collaboration between organisations offering a route to reducing costs, whilst maintaining public services.

4.2 Therefore, Tayside Contracts must satisfy ourselves and our constituent Councils that we are as cost-efficient as we can possibly be, and that our future plans to maximise our opportunities with our existing council partners, and expand our business to other local authorities, and to a range of public / private customers, will help reduce the costs of our services to our constituent Councils, and help secure the jobs of our employees who provide those services.

- 4.3 Therefore, to test whether Tayside Contracts is taking appropriate steps to meet these challenges effectively, the Chief Executives of Angus, Dundee City and Perth & Kinross Councils, jointly with the Managing Director of Tayside Contracts, commissioned a Supported Self-Assessment by an independent reviewer into the activities of Tayside Contracts. The purpose of the Supported Self-Assessment was to:
- build the capacity in Tayside Contracts to support evaluation of its own performance,
  - continuously improve the quality of services delivered for partner authorities,
  - offer independent evaluation and validation of Tayside Contracts' efficiency and effectiveness, within a contracting public sector framework.
- 4.4 This was to be achieved by establishing: -
- Is Tayside Contracts currently fit for the intended purpose of the organisation and as efficient as it can be?
  - Is the quality of services provided by Tayside Contracts being delivered at an optimal level and what level of service options could it provide to the constituent Councils?
  - Is the organisation taking appropriate steps to improve; and to secure further business opportunities?
- 4.5 An independent reviewer was engaged, to support the assessment, and work with the Tayside Contracts Corporate Leadership Team and senior colleagues within the constituent Councils, to assess and consider all the necessary elements to undertake this assignment.
- 4.6 The Chief Executives and Managing Director appointed Keith Winter to be the independent reviewer for this activity. His experience and expertise were considered to be appropriate for this commission, as he was formerly the Executive Director for Enterprise and Environment for a large Scottish Council and has extensive experience of local authority-based commercial activities, having had the strategic responsibility for the commercial operating arm of that Council. The project brief for this work is provided in Appendix 1.
- 4.7 The value of having someone outside the organisation fulfilling this role provided access to a trusted expert, who can challenge the organisation's leadership, by asking the questions we may not ask ourselves, and look at the organisation through another perspective (using their own expertise/experience), as well as offering an independent critique of the organisation's activities. It also gives an independent validation of the findings, to give confidence to the three Councils and our Joint Committee that this work has been thoroughly and independently undertaken.
- 4.8 The brief for this work was agreed in April 2023. The review actively consisted of: -
- Scoping discussions with the three Chief Executives and the Managing Director
  - Interviews with senior leadership of Tayside Contracts,

- Interviews with members of the Governance and Strategy Group (Senior representatives from each of the three Councils),
- Review of supporting documentary evidence submitted by Tayside Contracts – this comprised over 130 documents in supporting evidence,
- Meetings with Chief Executives, Governance and Strategy Group members and with the Managing Director to present both the interim findings, and the final report.

4.9 The outcome report from this work by the independent assessor is provided in Appendix 2.

## 5. FINDINGS

5.1 The key findings from this review work can be summarised as:-

### 5.2 **Is Tayside Contracts currently fit for the intended purpose of the organisation and as efficient as it can be?**

- There are many strengths in the Tayside Contracts model as it currently exists, which is consistent with a contracting led organisation model.
- Tayside Contracts` structure and shape are not unexpected and appear generally appropriate for the nature and scale of the organisation.
- There are views from Council representatives that there should be some financial savings made in the organisation`s structure, given the approaches being taken in the Councils over reducing budgets. There would need to be sensitivity in making savings to the organisations structure as the management and support costs are not out of the norm, and any push for growth or unexpected events may overstretch the current model capacity, as well as affect the aims for further business development and growth, as set out in the organisation`s Business Plan
- There is considerable information and data capture in relation to performance management, however there is no consensus between the Councils (as owners and primary customers) and Tayside Contracts (as the delivery organisation), on the key measures for the organisation, nor clarity from the Councils on the expected performance of the organisation. The preparation of an agreed and targeted Performance Framework, underpinned by dashboards suitable for the Governance & Strategy Group and Joint Committee, is a priority to assist scrutiny, clarity and monitoring of performance, and to build confidence and trust in the organisation.
- There remains a question over the capacity of the Joint Committee to discharge its oversight role on performance and undertake appropriate and proportionate scrutiny. This fits with a decision at the Joint Committee in June 2023, to remit the Managing Director to carry out a detailed engagement with Joint Committee members to identify their opinions on the governance and scrutiny role of the Joint Committee (Joint Committee report 16/23).

- The report proposes that to enhance links with the broader Council political membership, Tayside Contracts should provide their Annual Performance Report to respective Councils, through an appropriate committee mechanism.
- To assist all parties and establish a forward-looking approach to activity, performance and finance, Tayside Contracts should prepare a medium-term financial strategy to be agreed with the Councils.

### **5.3 Is the quality of services provided by Tayside Contracts being delivered at an optimal level and what level of service options could it provide to the constituent Councils ?**

- This high-level assessment has not identified significant issues with the quality of services provided. This is an area where a more detailed level of certainty is more problematic given the comments above regarding the need for a focused, agreed, and shared performance framework with the constituent Councils.
- Currently different processes operate in relation to engagement with Tayside Contracts. This is most notable in a comparison of the differences in engagement between the Roads and Facilities Management activities undertaken by Tayside Contracts. On Facilities Management, there is clear standardisation of approach which has delivered customer and operational benefits, as well as significant operational savings. However, in relation to Roads related activities there appears far fewer standard approaches from the Councils. There would be a benefit for all from standardisation across areas of delivery, and acceptance from Councils, with a model based on outcomes not inputs.
- There should be a 5-year cycle of Best Value reviews of Tayside Contracts. This should avoid time consuming, piecemeal, and reactive review processes, and allow a periodic step back and reflection for the parties on the direction of travel.

### **5.4 Is the organisation taking appropriate steps to improve, and to secure further business opportunities?**

- A clear focus and expectation from colleagues from the Councils is the pursuit of business growth for Tayside Contracts. A good start already exists for a focus on areas to pursue in the content of the Tayside Contracts Marketing Strategy 2023 and the Commercialisation & Collaboration matrix, which is a ranked list of potential collaboration and commercial opportunities, that sets the priorities for the organisation to pursue and review.
- Tayside Contracts' [Business Plan](#) outlines the priorities for improvement and development. There is good, related activity in here, and with endorsement by all as part of the focus for activity, performance, and process, will assist understanding of the intended approach over the next few years.

- The financial data, budget reports, cost models and income detail displays a competency in reporting and analysis of the position of Tayside Contracts.
- The documentation, covering internal audit, council reporting, asset registers, APSE information and around performance all came across as acceptable and that bases are covered.
- In relation to business plans, strategies and an up-to-date strategic plan, no omissions in approach were detected from that which would be expected for an organisation in relation to the this review.

## 5.5 Report Conclusions

- The Tayside Contracts model based on the review undertaken is a valid model for going forward. There are, some improvements and changes which can help gain more from the model and the relationships involved.
- Relationships across parties are not consistent, and the standing of the relationship between the respective Councils and Tayside Contracts needs affirmed i.e., that Tayside Contracts is an affiliate organisation to the Councils collectively. This message will help foster closer working.
- To achieve business development and growth requires some structural adjustment in Tayside Contracts to free up resource to develop opportunities, but particularly case manage this through to conversion of opportunities into sustainable, profitable business.
- All parties recognise that there are areas for improvement, though this requires transparency, trust, and acceptance of some risk, by all involved, to optimise the approach, and maximise returns from this unique model in the Scottish landscape.
- Overall, the report concluded that currently there is no benefit to any or all the Councils stepping away from the Tayside Contracts model.

The main headline recommendations were:

- Review of Governance & Strategy Group remit
- Develop a Five Year working framework
- Review Joint Committee reporting and use of digital tools
- Develop a Performance framework
- Develop a Medium Term Financial Strategy
- Review Partnership agreements
- Standardisation of standards across Roads activities
- Review the Business Development model
- Review of Tayside Contracts structure and focus
- Periodic Best Value reviews (5 yearly)

- 5.6 These findings are accepted by Tayside Contracts Corporate Leadership Team, and the proposals have been incorporated into an action plan to be implemented within the timescales set in the report. The Action Plan is detailed in Appendix 3. It includes both the headline recommendations mentioned above, and also other proposals detailed in the report.
- 5.7 The review has identified several actions which require the collective input of both Tayside Contracts and the constituent Councils. These will be actioned through the Governance and Strategy Group.

## **6. KEY CHALLENGES AND NEXT STEPS**

- 6.1 In addition to implementing the Action Plan detailed in 5.6 above, the report highlights several key challenges relating to future financial sustainability. These are being amplified by national factors which have intensified since this report was initially commissioned.
- 6.2 The Supported Self Assessment report highlighted the ongoing costs pressures facing Tayside Contracts and the constituent Councils. Section 2.1.81 refers to the impact of 2022/23 pay award which added an additional recurring cost to Tayside Contracts' pay bill of £4.5m, as pay awards are weighted to lower paid workers, and 73% of Tayside Contracts' employees are on the lowest local authority pay levels. This cost pressure will be accumulate, with the indications that the 2023/24 pay award will also be greater than inflation, with the current pay offer increasing lowest paid workers' pay by just under 10%.
- 6.3 In addition, inflationary impacts on goods and services - particularly food inflation- are compounding these financial pressures, both with the current year, and accumulating into future years, with increased costs to Tayside Contracts resulting in higher charges to constituent Councils for services provided, at a time when Councils are already facing significant pressures. The report highlights the pressures on public services, referring to the Scottish Government's Medium Term Financial Strategy which identified a spending deficit of £1 billion in 2024/25 (section 2.1.7). A necessary outcome is therefore to address the continued financial and organisational challenges being faced by Tayside Contracts and the three Councils, with a need for urgency in developing a sustainable model where services are provided, to align with the funding that the constituent Councils can afford.
- 6.4 Therefore, the focus both arising from the Supported Self-Assessment report, and continued cost pressures, is how to achieve solutions to manage within the available financial envelope. The report addressed several of these issues through: -
- The importance of generating income through developing business opportunities (section 2.3)
  - Improvements to productive working through enhanced collaboration and standardised approached (section 2.2.1.2)
  - Reducing costs through review and reduction of service delivery models (section 4.13)
  - The need for a Tayside Contracts Medium Term Financial Strategy (section 4.7)



- 6.5 The report recommended that the Governance and Strategy Group should oversee progress on these issues.
- 6.6 Tayside Contracts is already addressing these through a Change Plan of transformational activities, and further areas for service review, and a prioritised list of targeted commercial and collaborative opportunities. Actions have been set out in terms of three categories:
- Income generation - targeting priority areas to generate surplus through providing services to other public and private sector customers,
  - Efficiencies - reviewing all our service areas to identify cost reductions through more effective and innovative ways of working,
  - Service reductions - where insufficient savings can be realised through the other categories, options have been identified for reductions in services provided to constituent Councils.
- 6.7 These issues are both complex and challenging and it is recommended that a priority next step arising from this report will be further engagement with Joint Committee members, to share information on the scale of the financial challenges, as well as options to address these. It will be important to carry out this work in the near future, to help inform Joint Committee members, and other Councillors when developing both Council budgets, and Tayside Contracts` budget, as well as the development of Tayside Contracts Medium Term Financial Strategy.

## **7. DATA PROTECTION IMPACT ASSESSMENT (DPIA)**

- 7.1 The issues considered within this report have, as required by legislation, been the subject of consideration from a data protection perspective.
- 7.2 A data protection assessment is not required.

## **8. EQUALITIES ASSESSMENT**

- 8.1 The issues considered within this report have, as required by legislation, been the subject of consideration from an equalities perspective.
- 8.2 An equalities impact assessment (EqIA) is not required.

## **9. CONSULTATIONS**

- 9.1 The Governance and Strategy Group along with the Clerk and the Proper Officer to the Joint Committee have been consulted on the preparation of this report.

## **10. BACKGROUND PAPERS**

- 10.1 None.

**Author(s)**

| <b>Name</b>    | <b>Designation</b> | <b>Contact Details</b>                                                                                        |
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**Approved**

| <b>Name</b>    | <b>Designation</b> | <b>Date</b>      |
|----------------|--------------------|------------------|
| Keith McNamara | Managing Director  | 20 November 2023 |

## **Project Brief: Supported Self-Assessment of Tayside Contracts**

**Commissioned by:** Chief Executives of Angus, Dundee City and Perth & Kinross Councils, and Managing Director, Tayside Contracts

**Independent Reviewer:** Keith Winter

### **Context**

With the significant challenges facing Scottish Councils over the next few years, it is more vital than ever to be reassured that public services are being provided through the most appropriate service delivery models; and that maximum attention is given to ensuring efficiencies, transformation and income generation, to mitigate against reductions in public service delivery, as much as possible, as well as considering the advantages of greater collaboration between organisations offering a route to reducing costs, whilst maintaining service quality (as recommended by the Scottish Government, the Chartered Institute for Public Finance and Accountancy, and Audit Scotland, amongst other bodies).

### **Purpose of Supported Self-Assessment**

The assessment aims to

- build the capacity in Tayside Contracts to support evaluation of its own performance,
- continuously improve the quality of services delivered for partner authorities,
- offer independent evaluation and validation of Tayside Contracts' efficiency and effectiveness, within a contracting public sector framework.

It will do this by establishing:

1. Is Tayside Contracts currently fit for the intended purpose of the organisation and as efficient as it can be?
2. Is the quality of services provided by Tayside Contracts being delivered at an optimal level and what level of service options could it provide to the constituent Councils?
3. Is the organisation taking appropriate steps to improve; and to secure further business opportunities?

### **Detailed Brief**

1. Evaluate the strengths and weaknesses of the shared services delivery model provided by Tayside Contracts, in terms of whether:
  - the organisation is effective and efficient, when benchmarked with other organisations (e.g via APSE, ASSIST FM, or other benchmarking networks),
  - the strengths of the organisational model, organisational structure and functional arrangements/relationships with constituent Councils are being maximised,
  - appropriate PIs are in place to monitor and hold the organisation to account,

- there is sufficient skillset and capacity to actively market, deliver and expand Tayside Contracts services to other major customers,
  - a risk based approach is adopted to future commercial and/or income generating opportunities.
2. Review the measures undertaken and the further proposals of Tayside Contracts and the three constituent Councils to reduce costs, achieve efficiencies, deliver transformational change, and generate additional income; and provide conclusions on:
- a) The effectiveness of the measures carried out and the proposed actions;
  - b) Recommendations on any further measures that could be undertaken to achieve savings, efficiencies, transformational change, or income generation,
  - c) Identifying further measures that could be achieved, both led by Councils (e.g. service levels and standards), and those that would be led by Tayside Contracts (e.g. services provided to external customers/ new market opportunities),
  - d) An assessment of the whole system approach, including interaction with and direction given by the 3 constituent Councils and whether there is sufficient clarity on the ask from each of the 3 Councils, individually and collectively, for Tayside Contracts to work to an agreed set of realistic actions/desired outcomes,
  - e) Where there are further opportunities for collaboration with constituent Councils (particularly efficiencies through standardisation of services with constituent Councils)

### **Deliverables**

Production of report for Managing Director of Tayside Contracts and Chief Executives, with recommendations

### **Timescales**

- Project Brief agreed by commissioners by 20 March 2023
- Inception meeting (to set out reporting points, wider key contacts, initial programme for data capture and interviews, desk review of relevant documentation and materials) - week commencing 3 April 2023
- Interim meeting with Chief Executives – early June 2023
- Draft report to Managing Director, Tayside Contracts by 24 June 2023
- Final report to Chief Executives by 1 July 2023

### **Contacts**

The independent reviewer will need a key set of contacts to provide information and/or direction to appropriate contacts in their organisations. The proposed contacts are the members of the Governance and Strategy Group:-

|                         |   |                |
|-------------------------|---|----------------|
| Angus Council           | – | Mark Armstrong |
| Dundee City Council     | – | Robert Emmott  |
| Perth & Kinross Council | – | Fraser Crofts  |
| Tayside Contracts       | – | Keith McNamara |

### **Reporting Arrangements**

The independent reviewer will produce a final report to the three Chief Executives and the Managing Director of Tayside Contracts.

The final report will be submitted to the Tayside Contracts Joint Committee with recommendations and an action plan as necessary.



**Final Report 10/08/23**

**Report for Chief Executives of Angus, Dundee, and  
Perth & Kinross Councils, and Managing Director of  
Tayside Contracts**

**Supported Self-Assessment of Tayside Contracts**

Keith Winter

## **Executive Summary: Supported Self-Assessment of Tayside Contracts**

The review undertaken consisted of a desk review, interviews of key parties and an assessment of the information against a collectively agreed brief issued in April 2023

The main conclusions from the exercise (leading to the key recommendations listed in the table at appendix 1 with the timescales involved set out as targets), are stated as follows:

- The relationship between the respective Councils and Tayside Contracts needs affirmed i.e., that Tayside Contracts is an affiliate organisation to the Councils collectively.
- To assist matters all the Councils should achieve a standing partnership agreement with Tayside Contracts for services across the undertaken activities.
- There is a clear need and benefit for Councils to have more standardisation on service delivery to assist effective and efficient, cost-effective delivery by Tayside Contracts, and a focus on Outcomes.
- An agreed medium term financial strategy looking out 3 to 4 years would assist all parties.
- There is a wide range of performance information, but there is not a single, performance framework available to transparently review performance and scrutinise activities. To see the overall picture and assess performance needs more focus and work.
- The financial arrangements and expectations of Tayside Contracts is not consistent across the three Councils. More needs done on this re the position on savings, paying for pay awards and extracting any efficiency gains by savings.
- The real focus for efficiency and finance must be the expansion of the activity turnover and therefore the budget surplus return levels possible to the Councils annually.
- To achieve business development and growth requires a different resource and focus which requires some structural adjustment in Tayside Contracts to free up resource to drive this, develop opportunities, but particularly case manage this through to conversion of opportunities into sustainable, profitable business, and maintain client relationships thereafter. The organisation needs to review its structure periodically.
- The possible areas for expansion, including any additional activity areas for the 3 local authorities currently involved, need assessed and agreed but the start is in place for this.
- Post Covid, the review of services and delivery models needs reviewed and reset. This needs consideration given the possible impacts on workforce and any mitigation possible through any practical redeployment available.

Overall, there is not any visible benefit, currently, for any or all the Councils stepping away from the Tayside Contracts model. All parties recognise that there are areas for improvement,



though this requires transparency, trust, and acceptance of some risk, by all involved, to optimise the approach, and maximise return from this unique model in the Scottish landscape.

## **1.0 SECTION 1 INTRODUCTION**

1.1 This assessment activity commenced in February 2023, via a briefing by the Managing Director of Tayside Contracts requesting an independent reviewer for a supported self-assessment of Tayside Contracts, commissioned jointly by the Chief Executives of Angus, Dundee City and Perth & Kinross Councils, and the Managing Director of Tayside Contracts. Through discussions and drafting between the client parties a finalised brief was issued on 3 April 2023. The brief comprised:

The assessment aims to: -

- build the capacity in Tayside Contracts to support evaluation of its own performance,
- continuously improve the quality of services delivered for partner authorities,
- offer independent evaluation and validation of Tayside Contracts' efficiency and effectiveness, within a contracting public sector framework.

This was to be achieved by establishing:

1. Is Tayside Contracts currently fit for the intended purpose of the organisation and as efficient as it can be?
2. Is the quality of services provided by Tayside Contracts being delivered at an optimal level and what level of service options could it provide to the constituent Councils?
3. Is the organisation taking appropriate steps to improve, and to secure further business opportunities?

### **Detailed Brief**

1. Evaluate the strengths and weaknesses of the shared services delivery model provided by Tayside Contracts, in terms of whether:
  - the organisation is effective and efficient, when benchmarked with other organisations (e.g., via APSE, ASSIST FM, or other benchmarking networks),
  - the strengths of the organisational model, organisational structure and functional arrangements/relationships with constituent Councils are being maximised,
  - appropriate PIs are in place to monitor and hold the organisation to account,
  - there is sufficient skillset and capacity to actively market, deliver and expand Tayside Contracts services to other major customers,
  - a risk-based approach is adopted to future commercial and/or income generating opportunities.
2. Review the measures undertaken and the further proposals of Tayside Contracts and the three constituent Councils to reduce costs, achieve efficiencies, deliver transformational change, and generate additional income; and provide conclusions on:

- a) The effectiveness of the measures carried out and the proposed actions.
- b) Recommendations on any further measures that could be undertaken to achieve savings, efficiencies, transformational change, or income generation,
- c) Identifying further measures that could be achieved, both led by Councils (e.g., service levels and standards), and those that would be led by Tayside Contracts (e.g., services provided to external customers/ new market opportunities),
- d) An assessment of the whole system approach, including interaction with and direction given by the 3 constituent Councils and whether there is sufficient clarity on the ask from each of the 3 Councils, individually and collectively, for Tayside Contracts to work to an agreed set of realistic actions/desired outcomes,
- e) Where there are further opportunities for collaboration with constituent Councils (particularly efficiencies through standardisation of services with constituent Councils).

Access to relevant documentation in confidence and access to key leaders and managers would be arranged as part of the analysis activity.

- 1.1 It was set out that the data gathering, and interview activity should be complete by the end of June and a resulting finalised report available by the 1 July 2023. This was extended slightly, given the slight slippage in the commissioners approving the final brief and the annual holiday season. The final report was shared the week commencing 24<sup>th</sup> July 2023, given holidays.
- 1.2 A series of interviews with identified senior staff were carried out.
  - Doug McKay, Head of Operations, Tayside Contracts on 10<sup>th</sup> May 2023
  - Frank Reilly, Head of FM and Human Resources, Tayside Contracts on 11<sup>th</sup> May 2023
  - Diane Kidd, Service Leader Finance & Governance, Tayside Contracts on 11<sup>th</sup> May 2023
  - Leanne Reilly, HR Manager, Tayside Contracts on 22 May 2023
  - Ibukun Strachan, Facilities Business Improvement and Development Manager, Tayside Contracts on 22<sup>nd</sup> May 2023
  - Mark Armstrong, Governance & Strategy Group member, Angus Council on 10<sup>th</sup> May 2023
  - Robert Emmott, Governance & Strategy Group member, Dundee City Council on 12<sup>th</sup> May 2023
  - Fraser Croft, Governance & Strategy Group member, Perth & Kinross Council on 10<sup>th</sup> May 2023
- 1.3 A substantial range of reports and documents were provided by Tayside Contracts leadership (over 130 documents) under emails or via a shared Teams folder pathway over the period from April 4<sup>th</sup> to June 20<sup>th</sup>, 2023. Three final pieces of evidence were shared on 25<sup>th</sup> July.

- 1.4 Several meetings were held between the independent reviewer and the Managing Director of Tayside Contracts during the review to develop approach, assess progress, and agree a format leading to the final report.
- 1.5 The final report was submitted on 26th July 2023, and reviewed by the Chief Executives and Managing Director of Tayside Contracts.
- 1.6 Some starting points setting the context for the review.
- Tayside Contracts is a unique operational model in Scotland.
  - Tayside Contracts works under defined terms of reference (a Minute of Agreement – [click here to view](#)) set by the constituent Councils in 1996. The Minute of Agreement was reviewed and updated in 2018.
  - Tayside Contracts is an affiliate organisation of the three Councils collectively.
  - None of the Councils host any of the services covered by the activities and staff at Tayside Contracts
  - There is some variation in approach between the Councils in their dealings with Tayside Contracts, such as differing approaches to partnership agreements.
  - There have been previous reviews of Tayside Contracts over recent years. A specific activity in 2019 covered some of the activities contained in the brief for this review.
  - This is not a Best Value review.
- 1.7 The report and assessment were carried out by Keith Winter, appointed on the basis of his experience and knowledge of the operational areas involved, as well as a lengthy period in senior leadership roles in local government, including the strategic responsibility for the commercial operating arm of a large Scottish Council.

## 2.0 SECTION 2 AREAS COVERED

### 2.1 Is Tayside Contracts currently fit for the intended purpose of the organisation and as efficient as it can be?

- 2.1.1 There are many strengths in the Tayside Contracts model as it currently exists, consistent with a contracting led organisation model. The model retains many of the aspects established since its inception, and covered under the original Minute of Agreement, by the Councils setting Tayside Contracts up in 1996. The Minute of Agreement states that the three Councils will operate through a Joint Committee for the administration of the functions that the three constituent Councils delegate to the Joint Committee. Further detail is provided in the Minute of Agreement ([click here](#))
- 2.1.2 A question which arises from the review is whether Tayside Contracts is seen as an affiliate organisation to the Councils by the respective Council clients. In my opinion this perception is variable between officers across the three Councils, and between different levels within Councils, based on the discussions undertaken. This is expressed in the differing way work is agreed and commissioned by the respective Councils.
- 2.1.3 A means of establishing a fit for purpose position would include the review of financial data, performance documentation, dashboards and reporting into the governance structure for the Governance and Strategy Group (see Appendix 2) and the Joint Committee.
- 2.1.3.1 On the performance aspect `what does good look like and how do parties tell?` I find from the document review, and the interviews and discussions undertaken, that whilst there is considerable information and data capture, there is no consensus between the Councils (as owners and primary customers) and Tayside Contracts (as the delivery organisation), on the key measures for the organisation, nor clarity from different parties (i.e. the Councils) on the expected performance of the organisation.
- 2.1.3.2 The Annual Performance reports prepared by the organisation from 2018 through to 2021/22 all carry key performance data and assess the performance for the year. The 2021/22 Annual Performance Report confirms the intention to establish a shared performance indicator dashboard. However due to the impacts of Covid this has had to be reprioritised with work to progress in 2023. This is progressing and a draft set of performance measures are being finalised for shared use amongst the Governance & Strategy Group.
- 2.1.3.3 Given the above therefore, it is perhaps understandable why different parties in the Councils consider they are not as able as they would like in assessing performance and applying a reasonable degree of scrutiny.
- 2.1.3.4 The preparation of an agreed and targeted Performance Framework, underpinned by dashboards suitable for the Governance & Strategy Group and Joint Committee, is a priority to assist scrutiny, clarity and

monitoring of performance, and to build confidence and trust in the organisation.

- 2.1.4 The role of the Governance & Strategy Group is central to the operation and interaction of the Councils with Tayside Contracts. However, the remit remains as that set originally in 1996. Membership was then set as the Chief Executives, or their nominee. For many years this has been respective Council nominee led. To my mind a review of the remit of the Governance & Strategy Group is warranted given the passage of time, changing operational circumstances, different ways of working, increasing continuing financial pressures and performance led considerations.
- 2.1.4.1 As part of any review I would suggest that the chairing model be considered and perhaps a rotating chair across the membership come into place. This would reinforce the shared partnership approach to the operation of Tayside Contracts. It is noted that the rotating partnership model is adopted for the Street Lighting Partnership, and both the Dundee Roads Maintenance Partnership, and Perth & Kinross Roads Maintenance Partnership.
- 2.1.4.2 There is a high level of committed engagement by the representatives on the Governance & Strategy Group.
- 2.1.4.3 Much of the focus of the Governance & Strategy Group appears reactive and operational in nature. A proactive agenda focus (strategy, finance, people, current issues) would be expected and a forward work programme of intention and matters to be covered would assist.
- 2.1.4.4 A suggestion along with the above is that the Governance & Strategy Group prepare a five-year plan for activities and focus that can outline the areas of growth, performance priorities and investment led areas, as well as new areas for business development. This 5-year Plan would be strategic rather than detailed and would complement the Tayside Contracts Business Plan, which is due to be reviewed later this year.
- 2.1.4.5 The positioning of the Governance & Strategy Group in process and governance could benefit from a review between all the participants, and reaffirmation of its purpose, capacity to decide matters where appropriate, and direction of items for the Joint Committee. This could be covered through the review referenced at paragraph 2.1.4 above. There is though no expectation of further powers for the Governance & Strategy Group or any delegation increase to the Managing Director at Tayside Contracts.
- 2.1.5 in terms of the Joint Committee, this is seen as the key decision-making body. Reporting into the Joint Committee is led by Tayside Contracts primarily. In the absence of an agreed performance focus model however, there remains a question over the capacity of the Joint Committee to discharge its oversight role on performance and undertake appropriate and proportionate scrutiny. A review of reports into the Joint Committee may be of merit to ensure, as is good periodic practice, that these are relevant, informative, and striking the balance on reporting good and poorer areas of

performance, with the reasons why for each clear, and outline improvement steps where appropriate. This fits with a decision at the Joint Committee in June 2023, to remit the Managing Director to carry out a detailed engagement with Joint Committee members, to identify their opinions on the governance and scrutiny of the Joint Committee, and this engagement will consider both reporting arrangements, and key performance information required by the Joint Committee members to discharge their functions.

2.1.5.1 There are 18 members appointed from across the three Councils on the Joint Committee serving a 5-year term as normal, or a shorter period if appointed within a political cycle. The Councillor engagement with Tayside Contracts is primarily through the Joint Committee. It may be helpful to continue reinforcing the initial induction process for new committee members, both from a Tayside Contracts and a council perspective, with periodic activities including visits to premises, familiarisation with process and examples of service delivery.

2.1.5.2 In addition to the formal business of the Joint Committee, various engagement sessions and events have been held with Joint Committee members. These are more informal events to allow in-depth interaction and understanding on subjects which are strategic in nature or are of a particular interest to Joint Committee members and have been well attended by Joint Committee members. Examples include: -

- Developing the Business Plan
- Climate Change
- Supporting Local Producers in our supply chain
- Budget Proposals
- Visits to operational sites (e.g., Quarry, Tay Cuisine)
- School Meals service
- Tayside Contracts Community Fund
- Induction for new members of Joint Committee (offered to Members on a 1 to 1 basis)

2.1.5.3 The process of Chair and Vice-Chair is considered to work well and provide the continuance and stability in leadership for the operation of the organisation and linking to the Managing Director at Tayside Contracts.

2.1.6 The varying stances of individual Councils on the performance and interaction with Tayside Contracts, away from the Joint Committee, brings in different approaches on engagement and the level of trust and interaction. This has resulted in different approaches to updates and committee engagement in the respective Councils on occasion.

2.1.6.1 A suggestion to enhance links with the broader Council political membership would be that Tayside Contracts provide their Annual Performance Report into respective Councils, through an appropriate

committee mechanism. This provides a presence for Tayside Contracts, and an opportunity for scrutiny and update for elected members who are not part of the Joint Committee. This could be put into action this financial year, and build on the approach adopted by Angus Council, which invites the Managing Director to attend its Audit and Scrutiny Committee on an annual basis, to present the organisation's Annual Performance Report, and answer Members' questions.

2.1.7 On finance, this is an area of particular focus given the financial pressures involved currently, and looking ahead, for all organisations in the public sector. For example, in May 2023, the Scottish Government's Medium Term Financial Strategy highlighted the gap between its spending and funding was a projected deficit of £1bn in 2024/25, and £1.9bn in 2027/28. The recent changes in staffing and roles at Tayside Contracts should assist the process going forward. A suggestion is for more regular engagement across finance representatives from the respective organisations on assessing, reviewing, and planning forward finances. The Section 95 officer (termed the 'Proper Officer' in the Tayside Contracts Minute of Agreement) provides input and guidance as appropriate to Tayside Contracts' Managing Director and the organisation's senior Finance officer - Service Leader (Finance & Governance). This could be developed further in the short term to further enhance current relationships and assist with the ongoing challenges facing the four primary bodies and across the multiple finance processes involved.

2.1.7.1 To assist all parties and establish a forward-looking approach to activity, performance and finance, Tayside Contracts should prepare a medium-term financial strategy to be agreed with the Councils. This would set a context and clarity of focus for all and working arrangement around annual budget setting as occurs. As a start to this approach and strategy a starting point may be a short-term plan to look at current pressures in this year and looking to next.

2.1.8 There is an ongoing challenge regarding resources for the organisation both internally regarding capacity, and certainty to deliver annually against Council led expectations, and a focus on savings to be made as sought by the constituent Councils.

2.1.8.1 These should helpfully be resolved, as mixed expectations and requirements from the constituent Councils can only distract parties from a delivery focus, take up time for all, in the absence of clarity on what is sought, with short timescales (perhaps raised in-year, which diverts capacity from other priorities). Because of the existence of Tayside Contracts, the three Councils employ considerably fewer staff on the Scottish Local Government Living Wage level compared to other local authorities (73% of Tayside Contracts employees are on the lowest hourly rate for local authority employees. The equivalent figure for constituent Councils is 0 % of employees). Thus, the impact of bottom loading in annual pay awards, over several years, falls heavily on Tayside Contracts and not the three Councils (for example the 2022/23 pay award added additional costs of £4.5 million to Tayside Contracts' pay bill - a 10% overall increase to the organisation's pay costs). However, the position on strategy and means of passing on Scottish Government funded monies for such additional costs is not consistent across the

Councils. Tayside Contracts, in meeting such increases, has limited options to manage such increases, within its existing budget.

2.1.9 Tayside Contracts structure and shape are not unexpected and appears generally appropriate for the nature and scale of the organisation. A study by Ernst & Young on costs of management and support services (2017) would confirm that the costs are in line with, or lower than, expected level compared with other organisations (however it is noted that this review work preceded further reductions in management and support services headcount by participating organisations, and there would be benefit in carrying out a follow up benchmarking exercise as part of a Best Value review, as suggested in section 2.2.3).

2.1.9.1 There are however views from Council representatives that there should be some financial savings made in these areas, given the approaches being taken in the Councils over reducing budgets. I take the view however that this would need sensitivity as the management and support costs are not out of the norm, and any push for growth or unexpected events may overstretch the current model capacity as well as affect the aims for further business development and growth as set out in the organisation's Business Plan, and as expected by the Councils' Chief Executives for Tayside Contracts.

2.1.9.2 At the same time there must be an expectation that Tayside Contracts review its shape and structure periodically, and advance this for discussion through the Governance & Strategy Group, to remain effective, and aligned with the business needs of the organisation. Form follows function and thus any review of structures should relate to the provided performance framework identified in this review, the medium-term financial strategy identified and against the forward specifications and priorities set by the engaging Councils.

2.1.10 Tayside Contracts also plays a role in supporting the three Councils' wider ambitions around equality and fairness; economy and education; community empowerment; tackling climate change and building community wealth. 'Communities, Councils and Customers' is one of the five Strategic Priorities in the organisation's [Business Plan](#):

- Confidence, People and Relationships;
- Commercial Approach;
- Collaboration and Sharing;
- Continuous Improvement and Performance; and
- Communities, Councils and Customers

2.1.11 This highlights Tayside Contracts' commitment to corporate social, ethical and environmental responsibility, to enhance the lives of everyone in Tayside. For example:

- Tayside Contracts works with the three Councils' employability teams, as well as organisations such as Remploy, and Barnardos to support people who need additional support, into working with Tayside Contracts.
- The organisation worked in partnership with Dundee and Angus Developing the Young Workforce (DYW) team and have been recognised as an approved



official [Young Person's Guarantee](#) Employer which is a commitment to connect every 16- to 24-year-old in Scotland to an employment opportunity. This accreditation was renewed in July 2023.

- The Tayside Contracts` Community Fund has now helped over 50 local community groups and charities with support such as food provision, signage and small construction works.

2.1.12 It is noted that the Governance and Strategy Group have recently (August 2023) been discussing what further activities Tayside Contracts` can undertake to support the wider Community Planning and community empowerment ambitions of the Councils – including holding a workshop with the relevant colleagues from the three Councils.

## **2.2 Is the quality of services provided by Tayside Contracts being delivered at an optimal level and what level of service options could it provide to the constituent Councils?**

2.2.1. Although this high-level assessment has not identified significant issues with the quality of services provided, this is an area where a more detailed level of certainty is more problematic given the comments above regarding the need for a focused, agreed, and shared performance framework with the constituent Councils.

2.2.1.1 There is a need to gain a common alignment between the Councils and Tayside Contracts. Currently different processes operate in relation to engagement with Tayside Contracts. This is most notable in a comparison of the differences in engagement between the Roads and Facilities Management activities undertaken by Tayside Contracts. On Facilities Management, there is clear standardisation of approach which has delivered customer and operational benefits, as well as significant operational savings (e.g., common menus for school meals across Tayside; standardised delivery of meals service through the Central Processing Unit at Tay Cuisine), other than the correct consideration of operational aspects in that area. Yet in relation to Roads related activities there appears far fewer standard approaches from the Councils, regardless of some clear geographic differences which apply to the respective Council areas. There would be a benefit for all from standardisation across areas of delivery, and acceptance from Councils, with a model based on outcomes not inputs. It is noted that progress is being made in relation to greater standardisation in Construction through the Tri-Council Governance Group, and the Tri-Council Maintenance Strategy Group, based on recommendations made as part of the Tests of Change project commissioned by the Chief Executives.

2.2.1.2 For example, as well as a Tayside -wide Street Lighting Partnership, Perth & Kinross Council and Dundee City Council have well established shared Partnership agreements in place for Roads Maintenance. Angus Council appears an outlier, and the reasons for this relate to Angus Council seeking further reassurance and evidence to demonstrate that this Partnership model will deliver Best Value for the local authority.

Discussions are ongoing in this with Angus Council to identify any concerns and find a mutually agreed and beneficial way forward.

- 2.2.2 At the same time there is an acceptance across all interviewed that before any of the Councils may commit to further service areas being delivered through Tayside Contracts, and the requisite payment of budget for these, there is some prework necessary to build confidence and trust across parties, show that this all represents a best value and should be aided with a robust and informed business case approach for any new area of activity, with a culture of joint working and sharing of information between partners to develop a comprehensive, bespoke business case, which clearly demonstrates the benefits. This is recognised by the leadership at Tayside Contracts and the Managing Director Tayside Contracts will take this forward from the discussions to date.
- 2.2.3 Also to assist the engagement and provide a strategic overview for process and direction of the organisation, a suggestion is for a 5-year cycle of Best Value reviews of Tayside Contracts, starting before 2026. This should avoid time consuming, piecemeal, and reactive review processes (the uncertainty of which are demotivating to employees and consume resource from all parties), and tie in the other actions suggested in this report, which will allow a periodic step back and reflection for the parties on the direction of travel. This should also assist with concerns existing in Councils regarding retaining a fit for purpose model for delivery of these services, as external environments, internal strategies, and considerations develop over time. Whilst this would involve a greater resource input on each review, this would be discounted against sporadic reviews that may not provide all involved with a proper, considered, and strategic opportunity to reflect and agree approaches for the next operational period to follow between reviews.

### **2.3 Is the organisation taking appropriate steps to improve, and to secure further business opportunities?**

- 2.3.1 A clear focus and expectation from colleagues from the Councils is the pursuit of business growth for Tayside Contracts. There are, as accepted by all, capacities in several of the processes and capability to undertake further external work. A clearly favoured area for this is Tay Cuisine (the Central Processing Unit for meal preparation). Indeed, Tayside Contracts staff are in discussion with other parties re potential use of the facility to provide services for these organisations.
  - 2.3.1.1 Tayside Contracts leadership team are keen to pursue new external opportunities. Any risk-based approach to new business whether in the above activity area, or across other business elements, will consume valuable resource, and some will be lost if the business opportunity does not see conversion into a contract arrangement - and provide a meaningful and sustainable business income stream. The reference above to a reshape of the structure at Tayside Contracts as a suggestion, should focus on this area, and creating capacity for business development, and then ongoing relationship management, in the first instance.

- 2.3.1.2 The tight financial circumstances mean that there is a need for this activity to be largely self-financing. The organisation's Improvement & Innovation fund was introduced in 2021 as a means of working capital to fund such activity as they arise.
- 2.3.1.3 For such an approach to deliver success requires some more front-end work on what opportunities are available, which offer best return, by criteria to be set, and for the Governance & Strategy Group to oversee progress and retain oversight of the opportunities in flight for monitoring conversion rates and, though can be hard, dropping those that are not progressing. A good start already exists for a focus on areas to pursue in the content of the Tayside Contracts Marketing Strategy 2023 and the Commercialisation & Collaboration matrix, which is a ranked list of potential collaboration and commercial opportunities, that sets the priorities for the organisation to pursue and review. This was introduced in 2021 and is regularly monitored by the Corporate Leadership Team and has been shared with the Governance & Strategy Group. Tayside Contracts Leadership has also presented to the Governance & Strategy Group and the Chief Executives (December 2022) its prioritised targets for commercial expansion, including potential income generating estimates. In the last year, Tayside Contracts has taken on the following additional commercial and collaborative activities:
- Providing winter maintenance service and sharing Tayside Contracts depots with Amey (North East Trunk Road operator)
  - Community Meals teatime service for Angus Health & Social Care Partnership
  - Provision of Community Resource Assistants service for Dundee City Council
  - Hosting Dundee City Council Construction Services team in Tayside Contracts building, to allow demolition of DCC building, with sharing of operating costs.
  - providing gutter cleaning services for Perth & Kinross Council schools, and window cleaning services for all three Councils' schools
  - Providing fleet management services for Dundee & Angus College
  - High value external commissions outwith the "core" roads maintenance services e.g. in the last year, Cross Tay link, Broughty Ferry Active travel, and Glenferriate Estate
- 2.3.1.4 In the finance section above the quandary regarding the savings aspects for Tayside Contracts given financial pressures on the Councils was covered. It is the case that cuts of any scale in a model such as Tayside Contracts will translate into a consequential reduction in income given a reduction in resources. This does not include ongoing operational efficiencies being pursued as part of day-to-day activities and

opportunities or any specification alterations raised by an individual council for example.

2.3.1.5 Therefore the Governance & Strategy Group as a suggestion should, as part of the forward-looking programme approach mentioned at paragraph 2.3.1.3 above, look to address the strategy and agree areas for opportunity and then monitor progress on these, with a target indicated for income and return. This can then be included in the dashboard approach mentioned previously at paragraph 2.1.3.4

2.3.2 Tayside Contracts have an active [Business Plan](#) for the period 21 – 24. This outlines the priorities for improvement and development. These priorities were established through extensive engagement with the Joint Committee members, the Governance & Strategy Group and also the employees of Tayside Contracts. There is good, related activity in here, and with endorsement by all as part of the focus for activity, performance, and process, will assist understanding of the intended approach over the next few years.

## **2.4 Training and development**

2.4.1 The organisation has a Leadership and Development Strategy last updated in May 2018; this is mapped to EFQM criteria. Primary use of the Lombardo model underpins the approach. Covid has impacted on an update to the strategy, but this is now rising through the priorities of the organisation. The training budget for 2023/24, as shared, shows a budget of £220k for the organisation. A review though could cast a questioning eye over the balance in the operational versus development approach involved in the topics covered and proportion of spend on activities. There is no separate leadership training and development budget.

2.4.2 There may be opportunities for aspects of professional related training and leadership development to occur with or through the different Councils and their programmes, to assist provision and efficiency of delivery, whilst building further the relationships across officers in the local geography.

### **3.0 DESK REVIEW**

- 3.1 In carrying out the review I was provided with a copy of a report from June 2019 prepared for the Chief Executives with a purpose of covering:
- 1) current governance arrangements as in place
  - 2) what savings has TC delivered
  - 3) where is TC in terms of growth of the organisation
  - 4) what other opportunities are available to TC
- 3.2 These overlap with the current review to some degree.
- 3.3 I was provided with a range of financial data, including budget reports, cost models and income detail. This displays a competency in reporting and analysis of the position of Tayside Contracts. It may be helpful, through closer working, to enhance the understanding of such, and build that confidence across officers and elected members, to move to a more risk and key factor-based approach to reporting, issue coverage and performance assessment.
- 3.4 The documentation, covering internal audit, council reporting, asset registers, APSE information and around performance all came across as acceptable and that bases are covered. This does not mean that there is no room for improvement, though further analysis in this is not beneficial until all have an agreed performance framework and dashboard.
- 3.5 Business plans, strategies such as referenced in this report and an up-to-date strategic risk register were all helpfully made available. Again, there is nothing that stands out as missing or awry in approach from that which I would expect for an organisation in relation to the specifics of this review.

## **4.0 CONCLUSIONS**

- 4.1 The Tayside Contracts model based on the review undertaken is a valid model for going forward.
- 4.2 There are, as always, some improvements and changes which can help gain more from the model and the relationships involved.
- 4.3 The key suggestions are listed in the table at appendix 1 with the timescales involved set out as targets.
- 4.4 Relationships across players are decent - though not consistent - and the standing of the relationship between the respective Councils and Tayside Contracts needs affirmed i.e., that Tayside Contracts is an affiliate organisation to the Councils collectively. This message will help foster closer working both ways between individuals in the Councils and Tayside Contracts, at all levels.
- 4.5 To assist matters all the Councils should achieve a standing partnership agreement with Tayside Contracts for services across the undertaken activities.
- 4.6 There is a clear need and benefit for Councils to have more standardisation on service delivery to assist effective and efficient, cost-effective delivery by Tayside Contracts, and a focus on Outcomes.
- 4.7 Year on year budget settlements assist no party, though is the current reality of approach by the Scottish Government for the Councils, and therefore impact onto Tayside Contracts. Therefore, an agreed medium term financial strategy looking out 3 to 4 years would assist all.
- 4.8 It is acknowledged that, although there is a wide range of performance information shared with the Joint Committee, the Governance & Strategy Group, and the various partnership/ client meetings at operational level, there is not a single, overt performance framework available for Joint Committee, Governance & Strategy Group, Tayside Contracts and others, to transparently establish an opportunity to review performance and scrutinise activities. There are a host of measures- all relevant - but to see the overall picture and assess performance needs more focus and work. This is accepted by the Managing Director and a Performance Management Framework is currently being developed.
- 4.9 The financial arrangements and expectations of Tayside Contracts is not consistent across the three Councils. More needs done on this re the position on savings, paying for pay awards and extracting any efficiency gains by savings.
- 4.10 The real focus for efficiency and finance must be the expansion of the activity turnover and therefore the budget surplus return levels possible to the Councils annually.
- 4.11 To achieve business development and growth requires a different resource and focus for Tayside Contracts which requires some structural adjustment in Tayside Contracts to free up resource to drive this, develop opportunities, but particularly case manage this through to conversion of opportunities into sustainable, profitable business, and maintain client relationships thereafter.
- 4.12 The Improvement & Innovation Fund, established by Tayside Contracts, can provide a base for this objective, along with an agreed approach on transformation of the

business through growth and optimising current capacity, recognising much of the current model works on a marginal costing basis.

- 4.13 Post covid, the review of services and delivery models needs reviewed and reset. For example, office cleaning could be revisited by the respective Councils if properties are now operating different occupancy and operating hours. This needs consideration given the possible impacts on workforce and any mitigation possible through any practical redeployment available.
- 4.14 Overall there no visible benefit, currently, for any or all the Councils stepping away from the Tayside Contracts model. All parties recognise that there are areas for improvement, though this requires transparency, trust, and acceptance of some risk, by all involved, to optimise the approach, and maximise return from this unique model in the Scottish landscape.

## Appendix 1 – Table 1 Main Recommended Actions and Timescales

| Theme* | Action/timescale (months)                                 | 6 | 12 | 18 | 24 | Lead for the action stated                                                     |
|--------|-----------------------------------------------------------|---|----|----|----|--------------------------------------------------------------------------------|
| 1      | Governance & Strategy Group remit review                  | * |    |    |    | Managing Director Tayside Contracts with Governance and Strategy Group members |
| 1,3    | Five Year working framework (Governance & Strategy Group) | * | *  |    |    | Governance and Strategy Group                                                  |
| 1      | Joint Committee reporting and use of digital tools        |   | *  | *  |    | Tayside Contracts Leadership Team                                              |
| 1      | Performance framework                                     | * | *  | *  |    | Governance and Strategy Group                                                  |
| 1      | Medium Term Financial Strategy                            | * | *  | *  |    | Tayside Contracts Leadership Team                                              |
| 2      | Partnership agreements                                    | * | *  |    |    | 3 Councils and Tayside Contracts Leadership Team                               |
| 2      | Standardisation of standards across Roads activities      | * | *  |    |    | Tayside Contracts Leadership Team                                              |
| 2      | Business Development model                                |   | *  | *  |    | Tayside Contracts Leadership Team                                              |
| 1,3    | Tayside Contracts structure and focus review              |   | *  | *  | *  | Tayside Contracts Leadership Team                                              |
| 2      | Periodic Best Value review                                |   |    |    | *  | Tayside Contracts Leadership Team with involvement of the 3 councils           |

### \*Themes

1. Is Tayside Contracts currently fit for the intended purpose of the organisation and as efficient as it can be?
2. Is the quality of services provided by Tayside Contracts being delivered at an optimal level and what level of service options could it provide to the constituent Councils?
3. Is the organisation taking appropriate steps to improve, and to secure further business opportunities?



## **Appendix 2 Governance and Strategy Group (GSG)**

The activity of the GSG is defined in the Tayside Contracts [Minute of Agreement](#) – summary below.

This group consists of 3 Chief Executives of the constituent Councils (or their nominees) and the Managing Director of Tayside Contracts. It has been established to consider both the performance and development of Tayside Contracts as a shared service provider, and to consider any of the functions of the Joint Committee. The Governance and Strategy Group meets at regular intervals (at least 4 times per year). The business of the Governance and Strategy Group is conducted on the basis of majority voting, with officers of the Constituent Councils and Tayside Contracts having one vote each.



## JC35 2023 - Supported Self-Assessment – Detailed Action Plan

| Section of Report          | Action                                                                                                                                                                | Lead                                 | Timescale     | Comments                        |
|----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------------|---------------------------------|
| 2.1.2<br>4.4               | Engagements between Council officers and Tayside Contracts to reach a common understanding of the role of TC in relation to the Councils.                             | GSG Chair                            | By April 2024 | Engagement plan to be developed |
| 2.1.3.4<br>4.8             | Development of a Performance Framework with dashboards for Joint Committee (JC) and Governance and Strategy Group (GSG)                                               | Managing Director, Tayside Contracts | June 2024     |                                 |
| 2.1.4                      | Review of GSG remit, purpose, capacity for decision, direction of items for JC, including role of Chair                                                               | GSG Chair                            | May 2024      |                                 |
| 2.1.4.4                    | GSG to develop a 5-year plan for activities, growth, performance priorities and investment led areas                                                                  | GSG Chair                            | April 2024    |                                 |
| 2.1.5                      | Review of reports for Joint Committee                                                                                                                                 | Managing Director, Tayside Contracts | October 2023  |                                 |
| 2.1.6.1                    | Tayside Contracts` Annual Performance Report to be shared through appropriate Council reporting mechanisms                                                            | Council GSG Leads                    | Annually      |                                 |
| 2.1.7<br>4.2               | Regular engagement between finance representatives in Councils and TC to assess, review and plan formal finances via a medium-Term Financial Strategy                 | GSG Chair                            | March 2025    |                                 |
| 2.1.9.2<br>2.3.1.2<br>4.11 | Tayside Contracts to review its shape and structure periodically, and advance this through GSG, taking into account the need for capacity in new business development | Managing Director, Tayside Contracts | April 2024    |                                 |
| 2.2.12                     | Review opportunities for standardisation in Roads, e.g., Roads Maintenance Partnership, approach                                                                      | Head of Operations TC/Director of    | June 2024     |                                 |

## JC35 2023 - Supported Self-Assessment – Detailed Action Plan

|         |                                                                                                                                      |                                       |                |                                                                                                               |
|---------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------|
|         | (similar to Dundee and PKC for Angus area                                                                                            | Infrastructure and Environment, Angus |                |                                                                                                               |
| 2.2.3   | Establish a 5-year cycle of Best Value reviews of Tayside Contracts                                                                  | Managing Director, Tayside Contracts  | December 2025  |                                                                                                               |
| 2.3.1.3 | Oversee progress future plans and retain of opportunities for new business development, by GSG                                       | GSG Chair                             | September 2024 | To be part of new performance framework for GSG                                                               |
| 2.4.2   | Review opportunities for Tayside Contracts to access Council programmes for professional related training and leadership development | GSG Chair                             | April 2024     |                                                                                                               |
| 4.5     | Achieve a standing partnership agreement with Tayside Contracts for services undertaken by Tayside Contracts                         | GSG Chair                             | September 2024 |                                                                                                               |
| 4.9     | Review consistency of financial arrangements and expectations of Tayside Contracts across the three Councils                         | GSG Chair                             | March 2024     |                                                                                                               |
| 4.13    | Review of service delivery models post COVID (e.g., cleaning specification)                                                          | GSG Chair                             | February 2024  | GSG has committed to this work, with Tayside Contracts and Council staff working together to review proposals |

**Perth And Kinross Council**

**Scrutiny And Performance Committee - 24 April 2024**

**Executive Sub-Committee of The Learning And Families Committee - 3 June 2024**

**SUMMARY REPORT ON CARE INSPECTORATE AND EDUCATION SCOTLAND INSPECTIONS**

**Report by Strategic Lead - Education and Learning  
(Report No. 24/126)**

**1. PURPOSE**

- 1.1 This report provides an overview of the performance of Education and Children's services inspected and reported over the past year by the Care Inspectorate and Education Scotland, since the previous report of this type in 2023, and sets out the Service's approach to implementing improvement actions arising out of inspection.

**2. RECOMMENDATIONS**

- 2.1 It is recommended that the Scrutiny & Performance Committee:

- Scrutinises and comments as appropriate on the contents of the report.

It is recommended that the Executive Sub-Committee of the Learning and Families Committee:

- Scrutinises and comments as appropriate on the contents of the report.

**3. STRUCTURE OF REPORT**

- 3.1 This report is structured over the following sections:

- Section 4: Background
- Section 5: Summary of Inspections
- Section 6: Conclusion
- Appendices

**4. BACKGROUND**

**4.1 Care Inspectorate**

- 4.1.1 Regulated care services in Scotland are inspected by the [Care Inspectorate](#) using a range of quality frameworks, each with key questions and quality indicators. Services are measured against the National Health and Social Care Standards.

- 4.1.2 Where inspected, each key question and contributing quality indicator is graded on a six-point scale in which 1 = unsatisfactory, 2 = weak, 3 = adequate, 4 = good, 5 = very good and 6 = excellent.
- 4.1.3 An updated [quality framework for day care of children, childminding and school aged childcare, February 2022](#) was published by the Care Inspectorate in July 2021 and was used in test inspections, without published grades, before full implementation. This framework is now in place for inspections carried out since 1 June 2022.
- 4.1.4 The framework is framed around four key questions. Each of these include a number of quality indicators for actual inspection which are:
- How good is our care, play and learning?
  - How good is our setting?
  - How good is our leadership?
  - How good is our staff team?

The final key question is: What is our overall capacity for improvement? This requires a global judgement based on evidence and evaluations from all the other key areas but is not evaluated specifically.

- 4.1.5 The Care Inspectorate conducts unannounced inspections for all regulated services as the main inspection method unless there are practical reasons that this is not appropriate. 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.
- 4.1.6 Following an inspection, the Care Inspectorate publishes a report that may set out a series of:
- **Recommendations:** statements that set out actions the care service provider should take to improve or develop the quality of the service; and
  - **Requirements:** statements which set out what is required of the care service provider to comply with relevant legislation.
- 4.1.7 Care service providers must submit an action plan to the Care Inspectorate addressing any requirements and recommendations identified. Progress against the action plan is monitored by the Care Inspectorate through annual return and self-assessment forms submitted by the care service provider and through subsequent inspection.

## 4.2 Education Scotland

- 4.2.1 Education Scotland inspects and reports on the quality of education in Early Learning and Childcare (ELC) settings, primary schools, secondary schools, special schools, community learning and development services, colleges, and residential educational provision.

- 4.2.2. Inspections resumed post COVID-19 pandemic in September 2022 across all local authorities, selecting early years settings and schools for inspection on a proportionate basis as previously, using a sampling approach.
- 4.2.3 For ELC inspections, the [How good is our early learning and childcare \(HGIOELC\)](#) framework is used. For school inspections, a selection of the [How good is our school \(HGIOS4\)](#) quality indicators are evaluated on a six-point scale.
- 4.2.4 A short letter is provided to report the inspection, highlighting strengths and aspects for development, and includes a table indicating the quality indicator evaluations against the six-point scale. The inspection evidence gathered during the inspection is published online as a document called the Summarised Inspection Findings.

### 4.3 Analysis of Inspection Outcomes

- 4.3.1 There are a number of factors which can make the analysis of the inspection gradings complex over long reporting periods. These factors include:
- Improvements and changes to the inspection models and quality frameworks such that it is not possible to make direct comparisons across years;
  - The number of inspections carried out within the local authority area varies from year to year; and
  - The selection of quality indicators and themes can vary from inspection to inspection.

## 5. SUMMARY OF INSPECTIONS

### 5.1 Services Providing Day Care for Children

- 5.1.1 This section presents an overview of the performance of services providing day care for children inspected over the past year where Perth and Kinross Council (PKC) is the registered provider, and for services registered as funded partners; this includes childminders with funded childcare places. The Care Inspectorate Inspection Reports are reported to the Executive Sub-Committee of the Learning and Families Committee by exception, where any grading has been awarded an evaluation of unsatisfactory, weak, or excellent. In the past year, one service has been reported for receiving excellent gradings. One service was graded as unsatisfactory or weak.
- 5.1.2 All 28 inspections of services providing day care for children in 2023/24 were unannounced.
- 5.1.3 To date, in 2023/24, 88% of grades awarded were good or better, similar to the previous year and above national and comparator benchmarks. The

proportion of excellent and very good grades awarded is at 50%, a similar figure to the 52% in the previous year.

5.1.4 Appendix A (Summary of performance, services providing day care of children inspected by the Care Inspectorate) provides further details and interpretation of the overall figures as well as comparator and national benchmarks. The current inspection position of all settings indicates a positive picture relative to national and comparator benchmarks, across all Quality Themes.

5.1.5 Overall, every theme shows consistently high performance and improvement over the previous year, with only Quality of Leadership and Management showing a slight decrease compared to last year.

5.1.6 It is common for only certain key questions to be assessed during an inspection. When looking at individual indicators, care must be used in interpretation as some may be evaluated less frequently than others and therefore subject to greater change from year to year.

5.1.7 Education and Learning continue to monitor, support, and challenge all centres through a planned programme of improvement visits.

## 5.2 **Support and Residential Care Services**

### **Fostering Service**

5.2.1 There were no fostering service inspections carried out by the care inspectorate in the year 2023/24.

### **Adoption Service**

5.2.2 There were no adoption service inspections carried out by the care inspectorate in the year 2023/24.

### **Adult Placement Service**

5.2.3 There were no adult placement service inspections carried out by the care inspectorate in the year 2023/24.

## 5.3 **ELC Settings and Schools – Education Scotland Inspections**

5.3.1 This section presents an overview of the performance of PKC ELC settings, including partner providers, and schools inspected by Education Scotland and reported to the Executive Sub-Committee of Learning and Families Committee.

5.3.2 A combined summary of achievement (2016/17 to date) as well as performance against comparator local authorities and Scotland as a whole, is shown in Appendix B (Overview and Comparison of Education Scotland Inspections 2016/17 - 2023/24 by Performance Indicator. PKC consistently



outperforms both the comparator group of local authorities and the Scotland average across both the primary school and ELC sectors. Performance for secondary inspections is generally lower than both our comparator authorities and the Scotland average. Only four secondary school inspections have been carried out since 2016/17, these are Perth High School (Nov 2018), Perth Grammar School (Nov 2019), Pitlochry High School (April 2023) and Perth Academy (Nov 2023).

- 5.3.3 Areas for improvement identified during an inspection are addressed through a School Action Plan. Progress against the plan is monitored and a report is prepared for parents/carers within one year of the inspection report being published.
- 5.3.4 Broad themes for improvement are considered across all inspections and feed into the overall Education Quality Improvement Framework. They influence the development of the annual [Education Improvement Plan](#) and the [Raising Attainment Strategy](#).
- 5.3.5 Inspection reports are scrutinised by members of the Executive Sub-Committee of the Learning and Families Committee.

## 6. CONCLUSION

- 6.1 The analysis of the gradings and reports by the Care Inspectorate and Education Scotland provide positive confirmation that the standards and quality in our services remain high and set a clear agenda for continuous improvement.

### Author

| Name         | Designation         | Contact Details                                                                        |
|--------------|---------------------|----------------------------------------------------------------------------------------|
| James Chiles | Performance Officer | <a href="mailto:ECSCcommittee@pkc.gov.uk">ECSCcommittee@pkc.gov.uk</a><br>01738 475000 |

### Approved

| Name          | Designation                             | Date          |
|---------------|-----------------------------------------|---------------|
| Sheena Devlin | Strategic Lead – Education and Learning | 15 April 2024 |

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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>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

#### Community Plan/Single Outcome Agreement

1.1 This section sets out how the proposals relate to the delivery of the Perth and Kinross Community Plan/Single Outcome Agreement in terms of the following priorities:

- (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 Objective No. (i) and (ii).

#### Corporate Plan

1.2 This section sets out how the proposals relate to the achievement of the Council's Corporate Plan 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 Objective No. (i) and (ii).

1.3 The report also links to the Education & Children's Services Vision, Values and Priorities in respect of the following key Priority areas:

- Best Start
- Learning and Achievement

## 2. Resource Implications

### Financial

2.1 N/A

### Workforce

2.2 N/A

### 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.

3.1.1 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

3.2 The Environmental Assessment (Scotland) Act 2005 places a duty on the Council to identify and assess the environmental consequences of its proposals.

3.2.1 The proposals have been considered under the Act; however, no action is required as the Act does not apply to the matters presented in this report.

This is because the Committee are requested to note the contents of the report only and the Committee are not being requested to approve, adopt or agree to an action or to set the framework for future decisions.

### Sustainability

3.3 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. Under the Climate Change (Scotland) Act 2009 the Council also has a duty relating to climate change and, in exercising its functions must act:

- In the way best calculated to delivery of the Act's emissions reduction targets.
- In the way best calculated to deliver any statutory adaption programmes.
- In a way that it considers most sustainable.

3.3.1 The proposals have been considered but are not applicable for this report.

### Legal and Governance

3.4 N/A

3.5 N/A

### Risk

3.6 N/A

## **4. Consultation**

### Internal

4.1 Relevant Heads of Service and Service Managers within Education and Learning have been consulted in the preparation of this report.

### External

4.2 N/A

## **5. Communication**

5.1 In the case of an initial Education Scotland inspection of a school, a public meeting is held after the publication of the inspection report with invitations going to parents, the local elected members, and members of the Learning and Families Committee. These meetings give parents, carers, and other members of the community the opportunity to discuss the findings of the

inspection and to be consulted on the areas for improvement to be taken forward.

- 5.2 Where further inspection activity is carried out, Education Scotland will report publicly to parents and stakeholders. Other continuing engagement activities undertaken by PKC will also be reported to parents and stakeholders. This includes the publication of reports to parents on Extended Learning and Achievement Visits and follow-up reports on the school's website and on each school's page on the Council's website ([www.pkc.gov.uk](http://www.pkc.gov.uk)).

## **2. BACKGROUND PAPERS**

The following background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (and not containing confidential or exempt information) were relied on to a material extent in preparing the above report:

- Education Scotland Inspection reports, published by [Education Scotland](#).
- Care Inspectorate Inspection reports, published by the [Care Inspectorate](#).

## **3. APPENDICES**

- 3.1 Appendix A: Summary of performance, services providing day care of children inspected by the Care Inspectorate

Appendix B: Overview and Comparison of Education Scotland Inspections 2016/17 - 2023/24 (to date) by Performance Indicator

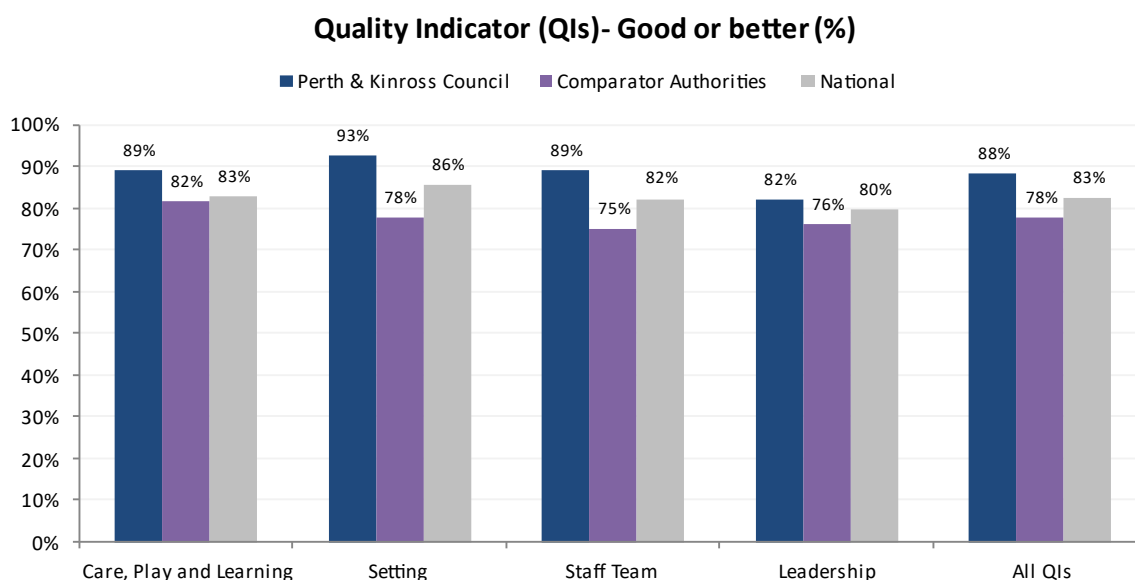


## Summary of performance<sup>1</sup>, services providing day care of children inspected by the Care Inspectorate<sup>2,3</sup>

**Table A1: Summary of performance – 2023/24 (to date)<sup>4</sup>**

| Number of services inspected = 28 |                         |             |            |                           |               |
|-----------------------------------|-------------------------|-------------|------------|---------------------------|---------------|
| Previous Themes                   | Care and Support        | Environment | Staffing   | Management and Leadership |               |
| Quality Themes                    | Care, Play and Learning | Setting     | Staff Team | Leadership                | Total         |
| <b>Excellent</b>                  | 0                       | 0           | 0          | 0                         | <b>0 0%</b>   |
| <b>Very Good</b>                  | 10                      | 14          | 19         | 13                        | <b>56 50%</b> |
| <b>Good</b>                       | 15                      | 12          | 6          | 10                        | <b>43 38%</b> |
| <b>Adequate</b>                   | 2                       | 2           | 3          | 4                         | <b>11 10%</b> |
| <b>Weak</b>                       | 1                       | 0           | 0          | 0                         | <b>1 1%</b>   |
| <b>Unsatisfactory</b>             | 0                       | 0           | 0          | 1                         | <b>1 1%</b>   |
| <b>Total</b>                      | <b>28</b>               | <b>28</b>   | <b>28</b>  | <b>28</b>                 | <b>112</b>    |

**CHART A1: Performance 2023/24: PKC, Comparator Authorities and Scotland**



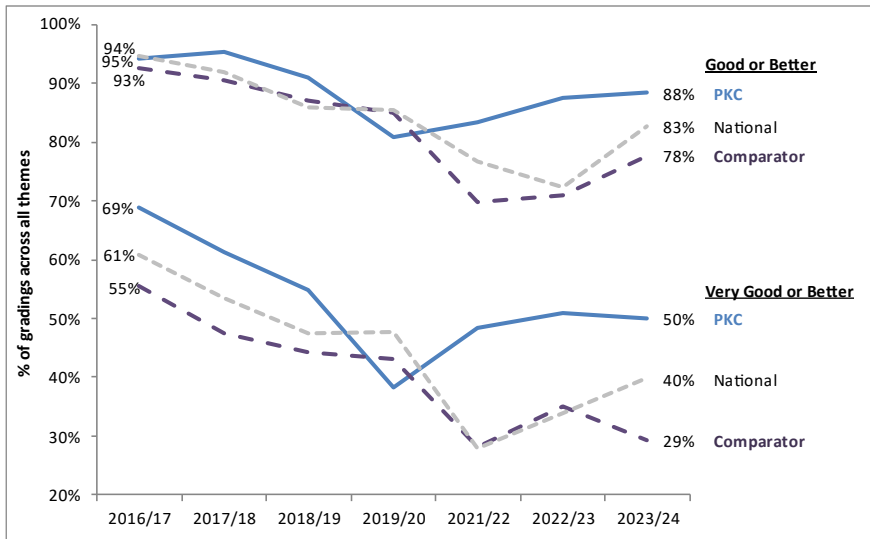
<sup>1</sup> Note that rounding of percentage figures may mean totals reported elsewhere differ slightly.

<sup>2</sup> Note that comparator and national proportions include all services for day care of children whereas Perth and Kinross figures only represent local authority and partner provider services (it is not possible to distinguish these in national statistics). It also restates previous gradings when quality themes are not assessed in every inspection.

<sup>3</sup> Comparator local authorities are Argyll and Bute, Aberdeenshire, Stirling, Scottish Borders and Highland Council. Comparator and national proportions currently available until January 2024.

<sup>4</sup> Inspected, published and reported to Learning and Families Executive Sub-Committee

## CHART A2: Performance 2016/17 to 2023/24: PKC, Comparator Authorities and Scotland



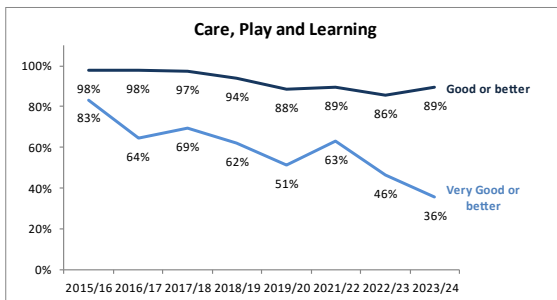
### Commentary:

National and comparator figures show PKC out-performing comparator and national benchmarks at both *Good and Better* and *Very Good or Better* levels.

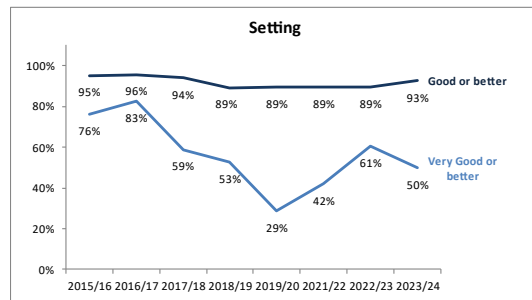
Note: Vertical axis adjusted to emphasise differences  
 \* Quality Indicators changed on 01/06/2022 by Care Inspectorate.

## CHARTS A3-6: Performance 2016/17 to 2023/24\*: PKC

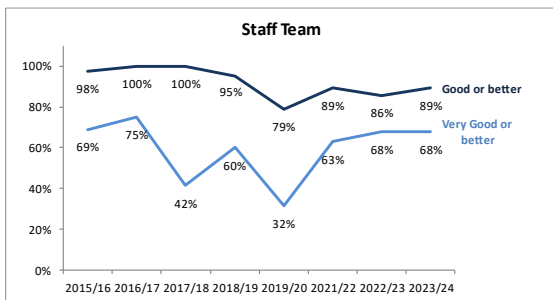
### CHART A3



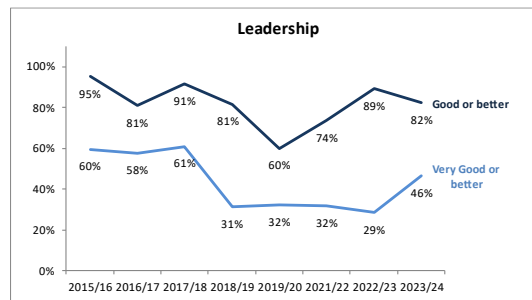
### CHART A4



### CHART A5



### CHART A6





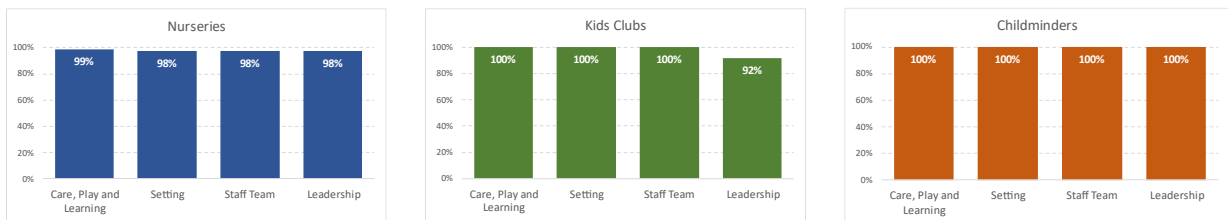
## Current Position

The charts above illustrate the aggregated individual results of inspections over several years. Some settings will be inspected more than once during this period, and some Quality Indicators are not covered in every inspection.

The accumulated result of all these inspections is the current position of all Early Learning and Childcare services in Perth & Kinross - shown in the charts below.

These summarise the proportion of settings that currently have a *Good or better* rating, based on the latest inspection for each indicator.

### CHART A7: Current Quality Ratings - PKC



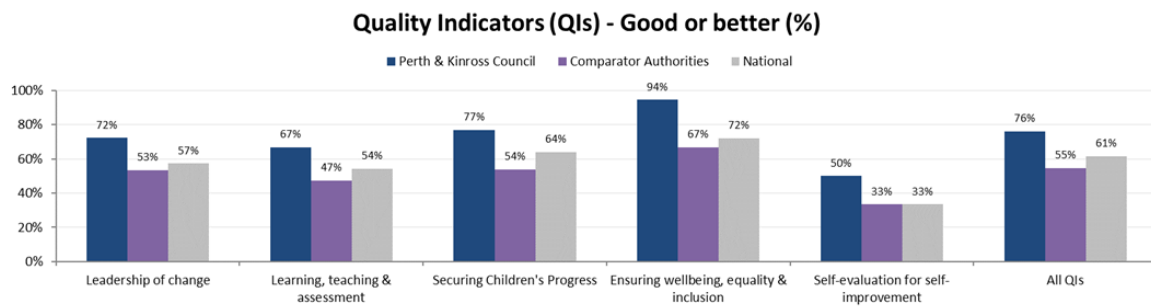


## Overview and Comparison of Education Scotland Inspections<sup>12</sup> 2016/17 – 2023/24 (to date) by Performance Indicator

**Table B1: ELC Settings Overview by Performance Indicator**

| Number of Pre-Schools inspected = 28 (2 Follow Through, 20 Full and 6 Short Inspections) |                      |                                 |                              |                                          |                                      |                        |
|------------------------------------------------------------------------------------------|----------------------|---------------------------------|------------------------------|------------------------------------------|--------------------------------------|------------------------|
| QI Grading                                                                               | Leadership of change | Learning, teaching & assessment | Securing Children's Progress | Ensuring wellbeing, equality & inclusion | Self-evaluation for self-improvement | All Quality Indicators |
| Excellent                                                                                | -                    | -                               | -                            | -                                        | -                                    | -                      |
| Very Good                                                                                | 5                    | 6                               | 7                            | 7                                        | -                                    | 25                     |
| Good                                                                                     | 8                    | 10                              | 13                           | 10                                       | 1                                    | 42                     |
| Satisfactory                                                                             | 5                    | 7                               | 3                            | 1                                        | 1                                    | 17                     |
| Weak                                                                                     | -                    | 1                               | 3                            | -                                        | -                                    | 4                      |
| Unsatisfactory                                                                           | -                    | -                               | -                            | -                                        | -                                    | -                      |
| <b>Total</b>                                                                             | <b>18</b>            | <b>24</b>                       | <b>26</b>                    | <b>18</b>                                | <b>2</b>                             | <b>88</b>              |

**Chart B1: ELC Settings Comparison by Performance Indicator**



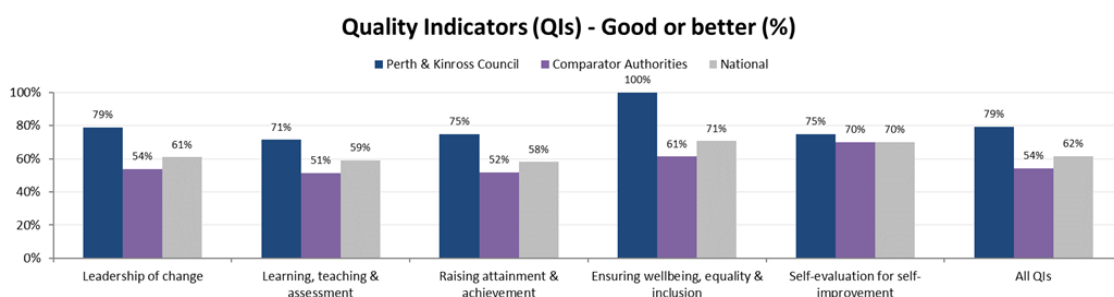
<sup>1</sup> Inspected, published and reported to Learning and Families Executive Sub-Committee

<sup>2</sup> Comparator Authorities are Argyll and Bute, Aberdeenshire, Stirling, Scottish Borders and Highland Council.

**Table B2: Primary Overview by Performance Indicator**

| Number of Primary Schools inspected = 35 (3 Follow Through, 21 Full and 11 Short Inspections) |                      |                                 |                                  |                                          |                                      |                        |
|-----------------------------------------------------------------------------------------------|----------------------|---------------------------------|----------------------------------|------------------------------------------|--------------------------------------|------------------------|
| QI Grading                                                                                    | Leadership of change | Learning, teaching & assessment | Raising attainment & achievement | Ensuring wellbeing, equality & inclusion | Self-evaluation for self-improvement | All Quality Indicators |
| Excellent                                                                                     | 1                    | -                               | -                                | 1                                        | -                                    | 2                      |
| Very Good                                                                                     | 8                    | 7                               | 11                               | 8                                        | 3                                    | 37                     |
| Good                                                                                          | 6                    | 13                              | 13                               | 10                                       | -                                    | 42                     |
| Satisfactory                                                                                  | 4                    | 7                               | 6                                | -                                        | 1                                    | 18                     |
| Weak                                                                                          | -                    | 1                               | 2                                | -                                        | -                                    | 3                      |
| Unsatisfactory                                                                                | -                    | -                               | -                                | -                                        | -                                    | -                      |
| <b>Total</b>                                                                                  | <b>19</b>            | <b>28</b>                       | <b>32</b>                        | <b>19</b>                                | <b>4</b>                             | <b>102</b>             |

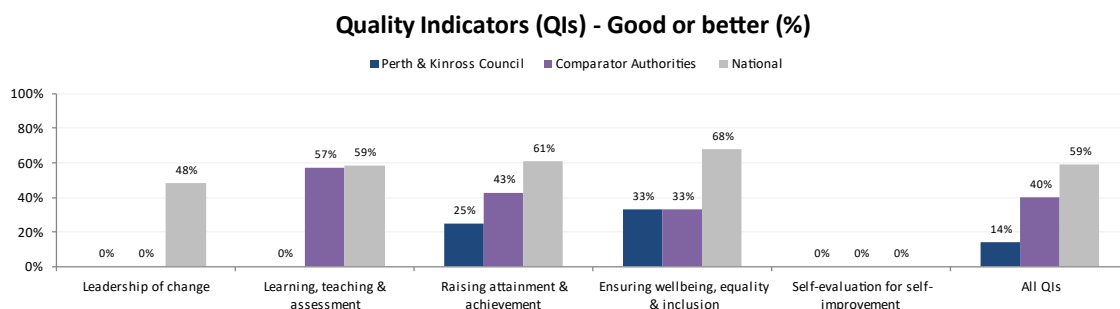
**Chart B2: Primary Comparison by Performance Indicator**



**Table B3: Secondary Overview by Performance Indicator**

| Number of Secondary Schools inspected = 5 (1 Follow Through, 3 Full and 1 Short Inspection) |                      |                                 |                                  |                                          |                                      |                        |
|---------------------------------------------------------------------------------------------|----------------------|---------------------------------|----------------------------------|------------------------------------------|--------------------------------------|------------------------|
| QI Grading                                                                                  | Leadership of change | Learning, teaching & assessment | Raising attainment & achievement | Ensuring wellbeing, equality & inclusion | Self-evaluation for self-improvement | All Quality Indicators |
| Excellent                                                                                   | -                    | -                               | -                                | -                                        | -                                    | -                      |
| Very Good                                                                                   | -                    | -                               | -                                | -                                        | -                                    | -                      |
| Good                                                                                        | -                    | -                               | 1                                | 1                                        | -                                    | 2                      |
| Satisfactory                                                                                | 3                    | 3                               | 2                                | 1                                        | -                                    | 9                      |
| Weak                                                                                        | -                    | 1                               | 1                                | 1                                        | -                                    | 3                      |
| Unsatisfactory                                                                              | -                    | -                               | -                                | -                                        | -                                    | -                      |
| <b>Total</b>                                                                                | <b>3</b>             | <b>4</b>                        | <b>4</b>                         | <b>3</b>                                 | <b>-</b>                             | <b>14</b>              |

**Chart B3: Secondary Comparison by Performance Indicator**



## Scrutiny And Performance Committee

24 April 2024

### ARMS LENGTH EXTERNAL ORGANISATIONS: UPDATE ON FINANCIAL PERFORMANCE AND BUSINESS TRANSFORMATION

#### Report by Head of Culture & Community Services

(Report No. 24/127)

#### 1. PURPOSE

- 1.1 This report summarises current live issues and risks for our three arms-length external organisations including an update on their current/projected year end 2023/24 financial positions. It also summarises work underway/planned by the ALEOs and the Council to manage these issues/risks, and future areas of focus for Scrutiny and Performance Committee in 2024/25.

#### 2. RECOMMENDATIONS

- 2.1 It is recommended that the Committee:
- **Notes** the summary of key issues/risks for each ALEO and the mitigating actions to manage these which are planned/underway
  - **Notes** the current financial position for each ALEO based on latest management accounts.

#### 3. STRUCTURE OF REPORT

- 3.1 This report is structured over the following sections:
- Section 4: Background
  - Section 5: Summary of current live issues and risks and financial summaries
  - Section 6: Conclusion
  - Appendices: Management accounts to end January 2024 (Culture Perth and Kinross) and February 2024 (Live Active Leisure, Perth Theatre and Concert Hall).

#### 4. BACKGROUND

- 4.1 Since 2016 the Council has commissioned all culture services and all sport/leisure services (except school sport) from three ALEOs. These are Culture Perth and Kinross (libraries/archives/local studies and museums/galleries); Live Active Leisure (sport/physical activity) and Perth Theatre and Concert Hall (performing arts). The total contract value of these services in 2023/24 was £8.468M. In February 2024 Council approved total budget savings of £1.03M from the 2023/24 baseline contract fees to be delivered over the next 3 years.

- 4.2 ALEOs are contractually required to submit monthly management accounts to the Council. Key variances and any mitigating action required to address financial risk are reported quarterly to Finance and Resources Committee. As part of the 2023 ALEO Transformation Review Glasgow Audit recommended that Scrutiny and Performance Committee also maintains oversight of financial and wider performance monitoring on a quarterly basis.

## **5. CURRENT ISSUES, RISKS AND MITIGATION ACTIONS**

### ***Culture Perth and Kinross***

- 5.1 On 30 March the Council and CPK opened Perth Museum as a major new cultural tourism project within the Tay Cities Region Deal, majority funded by the Council with £10M from UK Government via the Deal, and with a projected annual visitor target of 140-160,000 visits by year 3 (2026/27). Since opening Perth Museum has performed strongly; at the time of writing, it has attracted over 20,000 visits and significant international, UK and national media attention. A 6-month performance report on visitor numbers and income generation at Perth Museum, and wider considerations for CPK's future operating model in light of this data, will come to Scrutiny and Performance Committee later in 2024.
- 5.2 Due to the high level of expenditure required close to 2023/24-year end (aligned with the opening date of Perth Museum), Q4 management accounts are still being prepared. However, at end January 2024 CPK projected an end year deficit of £79,000. This is largely attributable to a backdated pay award approved by the Board in autumn 2023 to be funded through reserves for 2024/25.
- 5.3 CPK currently has £807,000 in restricted reserves and a forecasted year-end position of £183,000 in general reserves. During 2023/24 CPK has generated over £150,000 through fundraising for Perth Museum and more generally.

### ***Live Active Leisure***

- 5.4 LAL is currently focused on significant business transformation in light of several factors including ongoing plans for the PH20 redevelopment project, the redevelopment of Blair Recreation Centre which it will operate on behalf of the Council and plans to relocate services from Bell's Sports Centre to other venues in Perth following flooding at Bell's in October 2023. LAL is also responding to other factors including unplanned closures at Perth Leisure Pool largely attributable to the age of the building.
- 5.5 Further advice to Council will be provided in May 2024 and thereafter on Bell's Sports Centre including ongoing work to identify future viable options for the building. Council officers are working closely with LAL on these matters including works required at Dewars Centre to enable health and fitness facilities, which generate significant income for LAL, to re-start there by summer 2024. Engagement by LAL with affected user groups is also

underway. Council will also consider a revised scope for the PH20 project later this year.

- 5.6 LAL has a projected end year deficit of £334,000 which is an improvement against the original projection of £630,000. Customer generated income has performed well and above original expectations even allowing for service disruptions at Bell's and PLP. Utility costs and costs associated with Bell's have however contributed to the forecast deficit position.
- 5.7 LAL's reserves position is currently £5.3M of which £1.04M is general reserves, £1.7 is lifecycle/maintenance reserves and £2.5M is the insurance reserve. The remainder is held in a development reserve.

### ***Perth Theatre and Concert Hall***

- 5.8 Following the appointment of its new Chief Executive in autumn 2023 PTCH is continuing to review and refine its operating model and artistic vision with a clear focus on broadening community participation and representation within programmes, and a strengthened approach to using audience data to inform programming decisions. The current key priority is PTCH's next Multi-Year Funding application to Creative Scotland as the organisation's second core funder alongside the Council. If successful MYF will support core costs and cultural programmes for April 2025-March 2028. Outcomes will be known in October 2024. Meantime PTCH has been asked to model its 2025/26 financial position on a best/mid/worst case scenario depending on the outcome of its application.
- 5.9 PTCH is currently projecting a year end deficit of £211,000 largely attributable to implementation of a new pay award including implementation of Real Living Wage from 1 April 2024; £90,000 overspend on programme and a shortfall of £70,000 against net ticket income targets although ticket income continues to improve from previous years. Work is underway to reposition the Friends/regular donations scheme more strongly. The Perthshire Box Office initiative funded by the Council since February 2023 is now live and generating a small income and is successfully operating ticketing arrangements for the Stone of Destiny on behalf of CPK.
- 5.10 PTCH currently has £893,000 in reserves of which £396,000 is general reserves.

### ***Common issues/risks & mitigation actions***

- 5.11 As outlined above all three ALEOs are currently managing a range of issues all with ongoing strategic and delivery impact. All three will need to address significant financial pressures over the next 3 years arising from Council approved savings plus pay, property and energy costs. All three have prudent reserves strategies and provision in place but will still need to consider savings and efficiencies to ensure the services they deliver on behalf of the Council are financially sustainable and continue to adapt to changing circumstances and audience/customer needs.

- 5.12 In December 2023 Council approved all recommendations from a Transformation Review of the current ALEO delivery model. Report [23/347](#) refers. The recommendations are intended to help both the Council and the ALEOs address major financial pressures over the next 3 years and include a consolidation of corporate functions and a rationalisation of properties currently operated by the ALEOs.
- 5.13 Specific consideration of pay matters is a priority within the Transformation programme. Analysis of pay cost pressures is ongoing with the ALEOs, coordinated by the Council's HR team.
- 5.14 To inform and support transformation, the ALEOs have been asked to prepare revised business plans/transition plans for 2024/25 onwards setting out:
- Their approach to implementing savings/service reductions over the next 3 years
  - Opportunities for commercialisation of services where appropriate
  - Mitigating measures (e.g. co-location of services, partnering arrangements, community asset transfer of properties)
  - Public/stakeholder management and communications plans *and*
  - Indication of one-off costs of change including workforce management
- 5.15 Key Performance Indicators for the ALEO Service Level Agreements are also being revised to align more strongly with the Council's corporate priorities in respect of tackling poverty and inequality.
- 5.16 Alongside this work, the ALEOs are preparing their contributions to the Council's Annual Governance Statement. Key issues identified from the AGS should be used to inform the future focus of Scrutiny and Performance Committee in scrutinising the strategic risks in relation to the ALEOs. Alongside updates on implementation of the Transformation programme, these may include:
- Procurement policies & practice
  - Board governance and accountability
  - Cybersecurity policies & practice
  - Community engagement and use of customer/audience data to inform services and programmes.

## **6. CONCLUSIONS**

- 6.1 This report outlines current live issues, risks, mitigating measures and the financial positions of our three ALEOs.



**Author**

| <b>Name</b>     | <b>Designation</b>                   | <b>Contact Details</b>                                                                               |
|-----------------|--------------------------------------|------------------------------------------------------------------------------------------------------|
| Fiona Robertson | Head of Culture & Community Services | (01738) 475000<br><a href="mailto:ComCommitteeReports@pkc.gov.uk">ComCommitteeReports@pkc.gov.uk</a> |

**Approved**

| <b>Name</b>      | <b>Designation</b>                              | <b>Date</b>   |
|------------------|-------------------------------------------------|---------------|
| David Littlejohn | Strategic Lead, Economy, Development & Planning | 15 April 2024 |

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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> |
|-----------------------------------------------------|-------------------|
| Local Outcomes Improvement Plan                     | <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>None</b>       |
| Risk                                                | <b>Yes</b>        |
| <b>Consultation</b>                                 |                   |
| Internal                                            | <b>None</b>       |
| External                                            | <b>None</b>       |
| <b>Communication</b>                                |                   |
| Communications Plan                                 | <b>Yes</b>        |

### 1. Strategic Implications

#### Local Outcomes Improvement Plan

1.1 This Review impacts on the following aspects of the Local Outcomes Improvement Plan

- (i) Poverty and cost of living
- (ii) Mental and physical wellbeing

#### Corporate Plan

1.2 This Review impacts on the following priorities within the Council's Corporate Plan:

Corporate Plan Priority: Developing a resilient, stronger and greener local economy - Perth & Kinross Council ([pkc.gov.uk](http://pkc.gov.uk))

Corporate Plan Priority: Tackling climate change and supporting sustainable places

Corporate Plan Priority: Enabling our children and young people to achieve their full potential

Corporate Plan Priority: Supporting and promoting physical and mental wellbeing

## 2. Resource Implications

### Financial

2.1 There are no immediate financial implications to this report.

### Workforce

2.2 There are no immediate workforce implications to this report.

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

2.3 The asset management implications are contained within the report.

## 3. Assessments

3.1 The report has been considered under the Corporate Equalities Impact Assessment process (EqIA) with the following outcome:

- (i) Assessed as **not relevant** for the purposes of EqIA. Equalities Impact Assessments will be prepared for any consolidation/disinvestment recommendations if approved.

### 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.

3.3 The report has been considered under the Act and, no action is required as the Act does not apply to the matters presented in this report. This is because the Committee are requested to note the contents of the report only and the Committee are not being requested to approve, adopt or agree to an action or to set the framework for future decisions.

### 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. Under the Climate Change (Scotland) Act 2009 the Council also has a duty relating to climate change and, in exercising its functions must act:

- in the way best calculated to delivery of the Act's emissions reduction targets;
- in the way best calculated to deliver any statutory adaptation programmes; and
- in a way that it considers most sustainable.

- 3.5 If approved the recommendations from this report will support the Council's discharging of its duties in relation to the Act.

Legal and Governance

- 3.6 There are no immediate legal and governance implications to this report.

Risk

- 3.7 Strategic risks in relation to the ALEOs are assessed and managed based on the Council's Annual Governance Statement.

**4. Consultation**

Internal

- 4.1 The Strategic Lead, Finance and Business Resources, Strategic Lead, Economy Planning & Place and Corporate HR Manager have been consulted in the preparation of this report.

External

- 4.2 Culture Perth and Kinross, Perth Theatre and Concert Hall and Live Active Leisure have been consulted in the preparation of this report.

**5. Communication**

- 5.1 Not applicable.

**2. BACKGROUND PAPERS**

- 2.1 Appendices: Management accounts to January/February 2024

**Culture Perth and Kinross Limited**  
**Financial Summary - 31st Jan 2024**

**Profit & Loss Summary:**

|                          | 2023/24<br>Budget | Budget to<br>January | Actual to<br>January | Variance vs budget | Year End<br>Forecast |
|--------------------------|-------------------|----------------------|----------------------|--------------------|----------------------|
| <b>CHARITY:</b>          |                   |                      |                      |                    |                      |
| Total Income             | 3,557,920         | 2,949,933            | 3,031,430            | 81,497             | 3,649,646            |
| Total Expenditure        | 3,586,455         | 2,965,385            | 3,082,792            | 117,406            | 3,736,516            |
| <b>Surplus/(Deficit)</b> | <b>(28,535)</b>   | <b>(15,452)</b>      | <b>(51,362)</b>      | <b>(35,910)</b>    | <b>(86,870)</b>      |
| <b>TRADING:</b>          |                   |                      |                      |                    |                      |
| Total Income             | 110,507           | 92,089               | 85,709               | (6,380)            | 106,407              |
| Total Expenditure        | 97,637            | 81,364               | 74,920               | 6,444              | 98,335               |
| <b>Surplus/(Deficit)</b> | <b>25,764</b>     | <b>10,725</b>        | <b>10,789</b>        | <b>64</b>          | <b>8,072</b>         |

**Reserves**

|                     | Position at 31st Jan 24 | Year end forecast position |
|---------------------|-------------------------|----------------------------|
| <b>CHARITY:</b>     | £                       | £                          |
| Unrestricted        | 418,614                 | 331,744 *                  |
| Designated          | 198,655                 | 198,974                    |
| Restricted (grants) | 190,266                 | 358,435                    |
| <b>TRADING:</b>     |                         |                            |
| Reserves            | 33,998                  | 31,281                     |

\* £200k of unrestricted funds allocated to underwriting Perth Museum Fundraising

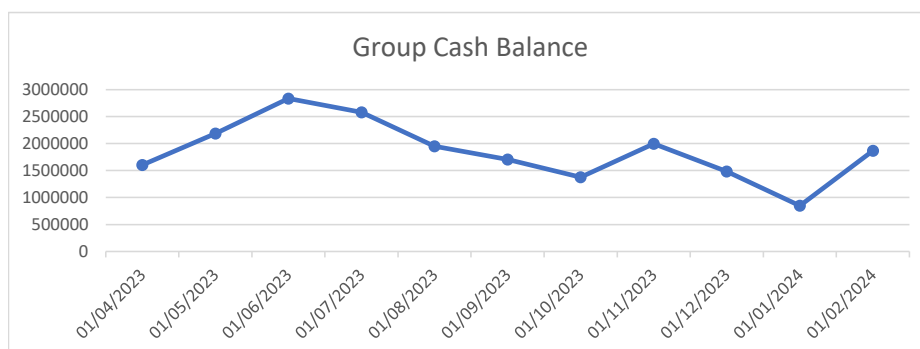
**Income Sources to 31st January 2024:**

|                                    | £                |     |
|------------------------------------|------------------|-----|
| Perth & Kinross Council SLA        | 2,826,763        | 77% |
| Restricted Income (Grants)         | 575,552          | 16% |
| Other Internally Generated         | 191,609          | 5%  |
| Bank Interest                      | 72,367           | 2%  |
| Unrestricted Fundraising/Donations | 26,400           | 1%  |
| <b>Total Income to 31st Dec'23</b> | <b>3,692,691</b> |     |

**Expenditure to 31st January 2024:**

|                                         | £                |     |
|-----------------------------------------|------------------|-----|
| Staffing                                | 2,533,467        | 59% |
| Restricted Expenditure (Grants)         | 1,143,721        | 27% |
| Supplies & Services                     | 356,063          | 8%  |
| Property                                | 67,026           | 2%  |
| Transport                               | 83,420           | 2%  |
| Trading Company                         | 74,920           | 2%  |
| Governance                              | 41,737           | 1%  |
| Finance                                 | 1,079            | 0%  |
| <b>Total Expenditure to 31st Jan'24</b> | <b>4,301,433</b> |     |

**Group Cash Balance:**



**Culture Perth and Kinross Limited**  
**Unrestricted Profit and Loss to 31 January 2024**

|                                                     | <u>2023/24</u>                     |                                 |                                    | <u>Actual to</u><br><u>January</u> | <u>Variance</u>  | <u>Comments</u>                                  |
|-----------------------------------------------------|------------------------------------|---------------------------------|------------------------------------|------------------------------------|------------------|--------------------------------------------------|
|                                                     | <u>Projected</u><br><u>Outturn</u> | <u>2023/24</u><br><u>Budget</u> | <u>Budget to</u><br><u>January</u> |                                    |                  |                                                  |
| <b>Income</b>                                       |                                    |                                 |                                    |                                    |                  |                                                  |
| <i>Donations and Legacies</i>                       |                                    |                                 |                                    |                                    |                  |                                                  |
| General Donations                                   | 17,438                             | 17,438                          | 14,532                             | 13,650                             | (882)            | PM patrons income in restricted                  |
| Fundraising Income                                  | 15,000                             | 15,000                          | 12,500                             | 12,750                             | 250              |                                                  |
|                                                     | 32,438                             | 32,438                          | 27,032                             | 26,400                             | (632)            |                                                  |
| <i>Income from charitable activities</i>            |                                    |                                 |                                    |                                    |                  |                                                  |
| Prison Reading Service                              | 13,170                             | 13,170                          | 10,975                             | 10,677                             | (298)            |                                                  |
| Archives/Local Family History                       | 750                                | 1,000                           | 833                                | 614                                | (219)            |                                                  |
| Miscellaneous Income                                | 56,506                             | 14,687                          | 12,239                             | 48,584                             | 36,345           | Includes FGIC income                             |
| Event/Exhibition Ticket Sales including art classes | 15,000                             | 20,000                          | 16,667                             | 12,311                             | (4,356)          | Cost of living impacting on additional spend     |
| PKC Service Fee                                     | 3,392,116                          | 3,392,116                       | 2,826,763                          | 2,826,763                          | (0)              |                                                  |
|                                                     | 3,477,542                          | 3,440,973                       | 2,867,478                          | 2,898,949                          | 31,472           |                                                  |
| <i>Investment Income</i>                            |                                    |                                 |                                    |                                    |                  |                                                  |
| Bank Interest                                       | 81,367                             | 25,000                          | 20,833                             | 72,367                             | 51,534           |                                                  |
|                                                     | 81,367                             | 25,000                          | 20,833                             | 72,367                             | 51,534           |                                                  |
| <i>Other Income</i>                                 |                                    |                                 |                                    |                                    |                  |                                                  |
| Museum and Galleries Tax Relief                     | 18,000                             | 18,000                          | 0                                  | 0                                  | 0                |                                                  |
| Library Charges (book requests/lost tickets)        | 1,000                              | 1,760                           | 1,467                              | 832                                | (635)            |                                                  |
| Makerspace                                          | 300                                | 750                             | 625                                | 208                                | (417)            |                                                  |
| Book Groups                                         | 2,500                              | 2,500                           | 2,083                              | 2,263                              | 180              |                                                  |
| Recharge to Trading                                 | 36,499                             | 36,499                          | 30,416                             | 30,416                             | 0                |                                                  |
| Shorts/Overs                                        | 0                                  | 0                               | 0                                  | (5)                                | (5)              |                                                  |
|                                                     | 58,299                             | 59,509                          | 34,591                             | 33,714                             | (877)            |                                                  |
| <b>TOTAL INCOME</b>                                 | <b>3,649,646</b>                   | <b>3,557,920</b>                | <b>2,949,933</b>                   | <b>3,031,430</b>                   | <b>81,497</b>    |                                                  |
| <b>Expenditure</b>                                  |                                    |                                 |                                    |                                    |                  |                                                  |
| <i>Staff Costs</i>                                  |                                    |                                 |                                    |                                    |                  |                                                  |
| Salary Costs - including NI/Pensions                | 2,913,869                          | 2,765,019                       | 2,304,183                          | 2,428,224                          | (124,042)        | Backdated pay award paid in Dec 23               |
| Supply Staff                                        | 56,585                             | 70,000                          | 58,333                             | 47,154                             | 11,179           |                                                  |
| Consultancy                                         | 70,000                             | 70,000                          | 23,333                             | 30,437                             | (7,104)          |                                                  |
| Training                                            | 15,000                             | 12,000                          | 10,000                             | 13,618                             | (3,618)          | Further costs in last Q for new PM staff         |
| Recruitment                                         | 12,750                             | 2,000                           | 1,667                              | 12,321                             | (10,654)         | includes Head of Finance recruitment             |
| Disclosure Scotland                                 | 2,000                              | 1,000                           | 833                                | 1,713                              | (880)            | Further costs in last Q for new PM staff         |
|                                                     | 3,070,204                          | 2,920,019                       | 2,398,349                          | 2,533,467                          | (135,118)        |                                                  |
| <i>Property Costs</i>                               |                                    |                                 |                                    |                                    |                  |                                                  |
| Rent                                                | 8,017                              | 8,017                           | 6,681                              | 6,681                              | (0)              | Birnam Library rent                              |
| Property Maintenance                                | 13,000                             | 13,000                          | 10,833                             | 10,659                             | 174              |                                                  |
| Cleaning                                            | 60,585                             | 60,585                          | 50,488                             | 49,686                             | 802              |                                                  |
|                                                     | 81,602                             | 81,602                          | 68,002                             | 67,026                             | 976              |                                                  |
| <i>Supplies &amp; Services</i>                      |                                    |                                 |                                    |                                    |                  |                                                  |
| Library supplies (books, periodicals, newspapers)   | 75,000                             | 75,000                          | 62,500                             | 62,792                             | (292)            | Spend weighted towards year end                  |
| Equipment & Materials                               | 22,500                             | 17,000                          | 14,167                             | 18,498                             | (4,331)          | includes Perth Museum spend                      |
| Health & Safety Materials                           | 6,000                              | 6,000                           | 5,000                              | 4,604                              | 396              |                                                  |
| Printing, Stationery, Photocopying and postage      | 10,000                             | 9,000                           | 7,500                              | 6,645                              | 855              |                                                  |
| Computer and IT costs                               | 70,000                             | 70,000                          | 58,333                             | 48,866                             | 9,467            |                                                  |
| Telephone Costs                                     | 5,000                              | 5,000                           | 4,167                              | 4,409                              | (242)            |                                                  |
| Marketing                                           | 23,000                             | 20,000                          | 16,667                             | 21,447                             | (4,780)          |                                                  |
| Events                                              | 20,000                             | 20,000                          | 16,667                             | 16,657                             | 10               | Events planned for last quarter                  |
| Depreciation Charge                                 | 8,000                              | 10,000                          | 8,333                              | 6,562                              | 1,771            |                                                  |
| Licences & Subscriptions                            | 73,000                             | 69,000                          | 57,500                             | 67,290                             | (9,790)          |                                                  |
| Exhibitions                                         | 40,000                             | 40,000                          | 33,333                             | 26,415                             | 6,918            | Spend weighted towards year end                  |
| Insurance                                           | 35,000                             | 33,000                          | 27,500                             | 28,905                             | (1,405)          |                                                  |
| Other Fees                                          | 20,000                             | 11,000                          | 9,167                              | 18,637                             | (9,470)          |                                                  |
| Irrecoverable VAT                                   | 0                                  | 4,100                           | 3,417                              | 0                                  | 3,417            |                                                  |
| Fundraising Costs                                   | 20,000                             | 20,000                          | 16,667                             | 16,653                             | 14               | includes Perth Museum fundraising costs & assets |
| Other Expenses                                      | 10,000                             | 10,000                          | 8,333                              | 7,683                              | 650              |                                                  |
|                                                     | 437,500                            | 419,100                         | 349,250                            | 356,063                            | (6,813)          |                                                  |
| <i>Transport Costs</i>                              |                                    |                                 |                                    |                                    |                  |                                                  |
| Fuel                                                | 12,000                             | 24,000                          | 20,000                             | 8,536                              | 11,464           | Reduction due to removal of 1 vehicle            |
| Lease                                               | 72,000                             | 82,000                          | 80,006                             | 70,700                             | 9,306            |                                                  |
| Subsistence                                         | 250                                | 250                             | 208                                | 26                                 | 182              |                                                  |
| Travel Costs                                        | 5,000                              | 9,000                           | 7,500                              | 4,158                              | 3,342            |                                                  |
|                                                     | 89,250                             | 115,250                         | 107,715                            | 83,420                             | 24,295           |                                                  |
| <i>Finance Costs</i>                                |                                    |                                 |                                    |                                    |                  |                                                  |
| Bank Charges                                        | 1,600                              | 1,600                           | 1,333                              | 1,079                              | 254              |                                                  |
|                                                     | 1,600                              | 1,600                           | 1,333                              | 1,079                              | 254              |                                                  |
| <i>Governance Expenses</i>                          |                                    |                                 |                                    |                                    |                  |                                                  |
| Accountancy Fees                                    | 10,000                             | 6,774                           | 5,645                              | 5,645                              | 0                | includes finance support costs                   |
| Audit Fees                                          | 10,000                             | 6,750                           | 5,625                              | 5,625                              | (0)              | Audit accrual                                    |
| Health & Safety Advice                              | 9,975                              | 9,975                           | 8,313                              | 8,313                              | 0                |                                                  |
| Employment Law                                      | 8,825                              | 8,825                           | 7,354                              | 7,354                              | 0                |                                                  |
| HR Software                                         | 5,760                              | 5,760                           | 4,800                              | 4,800                              | 0                | Bright HR software                               |
| Payroll                                             | 11,800                             | 10,800                          | 9,000                              | 10,000                             | (1,000)          | Includes one off set up costs                    |
|                                                     | 56,360                             | 48,884                          | 40,737                             | 41,737                             | (1,000)          |                                                  |
| <b>TOTAL EXPENDITURE</b>                            | <b>3,736,516</b>                   | <b>3,586,455</b>                | <b>2,965,385</b>                   | <b>3,082,792</b>                   | <b>(117,406)</b> |                                                  |
| <b>Surplus/(Deficit)</b>                            | <b>(86,870)</b>                    | <b>(28,535)</b>                 | <b>(15,452)</b>                    | <b>(51,362)</b>                    | <b>(35,910)</b>  |                                                  |

**Culture Perth and Kinross Limited**  
**Restricted Profit and Loss to 31 January 2024**

|                                            |                  |
|--------------------------------------------|------------------|
| Restricted Balance as at 1st April 2023    | 758,435          |
| Restricted Income                          | 575,552          |
| Restricted Expenditure                     | 1,143,721        |
| <b>Surplus/(Deficit)</b>                   | <b>(568,169)</b> |
| Restricted Balance as at 31st January 2024 | <b>190,266</b>   |

**Culture Perth and Kinross Limited**  
**Designated Profit and Loss to 31 January 2024**

|                                            | COVID Fund     | Library Development | Organisational Change | Perth Museum  | Total                |
|--------------------------------------------|----------------|---------------------|-----------------------|---------------|----------------------|
| Designated Balance as at 1st April 2023    | 3,822          | 60,000              | 100,000               | 63,000        | 226,822              |
| Transfers                                  | 0              | (60,000)            | 40,000                | 20,000        | 0 agreed at June FRC |
| Designated Income                          | 0              | 0                   | 0                     | 0             | 0                    |
| Designated Expenditure                     | (3,185)        | 0                   | (24,982)              | 0             | (28,167)             |
| <b>Surplus/(Deficit)</b>                   | <b>(3,185)</b> | <b>(60,000)</b>     | <b>15,018</b>         | <b>20,000</b> | <b>(28,167)</b>      |
| Designated Balance as at 31st January 2024 | <b>637</b>     | <b>0</b>            | <b>115,018</b>        | <b>83,000</b> | <b>198,655</b>       |

**Culture Perth and Kinross Limited**  
**Balance Sheet as at 31 January 2024**

|                                                  | Jan-24                  | Mar-23                  | Notes |
|--------------------------------------------------|-------------------------|-------------------------|-------|
| <b><u>Fixed Assets</u></b>                       |                         |                         |       |
| Investments                                      | 1                       | 1                       |       |
| Tangible Assets                                  | <u>56,570</u>           | <u>50,158</u>           |       |
|                                                  | 56,571                  | 50,159                  |       |
| <b><u>Current Assets</u></b>                     |                         |                         |       |
| Debtors                                          | 1,359,619               | 293,926                 |       |
| Cash                                             | <u>765,445</u>          | <u>1,913,442</u>        |       |
|                                                  | 2,125,064               | 2,207,368               |       |
| <b><u>Current Liabilities</u></b>                |                         |                         |       |
| Creditors                                        | <u>(1,109,099)</u>      | <u>(537,294)</u>        |       |
| <b><u>Net Current Assets / (Liabilities)</u></b> | 1,015,965               | 1,670,074               |       |
| <b><u>Pension Liability</u></b>                  | <u>3,541,000</u>        | <u>3,541,000</u>        |       |
| Total Net Assets/(Liabilities)                   | <u><u>4,613,536</u></u> | <u><u>5,261,233</u></u> |       |
| <b><u>Represented By:</u></b>                    |                         |                         |       |
| Restricted Funds                                 | 190,266                 | 758,435                 |       |
| Unrestricted Funds                               | 418,614                 | 469,976                 |       |
| Designated Funds                                 | 198,655                 | 226,822                 |       |
| Pension Reserve                                  | <u>3,806,000</u>        | <u>3,806,000</u>        |       |
|                                                  | <u><u>4,613,536</u></u> | <u><u>5,261,233</u></u> |       |



**Culture Perth and Kinross Limited**  
**Profit and Loss Account to 31 January 2024**

| <b>Income</b>                            | <b>2023/24</b>   |                | <b>Budget to January</b> | <b>Actual to January</b> | <b>Variance</b> | <b>Comments</b>                              |
|------------------------------------------|------------------|----------------|--------------------------|--------------------------|-----------------|----------------------------------------------|
|                                          | <b>Projected</b> | <b>2023/24</b> |                          |                          |                 |                                              |
|                                          | <b>Outturn</b>   | <b>Budget</b>  |                          |                          |                 |                                              |
| Venue Hire including catering            | 45,107           | 45,107         | 37,589                   | 37,260                   | (329)           | Venue hire picks up last Q of financial year |
| Retail Sales                             | 28,000           | 33,000         | 27,500                   | 20,833                   | (6,667)         | PAG sales lower than budgeted                |
| Coffee Cart Sales                        | 12,500           | 12,000         | 10,000                   | 10,408                   | 408             |                                              |
| Photocopying Charges                     | 11,000           | 11,000         | 9,167                    | 9,025                    | (142)           |                                              |
| Charges -images, copyright, postages etc | 1,500            | 2,000          | 1,667                    | 1,164                    | (503)           |                                              |
| Misc Income- book sales etc              | 6,000            | 7,000          | 5,833                    | 5,331                    | (502)           |                                              |
| Bank Interest received                   | 2,300            | 400            | 333                      | 1,688                    | 1,355           |                                              |
| <b>TOTAL INCOME</b>                      | <b>106,407</b>   | <b>110,507</b> | <b>92,089</b>            | <b>85,709</b>            | <b>(6,380)</b>  |                                              |
| <b>Expenditure</b>                       |                  |                |                          |                          |                 |                                              |
| Recharge from Charity                    | 36,499           | 36,499         | 30,416                   | 30,416                   | (0)             |                                              |
| Coffee Cart Stock                        | 8,500            | 5,208          | 4,340                    | 4,566                    | (226)           |                                              |
| Catering for Venue Hire                  | 8,000            | 11,994         | 9,995                    | 9,079                    | 916             |                                              |
| Cost of Retail Goods                     | 24,444           | 24,444         | 20,370                   | 13,652                   | 6,718           |                                              |
| Licences & Subscriptions                 | 6,185            | 6,185          | 5,154                    | 3,893                    | 1,261           |                                              |
| Miscellaneous                            | 2,000            | 600            | 500                      | 1,686                    | (1,186)         |                                              |
| Bank Charges                             | 3,100            | 3,100          | 2,583                    | 2,708                    | (125)           |                                              |
| Irrecoverable VAT                        | 100              | 100            | 83                       | 0                        | 83              |                                              |
| Accountancy Fees                         | 4,557            | 4,557          | 3,798                    | 4,395                    | (598)           |                                              |
| Audit Fees                               | 4,950            | 4,950          | 4,125                    | 4,525                    | (400)           |                                              |
| <b>TOTAL EXPENDITURE</b>                 | <b>98,335</b>    | <b>97,637</b>  | <b>81,364</b>            | <b>74,920</b>            | <b>6,444</b>    |                                              |
| <b>Surplus/(Deficit)</b>                 | <b>8,072</b>     | <b>25,764</b>  | <b>10,725</b>            | <b>10,789</b>            | <b>64</b>       |                                              |

**Culture Perth and Kinross Limited**  
**Balance Sheet as at 31 January 2024**

|                                          | Jan-24               | Mar-23               |
|------------------------------------------|----------------------|----------------------|
| <b><u>Fixed Assets</u></b>               |                      |                      |
| Tangible Assets                          | <u>1</u>             | <u>1</u>             |
| <b><u>Current Assets</u></b>             |                      |                      |
| Stock                                    | 36,082               | 26,145               |
| Debtors                                  | 6,842                | 10,755               |
| Cash                                     | <u>87,202</u>        | <u>41,808</u>        |
|                                          | 130,126              | 78,709               |
| <b><u>Current Liabilities</u></b>        |                      |                      |
| Creditors                                | <u>(96,129)</u>      | <u>(55,500)</u>      |
| <b><u>Net Assets / (Liabilities)</u></b> |                      |                      |
|                                          | <u><u>33,998</u></u> | <u><u>23,209</u></u> |
| <br><b><u>Represented By:</u></b>        |                      |                      |
| Called Up Share Capital                  | 1                    | 1                    |
| Reserves                                 | <u>33,997</u>        | <u>23,208</u>        |
|                                          | <u><u>33,998</u></u> | <u><u>23,209</u></u> |

## Live Active Leisure Group Summary (excluding funded activity) February 2024 - Highlights

### Notes

- \* Due to the timing of the Finance and Governance meeting, it is not possible to have the full draft figures for February 24. Whilst the income can be fairly accurate, the expenditure has still to be recorded. The budget figures for the month have been used as a prudent alternative.
  
- \* Customer generated income was 86% of budget for February 24. YTD it has decreased to 99% of budget. The increased income in the first six months of the fiscal year has compensated for the loss of income in the last five months with 99% of YTD income achieved with just one month until the end of the year. All venue usages for February 24 were 84k, compared with 110k for the same period in the previous year.
  
- \* Casual swimming income at Perth Leisure Pool for February is 81% of February 23. Usage for the venue was 24k compared to 30k for the same period in the previous year. Olympia in Dundee has been partially closed since early February.
  
- \* During February 24 there was a net member loss of 145. At the end of the month we had 2,588 members, 72% of our pre-flood level at the start of October 2023. Membership income has stabilised at £72k, again at 67% of the pre-flood level.
  
- \* The PKC contract fee for February was reduced by approximately £7.5k. This was to account for a repayment to SportsScotland relating to an underspend of grant income on 2022/23. Other income includes £34k of bank interest.
  
- \* Budget figures have been used for all expenditure categories. As most of the categories have been underspent YTD, it is possible that these costs are inflated.
  
- \* Based on the draft position to February 24, the company is still performing ahead of the fiscal year budget deficit of -£630k. Year to date we have a deficit of -£339k against a budgeted deficit of -£711k. This position is in line with our forecast deficit for the year end of -£334k used for the budget process.

LAL excluding funded activities

| Income                          | April          | May             | June            | July            | August          | September        | October           | November        | December        | January        | February       |                | YTD              |                  | February            | YTD                 |
|---------------------------------|----------------|-----------------|-----------------|-----------------|-----------------|------------------|-------------------|-----------------|-----------------|----------------|----------------|----------------|------------------|------------------|---------------------|---------------------|
|                                 | £              | £               | £               | £               | £               | £                | £                 | £               | £               | £              | Draft          | Budget         | Total            | Budget           | %age against Budget | %age against Budget |
| Pay and Play / Bookings income  | 189,425        | 139,982         | 179,773         | 139,350         | 140,462         | 154,994          | 133,905           | 150,760         | 125,600         | 159,168        | 175,365        |                | 1,688,784        |                  |                     |                     |
| Casual Swimming Income PLP only | 97,419         | 64,358          | 53,764          | 160,157         | 118,275         | 63,844           | 57,873            | 28,561          | 27,534          | 50,111         | 61,499         |                | 783,395          |                  |                     |                     |
| Membership income - DD          | 95,132         | 101,864         | 98,344          | 99,510          | 102,626         | 107,621          | 102,784           | 87,529          | 78,015          | 71,645         | 71,650         |                | 1,016,719        |                  |                     |                     |
| Swimming lesson income - DD     | 55,181         | 60,660          | 60,380          | 60,720          | 60,300          | 64,645           | 61,761            | 61,524          | 61,435          | 58,487         | 60,998         |                | 666,092          |                  |                     |                     |
| Total customer generated Income | 437,157        | 366,864         | 392,261         | 459,737         | 421,663         | 391,104          | 356,323           | 328,374         | 292,584         | 339,411        | 369,512        | 425,276        | 4,154,990        | 4,215,511        | 87%                 | 99%                 |
| PKC Contract                    | 398,278        | 398,278         | 398,278         | 398,279         | 398,279         | 398,279          | 398,279           | 398,279         | 398,279         | 398,279        | 390,777        | 398,278        | 4,373,563        | 4,381,063        | 98%                 | 100%                |
| Other                           | 19,534         | 12,660          | 20,826          | 27,232          | 35,500          | 25,217           | 22,081            | 25,532          | 20,227          | 35,188         | 38,597         | 6,875          | 282,594          | 162,562          | 561%                | 174%                |
| <b>Total Income</b>             | <b>854,969</b> | <b>777,802</b>  | <b>811,365</b>  | <b>885,248</b>  | <b>855,442</b>  | <b>814,600</b>   | <b>776,683</b>    | <b>752,185</b>  | <b>711,090</b>  | <b>772,878</b> | <b>798,886</b> | <b>830,429</b> | <b>8,811,147</b> | <b>8,759,136</b> | 96%                 | 101%                |
| <b>Expenditure</b>              |                |                 |                 |                 |                 |                  |                   |                 |                 |                |                |                |                  |                  |                     |                     |
| Staff Costs                     | 552,738        | 545,343         | 547,628         | 568,695         | 568,710         | 519,214          | 542,924           | 528,958         | 526,829         | 520,082        | 544,973        | 544,973        | 5,966,094        | 6,243,633        | 100%                | 96%                 |
| Supplies & Services             | 45,262         | 71,695          | 115,779         | 72,337          | 70,118          | 137,087          | 74,820            | 68,807          | 99,996          | 40,652         | 78,450         | 78,450         | 875,003          | 931,749          | 100%                | 94%                 |
| Property costs                  | 71,771         | 84,730          | 99,303          | 68,584          | 67,411          | 248,239          | 73,183            | 71,172          | 99,593          | 75,470         | 79,557         | 79,557         | 1,039,013        | 1,208,293        | 100%                | 86%                 |
| Utilities                       | 104,693        | 97,780          | 91,692          | 83,993          | 91,551          | 113,504          | 112,033           | 129,240         | 119,713         | 136,002        | 134,647        | 134,647        | 1,214,848        | 1,086,005        | 100%                | 112%                |
| Bell's Centre Flood Costs       |                |                 |                 |                 |                 |                  | 22,266            | 28,699          | 4,283           | 231            |                |                | 55,479           |                  |                     |                     |
| <b>Total Expenditure</b>        | <b>774,464</b> | <b>799,548</b>  | <b>854,402</b>  | <b>793,609</b>  | <b>797,790</b>  | <b>1,018,044</b> | <b>825,226</b>    | <b>826,876</b>  | <b>850,414</b>  | <b>772,437</b> | <b>837,627</b> | <b>837,627</b> | <b>9,150,437</b> | <b>9,469,680</b> | 100%                | 97%                 |
| <b>Surplus/-Deficit</b>         | <b>80,505</b>  | <b>-21,746</b>  | <b>-43,037</b>  | <b>91,639</b>   | <b>57,652</b>   | <b>-203,444</b>  | <b>-48,543</b>    | <b>-74,691</b>  | <b>-139,324</b> | <b>441</b>     | <b>-38,741</b> | <b>-7,198</b>  | <b>-339,290</b>  | <b>-710,544</b>  |                     |                     |
| 22-23 Operating Income          | <b>333,828</b> | <b>291,984</b>  | <b>290,917</b>  | <b>330,852</b>  | <b>329,093</b>  | <b>316,925</b>   | <b>377,610</b>    | <b>446,620</b>  | <b>313,731</b>  | <b>361,489</b> | <b>394,048</b> |                | <b>3,787,097</b> |                  |                     |                     |
|                                 | 131%           | 126%            | 135%            | 139%            | 128%            | 123%             | 94%               | 74%             | 93%             | 94%            | 94%            |                | 110%             |                  |                     |                     |
| 22-23 Surplus/ -Deficit         | <b>-25,324</b> | <b>-153,014</b> | <b>-260,600</b> | <b>-226,635</b> | <b>-119,928</b> | <b>-132,282</b>  | <b>-106,296</b>   | <b>-136,582</b> | <b>-105,863</b> | <b>-15,433</b> | <b>7,328</b>   |                | <b>-609,971</b>  |                  |                     |                     |
|                                 | -318%          | 14%             | 17%             | -40%            | -48%            | 154%             | 46%               | 55%             | 132%            | -3%            | -529%          |                | 56%              |                  |                     |                     |
| 19-20 Operating Income          | <b>438,182</b> | <b>428,911</b>  | <b>339,492</b>  | <b>366,817</b>  | <b>390,674</b>  | <b>436,625</b>   | <b>417,921.00</b> | <b>404,781</b>  | <b>343,884</b>  | <b>423,998</b> | <b>456,433</b> |                | <b>4,441,745</b> |                  |                     |                     |
|                                 | 100%           | 86%             | 116%            | 125%            | 108%            | 90%              | 85%               | 81%             | 85%             | 80%            | 81%            |                | 94%              |                  |                     |                     |
| 19-20 Surplus/ -Deficit         | <b>107,913</b> | <b>56,765</b>   | <b>-107,120</b> | <b>-56,519</b>  | <b>35,386</b>   | <b>61,828</b>    | <b>-5,492</b>     | <b>-12,748</b>  | <b>-199,823</b> | <b>39,985</b>  | <b>42,724</b>  |                | <b>36,514</b>    |                  |                     |                     |
|                                 | 75%            | -38%            | 40%             | -162%           | 163%            | -329%            | 884%              | 586%            | 70%             | 1%             | -91%           |                | -929%            |                  |                     |                     |

## Perth Theatre and Concert Hall

| PTCH I&E                        | Feb-24         |                |                 | Feb-23          |                 |
|---------------------------------|----------------|----------------|-----------------|-----------------|-----------------|
|                                 | Budget         | Actual         | Variance        | Actual          | Variance        |
| <b>Income</b>                   |                |                |                 |                 |                 |
| Creative Scotland funding       | 44,500         | 44,444         | (56)            | 133,334         | (88,890)        |
| Trusts and foundations          | 22,000         | 29,183         | 7,183           | 7,092           | 22,091          |
| PKC SLA                         | 88,540         | 88,540         | 0               | 88,540          | 0               |
| External Job funding            | 0              | 0              | 0               | 0               | 0               |
| (Net) Ticket income             | 116,798        | 107,045        | (9,753)         | 13,471          | 93,574          |
| PBO                             | 0              | 1,618          | 1,618           | 0               | 1,618           |
| Rental Income                   | 18,667         | 42,958         | 24,291          | 3,600           | 39,358          |
| Learning & engagement           | 3,000          | 3,628          | 628             | 7,924           | (4,296)         |
| Fundraising/sponsorship         | 6,642          | 5,725          | (917)           | 3,657           | 2,068           |
| Initiatives                     | 0              | 0              | 0               | 0               | 0               |
| Theatre Tax Relief              | 0              | 0              | 0               | 0               | 0               |
| Other Income                    | 3,332          | 2,963          | (368)           | 0               | 2,963           |
| Commercial GP                   | 43,311         | 48,916         | 5,605           | 6,506           | 42,410          |
| <b>Total Income</b>             | <b>346,790</b> | <b>375,021</b> | <b>28,231</b>   | <b>264,124</b>  | <b>110,897</b>  |
| <b>Expenditure</b>              |                |                |                 |                 |                 |
| Payroll costs                   | 196,835        | 201,823        | (4,989)         | 165,962         | (35,861)        |
| Programme costs                 | 26,612         | 77,189         | (50,577)        | 36,348          | (40,842)        |
| PBO                             | 0              | 2,731          | (2,731)         | 0               | (2,731)         |
| Utilities                       | 31,653         | 29,409         | 2,244           | 26,032          | (3,378)         |
| Rates                           | 6,108          | 6,108          | 0               | 0               | (6,108)         |
| Irrecoverable VAT               | 0              | 0              | 0               | 0               | 0               |
| Depreciation                    | 8,333          | 6,353          | 1,980           | 7,233           | 880             |
| Other costs                     | 28,908         | 26,673         | 2,235           | 60,205          | 33,533          |
| <b>Total Expenditure</b>        | <b>298,449</b> | <b>350,287</b> | <b>(51,838)</b> | <b>295,779</b>  | <b>(54,508)</b> |
| <b>Month Surplus/ (Deficit)</b> | <b>48,340</b>  | <b>24,734</b>  | <b>(23,607)</b> | <b>(31,655)</b> | <b>56,389</b>   |

### Main points to note:

**Trusts & Foundations** - Income from both The Gannochy Trust & Creative Scotland has been spread evenly over the year - in 2022-23 it was included in full in the month it was received. More funding applications have been submitted and are ongoing, including some substantial multi-year applications, with an emphasis on covering core costs in addition to project costs. An additional £10,000 was received in December from Forteviot Trust - not included here as the income relates to future periods. January includes a £25,000 grant from the Green recovery Capital fund relating to the BMS system. September includes £5,768 final payment re: the Youth Music Initiative (moved from Creative Scotland).

**Creative Scotland** - Spread evenly over the year.

**Net Ticket income** - Includes Dundee Consort, Paul Lewis, two lunchtime concerts, Jekyll & Hyde, The Time Machine Connor Burns, Jason Foxx and Rob Brydon.

**Rental Income** - Rentals included HM Royal Maries, BBC Scottish Symphony Orchestra, The Scottish Fiddle Orchestra, Rock Choir, The Famer's Choir and Scotland Sings Bacharach in Aberdeen and Edinburgh.

**Fundraising/sponsorship** - Work is being carried out to make our "Friends" regular giving scheme more attractive inc. the addition of a new Patron level, to encourage new donors and increase Gift Aid. We have also implemented our new reusable cups scheme. The income from this was £1,724 in February.

**Learning & Engagement** - Mainly block payments for classes taking place from January - March 2024.

**Other Income** - Mainly ice cream.

**Commercial GP** - Conferences this month include NHS Fusion, Scotland Improvement Districts Conference, East Young Farmers Cabaret Competition, PKC Creative Day of Dance and the Elevator Conference.

**Payroll Costs** - Most permanent posts are now filled.

**Programme Costs** - These include costs relating to PYT Antigone (approx £17k), additional design work for Perth Theatre subscription and Scotland Sings Bacharach.

**PBO** - Our PBO Manager commenced work in October 2023. Additional adaptations were required to the new web platform, which launched in January 2024, to optimise ticketing for the Stone of Destiny. Our new Ticketing Services Assistant was appointed in February.

**Depreciation** - Fewer assets have been purchased during the year so far than anticipated.

**Other costs** - YTD figures include the recruitment costs for Head of Finance & HR and Director positions. No refunds will be received relating to the HoF post. October 2023 includes £4.5k re: Director recruitment + £2.75k re: unbudgeted technical repairs. December 2023 includes a further £4.5k re: Director recruitment.

## Perth Theatre and Concert Hall

| PTCH I&E                      | FEB YTD          |                  |                  | FEB YTD          |                  |
|-------------------------------|------------------|------------------|------------------|------------------|------------------|
|                               | Budget           | Actual           | Variance         | Actual           | Variance         |
| <b>Income</b>                 |                  |                  |                  |                  |                  |
| Creative Scotland funding     | 495,268          | <b>494,657</b>   | (611)            | 775,767          | (281,110)        |
| Trusts and foundations        | 178,000          | <b>181,833</b>   | 3,833            | 162,279          | 19,554           |
| PKC SLA                       | 973,940          | <b>973,940</b>   | 0                | 885,400          | 88,540           |
| External Job funding          | 0                | <b>0</b>         | 0                | 22,975           | (22,975)         |
| (Net) Ticket income           | 1,135,112        | <b>1,065,935</b> | (69,176)         | 934,194          | 131,741          |
| PBO                           | 49,976           | <b>58,014</b>    | 8,038            | 0                | 58,014           |
| Rental Income                 | 253,078          | <b>272,700</b>   | 19,622           | 280,638          | (7,938)          |
| Learning & engagement         | 31,500           | <b>32,249</b>    | 749              | 28,177           | 4,072            |
| Fundraising/sponsorship       | 63,358           | <b>42,185</b>    | (21,173)         | 39,330           | 2,855            |
| Initiatives                   | 10,000           | <b>10,525</b>    | 525              | 30,404           | (19,879)         |
| TTR                           | 0                | <b>15,163</b>    | 15,163           | 0                | 15,163           |
| Other Income                  | 35,268           | <b>42,696</b>    | 7,428            | 0                | 42,696           |
| Commercial GP                 | 475,848          | <b>476,755</b>   | 908              | 418,317          | 58,439           |
| <b>Total Income</b>           | <b>3,701,348</b> | <b>3,666,652</b> | <b>(34,696)</b>  | <b>3,577,481</b> | <b>89,171</b>    |
| <b>Expenditure</b>            |                  |                  |                  |                  |                  |
| Payroll costs                 | 2,168,165        | <b>2,201,061</b> | (32,896)         | 1,783,385        | (417,676)        |
| Programme costs               | 698,567          | <b>752,249</b>   | (53,682)         | 877,582          | 125,333          |
| PBO                           | 51,765           | <b>35,301</b>    | 16,464           | 0                | (35,301)         |
| Utilities                     | 281,864          | <b>299,434</b>   | (17,570)         | 254,258          | (45,176)         |
| Rates                         | 67,188           | <b>67,187</b>    | 1                | 45,230           | (21,957)         |
| Irrecoverable VAT             | 97,500           | <b>83,870</b>    | 13,630           | 78,407           | (5,463)          |
| Depreciation                  | 91,667           | <b>74,641</b>    | 17,025           | 75,538           | 897              |
| Other costs                   | 375,962          | <b>394,050</b>   | (18,087)         | 355,332          | (38,718)         |
| <b>Total Expenditure</b>      | <b>3,832,678</b> | <b>3,907,793</b> | <b>(75,115)</b>  | <b>3,469,732</b> | <b>(438,061)</b> |
| <b>YTD Surplus/ (Deficit)</b> | <b>(131,330)</b> | <b>(241,141)</b> | <b>(109,811)</b> | <b>107,749</b>   | <b>(348,890)</b> |





## PERTH AND KINROSS COUNCIL

### Scrutiny and Performance Committee

24 April 2024

#### PERTH AND KINROSS HEALTH & SOCIAL CARE PARTNERSHIP (HSCP) CLINICAL AND CARE GOVERNANCE ASSURANCE REPORT

Jacque Pepper, Chief Officer, Perth and Kinross HSCP  
(Report No. 24/128)

#### 1. PURPOSE OF REPORT

- 1.1 This purpose of this report is to provide assurance to Perth & Kinross Council's Scrutiny and Performance Committee on the Clinical Care and Professional Governance of the Perth and Kinross HSCP.

#### 2. REPORT SUMMARY

##### 2.1 Situation

This report is being brought to the meeting to provide assurance on the clinical and care governance activities and arrangements across the Partnership as outlined in the Getting It Right For Everyone (GIRFE) Framework in accordance with the Partnership integration scheme. Clinical Governance is a statutory requirement to report on, at Board level, from Scottish Government as per NHS MEL (1998) 75.

The Care Governance Committee is being asked to provide their view on the level of assurance this report provides and therefore the level of assurance regards clinical and care governance within the Partnership. The timescale for the data within this report are the four months between 1<sup>st</sup> November 2023 and 29 February 2024.

As Lead Officer for Perth & Kinross HSCP I would suggest that the level of assurance provided is: **Reasonable Assurance**; due to the following factors:

- Several recent annual reports received from P&K HSCP services at the P&K HSCP CPGF which demonstrated reasonable levels of assurance.

##### 2.2 Background

The role of the Perth & Kinross HSCP Governance forum is to provide assurance to the Perth & Kinross HSCP Integration Joint Board (IJB), NHS Tayside Board (through the Care Governance Committee) and Perth & Kinross Council, that there are effective and embedded systems for Clinical, Care and Professional Governance in all services within Perth & Kinross HSCP.

The GIRFE Framework is an agreed tool used by all three HSCPs to ensure consistency of approach between Local Authorities, Tayside NHS Board and the IJBs for the three HSCPs; quality assurance is assessed against an agreed, prioritised common data set for each of the governance domains as detailed below. A GIRFE

Steering Group continues to meet, with representatives from each of the three Partnerships and part of its remit is to support additional common assurance measures and this template.

The six domains continue to evolve over time and must be adaptable and responsive to the changes in legislation and external support and monitoring. The domains reflect the principles set out in the Health and Social Care Standards, My support, My life; Scottish Government, 2018 and the Quality of Care Approach, HIS and Care Inspectorate, September 2018. The domains are:

|                                                   |
|---------------------------------------------------|
| Information Governance                            |
| Professional Regulation and Workforce Development |
| Patient/Service user/Carer and Staff Safety       |
| Patient/Service user/Carer and Staff Experience   |
| Quality and effectiveness of care                 |
| Promotion of Equality and Social Justice          |

## 2.3 Assessment

### 2.3.1 Exceptions

A risk with regards to staffing in Tay Ward, PRI has been reassessed as a red risk on DATIX.

A risk has existed on DATIX for staffing challenges across Tay and Stroke Wards for many years, as the stability of staffing levels and skill mix within these areas has fluctuated over time.

The overall risk level has recently increased in Tay ward specifically due to the high number of supplementary staff being used on the ward who may not know the patients and routine of the ward. This may lead to the potential of patients being harmed, not receiving acceptable levels of care, or extending their length of stay. The funded staffing levels for the ward are for 14 beds, and there are currently 21 beds. This is in combination with a vacancy which has been advertised on three occasions. A series of controls are in place to manage safe staffing levels, and a process of bed modelling is in progress to help inform future bed numbers.

A risk with regards to Occupational Therapy staffing across the PRI site has been reassessed as a red risk on DATIX.

A risk had previously existed on DATIX regarding OT staffing challenges across the PRI site, and this risk had been archived due to positive progress being made and the situation going through a period of stability.

The OT service currently has 2 vacancies which were permanent with non-recurring funding. Due to there being no identified funding for these posts, they were required to be absorbed by the service. This exacerbates a historical staffing situation, impacting on service resilience and staff morale as well as on a patient access to the service for those who have not been identified as a priority. Controls are in place to manage the risk, and the service identifies and communicates at the PRI site huddle on a daily basis specific wards that may not have adequate OT cover.

## 2.3.2 Clinical and Care Risk Management

The risk registers for Health and for Adult Social Work and Social Care (appendices 2 & 3) are discussed monthly at the P&K HSCP Care & Professional Governance Forum.

Managers of red risks provide a written update at every meeting, and managers of amber risks are asked for update at every other meeting.

This supports assurances that the relevant risks are being regularly monitored; what measures are in place to minimise the risk; what alternative mitigations plans and actions are in place to minimise the risk; that where the risk affects, or is impacted by, other parts of the health or social care system, or indeed other agency, we are assured that they are fully informed and engaged in the process.

P&K HSCP health red risks as at 15<sup>th</sup> March 2024:

| DatixRef | Risk Exposure – No controls |     |    | Current Risk Exposure Rating                                    |     |    |          |     |    |          |     |    |          |     |    | Planned Risk Exposure |     |    | Risk Trend (↑/→/↓) |
|----------|-----------------------------|-----|----|-----------------------------------------------------------------|-----|----|----------|-----|----|----------|-----|----|----------|-----|----|-----------------------|-----|----|--------------------|
|          |                             |     |    | Please include data from previous <b>four</b> reporting periods |     |    |          |     |    |          |     |    |          |     |    |                       |     |    |                    |
|          |                             |     |    | April 2023                                                      |     |    | Aug 2023 |     |    | Nov 2023 |     |    | Mar 2024 |     |    |                       |     |    |                    |
| L        | C                           | RER | L  | C                                                               | RER | L  | C        | RER | L  | C        | RER | L  | C        | RER | L  | C                     | RER |    |                    |
| 829      | 4                           | 5   | 20 | 4                                                               | 5   | 20 | 4        | 5   | 20 | 4        | 5   | 20 | 4        | 5   | 20 | 2                     | 5   | 10 | →                  |
| 701      | 5                           | 3   | 15 | 5                                                               | 4   | 20 | 5        | 4   | 20 | 5        | 4   | 20 | 5        | 4   | 20 | 1                     | 4   | 4  | →                  |
| 1321     | 5                           | 4   | 20 | -                                                               | -   | -  | 5        | 4   | 20 | 5        | 4   | 20 | 5        | 4   | 20 | 2                     | 4   | 8  | →                  |
| 886      | 5                           | 4   | 20 | -                                                               | -   | -  | -        | -   | -  | -        | -   | -  | 5        | 4   | 20 | 2                     | 4   | 8  | →                  |

L = Likelihood C = Consequence RER = Risk Exposure Rating

### Risk 829 - Challenges in relation to accommodation for clinical and non-clinical staff across P&K

Accommodation walkrounds have been completed across Health & Social care sites with a view to mapping sites to accommodate future teams.

Short life working group has now met twice, and new estates manager is taking forward the work, and is currently reviewing the timelines to allow the different moved to happen.

IDART will move to accommodation previously used for the Birnam Day Centre at Murray Royal, CCATS to Drumhar, Adult Mental health team to the Murray Royal site, and the CAMHS team to Cairnwell. Timelines for this are being finalised, and all information has been entered into Smartsheet. The first team to move will be IDART.

Smartsheet is being used to capture the current situation at each site where accommodation required review, and supporting SBAR's being used.

#### Risk 701 - Mental Health Waiting Times within the Prison Healthcare Service

New Patients (routine) are waiting over 18 weeks to be assessed by the Mental Health Team, as a result of demand higher than resource, high acuity of case load, this may lead to patients deteriorating, not improving and or not being provided follow up care on liberation from prison.

Listening service has now commenced and it appears clear that it will have an impact on the waiting list for lower level anxiety / depression  
Trainee ANP for MH in post

#### Risk 886 - Staffing challenges within the OT service at PRI

This is a new risk added as a result of the OT service at PRI having three posts which are permanently recruited with non recurring funding. This means when a vacancy comes up, these will require to be absorbed by the service. This will exacerbate a historical staffing situation within the service, leading to service resilience and staff morale being low, staff sickness increasing, as well as a significant impact on patient access to the service for those who have not been identified as a priority. With increasing pressures within PRI, this increases the overall risk level.

#### Risk 1321 - Inadequate environment for the Perth City CCATS service

This risk was added in April 2023, as in relation to the current CCATS service which is located within Beechgrove House, Perth. A recent Infection Prevention and Control team visit to the site found numerous environmental Infection Control concerns. A site visit has taken place from the current cleaning contractor, soft facilities and PKC estates to explore gaps and potential solutions within current provision. There is in place a Short Life Working Group regarding accommodation across P&K HSCP, and the CCATS service in Perth City is part of this working group.

CCATS continue to undertake risk mitigation such as additional cleaning and handwashing. Property application for CCATS submitted to short life working group.

P&K HSCP Adult Social Work & Social Care red risks as at 15<sup>th</sup> March 2024:

| Risk | Risk Exposure – No controls |   |     | Current Risk Exposure Rating                                    |   |     |          |   |     |          |   |     |          |   |     | Risk Trend (↑/→/↓) |
|------|-----------------------------|---|-----|-----------------------------------------------------------------|---|-----|----------|---|-----|----------|---|-----|----------|---|-----|--------------------|
|      |                             |   |     | Please include data from previous <b>four</b> reporting periods |   |     |          |   |     |          |   |     |          |   |     |                    |
|      |                             |   |     | April 2023                                                      |   |     | Jul 2023 |   |     | Nov 2023 |   |     | Mar 2024 |   |     |                    |
|      | L                           | C | RER | L                                                               | C | RER | L        | C | RER | L        | C | RER | L        | C | RER |                    |
| 1    | 4                           | 5 | 20  | 4                                                               | 5 | 20  | 4        | 5 | 20  | 4        | 5 | 20  | 4        | 5 | 20  | →                  |
| 2    | 4                           | 5 | 20  | 4                                                               | 5 | 20  | 4        | 5 | 20  | 4        | 5 | 20  | 4        | 5 | 20  | →                  |

L = Likelihood C = Consequence RER = Risk Exposure Rating

Adult Social Work and Social Care Risk 1 – Lack of Care at Home capacity, especially around rural P&K.

Care at Home Transformation group and workstreams in action. Automated scheduling went live 20 September. HART rotas in Perth updated and efficiency realised. North and South in progress. PinPoint system will be live end of March. Alliance contracting with independent sector progressing. 6 International staff starting with Living Well in April. 1 start date in April for HART. Waiting on 4 further start dates for HART and 1 x for LWC going through the recruitment.

Adult Social Work and Social Care Risk 2 – Lack of OT capacity

0.5 North OTs out to advert. Not meeting priority targets and no M and H reviews getting done. 1 admin advert liveDuty Team have had a resignation which will impact on signposting and advice

2.3.3 Clinical & Care Governance Arrangements

Lead Partners Services

Each HSCP is a Lead Partner for a number of services. These services report through to the Clinical Care and Professional Governance Forum for that HSCP. At the Clinical Care and Professional Governance Forum the Lead Partner Service reports receive the relevant level of scrutiny as other reports.

Systems and processes are being established to ensure that all three HSCPs receive copies of reports from other Lead Partner Services to support integration, and effective whole system working.

Full details of the Clinical & Care Governance Arrangements in P&K HSCP are provided within appendix 1.

## Summary of key exceptions raised at recent CPGF meetings:

Key exceptions identified within the **exception reports** from the CPGF meetings held in November 23, December 23, January 24 and February 24:

- North Locality:
  - Critical Staffing levels North Locality CRT & LInCS. The LInCS AP's, Physio and admin teams have been affected by high levels of long and short term sickness reporting continuous Amber and sporadic Red status despite working flexibility across P & K. This has significant impact on the wider system.
  - Storm Impact – BCPs/ Winter contingency plans evoked and tested on three occasions – services maintained despite exceptional circumstances.
  
- Urgent Care:
  - Medical cover on Red from 19/01/24 – 04/02/24. this has had an impact on Hospital at Home's ability to accept referrals. Vacant medic post recruited to; candidate coming from overseas – plan to be in post and orientated by spring. GP Locum/Medical Bank not available. PRI Consultant cover limited in ability to support. Lead ANP unable to support as supporting PCH.
  - Impact on Advanced Nurse Practitioner capacity due to demand for service, reduced staffing, vacancies and unplanned leave. Current staffing on Hot Amber.
  - Non Mandatory CPD time has been cancelled due to staffing levels and demand on services. CPD time being reviewed as part of ANP service review to support protected time for CPD.
  
- Podiatry:
  - At end December 23, there is an active caseload of approx 7,000 patients. 607 people on the Podiatry waiting list with 241 Podiatry MSK - 577 referrals on waiting list with 406 waiting over 12 weeks.
  
- Primary Care:
  - The Carse Medical Practice is currently operating from temporary accommodation with limited space. Both GPs are part-time and have highlighted that they may retire within the next 3 years. Future capital investment monies will be difficult to secure if there is any dubiety in relation to sustainable GMS in that area.
  
- Public Dental Service:
  - Awaiting input from Property Department to progress essential ventilation and building works. Work has been approved in principle by AMG and funding in place.
  
- Medicine for the Elderly, AHP and discharge services at PRI:
  - Risk in Tay Ward related to ongoing 50% bed increase and high usage of agency nursing. Risk added to DATIX.
  - AHP OT core staffing affected re budget controls on vacant posts. Risk had previously been archived due to investment in the substantive workforce in 2021 however this had never been supported with a permanent funding solution .

Key exceptions identified within the **annual reports** from the CPGF meetings held in November 23, December 23, January 24 and February 24:

- Perth City
  - Adverse events; the highest number over the past year were with regards to Pressure Ulcers, five of these were graded as being moderate, the remainder were graded as minor. Two of the five moderate incidents were deemed to be avoidable, and pressure ulcer reviews have been undertaken for all pressure ulcer incidents. Learning from Angus has shown a process to review Pressure Ulcer incidents. This involves a six monthly in-depth review of incidents that involve pressure ulcers to collate and share the learning and improve the identification and understanding of any themes. The Perth City CPTM will work with the District Nursing Team Leads to apply this process in Perth City.
  - As part of the induction for the Associate Director of Nursing visits to a number of Perth City Teams was undertaken with the Lead Nurse.
  - Care Opinion is rolled out across all teams and continues to provide the opportunity for people to communicate their experience through this digital platform. It provides valuable feedback and helps us to understand when we are doing well and also when we can improve. Towards the end of the year a report was scheduled to run monthly enabling the collation of stories to be shared within the Locality Governance Meeting and wider teams. In 2023, 30 stories were told and at the time of the report to date, have been viewed on Care Opinion 2,348 times in all. Further work is planned in 2024 to promote the use of Care Opinion across the teams and explore other ways for our client group to provide feedback as the digital interface is not always the preferred method of feedback.
  
- South Locality
  - The frailty and complexity of the patient groups has presented challenges across the locality and particularly within the inpatient areas. Core staffing levels have struggled to maintain safety with increased delirium, falls and distress behaviours, requiring additional staffing resource to maintain patient and staff safety.
  - The shortage of care at home across the locality has resulted in longer waits than we would want for some to access the support they have been assessed as requiring. This has had a significant impact on many clients and their carers waiting for care, particularly those who are waiting in care home placements for a care package, sometimes for many months. However we are supporting more clients than ever before, many of whom have complex needs, and whose wish is to remain in their community. Well established and some new multi-disciplinary forums and partnership working have enabled workers to develop bespoke packages of care, in many cases enabling people to remain in their own homes for longer.
  - Media reports in September 2023 highlighted the lack of Healthcare Improvement Scotland (HIS) inspections of community hospitals. Taking a proactive approach, the HSCP commenced a short life 'Inspection Ready' group to scope and agree preparatory work and set up peer walk around inspections.
  - With Care Opinion rolled out across all teams this has continued to provide the opportunity for people to tell their story in their own words. It provides valuable

feedback and a level of dialogue with families and service users that helps us understand what we do well and what needs to improve.

### Adverse Events:

Systems are in place for services/localities to review DATIX incidents. The Nursing & AHP leads meet along with the Clinical Governance Coordinator on monthly basis to review the top 5 incident categories. This helps to identify any trends or any appropriate action and supports closing the loop.

Regarding adverse events, the main themes reported during the months between November 2023 and February 2024 were:

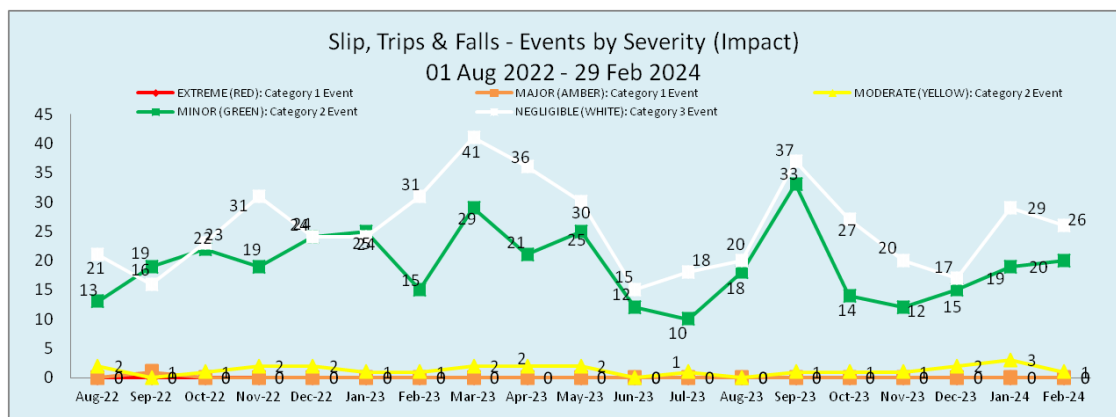
Highest frequency events:

1. Slips, Trips and Falls
2. Medication
3. Clinical Challenging behaviour
4. Pressure Ulcer
5. Violence & Aggression

**Harm** is defined as an outcome with a negative effect. Harm to a person or groups of people may result from worsening of a medical condition, the inherent risk of an investigation or treatment, system failure provider performance issues, service disruption, financial loss or adverse publicity.

### Slip, Trip & Falls

During the time period between November 2023 and February 2024, there were **165** incidents recorded, of which 23 involved harm. 74 occurred at MRH, 34 at PRI, 51 in Community Hospitals and the remaining 6 in other areas.



The Psychiatry of Old Age inpatient wards at Murray Royal Hospital experienced a higher than usual number of falls at the end of 2021 due to several patients who had multiple falls (many of which were controlled). Ward staff were doing all they could to manage the falls, and they had support from the Falls coordinator during this time.

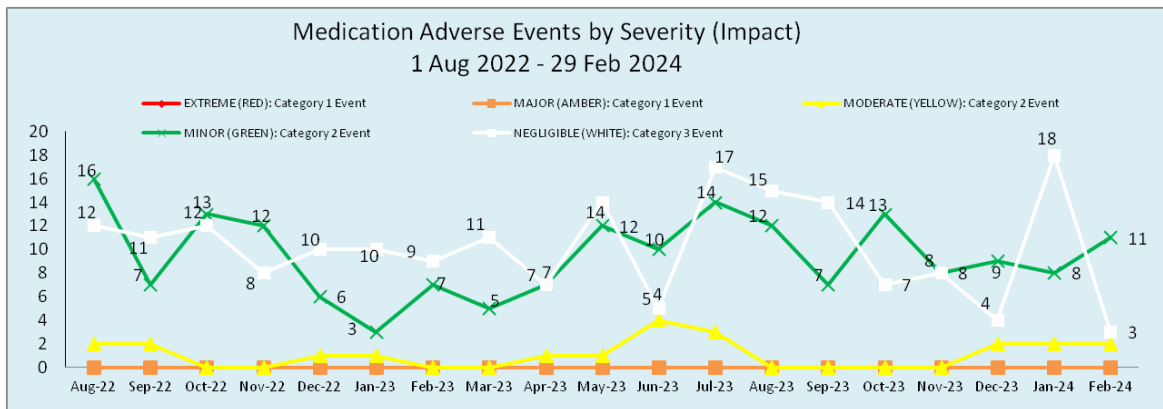


In addition, the Falls Coordinator continues to:

- review all of the wards in-patient falls Datix reports and provide feedback to the ward with a breakdown of their falls, outlining any trends, highlighting patients who fall repeatedly and enquiring if further information is required
- Supports all of the HSCP wards to have strength and balance exercise panels fitted on their walls and suitable patients also receive a set of strength and balance cue cards which they can take home with them. Along with that they receive a Care About Walking booklet and record charts for recording activity / steps.

### Medication

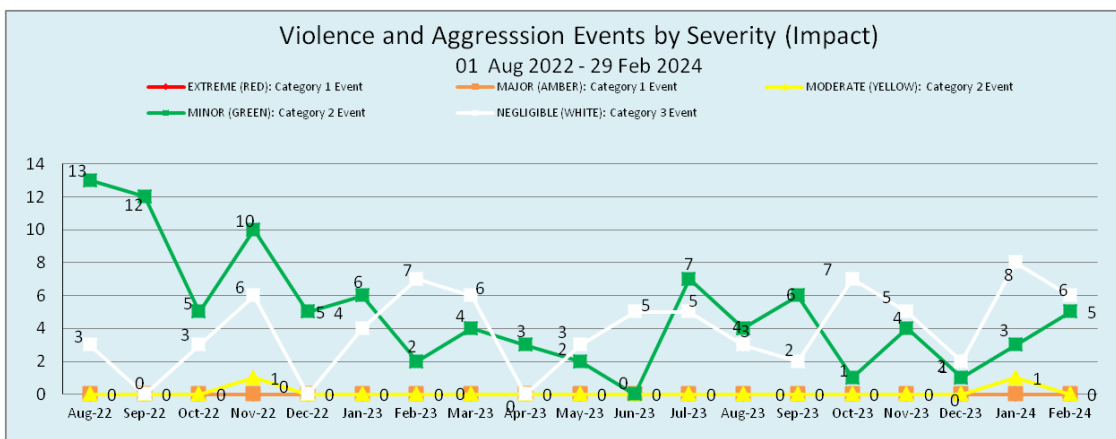
During the time period between November 2023 and February 2024, there were **75** incidents recorded, of which 5 involved harm. 6 occurred at MRH, 8 at PRI, 13 in Community Hospitals, 34 within a Prison Establishment and the remaining 14 in other areas.



The majority of medication adverse events occurred with the Prison Healthcare service. The prison healthcare service manages and administers a high volume of medication across three sites across Tayside - HMP Perth, HMP Castle Huntly and HMP & YOI Bella.

### Violence & Aggression

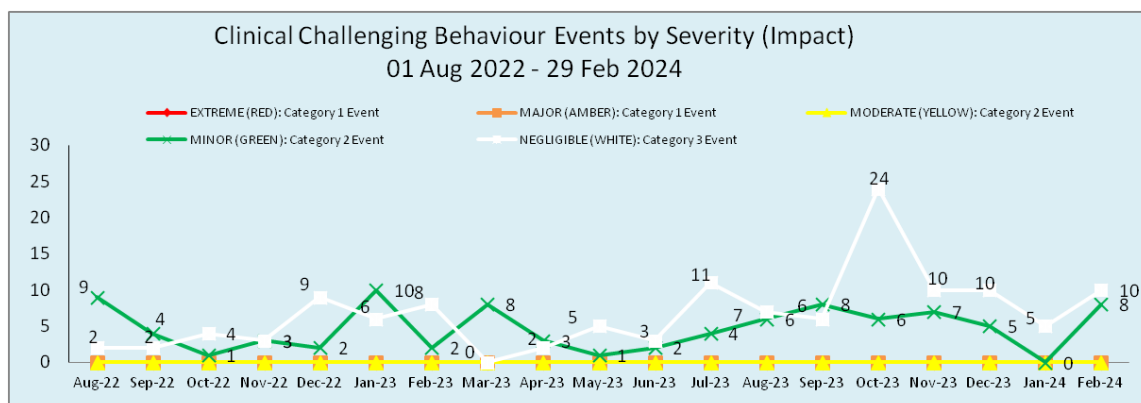
During the time period between November 2023 and February 2024, there were **35** incidents recorded, of which 3 involved harm. 18 occurred at MRH, 5 at PRI, 2 in Community Hospitals, and the remaining 10 in other areas.



All but one of the 18 incidents within Murray Royal Hospital were within the Psychiatry of Old Age wards. All three of the incidents involving harm involved physical aggression, and two were in an inpatient setting. Two were graded as green and one as amber (due to the level of injury sustained by a patient after being pushed by another patient and falling)

**Clinical Challenging Behaviour** (such as patient unable to understand risks, sexual disinhibition, general agitation)

During the time period between November 2023 and February 2024 there were **55** incidents recorded, of which 2 involved harm. 45 occurred at MRH, 3 at PRI, 5 in Community Hospitals and 2 others.

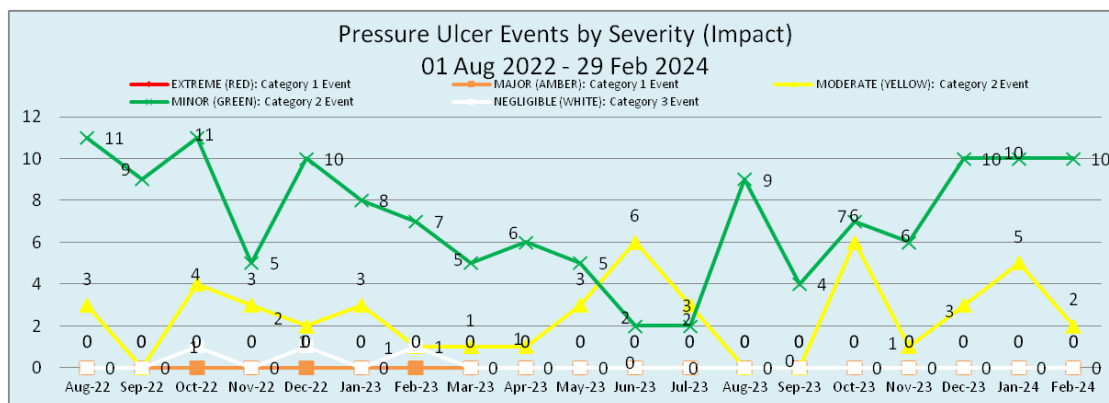


The vast majority of these incidents were within the Psychiatry of Old Age wards at Murray Royal Hospital. The rise in incidents (albeit of negligible grading) in October 2023 have been noted by the service. This appears to be attributable to a small group of patients in one particular POA ward who are exhibiting these behaviours.

The wards have sought input from the NHST PMVA team regarding the ongoing management of Violence & Aggression and Clinical Challenging Behaviour.

**Pressure Ulcers**

During the time period between November 2023 and February 2024, there were **47** incidents recorded, of which 40 involved harm. 32 were within the patients home, 7 within Care Homes, 5 within Community Hospitals, and the remaining 3 in other areas.



The yellow graded events are discussed at the relevant locality Care Governance meeting. It should be noted that some of these pressure ulcer incidents are regarding patients who have been discharged from hospital to the community with a pressure ulcer, which has then been picked up and reported by a service in P&K HSCP.

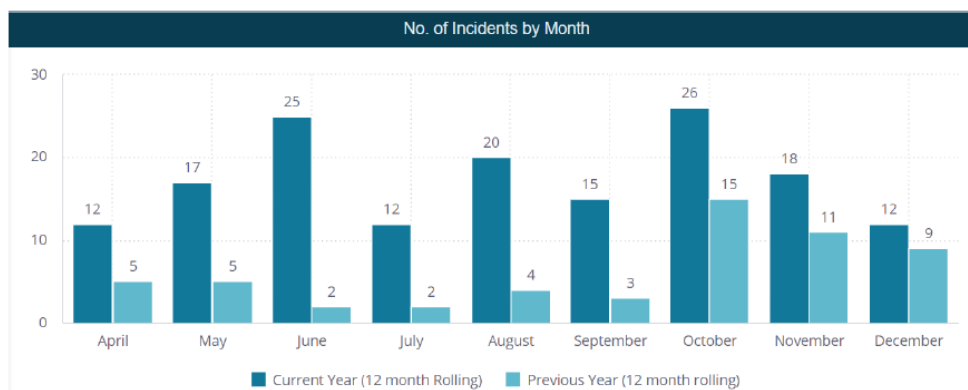
Each geographical locality in P&K is provided with a summary of adverse events specific to their locality to enable them to identify trends and any learning.

Adverse events are regularly reviewed and form a standing agenda item at the locality governance groups to identify learning, improvements, training needs or themes.

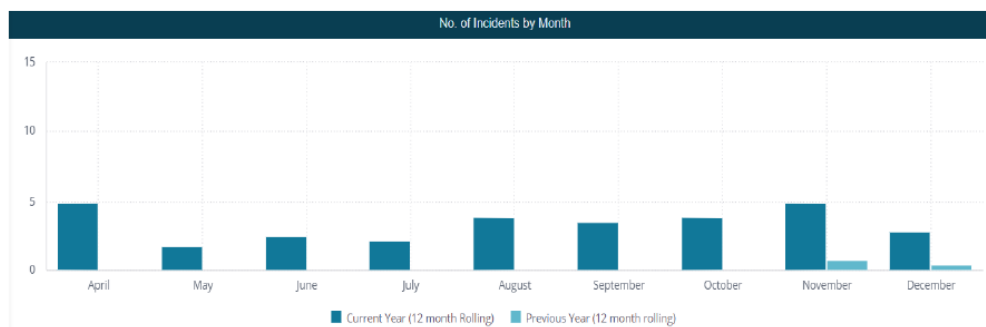
It has been identified and acknowledged by the CPGF that further performance improvement is required regarding the timescales for reporting and verifying DATIX incidents. This continues to improve and to be monitored at CPGF meetings.

### Adult Social Work & Social Care Incident Summary:

**Registered Services** – There have been 157 incidents across Q's 1-3 of 2023/24, and 56 in the last quarter (Q3). Annual statistics and trends as follows:



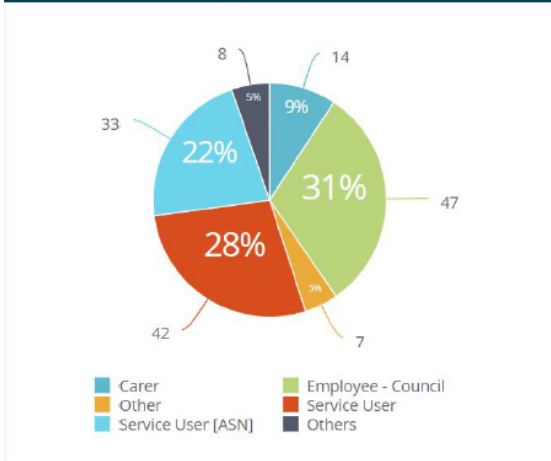
**Care at Home** – There have been 86 incidents across Q's 1-3 of 2023/24, and 33 in the last quarter (Q3). Annual statistics and trends as follows:



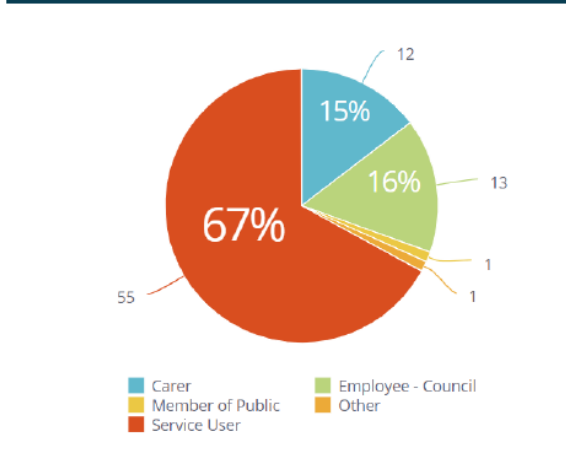
**Registered Services** – In Q3 and in terms of Injured / Affected Person, 38% were Employees, 29% Carers, and 20% Service Users. This is similar to across Q's 1-3 of 2023/24:

**Care at Home** – In Q3 and in terms of Injured / Affected Person, 69% were Service Users, 16% Carers, and 16% Employees. This is similar to across Q's 1-3 of 2023/24:

Incidents by Injured/Affected Person



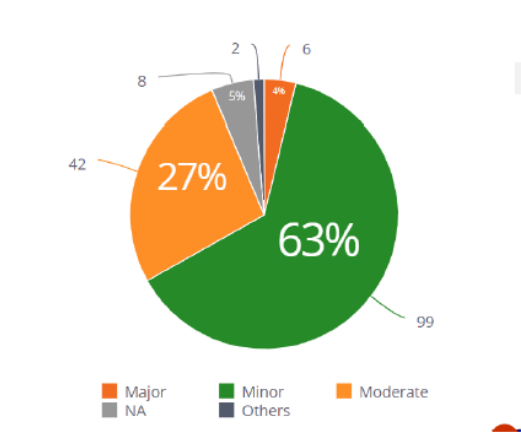
Incidents by Injured/Affected Person



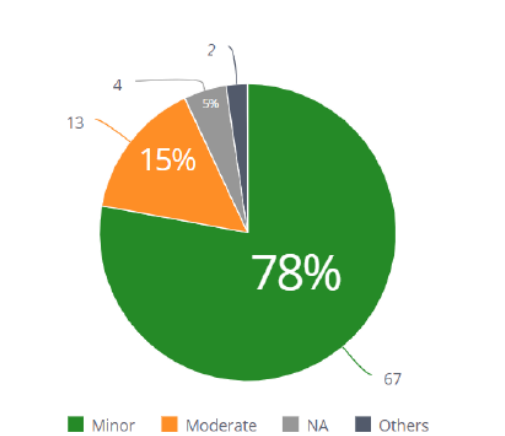
**Registered Services** – In Q3, 64% of Incidents have been categorised as Minor in terms of Severity and 25% as Moderate. This is similar to across Q's 1-3 of 2023/24:

**Care at Home** – In Q3, 76% of Incidents have been categorised as Minor in terms of Severity and 15% as Moderate. This is similar to across Q's 1-3 of 2023/24:

Incidents by Severity

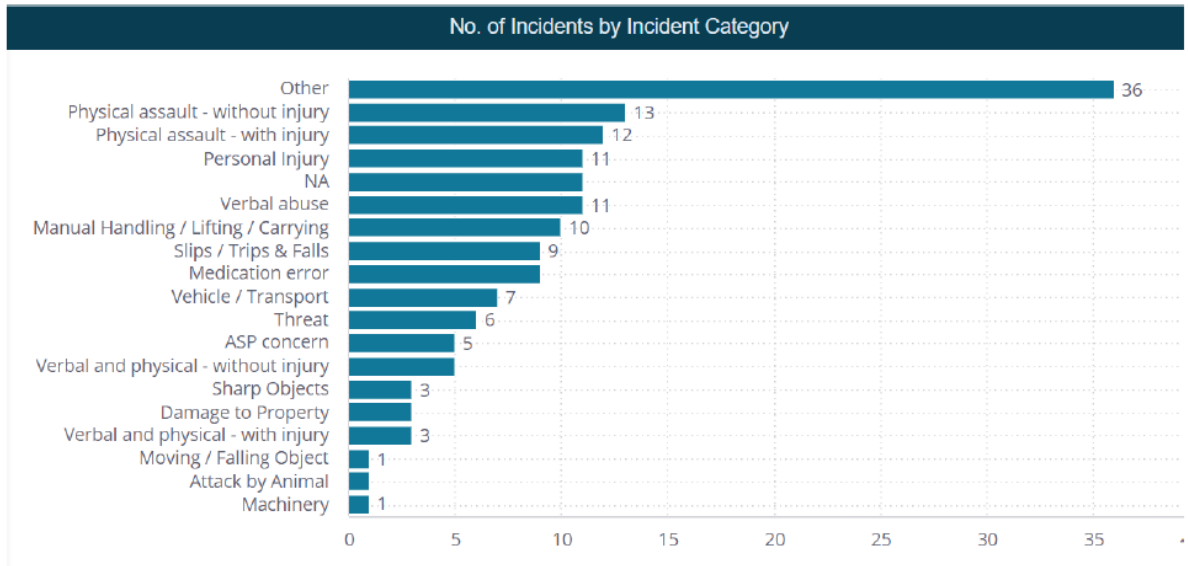


Incidents by Severity



**Registered Services** – With regards to Incident Category, the biggest categories (apart from Other and NA) are:

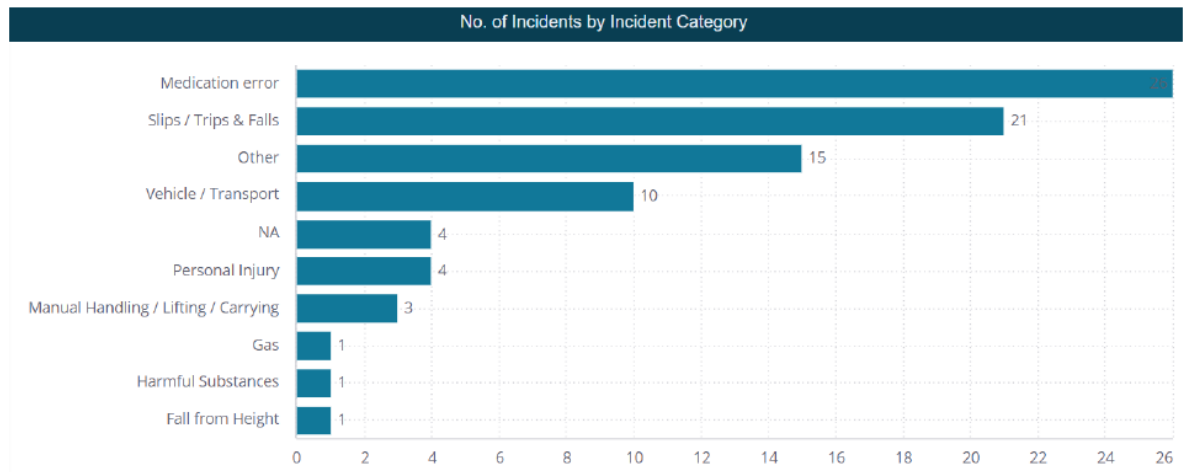
1. Physical assault - without injury
2. Physical assault - with injury
3. Verbal abuse
4. Manual Handling / Lifting / Carrying



- **Note** – With regards to Incidents Recorded as Other and NA, these Incidents need further investigation with services to determine actual Categories, as Other / NA should only be used when no other Category / Sub Category is relevant, as such should be minimal.

**Care at Home** – With regards to Incident Category, the biggest categories (apart from Other) are:

1. Slips / Trips & Falls
2. Medication Error
3. Vehicle / Transport



**Registered Services** – In Q3, 23% Incidents required a Detailed Investigation. This is similar to across Q's 1-3 of 2023/24:

**Care at Home** – In Q3, 9% Incidents required a Detailed Investigation. This is similar to across Q's 1-3 of 2023/24:

### 2.3.4 Significant Adverse Event Reviews

There are currently no pending SAER's in P&K HSCP.

### 2.3.5 Pressure Ulcers & Falls

Details regarding both of the types of Adverse events has been provided above in section 2.3.3.

Pressure ulcers are reviewed on an individual basis to ensure that all mitigating actions are in place and any themes in relation to learning are identified.

### 2.3.6 Complaints

Current Health Complaints as at 15/03/2024 - Stage 1

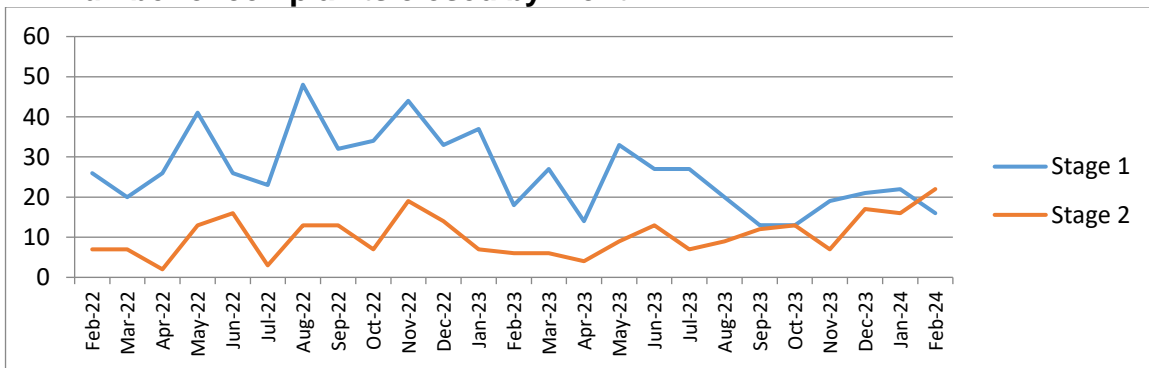
| Service Area         | 0-4 Days | 5-9 Days | Total |
|----------------------|----------|----------|-------|
| Perth & Kinross HSCP | 2        | 0        | 2     |

Current Health Complaints as at 15/03/2024 - Stage 2

| Service Area         | 0-5 days | 6-10 days | 11 or more days | Total |
|----------------------|----------|-----------|-----------------|-------|
| Perth & Kinross HSCP | 1        | 1         | 7               | 9     |

#### HEALTH COMPLAINT SUMMARY FOR FEBRUARY 2024:

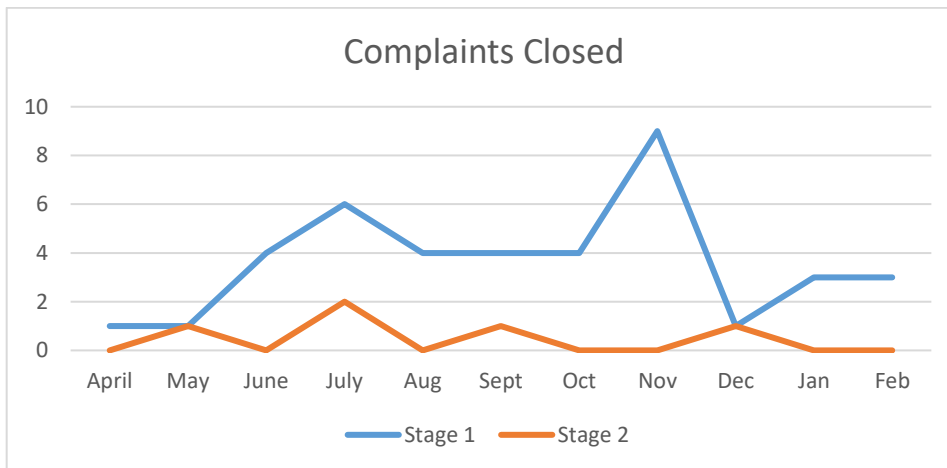
##### Number of complaints closed by month:



- **Total number of complaints received in Feb 2024 = 33**
- **Total number of complaints closed in Feb 2024 = 38**
  - Stage 1 = 16 (6 upheld or partially upheld)
  - Stage 2 = 22 (6 upheld or partially upheld)
  - % Stage 2 completed within timescales = 73%
  - % Stage 2 not completed within timescales = 27%
  - **Services**
    - Prison Healthcare – 31
    - Mental Health - 4
    - Public Dental – 1
    - AHP – 1
    - Perth City - 1

- **Top themes for Feb 24 (Prison Healthcare):**
  - **Overall** (*more than one theme can be applicable per complaint*)
    - Medication – 12
    - Disagreement with treatment plan or outcome - 9
    - Lack of support - 5
    - Wait times / delay - 4
    - Communication -1
  - **Upheld or Partially Upheld complaints** (*more than one theme can be applicable per complaint*)
    - Medication – 2
    - Disagreement with treatment plan or outcome - 2
    - Lack of support - 2
    - Wait times / delay - 2
  
- **Top themes for Feb 24 (other HSCP services):**
  - **Overall** (*more than one theme can be applicable per complaint*)
    - Disagreement with treatment plan or outcome – 2
    - Wait time – 2
    - Lack of support - 2
    - Care and treatment - 1
  - **Upheld or Partially Upheld complaints** (*more than one theme can be applicable per complaint*)
    - Wait time – 1
    - Lack of support - 1
    - Care and treatment - 1

## PKC COMPLAINT SUMMARY FOR February 2024:



- **Total number of complaints received in Feb 2024 = 4**
- **Total number of complaints closed in Feb 2024 = 3**
  - Stage 1 = 3 (2 resolved, 1 upheld)
  - Stage 2 = 1
    - % Stage 2 responded to within timescales = 0%
    - % Stage 2 not responded to within timescales = 100%
    - **Services the complaints relate to as below**
      - Perth City SW (South) - 1
      - HART and EIAP – 1
      - Access Team – 1
      - HDT - 1
- **Top themes**
  - **Overall** (*more than one theme can be applicable per complaint*)
    - Waiting Times/delays – 1
    - Staff Conduct - 1
    - Entitlement to service – 1
    - Service Provision - 1
  - **Upheld or Partially Upheld complaints** (*more than one theme can be applicable per complaint*)
    - Staff Conduct - 1

### **Actions taken from upheld/partially upheld stage 1 complaints:**

Fact finding conducted, following a fully upheld complaint, social care staff member was reminded how to conduct themselves while in the community and behave in a respectful manner by reinforcing code of conduct expectations.



### 2.3.7 Scottish Public Services Ombudsman Reports

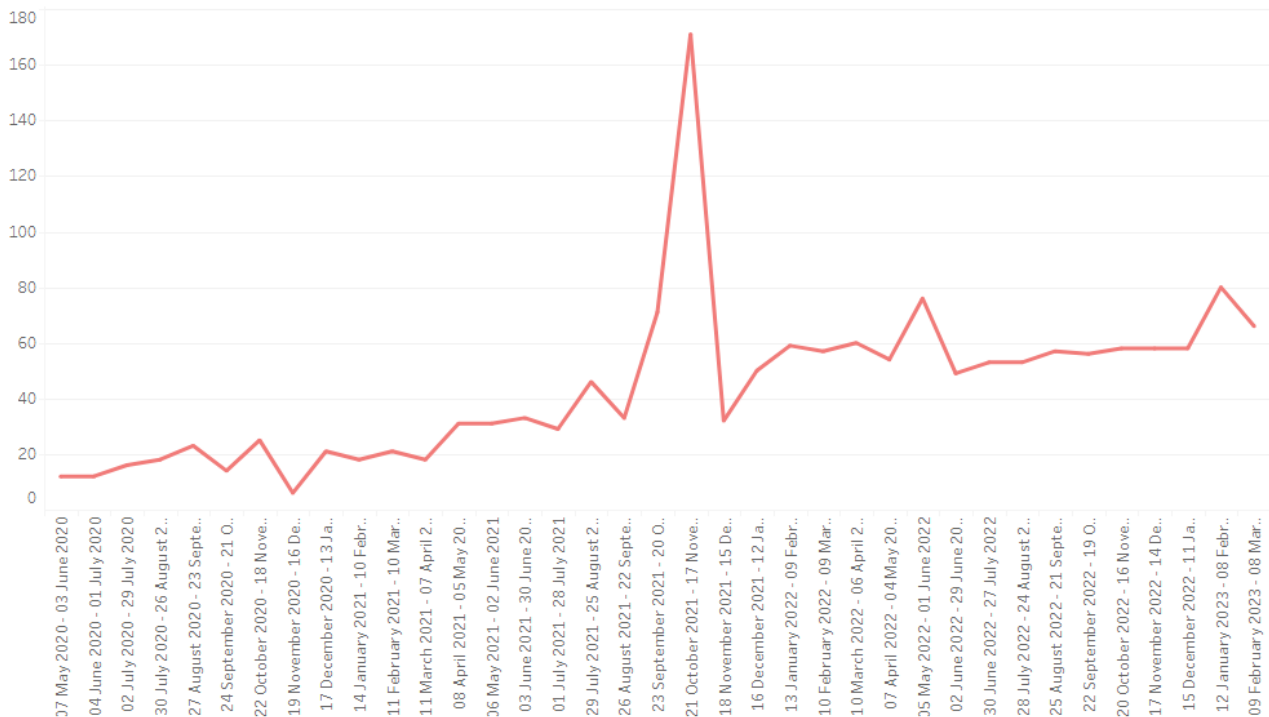
There have been no complaints referred to the SPSO during the time period.

The last complaint which was referred to the SPSO was from December 2021, and SPSO found that the Boards complaint response was reasonable and decided not to investigate further.

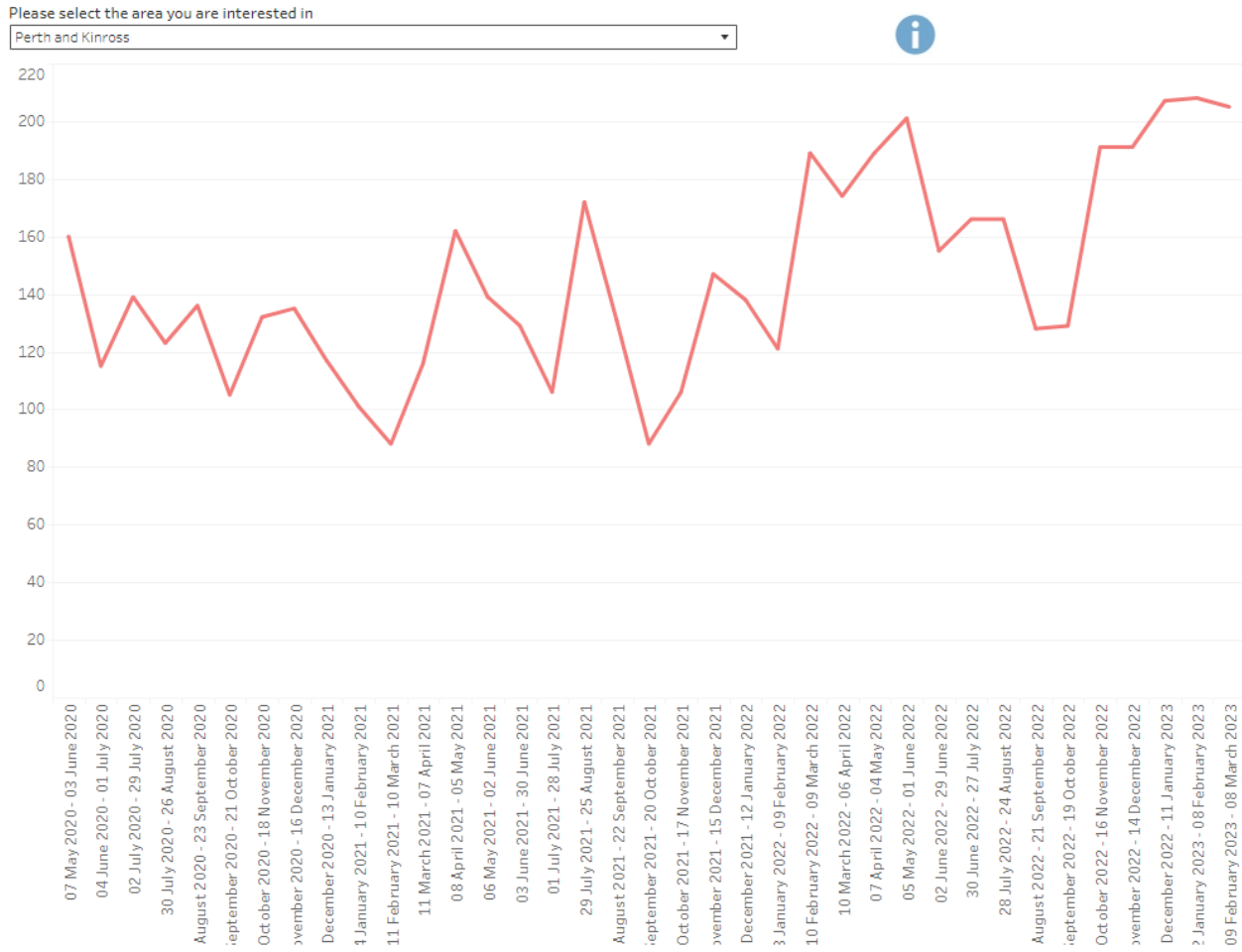
### 2.3.8 External Reports & Inspections

HM Inspectorate of Prisons for Scotland undertook an inspection to HMP Bella on during March 2024, and the visit report is awaited by the service.

### 2.3.9 Adult Support & Protection



Adult Concerns Received by Local Authorities from Police Scotland - last updated with 16/03/2023 collection



It should be noted that the above data collected and available nationally has not been updated since March 2023. However, it shows a significant increase in both AP concerns and VPRs up until that time. This is, at least partly, a result of increased awareness due to ongoing information campaigns and improved multi-agency working. Extra social worker posts have been recruited to respond to this increased demand.

Responding to concerns about adults at risk of harm is prioritised and, despite this increase in referrals, 97% of all concerns are screened within 24-hours. This indicator, together with the wider performance framework, is monitored at locality governance meetings, the Public Protection Group, Chief Officers Group and the Adult Protection Committee.

MAT Standards

Current RAG scores as at Feb 2024 are:

|           | Standard 1 | Standard 2 | Standard 3 | Standard 4 | Standard 5 | Standard 6 | Standard 7 | Standard 8 | Standard 9 | Standard 10 |
|-----------|------------|------------|------------|------------|------------|------------|------------|------------|------------|-------------|
| RAG Score |            |            |            |            |            |            |            |            |            |             |

**Standard 1 – All people accessing services have the option to start MAT from the same day of presentation.**

**GREEN**

**Standard 2 – All people are supported to make an informed choice on what medication to use for MAT, and the appropriate dose.**

**GREEN**

**Standard 3 – All people at high risk of drug-related harm are proactively identified and offered support to commence or continue MAT.**

**GREEN**

**Standard 4 – All people are offered evidence based harm reduction at the point of MAT delivery.**

**GREEN**

**Standard 5 – All people will receive support to remain in treatment for as long as requested.**

**GREEN**

**Standard 6 – The system that provides MAT is psychologically informed (tier 1); routinely delivers evidence-based low intensity psychosocial interventions (tier 2); and supports individuals to grow social networks.**

**AWAITING ASSESSMENT – EVIDENCE BEING GATHERED AND SUBMITTED**

**Standard 7 – All people have the option of MAT shared with Primary Care.**

**AWAITING ASSESSMENT – EVIDENCE BEING GATHERED AND SUBMITTED**

**Standard 8 – All people have access to advocacy and support for housing, welfare and income needs.**

**AWAITING ASSESSMENT – EVIDENCE BEING GATHERED AND SUBMITTED**

**Standard 9 – All people with co-occurring drug use and mental health difficulties can receive mental health care at the point of MAT delivery.**

**AWAITING ASSESSMENT – EVIDENCE BEING GATHERED AND SUBMITTED**

**Standard 10 – All people receive trauma informed care.**



## **AWAITING ASSESSMENT – EVIDENCE BEING GATHERED AND SUBMITTED**

### 2.3.10 Mental Health

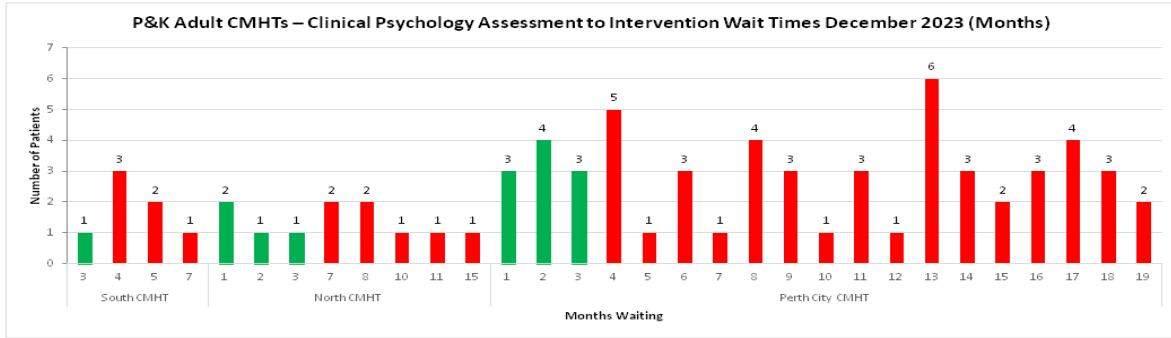
#### **P&K HSCP Mental health waiting times (1st December 2023 – 31st December 2023)**

The following is waiting time data for team's where their referral to assessment or their assessment to treatment intervention wait time standard has breached. Work is progressing to enhance this data over the coming weeks and months and future data will evolve to showcase month-on-month data and a more comprehensive analysis of the data presented.

| Team                                                                                                                             | Wait Time Standards                                                          | Breach Status |
|----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|---------------|
| Adult Mental Health Occupational Therapy Team                                                                                    | P1 – 5 Working Days<br>P2 – 6 Weeks<br>P3 – 12 Weeks                         |               |
| Community Learning Disabilities Team (Wait times currently being explored for Dietetics, Speech & Language, Clinical Psychology) | 12 Weeks                                                                     |               |
| Clinical Psychology, Adult Community Mental Health Teams                                                                         | 18 Weeks                                                                     |               |
| Consultant Psychiatrists, Psychiatry of Old Age Service                                                                          | 12 Weeks                                                                     |               |
| Garry Ward, Psychiatry of Old Age Inpatients                                                                                     | 0 Days                                                                       |               |
| Integrated Drug and Alcohol Recovery Team                                                                                        | 3 Weeks                                                                      |               |
| Learning Disability Intensive Support Service                                                                                    | 12 Weeks                                                                     |               |
| Leven Ward, Psychiatry of Old Age Inpatients                                                                                     | 0 Days                                                                       |               |
| Mental Health Officers                                                                                                           | 0 Days                                                                       |               |
| Mental Health Physiotherapy                                                                                                      | P1 – 3 Working Days<br>P2 – 5 Working Days<br>P3 – 10 Working Days           |               |
| MoveAhead                                                                                                                        | 12 Weeks                                                                     |               |
| North Perthshire Adult Community Mental Health Teams                                                                             | Urgent – 72 Hours<br>Routine - 12 Weeks                                      |               |
| North Perthshire Primary Care Mental Health and Wellbeing Team                                                                   | 12 Weeks                                                                     |               |
| Perth City Adult Community Mental Health Team                                                                                    | Urgent – 72 Hours<br>Routine - 12 Weeks                                      |               |
| Perth City Primary Care Mental Health and Wellbeing Team                                                                         | 12 Weeks                                                                     |               |
| SCOPE                                                                                                                            | AP Concerns – 24 hrs<br>ASP Inquiry – 10 days<br>ASP Investigation – 28 Days |               |
| South Perthshire Adult Community Mental Health Team                                                                              | Urgent – 72 Hours<br>Routine - 12 Weeks                                      |               |
| South Perthshire Primary Care Mental Health and Wellbeing Team                                                                   | 12 Weeks                                                                     |               |
| Therapeutics & ECT Team                                                                                                          | 0 Weeks                                                                      |               |
| The Wellbeing Support Team                                                                                                       |                                                                              |               |
| Tummel Ward, Psychiatry of Old Age Inpatients                                                                                    | 0 Days                                                                       |               |

 No Wait Time Breaches
  Wait Time Breached
  Data Pending

## Clinical Psychology – Adult CMHTs



Clinical Psychologists provide psychological therapies for people with complex mental illness who are working with the North Perthshire, Perth City and South Perthshire CMHTs. All patients on the Clinical Psychology waiting list will have received an initial mental health assessment, will be engaged in treatment interventions with another member(s) of the Adult CMHT and will have access to the CMHT Duty Worker. Clinical Psychology is a Dundee HSCP hosted service and monthly wait times are reported via this route. Further engagement with our Clinical Psychology colleagues is required to understand current and future mitigation and this will be explored in the second phase of this work.

Clinical Psychologists work to a 12 week waiting time target. The number of months waiting is shown along the bottom axis with the number of people waiting along the horizontal axis. The number of patients waiting within the stipulated 12 weeks are shown in green and all others breaching shown in red.

### South CMHT

Total Patients – 7

Within 3 Months – 1  
10

Outwith 3 months – 6  
45

Adherence to Standard– 14%  
Standard–18%

### North CMHT

Total Patients – 11

Within 3 Months – 4

Outwith 3 months – 7

Adherence to Standard–36%

### Perth City CMHT

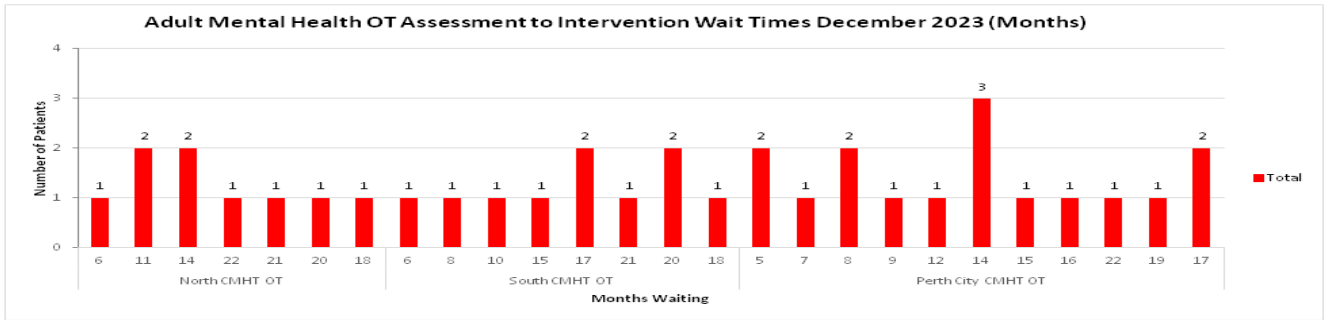
Total Patients – 55

Within 3 Months –

Outwith 3 Months –

Adherence to

## Adult Mental Health Occupational Therapy Team



Adult Mental Health Occupational Therapists provide OT interventions for people with complex mental illness who are working with the North Perthshire, Perth City and South Perthshire CMHTs. All patients on the OT waiting list will have received an initial mental health assessment prior to being referred on to the Mental Health Occupational Therapy and will have access to the CMHT Duty Worker. OT wait times have been impacted by a range of vacancies over a number of years.

Adult Mental Health OT’s work to priority bandings with a 12 week waiting time target for patients requiring routine interventions (Band 3). Safer Staffing Workforce Planning Tools will be undertaken for a two week period in February 2024 and this will inform an SBAR for EMT which is currently in development. Critical staffing issues and wait time breaches are logged within DATIX as an organisational risk. The number of months waiting is shown along the bottom axis with the number of people waiting along the horizontal axis. Patients waiting within the stipulated 12 weeks are shown in green and all others breaching shown in red.

### North CMHT OT

Total Patients – 9  
 Within 3 months – 0  
 Outwith 3 months – 9  
 Adherence to standard–0%  
 0%

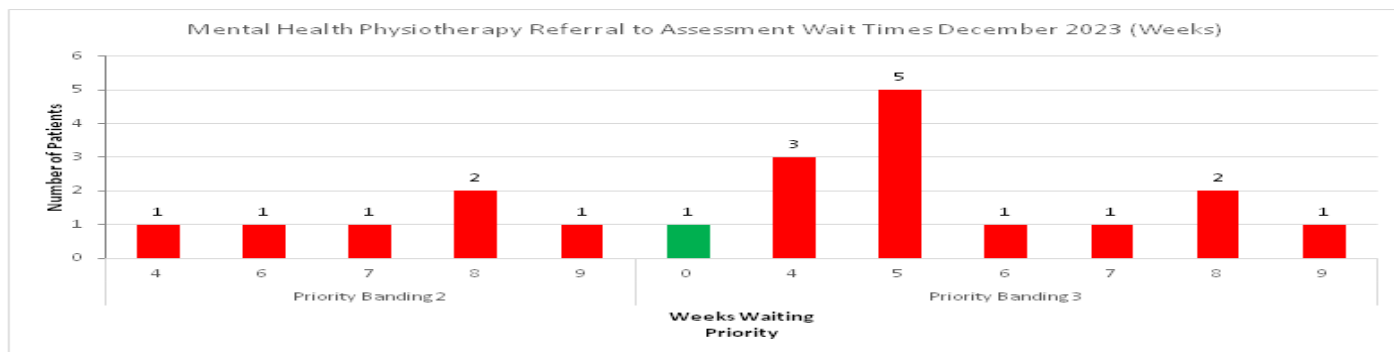
### South CMHT OT

Total Patients – 10  
 Within 3 months – 0  
 Outwith 3 months – 10  
 Adherence to standard–0%

### Perth City CMHT OT

Total Patients – 16  
 Within 3 months – 0  
 Outwith 3 months – 16  
 Adherence to standard–

## Mental Health Physiotherapy



Mental Health Physiotherapy provides interventions for people with complex mental illness who are currently engaged in treatment with the Adult and Older People’s CMHTs within North Perthshire, Perth City and South Perthshire (6 Teams), to all inpatients within the Perth and Kinross Psychiatry of Old Age Inpatient Unit (3 wards) and the General Adult Psychiatry Inpatient Unit (3 wards). The Team is also currently assisting Secure Care services with a small number of inpatient referrals due to their inability to recruit to their vacant post. The Team has a wide remit and a small staffing resource consisting of 1.4wte Specialist Physiotherapy staff and 1.0wte Community Support Worker staff.

Safer Staffing Workforce Planning Tools will be undertaken for a two week period in February 2024 and this will inform an SBAR for EMT which is currently in development. The number of weeks waiting is shown along the bottom axis with the number of people waiting along the horizontal axis. The number of patients waiting within the stipulated banding priorities are shown in green and all others breaching shown in red.

### Priority 1

Total Patients – 0

Within 3 months – 0

1

Outwith 3 months – 0  
– 13

Adherence to standard–100%  
standard–7%

### Priority 2

Total Patients – 6

Within 3 months – 0

Outwith 3 months – 6

Adherence to standard– 0%

### Priority 3

Total Patients – 14

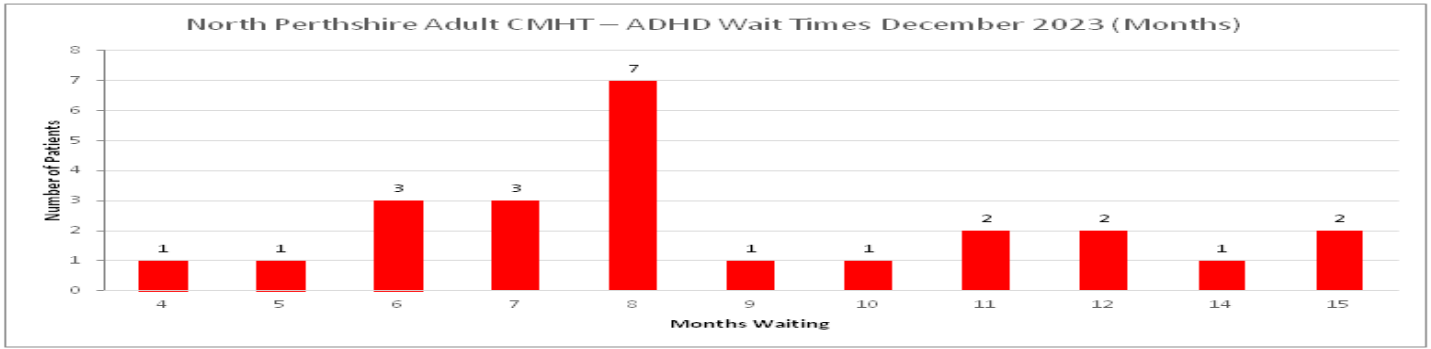
Within 3 months –

Outwith 3 months

Adherence to

## North Perthshire Adult CMHT – ADHD Wait Times



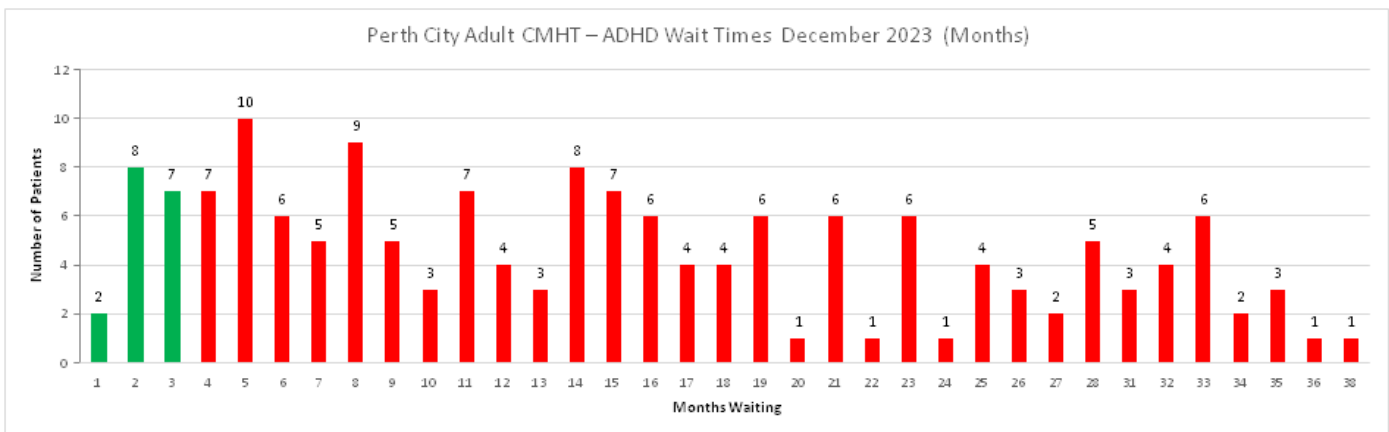


The Adult CMHTs have seen a significant increase in referrals for people with potential ADHD and are overwhelmed by the demand. This correlates with the emerging data across Scotland and rates are expected to increase exponentially. All patients on the ADHD waiting list have received baseline screening tools to determine whether they require to be assessed by a CMHT, self help information to access whilst they wait for initial assessment and will have access to the CMHT Duty Worker. The number of months waiting is shown along the bottom axis with the number of people waiting along the horizontal axis. Patients waiting within the stipulated 12 weeks are shown in green and all others breaching shown in red. In the absence of a Tayside Neurodevelopmental Pathway, we are currently developing a Neurodevelopmental Pathway proposal which will be presented to the Mental Health Steering Group on the 6<sup>th</sup> February 2024.

**ADHD Assessment**

- Total Patients – 24
- Within 3 months – 0
- Out with 3 months – 24
- Adherence to standard – 0%

**Perth City Adult CMHT – ADHD Wait Times**



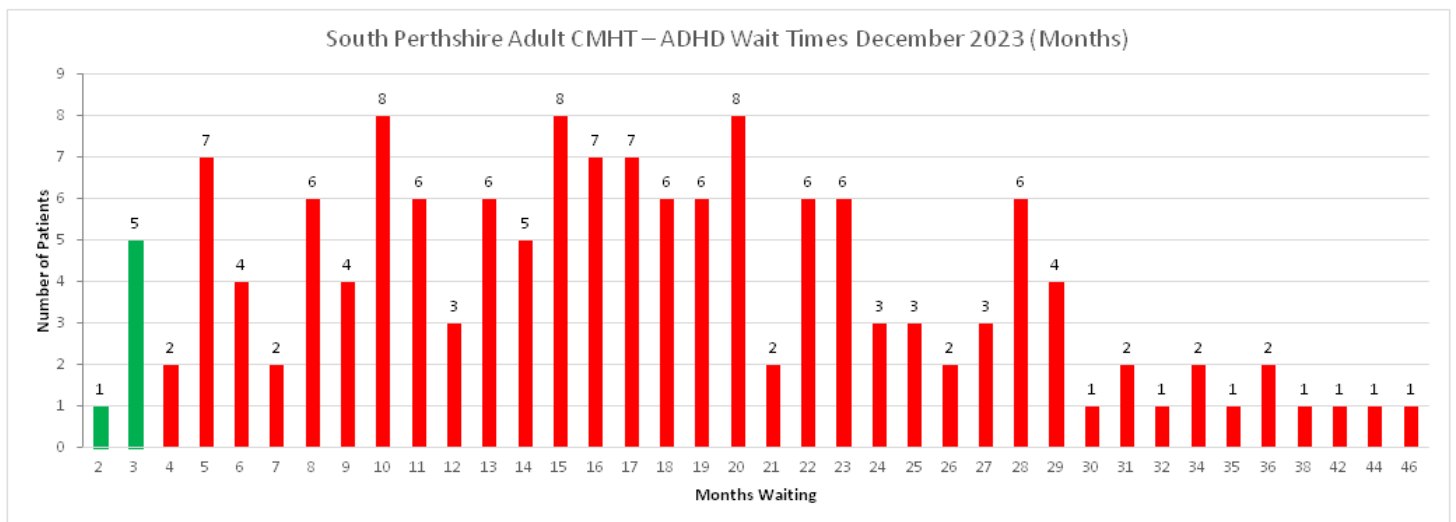
The Adult CMHTs have seen a significant increase in referrals for people with potential ADHD and are overwhelmed by the demand. This correlates with the emerging data across Scotland and rates are expected to increase exponentially. All patients on the ADHD waiting list have received baseline screening tools to determine whether they require to be assessed by a CMHT, self help information to access whilst they wait for initial assessment and will have access to the CMHT Duty Worker. The number of months waiting is shown along the bottom axis with the number of people waiting along the horizontal axis. Patients waiting within the

stipulated 12 weeks are shown in green and all others breaching shown in red. In the absence of a Tayside Neurodevelopmental Pathway, we are currently developing a Neurodevelopmental Pathway proposal which will be presented to the Mental Health Steering Group on the 6<sup>th</sup> February 2024.

**ADHD Assessment**

Total Patients – 160  
 Within 3 months – 17  
 Out with 3 months – 143  
 Adherence to standard – 11%

**South Perthshire Adult CMHT – ADHD Wait Times**

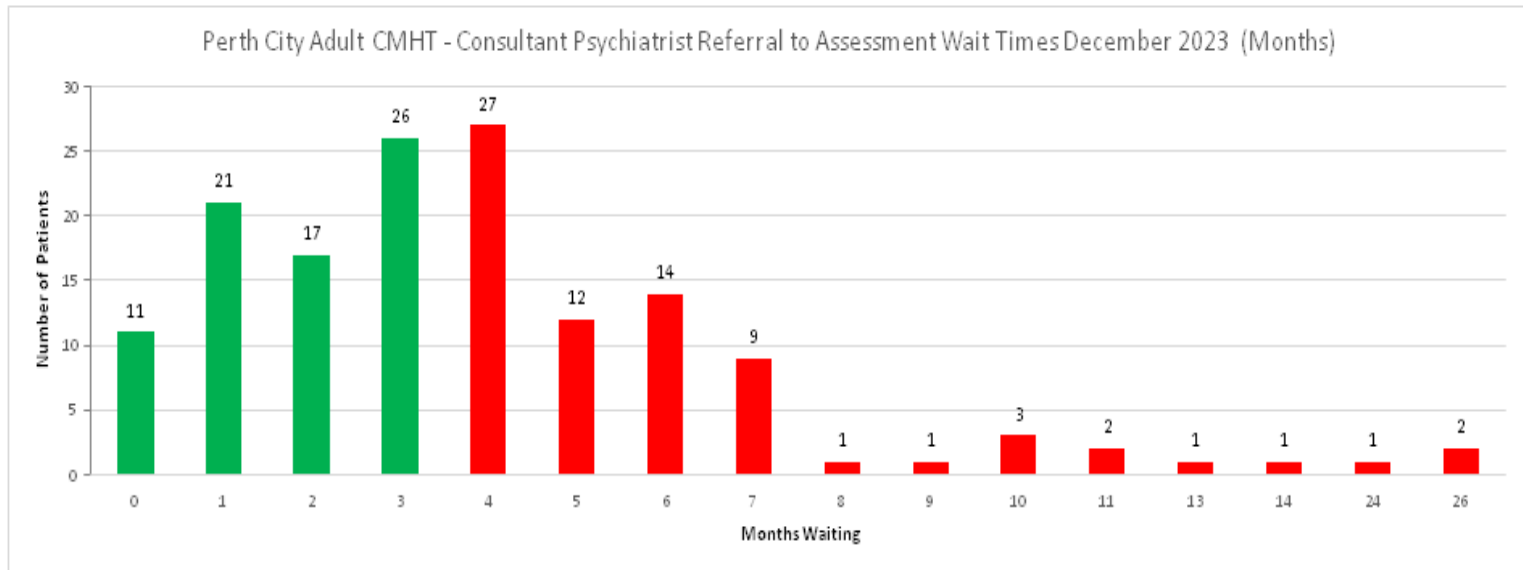


The Adult CMHTs have seen a significant increase in referrals for people with potential ADHD and are overwhelmed by the demand. This correlates with the emerging data across Scotland and rates are expected to increase exponentially. All patients on the ADHD waiting list have received baseline screening tools to determine whether they require to be assessed by a CMHT, self help information to access whilst they wait for initial assessment and will have access to the CMHT Duty Worker. The number of months waiting is shown along the bottom axis with the number of people waiting along the horizontal axis. Patients waiting within the stipulated 12 weeks are shown in green and all others breaching shown in red. In the absence of a Tayside Neurodevelopmental Pathway, we are currently developing a Neurodevelopmental Pathway proposal which will be presented to the Mental Health Steering Group on the 6<sup>th</sup> February 2024.

**ADHD Assessment**

Total Patients – 149  
 Within 3 months – 6  
 Out with 3 months – 143  
 Adherence to standard – 4%

## **Perth City Adult CMHT – Consultant Psychiatrist Referral to Assessment**



Wait times for Consultant Psychiatrist/Medical assessments are primarily due to recruitment issues and a reliance on temporary locum staff alongside outdated models of practice where Consultants primarily undertake outpatient clinics largely for people with less complex needs. Work to review models of practice and existing caseloads will progress over the coming year in line with the Tayside CMHS Redesign programme. The number of months waiting is shown along the bottom axis with the number of people waiting along the horizontal axis. Patients waiting within the stipulated 12 weeks are shown in green and all others breaching shown in red.

### **Consultant Psychiatrist Referral to Assessment**

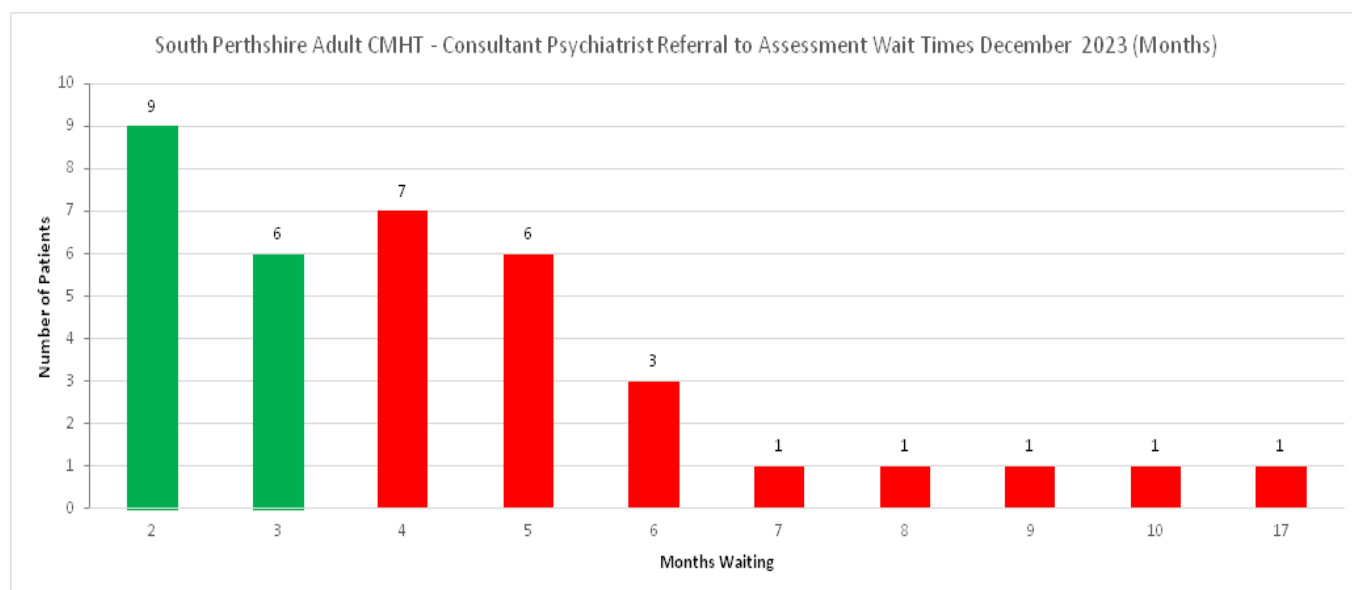
Total Patients – 149

Within 3 months – 75

Out with 3 months – 74

Adherence to standard – 50%

## **South Perthshire Adult CMHT – Consultant Psychiatrist Referral to Assessment**



Wait times for Consultant Psychiatrist/Medical assessments are primarily due to recruitment issues and a reliance on temporary locum staff alongside outdated models of practice where Consultants primarily undertake outpatient clinics largely for people with less complex needs. Work to review models of practice and existing caseloads will progress over the coming year in line with the Tayside CMHS Redesign programme. The number of months waiting is shown along the bottom axis with the number of people waiting along the horizontal axis. Patients waiting within the stipulated 12 weeks are shown in green and all others breaching shown in red.

### **Consultant Psychiatrist Referral to Assessment**

Total Patients – 36  
Within 3 months – 15  
Out with 3 months – 21  
Adherence to standard – 42%

### **Development of HSCP Mental Health KPIs**

The development of the suite of KPIs for MH across Tayside has continued with initial approval for the indicator suite having been reached. We are now in a data source/discovery phase. For data which sits within NHST systems we have agreement that the Business Unit will produce a data report covering each of the KPIs. This will be produced for Tayside, and each of the HSCPs and will therefore allow us to report independently but using the same suite of KPI data. We were due to receive the first draft of that data report by the end of Feb and so this is now overdue. This may be due to additional work which has been undertaken within NHST to produce NHST's Annual Delivery Plan and 3 year Strategic Plan.

In terms of the KPIs which are based on Local Government based data we have met recently with colleagues in Dundee and Angus to discuss the approaches that need to be taken to extract the data. Largely this will relate to our use of Social Care systems. In P&K with the move to MOSIAC upon us it may take a little longer to work through the detail and extract a first draft.

We have made good progress on this piece of the work but there are some pieces that still need to be completed. As we move forward we will insert a relatively short time horizon for us to review what's all been included in the suite of KPIs and make an assessment of the value and impact of including each of the indicators. This work will link with the NHST Strategic Plan, Scottish Government Mental Health Quality Indicators and the National Confidential Inquiry into Suicide and Safety in Mental Health Services(NCISH).

### 3. QUALITY/PATIENT CARE

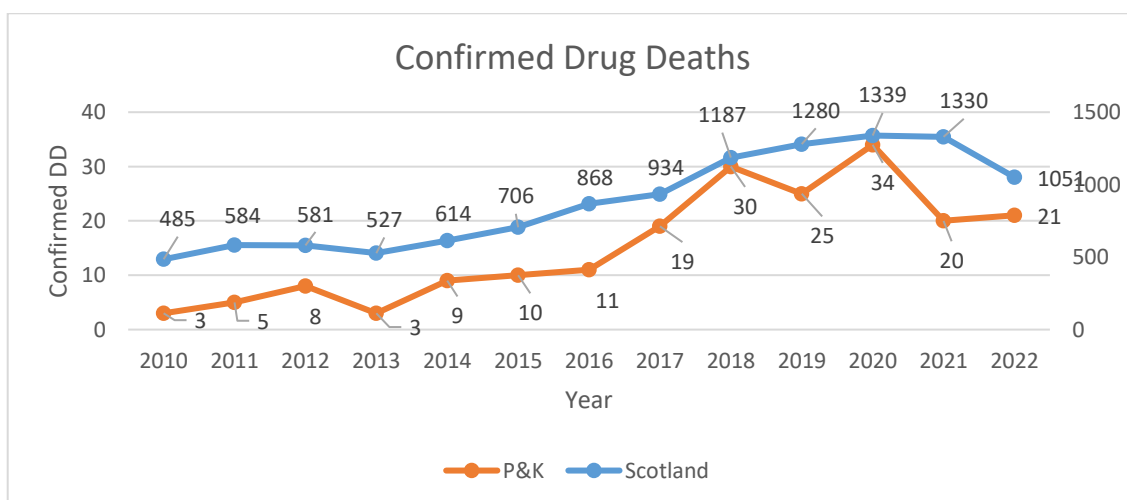
There are a number of ongoing risks (summarised within Appendices 2 &3) which, if not mitigated, pose a risk to the provision of safe care which is of high quality. The HSCP continues to manage these risks proactively. In addition:

- **Reduction of bed numbers in Garry Ward, MRH to help manage the risk to risk to patient safety and staff wellbeing.**
  - From February 2024, Garry ward has had a deficit of 4.75 WTE Registered nursing staff through a combination of rolling vacancies, maternity leave and further exasperated by long term sickness. Additional hours, overtime and temporarily increases of working hours has been offered to all staff to mitigate the risks on a short-term basis. NHST nurse bank have offered short term contracts to all RMN employed by NHST nurse bank and we have had no success with this approach to recruitment. The decision was made to reduce the ward bed compliment by 5 beds which supports the RCN recommendation for a 1:7 registrant/patient ratio. The temporary closure of these beds has been agreed until the end of October, but is under continual review and the beds may be opened if the staffing situation improves before then.

#### Drug related deaths:

Numbers of suspected drug related deaths are recorded across the three HSCP's, and is used to inform learning and context within and across the HSCP's.

The following shows data regarding confirmed drug deaths in P&K as compared to across Scotland (please note the two y-axes):



The following shows data regarding confirmed drug deaths in P&K as compared to across Scotland (please note the two y-axes):

- Local actions to mitigate risks in Perth and Kinross include:
- Implementation of Medication Assistant Treatment (MAT) Standards 1-5 by April 2023
- Implementation of MAT Standards 6-10 by April 2024
- National Mission to reduce drug deaths funding utilised to increase IDART staff compliment to reduce waiting times and enhance service provision e.g. – provision of an OT service and the creation of a new psychology assistant post to provide low level psychological interventions.
- Creation of a multiagency referral pathway for all new substance use referrals.
- Creation of a near fatal overdose pathway and multiagency group to review all reported near fatal overdoses with funding provided to third sector partners to employ assertive outreach workers to actively engage with service users.
- Creation of a residential rehabilitation pathway and funding panel to facilitate access to rehabilitation services for service users.

#### **4. WORKFORCE**

There are a number of ongoing risks regarding workforce challenges (summarised within Appendices 2 &3) which, if not mitigated, pose a risk to the provision of safe care which is of high quality. The HSCP continues to manage these risks proactively.

#### **5. FINANCIAL**

The composition of the Executive Management Team allows for a discussion of any financial issues from the perspective of Care & Professional Governance.

#### **6. RISK ASSESSMENT/MANAGEMENT**

Key risks and risk assurance process is detailed under section 2.3a.

#### **7. EQUALITY AND DIVERSITY, INCLUDING HEALTH INEQUALITIES**

Equality, diversity and health inequalities are core to the Getting it Right Framework and the domains within. Each service provides exception reports which include this aspect. Currently there are no exceptions requiring to be escalated to CGC.

#### **8. OTHER IMPACTS**

N/A

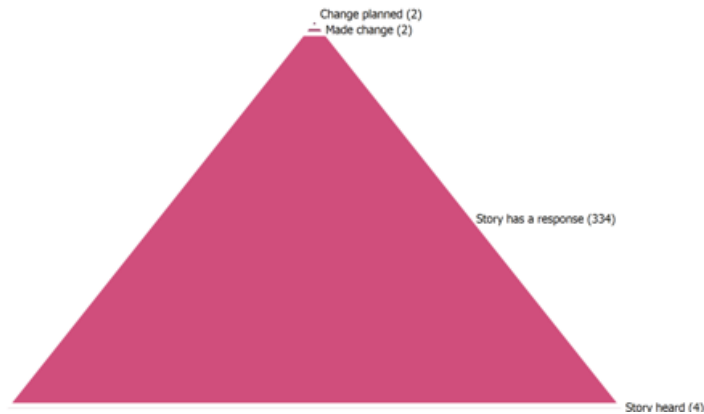
#### **9. COMMUNICATION, INVOLVEMENT, ENGAGEMENT AND CONSULTATION**

All HSCP Staff have been invited to complete the latest iMatter survey, and teams will meet to discuss the results of these and create actions to take forward.

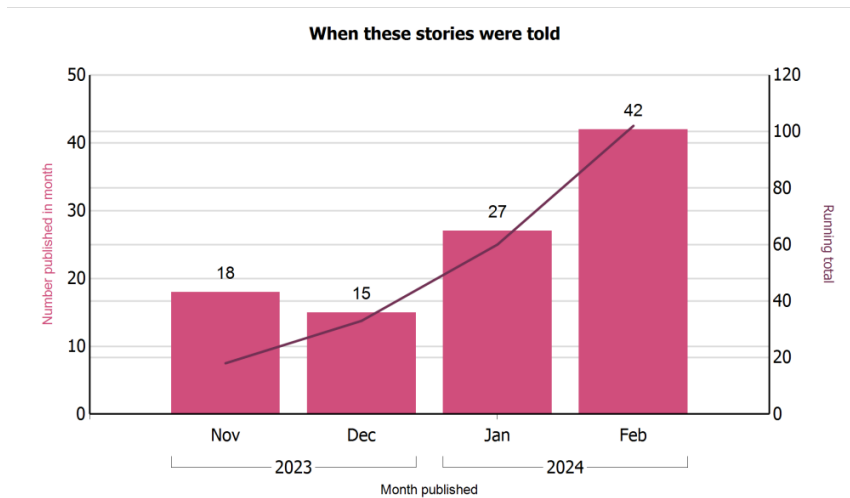
The use of Care Opinion continues to expand within the HSCP, and during reporting this reporting period, we have continued to be the most active HSCP in Scotland, and are ranked 18th within the top 35 most active Care Opinion

subscriptions across the UK. There were 102 stories between Nov 2023 – Feb 2024, viewed a total of 4191 times.

To date we have had 4 changes planned; these changes were promised before this reporting period and as you can see 2 of the changes have been made and 2 are being worked on and are yet to be completed.



In this bar chart below, you can see month by month how many stories we received over the reporting period. Currently we have a 98% response rate to the last 100 stories.



Looking at the most common word tag added by the authors, we can see by the total number of reactions that people have responded positively when sharing their story;

**What's good? - 149 responses**

**What could be improved? – 29 responses**

**Feelings - 89 responses**

**This is how Care Opinion have rated our stories;**

94 stories – not critical (0)

1 story – minimally critical (1)

7 stories - mildly critical (2)

## 9 ROUTE TO THE MEETING

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

- P&K HSCP Care & Professional Governance Forum members
- P&K HSCP Professional Leads and Heads of Service
- P&K HSCP Executive Management Team (final draft)




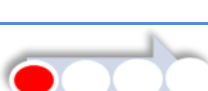
## 10 RECOMMENDATION

This report is being presented for:

- **Reasonable Assurance**

As Lead Officer for Perth & Kinross HSCP I would suggest that the level of assurance provided is: **Reasonable Assurance**

Please ✓ the level of assurance you are providing:

| Level of Assurance    | System Adequacy                                                                     | Controls                                                                                                                                                                                                                                                 | ✓ |
|-----------------------|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| Substantial Assurance |    | A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited                                               |   |
| Reasonable Assurance  |   | There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.                     | ✓ |
| Limited Assurance     |  | Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.                       |   |
| No Assurance          |  | Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited. |   |



**List of services within P&K HSCP**

The P&K HSCP works within a locality model to deliver the following delegated services and hosted services:

|                                   |                                                                                                                                                                                                                                                                                                         |           |
|-----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| <b>Perth City Locality</b>        | Community Nursing,<br>Community Mental Health Teams<br>(Adult and Older Peoples),<br>Community Allied Health Profession Teams                                                                                                                                                                           | Delegated |
| <b>North Locality</b>             | Integrated Drug & Alcohol Recovery Team,<br>Advanced Nurse Practitioners,<br>Community Hospitals (x4),<br>Community Care & Treatment Teams,<br>Community Learning Disability Services,<br>Adult Social Work Teams                                                                                       | Delegated |
| <b>South Locality</b>             | Respiratory Team<br>Care Home Liaison (Mental Health)<br>Access Team<br>Mental Health Officer Team<br>Wellbeing Team<br>Hospital Discharge Team<br>Discharge Hub                                                                                                                                        | Delegated |
| <b>Perth Royal Infirmary</b>      | Stroke Ward<br>Medicine for the Elderly Ward<br>Discharge Liaison Team<br>Allied Health Profession Team (Inpatients)<br>Allied Health Professions (Outpatient Teams)                                                                                                                                    | Delegated |
| <b>Murray Royal Hospital</b>      | 3 Older Peoples Mental Health Inpatient Wards                                                                                                                                                                                                                                                           | Delegated |
| <b>Commissioned Services</b>      | Care at Home,<br>42 Care Homes,<br>Supported Accommodation                                                                                                                                                                                                                                              | Delegated |
| <b>Registered Services</b>        | Dalweem & Parkdale Care Homes,<br>Day Care,<br>HART                                                                                                                                                                                                                                                     | Delegated |
| <b>Equipment &amp; TEC</b>        | Joint Equipment Loan Store,<br>Community Alarm                                                                                                                                                                                                                                                          | Delegated |
| <b>Mental Health Officer Team</b> | Mental Health Officers across P&K                                                                                                                                                                                                                                                                       | Delegated |
| <b>Prison Healthcare</b>          | Across 2 sites – HMP Perth and HMP Castle Huntly<br>Pharmacy Team<br>Primary Care Medical & Nursing Team<br>Integrated Mental Health & Substance Misuse Team<br>Occupational Therapy Team<br>Physiotherapy<br>Clinical Psychology<br>In-reach Podiatry<br>In-reach Dental<br>In-reach Blood Borne Virus | Hosted    |
| <b>Public Dental Service</b>      | Tayside wide Services                                                                                                                                                                                                                                                                                   | Hosted    |
| <b>Podiatry</b>                   | Tayside wide Services                                                                                                                                                                                                                                                                                   | Hosted    |



**DATIX service risks within P&K HSCP health services  
(as at 15<sup>th</sup> Mar 2024)**

Current service risks within health services (31):

| Ref | Locality/<br>Service | Title of risk                                                                                         | Risk<br>Score &<br>Grading<br>(Inherent<br>) | Risk<br>Score &<br>Grading<br>(Current) | Last<br>updated<br>/<br>Manager | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|-----|----------------------|-------------------------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 829 | P&K HSCP<br>wide     | Challenges in<br>relation to<br>accommodation<br>for clinical and<br>non-clinical staff<br>across P&K | 20<br>RED                                    | 20<br>RED                               | 06-12-23<br>Evelyn<br>Devine    | <p>P&amp;K HSCP Chief Officer and key staff are participating in the one public estate discussions in order to identify appropriate accommodation for different health and social care teams.</p> <p>Head of Health has briefed NHS Director of Facilities re all options which have currently been explored in NHS and PKC family</p> <p>Interim Chief Exec of PKC has been briefed by Chief Officer re: accommodation needs for the HSCP.</p> <p>Premises requirements identified and summarised in a briefing paper for CCATS, IDART, CAMH's, potential relocation of GP premises in Perth City and a multi-disciplinary team supporting young people and adults with a learning disability and/or Autism with complex needs. Shared with NHS Procurement and Estates</p> <p>Accommodation walkrounds have been completed across Health &amp; Social care sites with a view to mapping sites to accommodate future teams.</p> <p>Recommended a short life working group with NHST support service and Estates in order to review the accommodation needs for CCATS, IDART, Urgent Care and Community AHP's</p> <p>Consultation paper to be completed in relation to engaging with staff re: accommodation moves.</p> <p>Paper to be written to describe the options going forward (option appraisal) in conjunction with NHST estates and support services</p> |

| Ref | Locality/<br>Service | Title of risk                                                             | Risk<br>Score &<br>Grading<br>(Inherent<br>) | Risk<br>Score &<br>Grading<br>(Current) | Last<br>updated<br>/<br>Manager | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|-----|----------------------|---------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 701 | Prison<br>Healthcare | Mental Health<br>Waiting Times<br>within the Prison<br>Healthcare Service | 15<br>AMBER                                  | 20<br>RED                               | 15-01-23<br>David<br>Hope       | <p>Review of workforce model to increase capacity of PHC teams to meet demand</p> <p>Seek agency nursing staff to reduce time spent by team administering medication</p> <p>Escalate to chief officer concern over recruitment delays by HR</p> <p>SBAR to extend agency cover authorised by chief officer</p> <p>Introduced telephone consultations</p> <p>Explore skill mix within the team</p> <p>Readvertise band 6 RN 3 x CN posts to support the workforce compliment /requirement</p> <p>SCN holding clinical caseload in Perth</p> <p>Consider Learning disability RN for team to enhance service and enhance overall compliment given recruitment challenges</p> <p>SCN increasing clinical caseload</p> <p>RAG status applied to all triaged referrals and current caseload</p> <p>Further recruitment - only two band 6 nurses in post, 1 sick and working notice, the other working notice - recruitment ongoing</p> |

| Ref      | Locality/ Service | Title of risk                                           | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager    | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|----------|-------------------|---------------------------------------------------------|----------------------------------|--------------------------------|---------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 132<br>1 | Perth City        | Inadequate environment for the Perth City CCATS service | 20<br>RED                        | 20<br>RED                      | 17-01-24<br>Andrew Parker | <p>IPC audit undertaken in March 2023 to understand the numerous environmental concerns at Beechgrove.</p> <p>Clinical Staff undertake additional cleaning within the clinic areas</p> <p>Visit by Chief Officer to site and concerns highlighted.</p> <p>Engagement with PKC estates to explore repairs.</p> <p>Site visit from the current cleaning contractor, soft facilities and PKC estates to explore gaps and potential solutions within current provision</p> <p>Perth City CCATS incorporated in to SLWG for accommodation</p> <p>Mark Mudie NHST has set up accommodation group to address issues this will be main agenda item for this group</p> <p>Notice has been served by PKC and end date is August 2024</p> <p>Property Application submitted through smart sheet as requested by property colleagues</p> <p>Walkaround completed awaiting timeline from estates colleagues issues escalated</p> |

| Ref | Locality/ Service | Title of risk                                    | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager        | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|-----|-------------------|--------------------------------------------------|----------------------------------|--------------------------------|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 886 | AHP               | Staffing challenges within the OT service at PRI | 20<br>RED                        | 20<br>RED                      | 09-01-24<br>Terrienne Thomson | <p>Following on from WoC Audit data, 2x band 5 posts and 1 x band 6 posts have been recruited to</p> <p>Issue of staffing challenges escalated to Lead AHP and Senior Service Manager</p> <p>recruited to x2 band 5 posts and band 6 posts</p> <p>1 member of Bank staff supporting service</p> <p>Service has prioritised banding 1 &amp; 2 patients</p> <p>Existing staff have undertaken extra hours where possible.</p> <p>Continue to look to the AHP bank where possible.</p> <p>Ensuring adequate staff supervision, and allowing staff to meet with team leads and raise any concerns. Wellbeing resources and champions available, and the NHST Wellbeing team approached for support.</p> <p>Staff advised to record missed opportunities for therapy with patients.</p> <p>Staff asked to discuss with CPTM re any additional hours worked due to clinical demand.</p> <p>Professional support from CPTM and AHP Professional lead to staff where required.</p> <p>Week of care audit undertaken in Dec 2020, which has provided real world evidence of the challenges regarding demand and capacity ratio.</p> <p>1X b6 in post (with non-recurring funding), and 2x B5 in post (with non-recurring funding)</p> <p>Identifying and communicating at the PRI site huddle on a daily basis specific wards that may not have adequate OT cover for P1 &amp; P2 referrals.</p> |

| Ref  | Locality/ Service | Title of risk                                                         | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager | Mitigations                                                                                                                                                                                                                                                                                                                               |
|------|-------------------|-----------------------------------------------------------------------|----------------------------------|--------------------------------|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1458 | P&K wide          | Staffing levels within the P&K HSCP Community Nursing Evening Service | 20<br>RED                        | 16<br>AMBER                    | 29-02-24<br>Julie Dunn | <p>Use of bank staff requested</p> <p>Use of extra hours/overtime</p> <p>Locality cover requested</p> <p>Support from other teams</p> <p>Proactive recruitment to vacant posts (3 posts)</p> <p>Weekly huddles with Community Nursing managers across P&amp;K</p> <p>Vacancy reporting and ongoing update to Lead Nurse, P&amp;K HSCP</p> |

| Ref  | Locality/ Service | Title of risk                                                                        | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager     | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|------|-------------------|--------------------------------------------------------------------------------------|----------------------------------|--------------------------------|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1455 | POA               | Registrant workforce vacancies within 3 POA IP wards at Murray Royal Hospital Perth. | 20<br>RED                        | 16<br>AMBER                    | 19-02-24<br>Zara Borthwick | <p>Regular use of NHST Nurse bank staff, including retired RMN's who are experienced in POA.</p> <p>Ongoing recurring recruitment for vacant posts</p> <p>Engaging in NHST newly graduated practitioner program, with a view to being able to support 9 NGP this year across the service.</p> <p>Daily staffing huddles to look at acuity, risk and workforce across the service.</p> <p>Introduction of band 4 roles</p> <p>Conversion of 1.21 WTE B5 monies to support an extra WTE B6 across all three wards</p> <p>Five non operational beds in Garry ward due to 42% WTE registrant gaps. Non-operational beds agreed by P&amp;K HSCP EMT from February 2024 - October 2024 until NGP's can be recruited.</p> <p>Use of agency staffing to support safer staffing requirements as per P&amp;K HSCP escalation pathway</p> |

| Ref | Locality/ Service             | Title of risk        | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager     | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|-----|-------------------------------|----------------------|----------------------------------|--------------------------------|----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 272 | MFTE, POA / Intermediate Care | Tay ward - workforce | 20 RED                           | 16 AMBER                       | 15-03-24 Sharron Johnstone | <p>4 x daily safety huddles in PRI - staffing ratios and clinical acuity discussed.</p> <p>Skill mix managed on per shift basis by SCN</p> <p>SCN's now working predominantly in a clinical role</p> <p>Staff undertaking additional hours and/or overtime</p> <p>A rolling advert is in place to advertise substantive vacancies</p> <p>Timeous escalation for Agency and Bank</p> <p>Promoting attendance at work being managed as per policy by SCN and Senior Nurse.</p> <p>Tay staffing Gap analysis reviewed weekly with input from SCN, Senior Nurse, Service manager, Senior service Manager and Professional Lead Nurse</p> <p>There has been agreement for recruitment to 2WTE B5 staff nurses and 2 WTE B3 HCSW</p> <p>Full partnership daily huddles</p> <p>Substantive staff within HSCP services providing substantive nursing support.</p> |

| Ref  | Locality/ Service                    | Title of risk               | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager     | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|------|--------------------------------------|-----------------------------|----------------------------------|--------------------------------|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1432 | Inpatient MFTE and Intermediate Care | PRI Stroke Unit - Workforce | 20 RED                           | 16 AMBER                       | 22-12-23 Sharron Johnstone | <p>Stroke Unit now have newly aligned budget and the wellbeing enablement practitioners have been appointed.</p> <p>A rolling advert is in place to advertise vacancies that exist in the ward.</p> <p>Full partnership daily huddles</p> <p>4 x daily safety huddles in PRI - staffing ratios and clinical acuity discussed.</p> <p>Skill mix managed on per shift basis by SCN</p> <p>SCN's now working predominantly in a clinical role</p> <p>Staff undertaking additional hours and/or overtime</p> <p>Timeous escalation for Agency and Bank</p> <p>Promoting attendance at work being managed as per policy by SCN and Senior Nurse.</p> |

| Ref      | Locality/ Service | Title of risk                                           | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager    | Mitigations                                                                                                                                                                                                                                                                                                                          |
|----------|-------------------|---------------------------------------------------------|----------------------------------|--------------------------------|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 135<br>1 | P&K Wide          | P&K HSCP of framework agency use and impact on services | 20<br>RED                        | 16<br>AMBER                    | 10-07-23<br>Valerie Davis | <p>Tayside escalation process now in place</p> <p>Each area has established a workforce group to oversee daily staffing challenge/escalation</p> <p>Service managers are reporting through our established huddles any emerging issues.</p> <p>Use of off framework captured on DATIX.</p> <p>Certain areas using block booking.</p> |

| Ref      | Locality/ Service | Title of risk                                                         | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager     | Mitigations                                                                                                                                                                                                                                                |
|----------|-------------------|-----------------------------------------------------------------------|----------------------------------|--------------------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 133<br>5 | Public Dental     | Risk due to ageing decontamination equipment at Broxden Dental Centre | 16<br>AMBER                      | 16<br>AMBER                    | 29-01-24<br>Gillian Elliot | <p>Preventative planned maintenance by estates engineers monthly</p> <p>Stored data backed up to external server</p> <p>Daily checks by staff on machinery and escalation if required</p> <p>Reciprocal contingency arrangement with CSSD at Ninewells</p> |

| Ref      | Locality/<br>Service | Title of risk                                  | Risk<br>Score &<br>Grading<br>(Inherent<br>) | Risk<br>Score &<br>Grading<br>(Current) | Last<br>updated<br>/<br>Manager | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|----------|----------------------|------------------------------------------------|----------------------------------------------|-----------------------------------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 126<br>7 | P&K wide             | Capacity and Flow<br>Older Peoples<br>Services | 20<br>RED                                    | 16<br>AMBER                             | 17-01-24<br>Amanda<br>Taylor    | <p>Daily multiagency meetings within PRI regarding capacity and flow and prioritising of discharges</p> <p>Weekly Silver Command in place to monitor progress and actions</p> <p>Roll out of PDD implementation and training across sites now in place</p> <p>Frailty at Front Door Model in place</p> <p>Interim Bed usage across P&amp;K to facilitate flow</p> <p>TQUIP Improvement Work for Community Hospitals</p> <p>Improvement on Guardianship Processes across P&amp;K</p> <p>Focus on length of stay in Community Hospitals and improvement plans under development</p> <p>Care at Home Reviews to free up capacity</p> <p>Development of DD dashboard for P&amp;K</p> <p>Extension of Interim Process for further 12 months</p> <p>Review of integrated discharge team</p> <p>Development of discharge pathways using home first approach</p> <p>Further developments on integrated care model</p> <p>Reviw of interim process across P&amp;K/New process implemented by Leads</p> <p>bronze commend commenced</p> <p>Connections made with colleagues from Dundee regrding CAH improvements</p> <p>TOC being commenced around Front Door model AWI/Guardianship</p> |



| Ref  | Locality/ Service | Title of risk          | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager        | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|------|-------------------|------------------------|----------------------------------|--------------------------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1226 | Prison Healthcare | GP Cover for HMP Perth | 15 AMBER                         | 16 AMBER                       | 15-01-24<br>Angela Cunningham | <p>AMD in communication with a practice who may be interested in a hybrid approach</p> <p>Authority given by Medical Director to utilise non-framework locum agency</p> <p>Escalate risk to red given short timescales and implications</p> <p>Clear process to attempt to secure additional cover using locum agency, local locum groups and regular locum session</p> <p>Documented escalation process should shifts remain unfilled</p> <p>Back up explored via GP practice who cover HMP Castle Huntly and GP OOH service</p> <p>Locum GP in place to cover full time in November 2022</p> |

| Ref  | Locality/ Service             | Title of risk                                 | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager        | Mitigations                                                                                                                                                                                                                                                                                                                                                                |
|------|-------------------------------|-----------------------------------------------|----------------------------------|--------------------------------|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1170 | MFTE, POA / Intermediate Care | P&K HSCP Hand Therapy Service - Waiting Times | 20 RED                           | 16 AMBER                       | 08-09-23<br>Terrienne Thomson | <p>Capacity within the team has been increased by adding appointment types</p> <p>Waiting lists have been cleansed to ensure it is a true reflection of demand</p> <p>HCSW has recently started in the role.</p> <p>1 WTE currently vacant; postholder has accepted but not yet started.</p> <p>Being actively managed within the team to increase their clinical time</p> |

| Ref  | Locality/ Service     | Title of risk                                                                             | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager      | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|------|-----------------------|-------------------------------------------------------------------------------------------|----------------------------------|--------------------------------|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1157 | Public Dental service | Failure to meet statutory levels of ventilation within Dental Surgeries in Angus & Dundee | 20 RED                           | 16 AMBER                       | 20-02-23<br>Gillian Elliott | <p>Level 3 PPE &amp; FFP3 masks in place</p> <p>Enhanced cleaning and Infection Prevention &amp; Control procedures in place</p> <p>Limiting access to the appropriate people with complex care needs.</p> <p>The Public Dental Service has secured funding for NHST Estates to seek tenders</p> <p>Apply fallow time and open windows when possible</p> <p>Respiratory risk assessment undertaken before any Aerosol generating procedures.</p> |

| Ref  | Locality/ Service | Title of risk                   | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager  | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|------|-------------------|---------------------------------|----------------------------------|--------------------------------|-------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1151 | P&K wide          | Mental Health - Capacity & Flow | 20 RED                           | 16 AMBER                       | 6-12-23<br>Chris Lamont | <p>Daily multiagency meetings within POA regarding capacity, and daily Tayside GAP huddle attended by HSCP MH services.</p> <p>CMHT GAP &amp; POA are supporting people within the community to prevent admission and to support discharges from hospital</p> <p>Funding from action 15 has enabled an increase in level 1 supports for people with less complex needs- this results in earlier intervention</p> <p>OP CMHT workers attend discharge planning meetings for people in MH inpatients</p> <p>Dementia liaison team provides specialised input for people with increased care needs in care homes across P&amp;K</p> <p>GAP CMHT are in the process of aligning SW assistant to support with discharge planning.</p> <p>Review being undertaken of EMI patients within care home beds across P&amp;K. This is to increase capacity.</p> <p>Capacity and Flow discussed at Silver Command meeting. P&amp;K Mental Health rep present.</p> |

| Ref  | Locality/ Service | Title of risk                                       | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|------|-------------------|-----------------------------------------------------|----------------------------------|--------------------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1055 | Primary Care      | Risk regarding long term GP Practice sustainability | 16 AMBER                         | 16 AMBER                       | 13-02-24 Ruth Buchan   | <p>Active engagement with Westward Programme and Educational Release Programme to promote P&amp;K</p> <p>Sustainability requirements are being reviewed by the Senior Leadership Team</p> <p>Escalation processes through Primary Care Forum and the Primary Care Board.</p> <p>2nd Sustainability survey completed, with 23/23 practices responding. Data being collated and themed for an update report, Recruitment and Retention increasingly problematic and increasing age of workforce / imminent retireals</p> <p>HSCP have committed significant recurrent resource to develop a Primary Care Resilience Team.</p> |

| Ref | Locality/ Service      | Title of risk | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|-----|------------------------|---------------|----------------------------------|--------------------------------|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 982 | Mental Health P&K wide | Workforce     | 20 RED                           | 16 AMBER                       | 06-12-23 Chris Lamont  | <p>Learning from staff exit interviews</p> <p>Operational Associate Medical Director for Mental Health is currently reviewing and arranging updated recruitment tools</p> <p>Begun the exploration of a model relating to General practitioner specialists in a collaboration with the AMD for Mental health</p> <p>P&amp;K service entered contingency , and P&amp;K Mental Health contingency meeting established. As of 26th Nov 21, the service will exit contingency.</p> <p>Liaison with Mental Health AMD, Nurse Director and Medical Director</p> <p>Medical contingency team to be based at Murray Royal Hospital commencing 21 June. The team was stood Down from 29th Nov 21</p> <p>Pharmacy resource secured to support community teams from Oct 2022</p> <p>Advanced Nurse Practitioner resource being secured to support contingency team</p> <p>Drafting patient pathways between CMHT and medical contingency team</p> <p>NHST are deploying medical resource from Dundee</p> <p>Secured adequate locum psychiatrist cover for the next six months.</p> |

| Ref  | Locality/ Service | Title of risk                                                | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|------|-------------------|--------------------------------------------------------------|----------------------------------|--------------------------------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 657  | South             | P&K HSCP Community Hospital Registered Nurse Staffing Levels | 20 RED                           | 16 AMBER                       | 04-12-23 Tia Dixon     | <p>Current shifts escalated through normal bank procedures and regular discussion with nurse bank</p> <p>Risk Assessment completed by SCN/CN for each shift to assess risk against staffing levels and actioned as appropriate</p> <p>Care Assurance Tools have been implemented by CPTM and actioned as appropriate</p> <p>12 hour shifts in place</p> <p>Contingency / Escalation Plan being developed to consider future options of bed model across Community Hospitals</p> <p>Block contract for bank/agency for 3 months requested for Crieff</p> <p>Review CV-19 testing pathway to ensure rapid testing and staff able to return to work where appropriate.</p> <p>Sharing staff across the four sites to manage the risk regarding staffing.</p> <p>Implementing a SCN huddle twice a week to review workforce.</p> <p>Exploring local pools to work across P&amp;K HSCP.</p> <p>Rolling B5 advertising in place for South Locality.</p> |
| Ref  | Locality/ Service | Title of risk                                                | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 1329 | P&K wide          | Workforce Capacity risk to support Inpatient Areas           | 15 AMBER                         | 15 AMBER                       | 04-12-23 Amanda Taylor | <p>Daily huddle to review skill mix between SCN/Team</p> <p>Escalation processes in place to CPTM/Locality Managers</p> <p>SBAR to EMT describing risk and mitigation</p> <p>Contingency group set up for the South locality to manage inpatient staffing and potential risks.</p> <p>For all the areas the escalation process has been reviewed for P&amp;K and shared with all clinical leads.</p> <p>Ongoing conversations with Nurse bank to agree block booking of tier 1 agency staff.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                  |

| Ref | Locality/ Service      | Title of risk          | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager     | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|-----|------------------------|------------------------|----------------------------------|--------------------------------|----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 983 | Mental Health P&K wide | Ligature Anchor Points | 20 RED                           | 15 AMBER                       | 21-02-24<br>Zara Borthwick | <p>Clinical safeguards in place including risk assessment for self harm</p> <p>Developed standardised self harm care plan</p> <p>Increased staff training and awareness</p> <p>Manchester ligature assessment completed for all wards; reviews carried out annually</p> <p>Programme of work planned for red and amber areas in Leven ward, MRH. We have been advised by NHST that Leven ward has been included within Phase 2 of the programme of works</p> <p>Risk Assessment for Electric profiling bed in situ for all patients within Leven as per Protocol for GAP</p> <p>Awaiting further updates from NHST Estates regarding ligature reduction programme in Leven ward</p> <p>Functional Ward Leven (ie locking of laundry door when not in use). An action plan has been developed by SCN/CPTM within P&amp;K, Angus and Dundee. All reflective within Manchester tool (last completed on 03/03/21)</p> <p>Implementation of NHST Improving Observation Policy</p> <p>Considering any DATIX alerts received for any new ligature anchor point use across Tayside</p> <p>Ligature Risk now being monitored through Samrt Sheet system</p> <p>Assets management Team reviewing works progress. Awaiting feedback on when Ligature point works will be commenced</p> |

| Ref  | Locality/ Service | Title of risk                                                    | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager       | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|------|-------------------|------------------------------------------------------------------|----------------------------------|--------------------------------|------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1457 | Primary Care      | Risk regarding sustainability of GMS services in Carse of Gowrie | 15 AMBER                         | 12 AMBER                       | 28-02-24<br>Caitlin Charlton | <p>Proposed alignment of lease/licence/hire agreement to Nov 2027 approved by PC PiG on the 27th Feb</p> <p>NHST Property working with CLO to align the lease/licence/hire agreement</p> <p>GP Practice considering becoming a GP training practice to support succession planning</p> <p>GP recruitment - primary care services providing support</p> <p>GP practice liaising with Career Start recruitment and international medical graduate recruitment</p> <p>P&amp;K HSCP Primary Care undertaking premises RAG assessment in partnership with NHST property services</p> <p>Approval granted from EMT to undertake a health needs assessment survey of registered Carse of Gowrie patients</p> <p>Regular communication between GP practice and Primary Care Services</p> |

| Ref  | Locality/ Service      | Title of risk                                | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager      | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|------|------------------------|----------------------------------------------|----------------------------------|--------------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1293 | Mental Health P&K wide | Mental Health Nursing and AHP workforce risk | 20 RED                           | 12 AMBER                       | 01-03-24<br>Lindsey Griffin | <p>Focused recruitment continues across mental health nursing and mental health OT Teams. Workforce reviews have been undertaken and posts which have been out to recruitment on multiple occasions have been varied in some areas to make these more attractive to recruitment and retention.</p> <p>For POA Inpatients, we are continuing to secure supplementary staffing via bank and agency and we have implemented five non operational beds within Garry Ward in line with critical staffing issues and the inability to secure bank and agency staff.</p> <p>Learning from staff exit interviews.</p> <p>Advanced Nurse Practitioner resource has been secured with three Trainee ANPS now in post.</p> <p>Workload tools have been undertaken within the POA Inpatient wards and the Mental Health AHP Teams. These will be implemented across all areas over the coming year. Mental Health Physiotherapy Team are also developing an SBAR to identify the disparity between demand and capacity. The SBAR and the workload tools will be presented to the Executive Management Team.</p> <p>Significant funding has been secured to support core staffing within the POA Inpatient Ward.</p> <p>A range of posts such as Assistant Practitioners, Transition Nurse, Activity Workers, ANPs are also being implemented to enhance recruitment and diversify the nursing and AHP workforce.</p> <p>Currently utilising agency OT given the Mental Health OT Team is at critical staffing levels.</p> |

| Ref  | Locality/ Service | Title of risk                                  | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager        | Mitigations                                                                                                                                                                                     |
|------|-------------------|------------------------------------------------|----------------------------------|--------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1254 | Prison Healthcare | Non Emergency Transfer of Patients to Hospital | 12 AMBER                         | 12 AMBER                       | 10-10-23<br>Angela Cunningham | <p>Daily review of cancellations and liaison with SPS</p> <p>Escalation to contract manager (SPS) via Governor in Charge</p> <p>Monitor and escalation via the national Prison Care Network</p> |

| Ref  | Locality/ Service | Title of risk                                                   | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager  | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|------|-------------------|-----------------------------------------------------------------|----------------------------------|--------------------------------|-------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1038 | Podiatry          | Excessive patient waiting times within Tayside Podiatry service | 16<br>AMBER                      | 12<br>AMBER                    | 12-10-23<br>Mark Finnon | <p>Proactively engaging with Higher Education Institutions to attract Newly Qualified Practitioners</p> <p>Remobilisation of service and more robustly applying the NHST eligibility criteria for new and existing patients</p> <p>Creation of assessment hubs to allow for assessment against eligibility criteria</p> <p>Practice development training regarding wound management for staff to ensure staff knowledge and confidence around this</p> <p>Operational leads vetting weekly meeting to ensure consistency and equity across Tayside</p> |

| Ref | Locality/ Service      | Title of risk                  | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager   | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|-----|------------------------|--------------------------------|----------------------------------|--------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 980 | Mental Health P&K wide | Environment and Infrastructure | 16<br>AMBER                      | 12<br>AMBER                    | 06-12-23<br>Chris Lamont | <p>Near Me Technology web based video consulting service implemented</p> <p>NHS Tayside guidance and process in place to support home working arrangements.</p> <p>Safer Working Physical distancing risk assessments carried out across Health &amp; Social Care services in P&amp;K</p> <p>Business Continuity Plans in place across the HSCP, and reviewed as required</p> <p>Health &amp; Safety workbook holders, Fire Duty Holders in place across the estate, and infection prevention &amp; control processes and audit ongoing</p> <p>COVID restrictions no longer in place</p> <p>Currently exploring the use of one-off capital funding to improve our clinical environments.</p> <p>Capital funding has been identified for improving environment and improving fabric of Community MH bases.</p> <p>Current needs analysis being undertaken by CPTM. Multi-Professional Working Group has been established on the MRH site to identify potential accommodation to rehouse Mental Health staff. this will meet on a monthly basis.</p> |

| Ref | Locality/ Service | Title of risk                                                | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager      | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-----|-------------------|--------------------------------------------------------------|----------------------------------|--------------------------------|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 613 | Perth City        | Excessive wait times for Adult Mental Health OT intervention | 20<br>RED                        | 12<br>AMBER                    | 01-03-24<br>Lindsey Griffin | <p>All patients on the OT waiting list have received an initial mental health assessment and been determined as appropriate for mental health OT intervention. Waiting list management systems are fully embedded.</p> <p>Communication to patients every 3 months regarding duty worker arrangements and to provide updates regarding their referral.</p> <p>Patients given contact details for OOH services.</p> <p>Group interventions implemented.</p> <p>Providing ongoing support to existing staff working within the environment of excessive waiting times.</p> <p>Communication to referrers with regards to the waiting times situation.</p> <p>Removal of OT staff from generic CMHT roles (which they are funded for) to allow clinical time to focus solely on OT intervention.</p> <p>Targeting excessive waits of more than three years with agency staff.</p> |

| Ref | Locality/ Service | Title of risk                               | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager        | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|-----|-------------------|---------------------------------------------|----------------------------------|--------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 565 | Prison Healthcare | Prison Healthcare Staffing levels (nursing) | 15<br>AMBER                      | 12<br>AMBER                    | 04-03-24<br>Angela Cunningham | <p>Reduced health centre opening times at Castle Huntly</p> <p>Supplementary staffing utilises to maintain safe staffing levels (nursing &amp; medical)</p> <p>SBAR requesting 12 week agency contract</p> <p>Recruitment to vacancies</p> <p>Robust promoting attendance at work processes</p> <p>Omissions of care monitoring</p> <p>Monitoring of waiting times</p> <p>SBAR approved by Chief Officer for further agency bookings until December 2019. This has subsequently been extended, and a further SBAR request to be submitted by 16/10/20.</p> <p>6 Registered Nurse have commenced in post in past month</p> <p>4 Pharmacy Assistants have commenced in post in past month</p> <p>Drafting ANP role profiles to be agreed by Nursing Directorate</p> <p>Reduced staffing within the Bella Centre</p> <p>Continued recruitment. Invite potential candidates to visit prison</p> <p>Planning an open day for interested Bank staff</p> <p>Short term contracts offered to agency staff</p> |



| Ref | Locality/ Service | Title of risk                              | Risk Score & Grading (Inherent ) | Risk Score & Grading (Current) | Last updated / Manager | Mitigations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|-----|-------------------|--------------------------------------------|----------------------------------|--------------------------------|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 569 | Prison Healthcare | Medication administration within HMP Perth | 15 AMBER                         | 10 AMBER                       | 04-03-24 David Hope    | <ul style="list-style-type: none"> <li>Use of supplementary staffing</li> <li>Recruitment to vacant posts</li> <li>SBAR authorising extension of agency staff agreed by Chief Officer</li> <li>SLWG commenced jointly with SPS to review medicines administration across the prison</li> <li>SLWG commenced to review and share learning from CD incidents</li> <li>Core Agency staff in use who have received induction</li> <li>Mandatory CD training sessions being delivered to Multidisciplinary staff in service</li> <li>Nursing monthly commenced CD audits</li> <li>Medicines incidents reviewed at Medicines management meeting</li> <li>New medicines model implemented</li> <li>Pharmacy issuing all in possession medications</li> <li>Revised critical staffing levels and moved to core day</li> <li>Continue to work with SPS to identify novel ways of administering meds</li> </ul> |

|      |                        |                                                                               |          |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| 981  | Mental Health P&K wide | Pathways of Care                                                              | 8 YELLOW | 15-08-23 Chris Lamont | <p>Whole system change programme is in place identifying key clinical pathways for development across the six project areas (Good Mental Health for All; Primary &amp; Community Mental Health; Specialist Adult Mental Health; Children &amp; Young Peoples Mental Health; Learning Disabilities &amp; Mental Health; and Older Peoples Mental Health). P&amp;K HSCP are contributing to this process, and reps have been identified.</p> <p>To discuss and monitor and feedback our local current MH provision to NHST via the MH &amp; Wellbeing strategy group.</p> <p>Engaged with stakeholders and those with lived experience to seek their views and opinions on service provision and how this can be improved through care pathways.</p> <p>As part of NHS wide workstreams, 9 key areas are about to be reinstated with appropriate leads identified.</p>                                                                                                                                                                                                                                           |
| 1369 | South Locality         | P&K HSCP South locality inpatient safe means of escape for bariatric patients | 6 YELLOW | 28-07-23 Tia Dixon    | <ul style="list-style-type: none"> <li>Communication to HDT and admitting GPs that bariatric patient cannot currently be admitted on transferred to the two hospitals</li> <li>HDT will explain the reasons for the inability to transfer individual patients to them and apologise that they cannot be cared for in their home locality.</li> <li>Fire risk assessments carried out at both sites to fully understand and document the issues.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 985  | Mental Health P&K wide | Stakeholder and Partnership Engagement                                        | 4 YELLOW | 15-08-23 Chris Lamont | <ul style="list-style-type: none"> <li>Recent "Listen" report published through independent services and as a consequence of this, there have been engagement sessions with staff to discuss its findings and improve engagement.</li> <li>Undertook an extensive consultation and engagement exercise across communities across P&amp;K to help receive feedback and information to help develop our local strategy</li> <li>All workstreams associated with delivering the strategy have lived experience and staff side representation</li> <li>The P&amp;K Mental Health and Wellbeing Strategy Group is in place with broad representation from a range of stakeholders</li> <li>Locality newsletters have been developed and are disseminated out to all stakeholders and community members</li> <li>Strategic Planning Partnerships in place across each of the HSCPs with strong links with third sector, service user and carer organisations.</li> <li>P&amp;K have in place a Local Partnership forum</li> <li>Within P&amp;K, we have arrangements in place for service user engagement</li> </ul> |



**Risks within Adult Social Work & Social Care services  
(as at 15<sup>th</sup> Mar 2024)**

| Risk Number                                            | Risk Category | Cause (Trigger) (Because of...)<br>Event (There is a risk of...)<br>Effect (Impacting on...)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Risk Owner     | Inherent Risk |                   |                |                                                                                                                                                                                                                                                                                                                                                                                       | Residual Risk |                   |                | Mitigating Actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|--------------------------------------------------------|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------|-------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                        |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                | Impact Value  | Probability Value | Inherent Score | Controls                                                                                                                                                                                                                                                                                                                                                                              | Impact Value  | Probability Value | Residual Score |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>CARE AT HOME</b>                                    |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                |               |                   |                |                                                                                                                                                                                                                                                                                                                                                                                       |               |                   |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 1                                                      | operational   | <p>Because of increased demand</p> <p>There is a risk around a lack of Care at Home capacity, especially in rural P and K. Impacting on people not receiving their assessed levels of care</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Shona MacLean  | 5             | 4                 | 20             | <p>1 Existing capacity within CAH, HART, HART+ and Living well</p> <p>2 Overtime</p> <p>3 Early Supported Discharge</p>                                                                                                                                                                                                                                                               | 5             | 4                 | 20             | <p>Care at Home Transformation group and workstreams in action. Automated scheduling went live 20 September. HART rotas in Perth updated and efficieed realised. North and South in progress. PinPoint system will be live end of March. Alliance contracting with independent sector progressing. 6 International staff starting with Living Well in April. 1 start date in April for HART. Waiting on 4 further start dates for HART and 1x for LWC going through the recruitment.</p> |
| <b>OCCUPATIONAL THERAPY</b>                            |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                |               |                   |                |                                                                                                                                                                                                                                                                                                                                                                                       |               |                   |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 2                                                      | operational   | <p>Because of increased demand and staff vacancies</p> <p>There is a risk around a lack of OT capacity Impacting on delays in getting assessments, increased waiting lists which is currently at 405 people, service not meeting agreed response times. Staff reporting stress.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Shona MacLean  | 5             | 4                 | 20             | <p>1 Online Learning Module for basic OT equipment and adaptations for all Social Work/Social Care staff. Recruitment ongoing for OT staff.</p> <p>2 Advert live for OT vacancy</p> <p>3 Single handed care training has been extended to other professional groups. Associate Trainisers been upskilled to deliver support to families and carers to deliver moving and handling</p> | 5             | 4                 | 20             | <p>0.5 North OT's out to advert.</p> <p>Not meeting priority targets and no M and H reviews getting done.</p> <p>1 admin advert live</p> <p>Duly Team have had a resignation which will impact on signposting and advice</p>                                                                                                                                                                                                                                                             |
| <b>TEAM LEADER AND SOCIAL WORKER FOR SOUTH KINROSS</b> |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                |               |                   |                |                                                                                                                                                                                                                                                                                                                                                                                       |               |                   |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 3                                                      | operational   | <p>Because of no Team Leader in Kinross Social Work Team</p> <p>There is a risk around a lack of operational management</p> <p>Impact on Impact on Due to Team Leader secondment there has been no Team Leader for Kinross Social Work Team since January 2024 and a management vacancy within the south locality since July 2023. This is despite advertising internally and externally on 5 occasions. Day to day operational management and cover are a challenge and resulting in delayed supervisions and ERDs and reduced day to day oversight of teams. Difficulty ensuring attendance at meetings due to demands of covering 2 south locality areas of business. Request for secondment to be ended early was declined until business case presented to EMT for re-structure of HDT. Due to losing ASP trained SW, Kinross has not had sufficient Council Officer cover to manage all its statutory ASP work. TL Post Out to advert - advertised 5 times, no suitable applicants. Investigating</p> | Alison Fairlie | 4             | 4                 | 16             | <p>1 Adjustments to to some arrangements eg combined team meetings.</p> <p>2 Request for external support with ERDs</p>                                                                                                                                                                                                                                                               | 4             | 3                 | 12             | <p>Proposal to bring TL and SW back from secondment. SW to return 2-4-24.</p>                                                                                                                                                                                                                                                                                                                                                                                                            |



## Clinical & Care Governance Arrangements

The P&K Care & Professional Governance Forum (CPGF) has responsibility to ensure that there are effective and embedded systems for Clinical, Care & Professional Governance in all services within the partnership. This includes seeking assurances from all partnership localities and hosted services within the context of the six domains of Clinical, Care & Professional governance. Localities and Hosted Services have regular Governance Forums within their own services attended where appropriate by HSCP professional leads.

The HSCP remain committed to improving Care & Professional Governance. Work is progressing to develop governance and performance dashboards to support Care Assurance across agreed professional standards. Although delayed due to the Covid response, work to progress this has now resumed and is being tested in one of the localities. Additionally, work is underway to improve availability of locality performance data.

The HSCP has also commenced a Mental Health Clinical Care & Professional Governance Group, which reports directly to P&K CPGF and the Tayside Mental Health Quality & Performance Review. This will allow targeted improvement to improve Mental Health performance data, mitigation of Mental Health risks and to support scrutiny on progress made in respect of HIS Improvement Plan and Listen, Learn, Change work streams.

**Exception reporting** is a mechanism for services to quickly and easily flag up where work or events vary significantly from that which would be expected.

Exception reports were provided by all HSCP service grouping and localities (including hosted services) at each meeting of the previous bi-monthly Care & Professional Governance Forum (CPGF). Now that these meetings are occurring monthly such exception reports are now expected from half the services at each meeting, thus continuing the service reporting every 2-months.

Exception reports received during the previous year have been:

|                                          | SEP<br>2022  | OCT<br>2022  | NOV<br>2022  | DEC<br>2022  | JAN<br>2023  | FEB<br>2023  | MAR<br>2022  | APR<br>2022  | MAY<br>2023  | JUN<br>2023  |
|------------------------------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| ACCESS TEAM & MHO                        | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED |
| COMMISSIONED SERVICES                    | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | NOT RECEIVED | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED |
| EQUIPMENT & TEC                          | NOT REQUIRED | NOT RECEIVED | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            |
| NORTH LOCALITY                           | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            |
| PERTH CITY LOCALITY                      | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | NOT REQUIRED | NOT REQUIRED | ✓            | NOT REQUIRED | NOT REQUIRED |
| MFTE/POA IN-PATIENTS & INTERMEDIATE CARE | NOT REQUIRED | NOT RECEIVED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED |
| PODIATRY                                 | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            |

|                        |              |              |              |              |              |              |              |              |              |              |
|------------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| PRISON HEALTHCARE      | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED |
| PUBLIC DENTAL SERVICES | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED |
| REGISTERED SERVICES    | NOT REQUIRED | NOT RECEIVED | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            | NOT REQUIRED | ✓            |
| SOUTH LOCALITY         | NOT REQUIRED | NOT RECEIVED | NOT REQUIRED | NOT REQUIRED | NOT REQUIRED | ✓            | NOT REQUIRED | NOT REQUIRED | NOT REQUIRED | ✓            |

\* non submission of reports highlighted to manager for action

**Annual reports** are provided by all HSCP services and localities (including hosted services).

The structured annual reporting template brings together the six domains of Clinical, Care & Professional Governance outlined in the Getting it Right Framework, and also seeks to incorporate the new Health & Social Care Standards. Managers submit report and attend Care Governance Forum to present report, give assurance and answer questions. The HSCP have now completed cycle four and is reviewing the report schedule for cycle 5.

|                                          | 2nd Cycle      | 3rd Cycle      | 4th Cycle |
|------------------------------------------|----------------|----------------|-----------|
| ACCESS TEAM & MHO                        | November 2020  | April 2022     | Jan 2023  |
| COMMISSIONED SERVICES                    | July 2021      | July 2022      | Nov 2023  |
| EQUIPMENT & TEC                          | June 2021      | May 2022       | Jun 2023  |
| NORTH LOCALITY                           | July 2021      | June 2022      | May 2023  |
| PERTH CITY LOCALITY                      | April 2021     | February 2022  | Apr 2023  |
| MFTE/POA IN-PATIENTS & INTERMEDIATE CARE | May 2021       | April 2022     | Jun 2023  |
| PODIATRY                                 | September 2021 | September 2022 | Aug 2023  |
| PRISON HEALTHCARE                        | March 2021     | March 2022     | Mar 2023  |
| PUBLIC DENTAL SERVICES                   | November 2020  | January 2022   | Feb 2023  |
| REGISTERED SERVICES                      | August 2021    | August 2022    | Aug 2023  |
| SOUTH LOCALITY                           | September 2020 | November 2021  | Dec 2022  |
| POA Inpatients (added in cycle 3)        |                | November 2021  | Aug 2023  |
| MENTAL HEALTH (added in cycle 4)         |                |                | Aug 2023  |
| PRIMARY CARE (added in cycle 4)          |                |                | Oct 2023  |

### **Wider governance arrangements:**

- Integrated Locality Care Governance Groups (bi monthly)
- Prison Healthcare Medicines Management Governance Group (monthly)
- Prison Healthcare Business & Governance Group (monthly)
- Nursing and Allied Health Profession Forum (bi-monthly) to explore pertinent professional issues with CPTMs and other relevant colleagues.
- Senior Nurses, AHP Professional Leads, and the Clinical & Professional Team Managers meet regularly on an individual 1:1 basis with the Lead Nurse and also the AHP Lead to discuss relevant professional and governance issues.
- Mental Health Portfolio Lead contributes to the Mental Health QPR Forum
- Partnership Short Life Working Group commenced to improve care governance for mental health services
- Health Senior Management Team Huddle weekly to review Datix risks and red adverse events
- Clinical Governance Coordinator supports locality groups to undertake Local Adverse Event Reviews (LAER's) where required. All LAER's are signed off by a senior manager.
- Care Home Oversight Group meeting at times daily to monitor and provide support to Care Home resident and staff safety wellbeing.
- The P&K CPGF co-chairs contribute to the NHST Getting It Right For Everyone (GIRFE) group.
- Adult Social Work and Social Care Forum (monthly)

