Public Document Pack

People Overview & Scrutiny Committee

Monday, 11th June, 2018
6.00 pm
Meeting Room A - Old Town Hall, Blackburn

AGENDA

1. Welcome and Apologies

2. Declarations of Interest

Declarations of Interest **3**

3. The Role of Scrutiny

Extract from Constitution – attached.

The Role of Scrutiny - Extract from the Constitution **4 - 5**

4. Oversight of Corporate Plan and Forward Plan

Corporate Plan – attached.

Forward Plan – attached.

June -September 2018 Forward Plan **6 - 56**
Corporate Plan six months to Year-end October 2017 to March 2018
Appendix One 201718 Year-end Corp Plan v2
Appendix Two 201718 Year-end Exception reports v1

5. Executive Member(s) to Report on 3 Key Issues for the Yeah Ahead and Top 3 Risks

6. Legacy Item - OFSTED Plan Update

OFSTED Plan – attached.

SIF Inspection Action Plan (Sept 2017) v1_12_Scrutiny **57 - 66**

7. Work Programme for 2018-2019

It is suggested that one key area is reviewed at each meeting starting with the September cycle, with Task and Finish Groups meeting additionally as appropriate.

Date Published: Friday, 1st June 2018
Harry Catherall, Chief Executive

DECLARATIONS OF INTEREST IN

ITEMS ON THIS AGENDA

Members attending a Council, Committee, Board or other meeting with a personal interest in a matter on the Agenda must disclose the existence and nature of the interest and, if it is a Disclosable Pecuniary Interest or an Other Interest under paragraph 16.1 of the Code of Conduct, should leave the meeting during discussion and voting on the item.

Members declaring an interest(s) should complete this form and hand it to the Democratic Services Officer at the commencement of the meeting and declare such an interest at the appropriate point on the agenda.

MEETING: **PEOPLE OSC**

DATE: **11th JUNE 2018**

AGENDA ITEM NO.**:**

DESCRIPTION (BRIEF):

NATURE OF INTEREST:

DISCLOSABLE PECUNIARY/OTHER (delete as appropriate)

SIGNED :

PRINT NAME:

(Paragraphs 8 to 17 of the Code of Conduct for Members of the Council refer)

Article 6 – Overview and Scrutiny

6.01 Terms of reference

The Council will appoint a Policy and Corporate Resources Overview and Scrutiny Committee to co-ordinate the scrutiny function and to perform the roles set out in the Overview and Scrutiny Procedure rules. The Council will also appoint Standing Overview and Scrutiny Committees which will be listed in Part 3 of this Constitution. The Policy and Corporate Resources Overview and Scrutiny Committee and the Standing Overview and Scrutiny Committees will be collectively referred to as "Overview and Scrutiny Committees" and will between them discharge the functions conferred by section 21 of the Local Government Act 2000, the provisions of the Localism Act 2011, Health and Social Care Act 2012, the Local Government and Public Involvement in Health Act 2007, and relevant regulations.

6.02 General role

Within their terms of reference the Overview and Scrutiny Committees will:

(i) examine and/or scrutinise decisions made or actions taken in connection with the discharge of any of the Council's functions including Executive functions;

(ii) make reports and/or recommendations to Executive Members, the Executive Board and to full Council in connection with the discharge of any functions;

(iii) consider matters affecting the area or its inhabitants; and

(iv) following a call in, review decisions made but not yet implemented by the Executive.

(v) undertake pre-decision scrutiny

6.03 Specific functions

(a) **Reports and Recommendations.**

Overview and Scrutiny Committees may:

(i) review corporate policy matters and make recommendations to the Executive Board and/or the Council for consideration;

(ii) consider and implement mechanisms to encourage and enhance community participation in their work;

(iii) question members of the Executive Board and/or committees, officers and Partners about their views on issues and proposals affecting the area; and

(iv) consider the outcome of external inspections of Council Services and the response to them.

(b) **Scrutiny.**

Overview and Scrutiny Committees may:

(i) examine and scrutinise the decisions made by and performance of Executive Members, the Executive Board and/or committees and officers both in relation to particular decisions and over time;

(ii) examine and scrutinise the performance of the Council in relation to its policy objectives, performance targets and/or particular service areas;

(iii) question members of the Executive Board and/or committees and officers about their decisions and performance, whether generally in comparison with service plans and targets over a period of time, or in relation to particular decisions, initiatives or projects;

(iv) make recommendations to the Executive Member, the Executive Board and/or appropriate committee and/or Council arising from the outcome of the scrutiny process;

(v) review and scrutinise the performance of other public bodies in the area including the Health Service and invite reports from them by requesting them to address the Overview and Scrutiny Committees and local people about their activities and performance. This includes any powers and duties under the Local Government and Public Involvement in Health Act 2007 and

(vi) invite appropriate persons to attend meetings and give evidence or act as critical friends.

(c) **Finance.**

(i) Overview and Scrutiny Committees may exercise overall responsibility for the finances made available to them.

(d) **Annual report.**

(i) The Policy and Corporate Resources Overview and Scrutiny Committee must report annually to full Council on the workings of the Overview and Scrutiny Committees and their working methods.

6.04 Proceedings of Overview and Scrutiny Committees

Overview and Scrutiny Committees will conduct their proceedings in accordance with the Overview and Scrutiny Procedure Rules set out in Part 4 of this Constitution.

EXECUTIVE BOARD DECISION

REPORT OF:	Leader
LEAD OFFICERS:	Deputy Chief Executive
DATE:	14th June 2018

PORTFOLIO/S AFFECTED:	ALL
WARD/S AFFECTED:	All
KEY DECISION:	**YES** ☐ **NO** ☒

SUBJECT: Report on the progress against the Corporate Plan 2017/2018 for six months to Year-end (October 2017 to March 2018).

1. EXECUTIVE SUMMARY

To provide Executive Board the opportunity to review progress against the Council's strategic priorities documented within the Corporate Plan and to provide assurance that appropriate actions are being taken to address key areas of concern.

2. RECOMMENDATIONS

That the Executive Board:

1. Note the overall performance against the delivery of the Council's strategic objectives as illustrated in Appendix One
2. Note the remedial action to improve delivery against those priorities which are giving cause for concern, as outlined in Appendix Two.

3. BACKGROUND

As per previous years, robust performance management arrangements continue to be in place to monitor and ensure the delivery of the Corporate Plan.

The performance framework continues to see performance discussed and challenged with directors and also includes a direct challenge from the Leader of the Council to the Executive Members on a six monthly basis.

Appendix One tracks the progress of performance against the Council's strategic objectives for six months to year-end (October 2017 to March 2018).

Appendix Two provides exception reports for priorities which are considered to be off track.

Internal quality assurance checks, through the established Council challenge process, aim to ensure the robustness of the data and information included in all performance monitoring reports. Executive Board are asked to note that some figures may change in future reports, as a result of these quality assurance checks.

Policy Council 2015 adopted the current Corporate Plan which sets out the council's aims and ambitions up to 2019. As part of this, Policy Council 2017 agreed the continuation of the six corporate priorities to 2020 these are:

1. Creating more **jobs** and supporting business growth
2. Improving **housing** quality and building more houses
3. Improving **health and well-being**
4. Improving outcomes for our **young people**
5. Safeguarding the most **vulnerable people**
6. **Making your money go further**

Further to this four long term strategic themes have been distilled into every portfolio to complement the Corporate Priorities.

The themes are:

- Image and marketing of the borough.
- Fairness / Equality / Cohesion.
- Partnership working:
    - With businesses and other public sector organisations (to maximise impact of Blackburn with Darwen spend)
    - With residents - empowering communities through volunteering and asset based working (more effective use of all our assets, people and places)
    - Other key stakeholders
- Digital First.

Each portfolio has been asked to allocate a red / amber / green forecast to the measures that they own. The following guidelines have been provided to ensure a standardised approach to allocating these forecasts.

Red

- The measure is likely to fail or perform poorly in the future
- The measure falls below a set national target / statutory required performance.
- The measure may also be below a minimum requirement for the particular service as agreed by the department
- The lead department perceives there could be a potential serious risk to the Council

Amber

- The measure is at risk of failure, but the lead department feels this is currently being managed
- Actions are or need to be in place to ensure that the end of year position is achieved

Green

- The measure is on target/ over performing / over achieving (if departmental target has been set)
- The lead department perceives there is currently no risk to the council in relation to this measure.

4. KEY ISSUES & RISKS

4.1 Performance overview

There are 108 measures within the Corporate Plan linked to the Council's priority objectives.

The table below shows a breakdown of the measures across the portfolios:

Portfolio	Total	Red	Amber	Green	Awaiting data
Leaders	**11**	0	1	10	0
Resources	**10**	1	3*	6	0
Regeneration	**23**	0	4	19	0
Environment	**8**	1	1	6	0
Leisure, Culture and Young People	**11**	1	2	8	0
Neighbourhoods and Prevention Services	**11**	1	4	6	0
Adults	**7**	0	4	2	1
Public Health	**7**	3	0	4	0
Children's Services	**12**	1	3	8	0
Schools and Education	**8**	0	2	6	0
Total	**108**	**8**	**24**	**75**	**1**

**Two of the measures within the Resources portfolio relate to budget outturn performance and delivery of the savings programme. At the time of writing the report, work is still ongoing to finalise the year end outturn position, however based on the position at this time, it is expected that both measures will be Amber as defined below.*

Of the 108 measures information for the period is as follows:

- 7% (8 actual) have been forecast as "red" where performance is, or is likely to be off track
- 22% (24 actual) have been forecast "amber" where delivery is on track and currently being managed
- 70% (75 actual) have been forecast "green" or on track
- 1% (1 actual) of the measures a RAG rating is not available

The purpose of this report is to provide a picture of overall performance and highlight any key issues of concern which are in need of closer monitoring and follow up action. Information on all Corporate Plan measures and key issues raised through the performance challenge process are documented for Executive Board, in two separate appendices, as follows:

1. Appendix One shows a summary of all Corporate Plan priorities, highlighting those areas that are forecast as being on track; those where delivery is not going as planned and those where performance is forecast as off track or likely to be off track. Please note performance data is provisional and is subject to validation.

2. Appendix Two provides exception reports for priorities which are considered to be off track.

5. POLICY IMPLICATIONS

The attached performance monitoring report provides information on progress against the Council's strategic objectives as set out in the Corporate Plan for 2016/2019.

6. FINANCIAL IMPLICATIONS
There are no financial implications as a direct result of this report. Financial implications of any actions referred to in the report will be included in an appropriate briefing paper.

7. LEGAL IMPLICATIONS
There are no legal implications as a result of this report.

8. RESOURCE IMPLICATIONS
There are no resource implications as a result of this report. Resource implications of any actions referred to in the report will be included in an appropriate briefing paper.

9. EQUALITY AND HEALTH IMPLICATIONS
Please select one of the options below. Where appropriate please include the hyperlink to the EIA.

Option 1 ☐ Equality Impact Assessment (EIA) not required – the EIA checklist has been completed.

Option 2 ☒ In determining this matter the Executive Member needs to consider the EIA associated with this item in advance of making the decision. Corporate Plan EIA 2016/2019

Option 3 ☐ In determining this matter the Executive Board Members need to consider the EIA associated with this item in advance of making the decision.

10. CONSULTATIONS
The report has been developed in consultation with the relevant Council officers and Executive Member.

11. STATEMENT OF COMPLIANCE
The recommendations are made further to advice from the Monitoring Officer and the Section 151 Officer has confirmed that they do not incur unlawful expenditure. They are also compliant with equality legislation and an equality analysis and impact assessment has been considered. The recommendations reflect the core principles of good governance set out in the Council's Code of Corporate Governance.

12. DECLARATION OF INTEREST
All Declarations of Interest of any Executive Member consulted and note of any dispensation granted by the Chief Executive will be recorded in the Summary of Decisions published on the day following the meeting.

VERSION:	**1.0**

CONTACT OFFICER:	**Denise Park**
DATE:	16/05/2018
BACKGROUND PAPER:	

EXECUTIVE BOARD DECISION

REPORT OF:	Leader
LEAD OFFICERS:	Deputy Chief Executive
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DATE:	16/05/2018
BACKGROUND PAPER:	

Appendix One: Corporate Plan 2017/2018: Performance Report
Year-end (October 2017 to March 2018)

The Leader's portfolio	**Performance measures**	**Good Performance is**	**Baseline**	**17/18 target**	**Half year performance and rating**	**Year-end performance and rating** **(RED)** **(AMBER)** **(GREEN)**
1. Your Call • Improvements to make Blackburn with Darwen cleaner and greener • Improvements to health and wellbeing • Improving community togetherness and belonging/neighbourliness	Delivery of work programme to expand the scope and delivery of Your Call by ensuring all those with ideas are supported.	Delivery	On-going delivery	90 Your Call Clean ups 150 other Your Call Activity	**64 Your Call Clean ups** **378 other Your Call Activity** **(GREEN)**	**40 Your Call Clean ups** **301 other Your Call Activity** **Cumulative: 104 Your Call Clean ups 679 other Your Call Activity (GREEN)**
	Delivery of work programme to have a co-ordinated voluntary offer that works with all sectors to enhance our ability to make volunteering easier. Whilst enabling the council and partners to direct volunteer support where it is most needed.	Delivery	On-going delivery	Update on progress	**(GREEN)**	**(GREEN)**
	Delivery of work programme to facilitate and build resilient communities who are more capable of doing things for themselves.	Delivery	On-going delivery	Update on progress	**(GREEN)**	**(GREEN)**

2. Ensuring BwD plays a key role in Lancashire governance and expanding our scope within the Northern powerhouse**.**	Delivery of work programme to ensure that Blackburn with Darwen is in a strong position to benefit from any positive changes to Lancashire governance arrangements and potential freedoms and flexibilities offered to Lancashire by the Government.	Delivery	On-going delivery	Update on progress	**(GREEN)**	**(GREEN)**
3. Support community cohesion	Civic participation and community events	Maintain annual activity	18	Update on progress	**13 Civic participation and community events** **(GREEN)**	**12 Civic participation and community events** **Cumulative: 25 Civic participation and community events** **(GREEN)**
	% of people who meet and talk to people from different ethnic groups	Higher		Maintain the ranking of the most popular places.	**(GREEN)**	**94%** **(GREEN)**
	% of people who agree that the borough is a place where people from different backgrounds get on well together	Higher	60% (2013)	Increase performance (2013 Baseline 60%)	**(GREEN)**	**44%** **Survey data is not comparable with previous surveys due to methodology.** **New baseline for 2018** **(AMBER)**

	Delivery of Equalities Work programme (Social Integration Strategy)	Delivery	On-going delivery	Update on progress	**(GREEN)**	**(GREEN)**
4. Improving the image of BwD	Delivery of growth work programme - to promote the positive offer of the borough	Delivery	On-going delivery	Update on progress	**(GREEN)**	**(GREEN)**
	Delivery of work programme - Managing the reputation of the Council	Delivery	On-going delivery	Update on progress	**(GREEN)**	**(GREEN)**
5. Improving Health and Wellbeing	Delivery of work programme (HWB and HWB strategy) - we will achieve our ambitions in the Joint Health and Well-being Strategy.	Delivery	On-going delivery	Update on progress	**(GREEN)**	**(GREEN)**

Resources	**Performance measures**	**Good Performance is**	**Baseline**	**17/18 target**	**Half year performance and rating**	**Year-end performance and rating** **(RED)** **(AMBER)** **(GREEN)**
1. Deliver a balanced budget year on year with the resources available.	% of the remaining savings programme achieved	Higher		98%	**(AMBER)**	**Pending final outturn reporting** **(Forecast AMBER)**
	Achieve a breakeven or underspend against overall cash limit	Higher		Overall 1% tolerance	**(RED)**	**Pending final outturn reporting** **(Forecast AMBER)**

2. Transforming our systems to offer digital solutions.	% of service requests/forms identified during the audit in the first quarter of 2017 to be made digitally accessible.	Higher		75% of all service requests/forms identified during the audit, to be made digitally accessible.	**A further 10 e-forms have been identified from reviews of 8 service areas** **(AMBER)**	**A total of 19 e-forms have been identified through the work of the Digital Task team.** **(AMBER)**
3. Developing the organisation and its people.	Reduction in employee absence through sickness	Lower	9.37 (2016/17)	8 days	**(AMBER)**	**Year-end total 9.24 days per FTE** **(RED)**
	Information relating to RIDDORS	Lower		RIDDORS: quarterly update	**3* RIDDORS in Qtrs 1 & 2** ***Revised figure** **(GREEN)**	**5 RIDDOR Qtrs 3 & 4** **Cumulative 8 RIDDORS in the year for BwD** **(GREEN)**
	MyView self- service utilisation: Digitisation of HR	Higher		97% of all pay documents accessed via MyView	**98% of pay documents accessed via MyView** **(GREEN)**	**98% of pay documents accessed via MyView** **(GREEN)**
		Higher		95% of employees to have electronic files	**100% Employees have Electronic Files** **(GREEN)**	**100% Employees have Electronic Files** **(GREEN)**
		Higher		99% expense claims submitted via MyView	**100% expenses claims submitted via MyView**	**100% expenses claims submitted via MyView**

					(GREEN)	**(GREEN)**
		Higher		95% sickness absence recorded via MyView	**100% Sickness absence recorded via MyView** **(GREEN)**	**100% Sickness absence recorded via MyView** **(GREEN)**
		Higher		90% of paper forms accessible via MyView	**100% Forms accessible via MyView** **(GREEN)**	**100% Forms accessible via MyView** **(GREEN)**

Regeneration	**Performance measures**	**Good Performance is**	**Baseline**	**17/18 target**	**Half year performance and rating**	**Year-end performance and rating** **(RED)** **(AMBER)** **(GREEN)**
1. Accelerating the Growth Agenda.	Housing: a) Number of new build properties	Higher	130 for 2016/17	150 properties	**136 properties** **(GREEN)**	**95 properties** **Cumulative 231 properties** **(GREEN)**
	Housing: b) Number of empty properties brought back into use	Higher	Average for previous 5 years is 127 empty properties brought back into use	130 properties	**84 properties**	**64 properties** **Cumulative 148 Properties**

					(GREEN)	**(GREEN)**
	Housing: c) Sq. m of commercial floorspace developed or underway	Higher		10,000 Sq.m	**28,636 Sq.m Floorspace developed & underway** **(GREEN)**	**20,880 Sq.m Developed floorspace only** **(GREEN)**
	Town centre vitality: a) Vacancy rates in Blackburn town centre	Lower	Baseline: Blackburn 21.0% (2012/13)	Blackburn 17%	**Blackburn** **14.5%** **(GREEN)**	**Blackburn** **16.2%** **(GREEN)**
	Town centre vitality: b) Vacancy rates in Darwen town centre	Lower	Baseline: Darwen 16.6% (12/13)	Darwen 12%	**Darwen** **10.3%** **(GREEN)**	**Darwen** **10.3%** **(GREEN)**
	Evening economy: a) Blackburn town centre	Higher	New openings	Blackburn 5 new openings	**Blackburn** **2** **(GREEN)**	**Blackburn** **7** **Cumulative: 9** **(GREEN)**
	Evening economy: b) Darwen town centre	Higher	New openings	Darwen 3 new openings	**Darwen** **1** **(GREEN)**	**Darwen** **3** **Cumulative: 4** **(GREEN)**
2. Delivering the capital projects - Securing the outcomes from capital investment	Completion of transport capital projects: • LTP and • Growth Deal Scheme	Delivery on time and to budget	Annual spend	LTP programme, Darwen East Development Corridor GD2 LTP £3,976,000	**Current LTP and Capital Programme spend stands at £1.524m 34%.**	**2018/19 end of year LTP and Capital Programme spend at 100% = £4.476m**

				Growth Deal 2 £500,000 Total = £4,476,000	**(AMBER)**	**(GREEN)**
	Darwen Market Square	Delivery	Programme delivery	On site	**Detailed Design underway** **(GREEN)**	**Out to tender. On site May 18. Completion November 18** **(GREEN)**
	Education building programme delivery	Higher	Programme delivery	Time and cost 10% tolerance	**6 projects delivered within 10% ± tolerance (programme ongoing)** **(GREEN)**	**15 projects delivered within 10% ± tolerance (programme ongoing)** **(GREEN)**
	Corporate buildings delivery	Higher	Programme delivery	Time and cost 10% tolerance	**5 projects delivered within 10% ± tolerance** **(GREEN)**	**7 projects delivered within 10% ± tolerance** **(GREEN)**
3. Improving the appearance of the borough and maintaining service standards	Monitoring against national planning performance targets 2018: a) Major projects decided in 13 weeks	Higher	Baseline: 85%(14/16)	a)Major projects decided in 13 weeks inc. Agreed Extensions of Time (60%) for preceding 2 years	**98%** **(GREEN)**	**98%** **(GREEN)**
	Monitoring against national planning performance targets 2018:	Higher	Baseline: 68% (14/16)	b)Non-major projects decided in 8 weeks (65%) -	**95%**	**97%**

	b) Non-major projects decided in 8 weeks			from 2018 inc. Agreed Extensions of Time (70%) for preceding 2 years – this only relates to changes of use and householder applications	**(GREEN)**	**(GREEN)**
	Appeals: a) major applications allowed preceding 2 years	Higher	Baseline: 0% (14/16)	a)Appeals: major applications allowed preceding 2 years (10%)	**0% - no major appeals determined** **(GREEN)**	**0% - no major appeals determined** **(GREEN)**
	Appeals: b) Non-major applications allowed preceding 2 years	Higher	Baseline: 1.43% (14/16)	b)Appeals: Non-major applications allowed preceding 2 years (10%).	**0.89% (12 appeals allowed against 1,342 applications determined)** **(GREEN)**	**0.94% (12 appeals allowed against 1,261 applications determined)** **(GREEN)**
	Performance of investment estate portfolio: • Occupancy rate	Higher	Baseline: 95.6% (14/15)	96%	**97.91%** **(GREEN)**	**99.87%** **(GREEN)**
	To deliver whole network inspections. All named roads: Measure routine inspections of all adopted roads within the inspection frequency	Higher (>95%)	100%	100%	**100%** **(GREEN)**	**100%** **(GREEN)**

	Response to dangerous structures	Higher	New measure – 2017/18 baseline year	Respond within 24 hours	**100%** **(GREEN)**	**100%** **(GREEN)**
4. Local jobs for local people.	New Jobs	Higher	New measure – 2017/18 baseline year	2,324 new jobs (cumulative)	**(AMBER)**	**(AMBER)**
	Economic activity rate (% of working age people in employment and/or seeking employment)	Higher	69.4% (Apr 16 – Mar 17)	71%	**68.4%** **(Jul 16-Jun 17)** **(AMBER)**	**68.7%** **(Oct 16 - Sept 17)** **Latest available data** **(AMBER)**
	Under 19 apprenticeship starts	Higher	510 (2016/17)	550	**500** **(DfE provisional data for 2017/18)** **(AMBER)**	**300** **(DfE provisional figures for the period Aug 17 - Jan 18)** **(AMBER)**
	% of residents with level 4 or above qualifications	Higher	28% (Jan 16 – Dec 16)	29%	**28%** **(Jan -Dec 16)** **(AMBER)**	**28%** **(Jan - Dec 16)** **Latest available data** **(AMBER)**
	Number of supported businesses by Growth Lancashire Limited	Higher	New measure – 2017/18 baseline year	80 businesses benefitting from 1:1 advice sessions with a Senior Business Advisor.	**Number of businesses supported** **Q1: 25** **Q2: 39** **Cumulative: 64**	**74 businesses supported in Q3 & Q4** **Cumulative: 138**

					(GREEN)	**(GREEN)**

Environment	**Performance measures**	**Good Performance is**	**Baseline**	**17/18 target**	**Half year performance and rating**	**Year-end performance and rating** **(RED)** **(AMBER)** **(GREEN)**
1. Improving the appearance of the borough and maintaining service standards	Number of Your Call clean up events held.	Higher	2016/17: Events : 144 Volunteers : 2,759	10 events per month April to September, 4 per month October to March, culminating in 3,000 volunteers	**Events: 71** **Volunteers: 1,268** **(AMBER)**	**Events: 48 (Oct 17 - Mar 18) (Cumulative: 119 events)** **Volunteers: 727 (Oct 17- Mar 18) (Cumulative: 1,995 volunteers taking part in supported clean ups) + 503 litter pick volunteers** **(AMBER)**
2. Reducing fly tipping, landfill waste and maximising recycling.	Reduce the amount of waste going to landfill.	Lower	2016/17 : 7,596 tonnes	7,600 tonnes	**(Apr 17 - Sept 17) 4,507 tonnes**	**(Oct 17 - Mar 18) 4,073 tonnes.** **(Cumulative 8,580**

					(AMBER)	**tonnes in the year)** **(RED)**
3. Effective licensing and enforcement activities.	Rotate CCTV cameras to cover at least 36 problem locations in a 12 month period	Higher	New indicator	36 locations targeted	**Cameras installed at 20 distinct locations across the borough** **(GREEN)**	**Cameras installed at 40 distinct locations across the borough** **(GREEN)**
	Quantity of illicit tobacco seized.	Higher	≥ 6000 cigarettes and / or 4.6kg tobacco	≥ 6000 cigarettes and / or 4.6kg tobacco	**8,362 cigarettes and 11.95kg tobacco seized** **(GREEN)**	**236,462 cigarettes and 44.75kg tobacco,** **475 packets chewing tobacco seized** **Cumulative totals: 244,824 cigarettes, 56.7 kg tobacco and 475 packets of chewing tobacco** **(GREEN)**
	% of alcohol retailers compliant with licensing conditions.	Higher		≥95%	**98.7%** **(GREEN)**	**98.5%** **(GREEN)**
	% of food businesses achieving 3 Star and above rating on the National Food Hygiene Rating Scheme.	Higher		≥90%	**92%** **(GREEN)**	**92.4%** **(GREEN)**
	We will continue to commit resources to shisha enforcement: Number of formal interventions for smoking in	Higher		≥4	**2** **formal interventions**	**10** **formal interventions**

	enclosed premises (related to shisha).				**(GREEN)**	**(GREEN)**
	Permitted air polluting processes (for which the council is the regulatory authority) which are compliant with permit requirements.	Higher		≥90%	**100%** **(GREEN)**	**100%** **(GREEN)**

Leisure, Culture and Young People	**Performance measures**	**Good Performance is**	**Baseline**	**17/18 target**	**Half year performance and rating**	**Year-end performance and rating** **(RED)** **(AMBER)** **(GREEN)**
1. Increasing the participation and engagement of young people.	Number of junior visits generated through CLS&YP services	Higher		403,000 junior visits	**Junior visits** **YPS : 24,498** **Arts & Heritage: 14,763** **LIS: 20,175** **Venues: 3,707** **Leisure: 146,540** **Total: 209,683** **(GREEN)**	**Junior visits** **YPS : 25,081** **Arts & Heritage: 6,229** **LIS: 40,525** **Venues: 25,383** **Leisure: 39,132** **Total: 136,350** **Cumulative: 346,033 junior visits** **(AMBER)**
	Number of attendances to youth provision	Higher		30,000 attendances	**28,084 attendances**	**28,051 attendances** **Cumulative: 56,135**

					(GREEN)	**attendances** **(GREEN)**
	Number of cases managed by the Targeted Youth Support Team	Higher		80 cases managed	**119 cases** **(GREEN)**	**102 cases** **Cumulative: 221 cases** **(GREEN)**
	Number of young people participating in the democratic process	Higher		1,500 (Make Your Mark Campaign) 8,000 (Youth Elections)	**9,108 votes (Make Your Mark Campaign)** **(GREEN)**	**8,240 votes (Youth Elections)** **(GREEN)**
2. Providing opportunities for people to be active and make healthy lifestyle choices.	Number of volunteers hours supporting CLS&YP service delivery (whole portfolio contribution)	Higher		22,933 volunteer hours	**Volunteer hours** **YPS: 129.25** **LIS: 6,772** **Heritage: 1,963** **Arts: 1,001** **Leisure: 2,852*** **Venues: 410** **Total: 13,127.25* hours** ***Revised figure** **(GREEN)**	**Volunteer hours** **YPS: 200** **LIS: 13,153** **Heritage: 1,241** **Arts: 1,206** **Leisure: 3,381** **Venues: 370** **Total: 19,551 hours** **Cumulative: 32,678.25 hours** **(GREEN)**
	Number of Leisure Attendances (including pitches)	Higher		1,005,754 attendances	**484,459 attendances**	**339,774 attendances** **Cumulative:**

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					(GREEN)	**824,233 attendances** **(AMBER)**
	Number of contacts and referrals to health and wellbeing hub	Higher		4,866 contacts & referrals	**Contacts & referrals Calls/emails: 1,964 Referrals: 883** **Total: 2,847** **(GREEN)**	**Contacts & referrals Calls/emails: 3,853 Referrals: 1,885** **Total: 5,738** **Cumulative: 8,585 contacts & referrals** **(GREEN)**
3. Stimulating cultural involvement into social and economic regeneration.	Number of attendances at King Georges Hall (KGH) and Darwen Library Theatre(DLT)	Higher		172,149 attendances	**50,738* attendances** ***Revised figure** **(AMBER)**	**67,991 attendances** **Cumulative: 118,729** **(RED)**
	Number of art organisations and programmes supported	Higher		30 art organisations and programmes supported	**21 organisations and programmes supported** **(GREEN)**	**45 organisations and programmes supported** **Cumulative: 66 (GREEN)**
	Number of LIS cultural and self-directed learning events and activities	Higher		800 events & activities	**451 events & activities**	**441 events & activities**

					(GREEN)	**Cumulative: 892** **(GREEN)**
	Number of cultural events and activities across arts and heritage services	Higher		150 cultural events & activities	**Cultural events & activities** **Museum: 30** **Turton Tower: 11** **Arts: 48** **LIS: 13** **Total: 102** **(GREEN)**	**Cultural events & activities** **Museum: 28** **Turton Tower: 8** **Arts: 56** **LIS: 7** **Total: 99** **Cumulative: 201** **(GREEN)**

Neighbourhoods & Prevention Services	**Performance measures**	**Good Performance is**	**Baseline**	**17/18 target**	**Half year performance and rating**	**Year-end performance and rating** **(RED)** **(AMBER)** **(GREEN)**
1. Improving the quality of housing.	Reduction in number of privately run HMO bed spaces	Higher		30	**26** **(GREEN)**	**37** **(GREEN)**
	HMOs subject to enforcement	Higher		26	**23** **(GREEN)**	**38** **(GREEN)**
	Properties licensed and inspected in Selective Licensing areas	Higher		300 licences 200 inspected	**173 licences** **33 inspected** **(AMBER)**	**688 licences granted** **85 inspected** **(GREEN)**

	Increasing the number of private sector homes that have hazards (category 1 & 2) removed	Higher		347	**197** **(GREEN)**	**363** **(GREEN)**
2. Demand management and prevention.	Households prevented from becoming homeless	Higher		350	**177** **(GREEN)**	**480** **(GREEN)**
	Number of people engaged in capacity building activities	Higher		3,600 people engaged in capacity building events	**1,739 people engaged in capacity building events** **(GREEN)**	**1,033 people engaged in capacity building events** **Cumulative: 2,772** **(AMBER)**
	Number of Volunteers	Higher		2,500 volunteers	**3,531 volunteers** **(GREEN)**	**2,851 volunteers** **Cumulative: 6,382** **(GREEN)**
3. Community Safety / Lifelong Learning	Total crime figures	Lower	12,207 (2016/17)	Reduce total crime: within +/-10% of the 2016/17 baseline	**6,611** **+8%** **(AMBER)**	**14,338** **+18%** **(RED)**
	Number of people on skills programmes	Higher		2,679 people on skills programmes	**237 people on skills programmes** **(AMBER)**	**758 people on skills programmes (Aug - Dec 17)** **Cumulative: 995** **(AMBER)**
	Number of people achieving a qualification	Higher		700 people achieving a	**8 people achieving a qualification**	**109 people achieving a**

				qualification	**(AMBER)**	**qualification (Aug - Dec 17)** **Cumulative: 117** **(AMBER)**
	Number of people supported through National Careers Service Contract into higher level skills or employment.	Higher		1,200 people supported	**657 people supported** **(RED)**	**339 people supported** **Cumulative: 996** **(AMBER)**

Adult Social Care	**Performance measures**	**Good Performance is**	**Baseline**	**17/18 target**	**Half year performance and rating**	**Year-end performance and rating** **(RED)** **(AMBER)** **(GREEN)**
Overarching Priority: To fulfil the council's statutory and regulatory duties to improve and protect the health and wellbeing of the population through innovation and engagement						
1. Safeguarding vulnerable adults and developing the Service User voice.	'Percentage of individuals with a safeguarding concern that proceeded to a section 42 enquiry'. Measure SGA3 in the new Safeguarding Adults Collection (SAC). *(monitored on number of people)*	Within a range	(2016/17) 49.9% (572/1146) people	Within the range of 45-55%	**49.5%** **(253/511 people)** **(GREEN)**	**Data available end of Q1 2018/19**
	User experience and user voice: to achieve 'silver status' in Making Safeguarding Personal (MSP) by March 2018.	Achieve		Silver status by March 2018 in MSP strand: 'Motivational interviewing		

				and cycles of change.'	**(GREEN)**	**(AMBER)**
2. Managing demand and budget pressures through prevention, early intervention and self-help.	Permanent admissions to residential and nursing care homes for older people (65 and over), per 100,000 population *(Using ASCOF measure not SALT)*	Lower	(2016/17): 838.9 per 100,000 pop 65+	Lower than baseline year	**346 per 100,000 population** **(GREEN)**	**692 per 100,000 population** **Q4 data available May 2018** **(GREEN)**
	% of total contacts signposted to alternative sources of support.	Higher	2017/18 baseline year	35%	**45%** **351/788** **(GREEN)**	**46%** **342/751** **(GREEN)**
3. Integration and partnership working with key partners across the public and voluntary sectors.	Delayed transfers of care (DTOC) from hospital that are attributable to adult social care, per 100,000 population. (Ascof 2C2)	Lower	2017/18 data to set the baseline	7.48 days per 100,000 population overall of which no more than 2.62 days attributable to social care	**To be reported Q4**	**4.56** **(AMBER)**
	Number of referrals from the Social Work Teams to the Neighbourhood Service for a) volunteers	Higher		Baseline year (April 17 –Sept 17 data)	**8** **(AMBER)**	**9** **Cumulative: 17** **(AMBER)**
	Number of referrals from the Social Work Teams to the Neighbourhood Service for b) community connectors	Higher		Baseline year (April 17 –Sept 17 data)	**12** **(AMBER)**	**34** **Cumulative: 46** **(AMBER)**

Health	**Performance measures**	**Good Performance is**	**Baseline**	**17/18 target**	**Half Year performance and rating**	**Half year performance and rating** **(RED)** **(AMBER)** **(GREEN)**
Overarching Priority: Providing the best services possible to fulfil the council's statutory and regulatory duties towards the borough's children, young people and their families.						
1. Help residents to live longer and healthier lives.	Reduce differences in life expectancy between BwD and the national average year on year.	Lower	Baseline year 2008-10	6% reduction in local life expectancy gap on the 2008-10 baseline	**Using new Life Expectancy Formula introduced Dec 2016 for comparison** **2.6% males** **6.6% females** **(AMBER)**	**-10.0% males** **-4.3% females** **NB. A negative reduction equates to an increase, i.e. the gap with England has got wider since baseline, not narrower.** **(RED)**
	Increase BwD citizen life expectancy year on year.	Higher	Baseline year 2008-10	0.6 year increase in average local life expectancy on 2008-10 baseline	**Using new Life Expectancy Formula introduced Dec 2016 for comparison** **1.2yrs males** **0.9yrs females** **(GREEN)**	**Using new Life Expectancy Formula Introduced Dec 2016** **0.9yrs males** **0.7yrs females** **(GREEN)**

2. Improve life chances for residents by offering improved and joined up health and wellbeing services.	Stop smoking: a) Number of 4 week quitters	Higher	Baseline 255 per quarter	Achieve 650 4 week quitters per year, in the face of increasing use of eCigarettes as an alternative to Stop Smoking services and a reduction in smoking prevalence	**Q1 – 130** **Q2 - 118** **248 combined Complete figures for Q2 available mid-November.** **(AMBER)**	**Q3 – 89** **Q4 – 108** **197 combined (Q3-Q4).** **Achieved total of 445 4 week quits for 2017/18.** **(RED)**
	Stop smoking: b) Quit rate (Successful quitters as proportion of all who set a quit date)	Higher		Increase Quit rate (Successful quitters as proportion of all who set a quit date) to 45%	**Q1 – 35%** **Q2 – 26%** **Complete figures for Q2 available mid -November**. **(AMBER)**	**Q3 – 28%** **Q4 – 33%** **4 week quit rate for Q3-Q4 = 31%.** **Overall 4 week quit rate for 2017/18 = 31%** **(RED)**
	Better outcomes in: Successful drug treatment: Proportion of all in treatment, who successfully completed treatment and did not re-present within 6 months.	Higher	20.1% (2016/17)	All Adults - 22%	**Q1 2017/18** **22.5%** **(June 2017)** **(GREEN)**	**Q4 2017/18** **25.2%** **(End of Jan 2018)** **(GREEN)**
3. Effectively manage public sector demand and put more resources into	To develop a Public Health prevention model for the borough	Monitor progress		Embed monitoring & reporting arrangements & agree a three		

preventative services.				year development plan to grow the Council offer (internal commissions & Social Determinants of Health) delivered from the Public Health Grant, ensuring a shift toward primary prevention across the four key programme areas: 1. Safe and healthy homes 2. Healthy places 3. Wellbeing and self-care 4. Workplace wellbeing and employment	**(GREEN)**	**(GREEN)**
	To develop a Public Health prevention model to be applied across the Pennine Lancashire health and social care system	Monitor progress	New	Embed prevention across the Pennine Lancs Transformation Programme		

				business case.	**(GREEN)**	**(GREEN)**

Children's Services	**Performance measures**	**Good Performance is**	**Baseline**	**17/18 target**	**Half year performance and rating**	**Year-end performance and rating** **(RED)** **(AMBER)** **(GREEN)**
Overarching Priority: Providing the best services possible to fulfil the council's statutory and regulatory duties towards the borough's children, young people and their families.						
1. Work effectively with partners to safeguard children and young people including those vulnerable to exploitation, radicalisation or offending.	Youth Offending: a) First time entrants to the youth justice system (rate per 100,000 – rolling 12 months)	Lower	246 per 100,000 (April 15 – March 16)	Beneath the regional and national average	**189 per 100,000 (Apr 16 - Mar 17) Reported one quarter in arrears on a rolling year basis.** **(GREEN)**	**189 per 100,000 (Oct 16 - Sept 17) Reported one quarter in arrears on a rolling year basis.** **(GREEN)**
	Youth Offending: b) Proven rate of Re-offending by Young Offenders	Lower	33.3% (October 13-September 14)	Beneath the regional and national average	**45.3% (Oct 14 -Sept 15) Reported quarterly on a rolling year basis.** **(AMBER)**	**34.5% (Jan 16 - Mar 16) Reported quarterly on a rolling year basis** **(GREEN)**
	Number of Open Child in Need cases - not including open single assessments (excluding Looked After Children, Child Protection & Care Leavers)	Lower	873 (Year End 2016/17)	500-600	**509 (As at 27/09/17)** **(GREEN)**	**644 (As at 29/03/18)** **(AMBER)**

	Exploitation measure: Proportion of young people worked with by Engage where risk is successfully reduced	Higher	75% (2016/17)	75%	**89% (Apr - Sept 17)** **(GREEN)**	**96% (Apr – Mar 18)** **(GREEN)**
2. Intervene early at the right time to avoid costly intervention wherever possible, including supporting those children with additional needs.	Increase the number of families receiving help through the CAF process and Early Help offer to reduce number of child in need cases open to social care	Within a band	250	400+ (previously within a band of 350-400)	**492** **(GREEN)**	**522** **(GREEN)**
	Number of commissioned residential placements for Looked After Children as a total of all Looked After Children placements.	Maintain	15 (October 2015)	10-20	**25 (6.5% of all children in our care)** **(RED)**	**28 (7.4% of all children in our care)** **(RED)**
	% of children offered a package of care at Apple Trees within 28 days of the referral panel decision being made	Higher	100% 2016/17	100%	**89%** **(AMBER)**	**100%** **(GREEN)**
	To increase the number of children aged 0-5 with additional needs who receive support through the CAF	Higher		Higher than the previous year (12)	**15** **(GREEN)**	**79** **(GREEN)**
3. For those children who come into care, work quickly to ensure that they achieve permanence without unnecessary delay and their care and learning needs are prioritised.	Adoption scorecard national targets: a) Average days from child entering care to starting adoptive placement	Lower	680 (2012-2015)	Perform at national threshold level (426 days)	**438** **(AMBER)**	**447** **(AMBER)**
	Adoption scorecard national targets: b) Time taken from court decision for placement order to matching the child with an adoptive family	Lower	226 (2012-2015)	Perform at national threshold level (121 days)	**210 days** **(AMBER)**	**200 days** **(AMBER)**
	% of care leavers aged 19, 20 & 21 in Education, Employment or Training (EET)	Higher		Achieve at or above national average for	**51.1%**	**50%**

				2017/18	**(GREEN)**	**(GREEN)**
	% of children in care for 2 ½ years who have remained in the same placement for at least 2 years	Higher		Achieve at or above national average for 2017/18	**67%** **(AMBER)**	**71%** **(GREEN)**

Schools and Education	**Performance measures**	**Good Performance is**	**Baseline**	**17/18 target**	**Half year performance and rating**	**Year-end performance and rating** **(RED)** **(AMBER)** **(GREEN)**
1. Ensure that children and young people with Special Educational Needs and Disabilities (aged 0-25) have opportunities and support which inspire and enable them to achieve their best.	% of children with identified SEN achieving expected progress in Reading, Writing and Maths between Key Stage 1 and the end of Key Stage 2	Higher	2016/17 Reading: -0.9 Writing: -1.0 Maths: +0.3	Achieve at or above national average for 2017/18	**Reading -0.5** **Writing -0.81** **Maths +0.68** **(National 2016/17** **R: -1.5** **W: -2.6** **M: -1.4)** **(GREEN)**	**Reading -0.51** **Writing -0.82** **Maths +0.66** **(National 2017/18** **R: -1.6 ;** **W: -2.6** **M: -1.4)** **(GREEN)**
	Average Progress 8 score at GCSE for students with identified SEN	Higher	2016/17: -0.34	Achieve at or above national average for 2017/18	**-0.25** **(National 2016/17: -0.55)**	**-0.25** **(National 2017/18: -0.59)**

					(GREEN)	**(GREEN)**
2. Continue to work with schools and develop local partnerships to improve learning, training and employment outcomes for children and young people.	% of learners attending schools judged good or better by Ofsted	Higher	85% (2015/16)	Achieve at or above national average for 2017/18	**86%** **(AMBER)**	**80%** **(AMBER)**
	% 16-17 year olds Not in Education, Employment or Training (NEET). Reported once a year on the same basis as the national figure, i.e. as an average across November to January.	Lower	6.17% (BWD figure) December 16 – February 17 counting period	Achieve at or below national average for 2017/18	**Apr-Sept 17:** **NEET Average: 3.9%** **Not Known: 2.4%** **Combined: 6.28%** **(NW combined: 7.36%** **England combined: 7.98%)** **(GREEN)**	**Jan-Mar 18: (the figures below are taken from the Dec-Feb averages)** **NEET Average: 3.0%** **Not Known: 1.8%** **Combined: 4.8%** **(NW combined: 6.5%** **England combined: 6.0%)** **(GREEN)**
3. Continue to narrow the gap in academic attainment for children from our more vulnerable groups by removing barriers to success.	Gap in academic achievement for children living in areas in the borough in the most deprived 30% nationally according to the 'Income Deprivation Affecting Children Index' (IDACI) compared to the national average for such areas:					
	a) % of disadvantaged children achieving the new expected standard by the end of Key Stage 2	Higher	2016/17: 42%	Achieve at or above national average for 2017/18	**50%** **(National 2016/17: 39%)** **(GREEN)**	**51%** **(National 2017/18: 48%)** **(GREEN)**
	b) Average Progress 8 performance for children Progress 8 is the new composite GCSE measure covering English, Maths, other EBacc* subjects and other relevant qualifications. *History, Geography,	Higher	2016/17: -0.23	Achieve at or above national average for 2017/18	**-0.21** **(National 2016/17 -0.38)**	**-0.22** **(National 2017/18 -0.40)**

	Physics, Biology, Chemistry, Science, Modern Foreign Languages				**(GREEN)**	**(GREEN)**
	% of children and young people in care performing at nationally expected levels: a) At the end of primary school	Higher	2016/17: 33%	Achieve at or above national average for 2017/18	**33%** **(GREEN)**	**33%** **National 2016/17: 25%** **(GREEN)**
	% of children and young people in care performing at nationally expected levels: b) At the end of secondary school	Higher	2016/17: -1.18	Achieve at or above national average for 2017/18	**Data Unavailable until Quarter 3**	**-1.55** **National 2016/17: -1.14** **(AMBER)**

Appendix Two: Corporate Plan 2017/2018: Performance Report
Year-end (October 2017 to March 2018) Exception Reports

- **Resources:**
  - Reduction in employee absence through sickness
- **Environment:**
  - Reduce the amount of waste going to landfill
- **Leisure, Culture and Young people**:
  - Number of attendances at King Georges Hall (KGH) and Darwen Library Theatre(DLT)
- **Neighbourhoods and Prevention Services**:
  - Total crime figures
- **Public Health:**
  - Reduce differences in life expectancy between BwD and the national average year on year.
  - Stop smoking: a) Number of 4 week quitters and b) Quit rate (Successful quitters as proportion of all who set a quit date)
- **Children's Services**:
  - Number of commissioned residential placements for Looked After Children as a total of all Looked After Children placements.

Portfolio:	**Resources**		
Priority:	**Developing the organisation and its people**		
Performance Measure:	**Staff sickness absence**	**Good performance is:**	**lower (less than 8 days)**
Target:	**8**	**Baseline:**	**9.37 previous year end**
Performance	**Half year performance and RAG rating** **(AMBER)**	**Year-end performance and RAG rating** **9.24** **(RED)**	

What is the reason for the performance? Overall direction is positive compared to last year (9.37 days) and the support and proactive work will need to continue.

Quarter	2016/17	2017/18
1	2.84	2.17
2	2.32	2.29
3	2.76	2.45
4	2.56	2.73
Overall	9.37	9.24

The five main reasons for sickness absences for the Council have slightly changed. There has been an increase in stomach, Ear/Nose/Throat, Musculoskeletal and Mental Ill Health related absences. However a decrease in chest and respiratory absences. This may be due to the fact that the Council and CCG both made exceptional efforts this year to vaccinate their own staff and encourage vaccination.

Emphasis remains on those departments where performance is continuing to be below expectations and support /advice will be delivered to the managers and areas of concern escalated to Directors as required.

Departmental analysis is undertaken on a month by month basis with specific actions being highlighted to managers for their particular categories of absences, with cost and employee numbers specifically those with 3+ absences. This includes recommendations on how to improve sickness and support can offer to those employees. Below are examples of recommendations sent to managers to implement;

It is generally very difficult to bring down sickness absence from a culture of regular absences at the level we have experienced for many years (which remain similar to those of other local authorities), however we remain committed to keep the trend going in the right direction and working towards the organisations 8 day target.

Support and advice has been provided to line managers, to ensure the Improving Attendance Policy is being followed along with support in meetings, creation of outcome letters and next steps. Early intervention has been a key area of this support and included advice and analysis of absence patterns and absence history. The sickness team consistently highlights to managers the importance of ensuring sickness absence is managed as a high priority and absence processes are being followed by managers with HR support, guidance, advice and mentoring. The support supplied by the HR service has given managers confidence to deal with absence in a consistent manner.

MyView dashboard reporting has now been implemented to support managing attendance. Work has been carried out improving performance with training already delivered on MyView absence reporting and guidance available via the intranet for managers, and trade unions.

What is the likely impact of continued performance? A few sick days a year might not seem like too much of an issue to an employee, but when combined it has a huge impact on staff morale and engagement and in turn increase absence within that area and impact on service delivery. Two of the main reasons for absence (musculoskeletal and stress), if early intervention does not take place when these are the reasons it can lead onto long term sick absence and associated high staffing costs.

Emphasis remains on those departments where performance is continuing to be below expectations and support /advice will be delivered to the managers and areas of concern escalated to Directors as required.

What activities have been or are being put in place to address these issues? The commitment to all employees' health and wellbeing is to foster and promote a culture that increases awareness of ways to improve health, decreases high levels of stress, though monitoring the working environment, protecting employees where possible from workplace injury, offering job satisfaction and flexible working options and supporting employees through having in place, health and wellbeing medical, physical and mental health support and guidance available from a range of practitioners.
There have been a number of initiatives undertaken that have included:

- Part of the HR objectives is to continually review our policies and guidance in order to support Line managers with HR issues. As part of our reviews the Councils New Improving Attendance Policy went live on 1st April.
- Employee wellbeing is at the forefront of the HR service objectives we aim to achieve these, in conjunction with the BwD Wellbeing Service and the EAP offer.
- Bite size sessions have been conducted with teams/departments to support their knowledge/practical use of Improving Attendance policy.
- Health and Wellbeing Week ran in October 2017, the national Wellbeing week had themed events for each day, and the Council's action plan tried to reflect this and focused on providing Council employees with activities, information and guidance to make an informed choice about their lifestyle. The week was organised by the Council's health, safety and wellbeing team in HR and the Wellbeing Service in Leisure & Environment. The task team recognised that health and wellbeing means different things to different people so arranged a range of events and activities for employees to participate in. Each day carried a different theme and activities were centred on the following: Healthy Heart, Changing Habits, Health, Safety and Wellbeing, Eat Well and Get Active.
- Committed to changing employee perceptions and behaviours towards mental health. To show this HSW and Public Health have been working with Lancashire mind to commit to Time to Change. By signing this pledge BwD will be committed to;
    - Improve attitudes and behaviour towards people with mental health problems.
    - Reduce the amount of discrimination that people with mental health problems report in their personal relationships and at work.
    - Make sure even more people with mental health problems can take action to challenge stigma and discrimination in the workplaces
    - Create a sustainable campaign that will continue long into the future.

Following on from the success of the 2017 Health & Wellbeing week, 2018 has seen proactive work to encourage employee engagement and increase improved health and wellbeing in the workplace. The benefits of promoting physical and mental wellbeing are well-known:

- Reduced sickness absence,
- Increased productivity,
- The opportunity for employees to build positive workplace relationships and,
- As a result, increased employee engagement, satisfaction and retention.

There is also work continuing on Wellbeing Initiatives already being consulted on:

- Health & Wellbeing Champions - will help to promote health and wellbeing activities within their workplaces.
- Mental Health Champions - Their details will be published to employees as Mental Health Champions. These champions will have;
    - An in depth understanding of mental health and the factors that can affect wellbeing
    - Practical skills to spot the triggers and signs of mental health issues
    - Confidence to step in, reassure and support a person in distress
    - Enhanced interpersonal skills such as non-judgemental listening
    - Knowledge to help someone recover their health by guiding them to further support - whether that's self-help resources, through their employer, the NHS, or a mix
- Working towards 'National Award for England- The Workplace Wellbeing Charter'
- Promoting the 5 ways to wellbeing. - Connect, Be Active, Keep Learning, Give and Take notice.
- Encouraging managers to be supportive – looking at ways they can demonstrate commitment to the strategy
- Tool kits - More comprehensive schemes to recognise and engage the effects of external stresses too, such as financial worries, caring needs.
- Joined up approach with Wellbeing service, Leisure, Public Health and Resources
- Publish a Calendar of events which includes; Activity months/challenges, Awareness days and trends – BwD, Local, National.
- As part of a new wellbeing initiative to support employees who may suffer with the mental ill-health symptoms 64 employees will train to become qualified Mental Health First Aiders by the end of May 2018.

Are there any decisions likely to be required of Executive Members in the future, in relation to this issue? No

Portfolio: Environment		
Priority: Reducing fly tipping, landfill waste and maximising recycling.		
Performance Measure: Reduce the amount of waste going to landfill.		**Good performance is: Lower**
Target: 7,600 tonnes		**Baseline: 2016/17: 7,596 tonnes**
Performance	**Half year performance and RAG rating** **April 17 to September 2017** **4,507 tonnes** **(AMBER)**	**Year-end performance and RAG rating** **October 17 to March 18** **4,073 tonnes.** **(Cumulative 8,580 tonnes in the year)** **(RED)**

What is the reason for the performance? There has been a reduction in the amount of waste sent to landfill for the second half of the year, but this still has exceeded the overall target. The amount of waste landfilled is a result of fly tipped waste, bulky waste removals and waste going through the household waste recycling centres, which could not be sent for waste to energy via the agreement with Greater Manchester Waste Disposal Authority (GMWDA), due to its composition. The new treatment agreement with Suez, which starts April 2018, is looking to shred this material in future, thereby making it suitable for waste to energy and so divert away from landfill. The new Household Waste Recycling Centres (HWRC) contract also has increased diversion targets in place. The Blackburn site in particular is too small and no longer fit for purpose, hence the need for a new site to enable better recycling. In the meantime, site improvements are being carried out at the site to reduce the need for the site to close as often during skip exchanges and to provide space for new containers.

Please provide an explanation of the performance measure?

A measurement of the amount of waste the council sends to landfill, as opposed to it being treated by alternative means, such as energy from waste.

Explanation against target. The target of 7,600 tonnes of waste being sent to landfill has been exceeded by 980 tonnes.

Comparisons / trends – compared to previous quarters, previous years? Comparators with previous years is not directly possible for all wastes, as the council introduced alternate weekly collections in October 2016, which may well have increased the amount of waste deposited at the HWRCs and also flytipped, plus the introduction of green waste charges in March 2017 may have impacted on waste arisings, but there is no direct evidence to suggest this has happened, as no waste audit has been undertaken in the last 3 years, due to budget reductions. Additionally, there is a trend for increased tonnages across the region, given that waste has risen in Lancashire by 3% over the last year, with less recycling taking place.

Has policy, delivery changed? Yes, the introduction of alternate weekly collections, plus the decision to introduce green waste charges in March 2017.

Explanation of service delivery? The agreement with GMWDA was to accept waste from burgundy bin collections, but they were unable to take bulky materials for disposal and treatment, with those materials being landfilled.

What is the likely impact of continued performance?

What is the impact on residents? No direct impact on residents, aside from on occasion, the residual waste containers being full at the HWRC sites.

What is the impact on the council, department/s or portfolio/s? The financial cost to the portfolio was to produce a financial saving, as landfill was cheaper than energy from waste by 88 pence per tonne. This saved the portfolio £862 in the year.

What is likely to happen to performance against target at year end? The target was exceeded at year end, but the waste disposed of legally and effectively.

What activities have been or are being put in place to address these issues?

Have action plans / improvement plans been completed – from these what are the key actions / improvements and what are the timelines for them? A new

outlet for the council's waste disposal is being identified, with GMWDA no longer able to provide a solution for the council. The council has initiated a 2 year agreement to dispose of its waste with SUEZ, via its existing contract with them, from April 2018, minimising the use of landfill as a disposal option and utilising energy from waste as a solution. **Are there new strategies being developed?** Yes, bulky waste is now being shredded and taken to energy from waste from April 2018 **Are there changes in policy / structures?** No
Are there any decisions likely to be required of Executive Members in the future, in relation to this issue? **Exec Board decision?** No **Exec Member / SPT decisions?** Exec Member decision to dispose of waste via SUEZ instead of GMWDA was agreed in February 2018. **Initial discussion with members re possible change in service?** Discussions took place in February 2018 with the Executive Members for Resources and Environment.

Portfolio: Leisure, Culture and Young People Portfolio			
Priority: Stimulating cultural involvement into social and economic regeneration.			
Performance Measure: Number of attendances at King Georges Hall (KGH) and Darwen Library Theatre (DLT)		**Good performance is: Higher**	
Target: 172,149 attendances		**Baseline:**	
Performance	**50,738 Q1 + Q2 attendances (AMBER)**	**67,991 Q3 + Q4 attendances Cumulative: 118,729 attendances RED)**	

What is the reason for the performance? The performance measure collates attendances for all bookings, hires, events and shows at both King Georges Hall (KGH) and Darwen Library Theatre **(**DLT).

Despite a 35% improvement in the second half of the year the yearend total attendance figure was 31% below target.

Comparing the programming in 2017/18 to the previous year 2016/17 there were 10 more shows programmed into KGH main concert hall than in 2016/17, however the programming in the Windsor Suite and Blakey's dropped by 15 shows. In addition private hire bookings at KGH fell by 12%. With the reduced number of smaller bookings and private hires the increase seen in big shows bookings was not able to compensate thus the lower attendances.
Venues underwent a significant efficiency remodel and loss of experienced staff as part of the 2016/17 and 2017/18 efficiencies. The remaining staff focussed on securing high profile bands and show bookings for the main concert hall to put KGH back 'on the map'(increased shows in 17/18 evidence the success of this strategy) but in turn there was reduced capacity for focus on the smaller bookings (again lower bookings demonstrate this).

What is the likely impact of continued performance? Performance in Q4 demonstrated the positive direction that Venues are taking; KGH sold out all public performances of the pantomime & achieved growth in school bookings. Q4 saw more sell out shows go on sale than in any of the previous quarters in 2017/18. Performance for 2018/19 is already in a stronger position: the number of shows already booked for 2018/19 exceeds those booked for 2017/18 at the same time last year. This positive position combined with improved marketing and audience analysis will enable the team to strengthen audience attendances.

The already secured programme for 2018/19 provides residents with a wide variety of shows and events including comedy, music, classics, ballet, Festival of Making and children's' / family entertainment which is positive for the continued regeneration of the town centre and the borough's profile.

It is anticipated that attendances in 2018/19 will be much improved on 2017/18 as the remodelled team establish new ways of working to benefit all aspects of the business.

What activities have been or are being put in place to address these issues? The remaining staff are working hard implementing improved monitoring processes and developing updated marketing and promotion strategies including a strong social media presence. Key areas of focus include:-

- Increase number of private hires – developing marketing campaigns to better promote the venue for this purpose
- Windsor Suite / DLT programming – setting number of show targets /quarter based on audience development strategy

- Concert Hall programming – introduction of children's activity programming will be seen in Q2 2018/19. This was identified as a programming gap in 2016/17 however it required exploration and product advance bookings hence delayed implementation.
- New Box Office System – expected to be implemented in Q3 the new system will enable improved ability to identify audience booking patterns and develop strategies to increase repeat attendances and increase regular attendances.

Are there any decisions likely to be required of Executive Members in the future, in relation to this issue? The Executive Board decisions at the end of 2017/18 in relation to Blakeys and leasing the space commercially will enable the small staff team to better focus on audience development and programming across both KGH & DLT.

Portfolio: Neighbourhoods & Prevention		
Priority: Maintaining Low Crime Levels		
Performance Measure: Total crime figures as recorded by the constabulary		**Good performance is: same or lower**
Target: within 10% of baseline year.		**Baseline: 12,207 crimes recorded (2016/17)**
Performance	**Half year performance and RAG rating** **Actual 6,611** **+8%** **(AMBER)**	**Year-end performance and RAG rating** **Actual 14,338** **+18%** **(RED)**

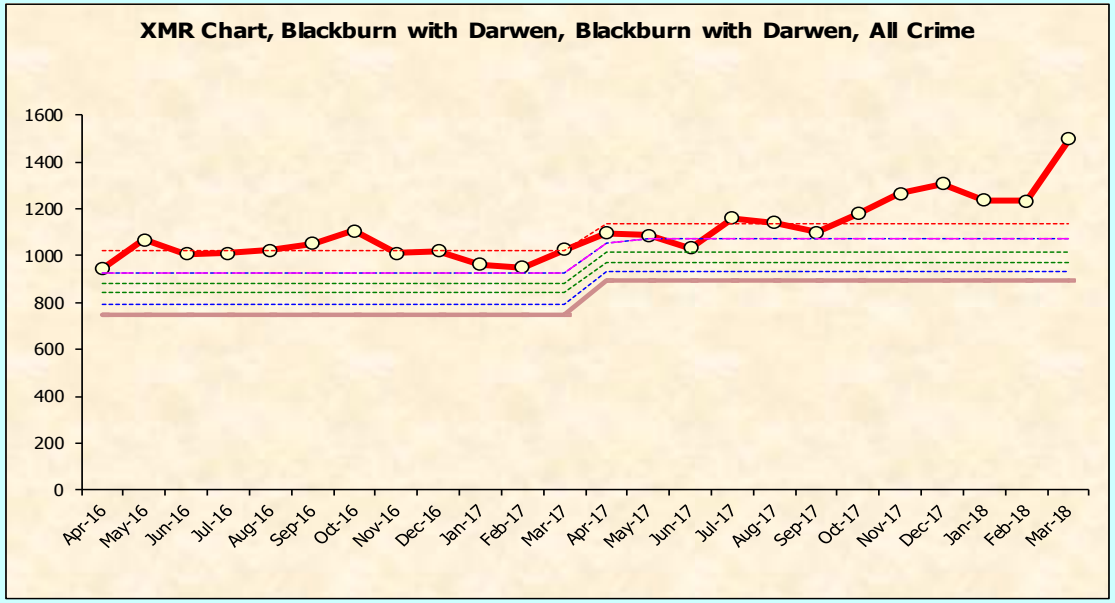
What is the reason for the performance? The Performance measure is the total number of crimes reported to the constabulary by residents, businesses and or visitors to the borough.

Explanation against target – The target is set at within plus or minus 10% of the 2015/16 baseline year; essentially our aim is to keep crime rates stable. While there have been significant improvements in crime rates over the last 10 years, particularly in the period 2006-2013, maintaining those reductions set against a backdrop of austerity has been the focus, given the difficultly in making further gains with much reduced resources.

Comparisons / trends compared to previous quarters, previous years – The below chart gives an overview of crime trends over the last 3 years. While individual crime categories can be affected by changes in recording practice which can and do occur, the overall number of crimes being reported is lesser affected, hence a good overall indicator of the actual levels of crime we can supplement with feedback from residents via local and national crime survey data.

What the chart shows is an increasing volume of crimes being reported to the police at an increasing rate from an average of circa 800 crimes a month to over 1000; the rate of increase has moderated over the full year but has not improved. It is also worthy of note that both Anti-Social Behaviour, Crime and Road Safety are the predominant issues at the majority of community meetings, town centre and business engagement events and ward solutions meetings reflecting the impact on residents and businesses.

Ward:	Blackburn with Darwen
Category:	All Crime



Exceptional Results: (1) Single result above upper or below lower dotted red line; (2) Two out of three consecutive results above upper or below lower dotted blue line; (3) Four out of five consecutive results above upper or below lower green dotted line.

Has policy, delivery changed - Policy has developed in many areas; the work around early action, transforming lives and troubled families being examples. We have also continued to develop the work we do with neighbouring authorities, driving collaborative service delivery, inward investment and developing economies of scale opportunities wherever possible to mitigate the impact of austerity. That said the challenge posed has been a significant one with its impact, in reducing resources, having continued year upon year; the effect of which multiplies when you take account of the number of agencies involved in the prevention, intervention and enforcement of Crime and Disorder, all of whom have been affected to varying degrees. As a partnership, we have also had to take decisions around prioritising what is most important, with a move toward maintaining and or enhancing protecting vulnerable people from serious harm, particularly young people, at the cost of work streams targeting volume crime offenders committing lower level offences which are impacting on overall crime levels.

Explanation of service delivery - Service Delivery is outlined in the area Community Safety Plan detailed on the Council's webpage. The partnerships priorities are supplemented by a delivery plan against each which can be circulated on request.

What is the likely impact of continued performance? The impact higher crime rates have on communities is well documented. High or increasing crime levels can be catalysts to community tensions and business disinvestment and decline. This can include; increased desire to move or higher actual mobility of residents; weaker attachments of residents to, and satisfaction with, their neighbourhood, lower local involvement; and lower house values and inward investment. Empirical research confirms this. **In terms of the impact on the council.** Overall demand for services will go up, particularly those services that protect vulnerable people and places and the restriction in what preventative programmes can be introduced as we respond to escalation and crisis management. It will have an impact on inward investment for both business and housing as noted with the desirability of living or working in an area tied to perceived and or actual crime rates. The target is likely to be missed next year given the rate of increase has reduced but not the volume of offences. Current trajectory would suggest a similar crime level to this year in 2018/19 i.e. remaining 18-20% above the baseline.
What activities have been or are being put in place to address these issues? Further work is being developed to target violent crime offences, particularly those that are most vulnerable, suffering the greatest levels of harm and or repeat victimisation. There is also targeted work around both Blackburn and Darwen town centres as we continue to work with local businesses. Resourcing any activity sustainably is the biggest challenge we are working on with the Office of the Police and Crime Commissioner, the Blackburn BID and other partners to resource to risk and invest in sustainable interventions collectively.
Are there any decisions likely to be required of Executive Members in the future, in relation to this issue? A range of proposals likely to impact on crime rates will be put before members as part of the 2018-23 Community Safety Strategy development. Given crime is principally the symptom of wider social issues, the majority of reductions in service will have impact, the cumulative effect of which will be a negative one.

Portfolio: Health		
Priority: Help residents to live longer and healthier lives		
Performance Measure: Reduce differences in life expectancy between BwD and the national average year on year		**Good performance is: a big reduction**
Target: 6% reduction in local life expectancy gap on the 2008-10 baseline		**Baseline: Baseline year 2008-10**
Performance	**Half year performance and RAG rating** **2.6% males** **6.6% females** **(2013-15 performance)** **(AMBER)**	**Year-end performance and RAG rating** **-10.0% males** **-4.3% females** **(2014-16 performance)** **(RED)** **NB. A negative reduction equates to an increase, i.e. the gap with England has got wider since baseline, not narrower.**

What is the reason for the performance? Blackburn with Darwen has had falling life expectancy in the last two years. The Public Health team were the first to raise this issue nationally in 2015, with extensive coverage in the Health Service Journal and Local Government Chronicle. The possibility they raised of a national trend was then dismissed by the Department of Health.

The Public Health team then went on to publish national research in 2017 with colleagues at the University of Oxford and the London School of Hygiene and Tropical Medicine which examined the national trend and explored possible causes and remedies. This showed the majority of excess deaths (on previous years) were in older people over 70). This year, about 20% of Local Authorities have a reduction in life expectancy for either males or females or both – these are mostly in post-industrial northern towns, seaside towns and some wealthier highly rural areas.

What is the likely impact of continued performance? As a result of this trend ONS have revised downwards their long term estimates for UK life expectancy, the Department of Health and NHS England have now accepted there is a major problem and commissioned further national research through Public Health England – building on BwDs original research. BwD Director of Public Health has been invited onto the National Mortality Surveillance Group, and the Local Government Chronicle this spring produced an editorial praising our work.

Locally we have been further examining the causes of the rise in old age mortality. We have found that :

- Most of the 'excess deaths' are in those over 70 years.
- There are no new diseases causing this rise - it is mostly older people dying of the same diseases slightly earlier than in previous years.
- We think this is because of increased vulnerability in this population group exacerbated by increasing difficulties across the health and social care system to meet 'surge demand' due to reduced resources.

What activities have been or are being put in place to address these issues? Our plan to deal with this is focussed on the creation of four neighbourhood / locality health and care systems, working with the voluntary and faith sector with more data-informed planning to assist meeting the needs of frail elderly. This is part of our health and social care transformation programme across Pennine Lancashire.

Are there any decisions likely to be required of Executive Members in the future, in relation to this issue? No.

Portfolio: Public Health & Adult Social Care		
Priority: 2. Improve life chances for residents by offering improved and joined up health and wellbeing services.		
Performance Measure: Stop smoking: **a) Number of 4 week quitters** **b) Quit rate (Successful quitters as proportion of all who set a quit date)**		**Good performance is: Higher**
Target: **a) Achieve 650 4 week quitters per year (2017-18)** **b) Increase Quit rate (Successful quitters as proportion of all who set a quit date) to 45%**		**Baseline:** **a) 255 per quarter**
Performance	**Half year performance and RAG rating** **a) Number of 4 week quits = 248** **b) Quit rate = 31%** **(AMBER)**	**Year-end performance and RAG rating** **a) Number of 4 week quits = 445** **b) Quit rate = 31%** **(RED)**

What is the reason for the performance? The number of people accessing Stop Smoking Services in Blackburn with Darwen has reduced during 2017/18 compared to previous years, which appears to be a year on year downward trend. Overall 4 week quit rates have dropped below the minimum 35% quality standard recommended, with a slight improvement in Q4. The target of 650 4 week quits per year (2017/18) and the service performance quality standard of 45% quit rate was not achieved.

Smoking Indicators	**Q1***	**Q2***	**Q3****	**Q4****	**Full Year (2017-18)**
Numbers accessing service	371	454	315	332	**1236**
Number achieving 4 week quit	130	118	89	108	**445**
4 week quit rate	35%	26%	28%	33%	**31%**

*Q1 - Q2 MAF report figures (system change-combined data QwU and PharmOutcomes data)

**Q3 - Q4 PharmOutcomes Report (new system data only)

During 2017/18, there have been significant service redesign developments, alongside continued changing social trends in smoking behaviours:

1. National and local smoking prevalence has reduced year on year as a result of the Smoking Ban, which may have impacted on **reducing demand for Stop**

Smoking Services. Provision may need to shift to offer a more targeted approach and different delivery model, e.g. smoking in pregnancy, people with mental health problems.

2. **New data system** (PharmOutcomes system) introduced on 1st April 2017 to increase back room efficiency with processing multiple claims – previously Quit with Us System (manual claims checking process). Moved from quarterly in arrears payments to monthly in arrears payments. Improved data quality and audit reports. Significant savings achieved by removing manual administration and reduced system license fees.
3. **New service specification** introduced on 1st April 2017 – stopped payment for initial (new clients) appointment and increased focus on behaviour change outcomes (4, 8 and 12 week quits). Rationale was to incentive quit rates as opposed to quick win activity (sign up of new clients).
4. **Introduced electronic NRT vouchers** to replace paper vouchers to achieve savings on printing, administration and storage costs. Improved data auditing and efficiency in accessing support. Payments transactional speed increased and commissioner access to monthly activity figures for timely reporting to NHS Digital improved.
5. **Smoking in Pregnancy incentive scheme** – 10x Children's centre staff were trained up at Stop Smoking Service (SSS) Advisors during Q3-4. Smoking in pregnancy care pathway developed with maternity services and Children's centres with the aim of increasing quit rates of pregnant mums. Scheme is scheduled to commence in in Q1 (2018/19).
6. **CLEAR Assessment** – local area review of Tobacco Control / Smokefree strategy. Review of local provision, effectiveness and approach in response to national and local reductions in smoking prevalence, reduced DH Prevention grant, and social shift presenting new challenges, e.g. e-cigarettes, targeted offer for pregnant women, people with mental health problems.

There have also been a number of issues during 2017/18, which have negatively impacted on the Tobacco Control programme:

a) As a result of the reduced Public Health grant, the impact of **significant efficiency savings** has reduced SSS management capacity.
b) **New system** implementation presented challenges for both providers and commissioners and additional capacity and training was delivered in November 2017.
c) **Reduced public health capacity** to manage Tobacco Control programme agenda (Q3 - Q4) due to sickness absence.
d) **Reduced Stop Smoking Service capacity** due to reduction in SSS Advisors (loss of expertise to provide the service).
e) **No intermediary Specialist Stop Smoking Service** Management – new care pathways needed to be redesigned and subsequent delays with implementation.

What is the likely impact of continued performance?

- Residents will not be able to access high quality Stop Smoking community support to help them quit smoking
- Public Health outcomes for residents with smoking related illnesses, health complications and long term conditions will be negatively impacted
- Lack of preventative services and interventions will increase demand on primary and secondary care, and acute NHS services due to smoking related illnesses and conditions

- The council will attract negative publicity and reputational damage when local stop smoking service data is published (quarterly submissions are made to NHS Digital)
- Increased scrutiny from Public Health England and other NHS commissioners, due to increased demand and costs for the local health and care economy.

What activities have been or are being put in place to address these issues? Plans for 2018/19 include:

- Recruitment of public health development managers is in progress which will provide increased capacity to manage and develop the Tobacco Control programme.
- Detailed review of activity data by providers with targeted 'notice to improve' using contractual mechanisms.
- Complete CLEAR Assessment and review local area provision in line with the Tobacco Control strategy priorities and evidence.
- Smoking in pregnancy incentive scheme and care pathway will be launched in Q1, with an improved targeted support offer.
- Training and network support for SSS providers has been scheduled for June, which should improve service quality, sharing good practise, partnership working with the Wellbeing Service and quit rates.
- Continued public awareness raising and marketing of the SSS and public health campaigns, e.g. Stoptober (Public Health England).
- PharmOutcomes system will be embedded and commissioners and providers will be able to flag and respond to any quality issues in a timely manner.
- Further in house PharmOutcomes training for Business Support and CAPS to increase back room capacity and reduce single points of failure.

Are there any decisions likely to be required of Executive Members in the future, in relation to this issue? No.

Portfolio: Children's Services		
Priority: Intervene early at the right time to avoid costly intervention wherever possible, including supporting those children with additional needs.		
Performance Measure: Number of commissioned residential placements for Looked After Children as a total of all Looked After Children placements.		**Good performance is: Maintain**
Target: 10-20		**Baseline: 15 (Oct 15)**
Performance	**Half year performance and RAG rating** **25 (6.5% of all children in our care)** **(RED)**	**Year-end performance and RAG rating** **28 (7.4% of all children in our care)** **(RED)**

What is the reason for the performance? Of the 28 commissioned residential placements, 5 are of severely autistic children for whom there is no possible internal provision. The other children and young people are in residential placements as the risks present in their lives are of such severity that intensive residential support is the only appropriate option, often distant from the Borough.

Even though we have seen a significant recent growth in residential placements, it needs to be noted that the proportion of children and young people in our care that are placed in residential provision remains beneath the national (12%). Again, the target range for performance will need reconsidering in the light of higher children in our care numbers and a more nationally typical proportion of young people in residential provision. Using the national and regional average as a range, one would expect Blackburn with Darwen to have between 35 and 45 children and young people in residential provision. Including those in in-house residential provision, we currently have 34 children and young people in children's homes or residential schools. Therefore this pressure reflects a reversion to the norm and a movement away from previously exceptional performance.

The wider context around commissioned placements, especially in the region, is that there is insufficient capacity to meet growing need in agency placements, which means that this situation is likely to worsen over the next few years, especially in the light of growing complexity and demand and the long term impact of austerity now being felt by the 'people' departments. In children's social care the impact is being felt in both rising demand and in more damaged children, with a higher complexity of need. It is the latter group of children and young people that are the key drivers for this rise in the number of children in external residential placements. The second key challenge for the department and the council over the coming year (in addition to the capacity of the service to meet the presenting demand from the local community for social care services) is how well we can contain this ongoing pressure in the face of extremely difficult circumstances both within the market for care placements and the needs and risk present in the local community.

What is the likely impact of continued performance? When reported last in September the average weekly cost of each commissioned residential placement was £3,750, with a potential annualised cost for the placements of nearly £5.5 million. This represented a rise of £750 per child in placement since the start of the financial year. Over the latter half of the year, we have been able to reverse this situation so that, while the number of placements remains the same, the average weekly cost has reduced somewhat (currently £3,050) - with a potential annualised commitment of £4.5m, but this still represents a major budget pressure going into the next financial year. Should savings need to be found from elsewhere within the portfolio or council to offset this pressure, this would pose a considerable challenge.

What activities have been or are being put in place to address these issues? Very tight monitoring of external residential placements has been in place for the past decade and this continues - a weekly panel to discuss any placement changes, chaired by a Head of Service, with a quarterly review of all children in

commissioned placements - chaired by the Director of Children's Services. One of our strategic commitments is to try to keep all of our children in local placements and this has driven our exceptional performance over the past decade. Children and young people are only ever placed in residential placements outside the borough where there are no appropriate alternatives and where it is clearly the only means of meeting that child or young person's needs.
Are there any decisions likely to be required of Executive Members in the future, in relation to this issue? The Executive Member for Children's Services is regularly briefed on the number of commissioned placements. The activities to manage the issue, as outlined above, is discussed at Senior Policy Team meetings via quarterly performance reporting and budget monitoring items.

Blackburn with Darwen SIF Inspection Action Plan

Inspection date: 25th September – 19th October 2017

Action	Lead Officer	Timescales	Progress/Comments	RAG Rating
1. Ensure that all assessments are timely and updated to reflect changes in the children's lives, and to take account of their history and identity needs. Key success indicators: all assessments are completed within timescales (unless there is a good reason not), and are updated at significant events as measured through performance data and audits. Assessments clearly evidence analysis of historical information and acknowledge identity.				
a. Review and relaunch What Does Good Look Like (WDGLL) Guidance	Head of Social Work Service	January 2018	Guidance has been reviewed and re-issued to staff.	
b. Review the trigger points at which to update assessments	Principal Social Worker	February 2018	Procedures have been reviewed and updated on Tri.X.	
c. Improve induction for new staff	Principal Social Worker; Lead HR Consultant, Workforce Development	March 2018	The online Virtual Learning Environment (VLE) has been reviewed. Checklists and training requirements are going to be streamlined and anything that is currently still offline will be moved online, either directly into the VLE, or by adding to the Department's Good Practice Sharepoint site. The changes are being made to the system in June and we expect to relaunch in July. All social workers and team managers will receive 1 week clear of case allocation to follow the revised induction programme.	
d. Best Practice team to deliver mandatory training	Principal Social Worker	March 2018	Training delivered (and this is part of the Best Practice team ongoing support)	
e. Mandatory workshop for managers and Independent Reviewing Officers (IROs)	Principal Social Worker	April 2018	Training delivered	
f. Review active assessments to ensure that any areas for development can be addressed on the assessment before it is finalised	Principal Social Worker	June 2018	This is seeking to ensure learning is delivered as part of the process, rather than a retrospective audit of the quality of the work.	
2. Ensure that children's plans contain clear actions, timescales and outcomes, and that actions are progressed effectively to avoid drift and delay for the child. Key success indicators: effective and appropriate plans evidence that the right offer of support is being provided at the right time; permanence options are considered				

Action	Lead Officer	Timescales	Progress/Comments	RAG Rating
at the earliest opportunity; any drift and delay is addressed swiftly.				
a. Revise format of plan	Head of Social Work Service	Dec 2017	Development of the plan format was delayed pending findings of a planned audit for January. Following the audit, the plan format has been simplified and changes were recently implemented. It should be noted this is an interim solution, a fundamental review of plans needs to be undertaken in Autumn to consider new functionality that is now available on the recording system, which will require significant resource from PPP/Systems, QA, Social Care Managers and Social Workers.	
b. Deliver mandatory training to managers and IROs around plans	Principal Social Worker	May 2018	Completed	
c. Train social workers on new plan format	Principal Social Worker	May 2018	Completed	
d. Ensure senior management/IRO oversight of all plans to strengthen challenge around potential drift and delay	Service Leads; Independent Reviewing Officers	December 2017 – April 2018	Since the inspection there have been a number of new processes to provide formal management oversight, such as: • Children in Need (CIN) tracking - monthly • Permanence Panel – fortnightly & thematic • Adoption Tracking Panel – 6 weekly • Review of Child Protection (CP) cases prior to their 3rd conference • PLO tracking – monthly	
3. Ensure that the transition arrangements for disabled children are focused on the needs of the individual child and that clear plans are in place well before their 18th birthday. Key success indicators: audits identify that children are receiving the services they need to meet their needs when they turn 18 (with no delay); young people and families report that they are happy with their transitions arrangements.				
a. Establish a multi-agency focus group to review transitions and consider timing of an earlier transition point	Service Lead, Children in our Care (CIOC), Children with Disabilities (CwD) and Leaving Care	January – June 2018	So far, the group has established a monthly Transition Panel, which reviews all cases of young people who are due to transition. The group has agreed that transitions needs to start from the age of 14, with a graduated approach that sees involvement of Adult Social Care (and the level of co-working) increasing gradually as the young person approaches their 18th	

Action	Lead Officer	Timescales	Progress/Comments	RAG Rating
			birthday. However, it will take some time to fully achieve that in practice & the probable need for additional resource.	
b. Develop clear procedure, outlining expectations and offer to young people and families	Service Lead, CIOC, CwD and Leaving Care; Service Lead, Specialist Services (Adults Social Care)	April – June 2018	The Council's offer for care leavers is published on the Council website. More work is needed to define the local offer, this will be picked up by the working group.	
c. Develop Memorandum of Understanding between DCS, Director of Adult Social Services (DASS) and Clinical Commissioning Group (CCG)	Director of Children's Services	August 2018		
d. Interim review of young people aged 13 years and over who are likely to transition to identify transition plan(s) for those children, pending outcome of wider reviews around processes	Service Lead, CIOC, CwD and Leaving Care; Service Lead, Service Lead, Specialist Services (Adults Social Care)	March 2018	A list of children aged 13 years upwards who are likely to transition has been shared with relevant colleagues. We have begun considering whether each young person has appropriate transition arrangements in place. Currently, only the 17 year olds are being looked at although the intention is to move through the list in age order.	
4. Improve the quality and timeliness of pre-proceedings work, particularly in relation to chronic neglect, and ensure that monitoring systems are in place to prevent delay. Key success indicators: Pre-proceedings work is timely and any exceptions are clearly understood and reviewed on a regular bases by senior management; audits by senior management, IROs and the DCS do not find issues of drift and delay.				
a. Re-launch the Neglect Strategy	Head of Social Work Service; Principal Social Worker	January 2018	The Strategy has been launched and shared with the Local Safeguarding Children Board (LSCB), who have developed a multi-agency action plan.	
b. LSCB to have closer line of sight to practice around neglect	LSCB Chair	January 2018	The case of concern (involving neglect) that was referred in during the SIF inspection has been referred in to the LSCB for a Multi-Agency Concise Review, to provide an opportunity for learning across the partnership. It has also been agreed that the LSCB will include neglect on the multi-agency audit plan in the next year.	
c. Introduce formal tracking systems for CIN	Head of Social	November	Formal Public Law Outline (PLO) tracking processes were	

Action	Lead Officer	Timescales	Progress/Comments	RAG Rating
and Public Law Outline (PLO) cases	Work Service; Head of Service, Policy Planning & Performance	2017	introduced in October 2017; CIN tracking systems were implemented in November.	
d. Ensure families have an offer of Family Group Conferencing (FGC) either prior to or in pre-proceedings	Service Lead, Early Intervention & Prevention	December 2017	All staff now aware of the need for an early offer of FGC. The Head of Service looks for evidence of the FGC offer in case decision forms requiring approval. There has been an increase in referrals for FGC: from October to December an average of 30 children per month were being referred to the FGC co-ordinator; in January and February there were around 60 per month.	
e. Create capacity within the fostering service to undertake more timely assessments of connected others.	Head of Social Work Service	March 2018	After initial delay in approving new posts, in February 2018 it was agreed to recruit 2 new social workers and these posts were recruited to in early April. One will be in post in April with the second not able to join us for 3 months and so the full impact of the additional capacity will not be felt until July.	
f. Ensure that where children are experiencing neglect that all assessments are underpinned by the graded care profile tool	Principal Social Worker	November 2017	The recording system has been modified so that the graded care profile tool is attached to the assessment. This will be monitored through audit to ensure processes are being followed.	
g. Ensure greater evidence of direct work, informing future planning	Head of Social Work Service	November 2017	Business Support have reviewed documents that sit outside the Protocol system, including direct work. In early June guidance is being issued to all workers setting out how direct work should be recorded – which will make evidence of direct work more apparent, and can then inform planning more effectively.	
h. Review reporting of this area to ensure greater visibility	Head of Service, Policy Planning & Performance; Head of Social Work Service	October 2017 - February 2018	Reporting of children subject to Public Law Outline work is now captured in weekly reports provided to managers, Service Leads and Heads of Service.	
i. Ensure effectiveness of intervention through increased senior management oversight	Service Lead, Review & Quality	January 2018	All Child Protection Plan (CP) cases will be reviewed by a Service Lead one month prior to the 3rd review conference,	

Action	Lead Officer	Timescales	Progress/Comments	RAG Rating
			challenging any issues and generating appropriate actions.	
j. Increase DCS line of sight to front line practice in this area	Director of Children's Services	January 2018	The fortnightly Tier 3 audits held by the DCS have been re-focused on pre-proceeding cases. This is providing the DCS with line of sight to front line practice in this area and able to provide effective support and challenge to workers on their PLO cases.	
5. Ensure that life-story work and later-life letters are available for children looked after to assist each child's understanding of their history and plan for their future. Key success indicators: Audits of children's case files evidence good quality life story work completed at the appropriate point.				
a. Review support materials available	Head of Social Work Service	December 2017	Comprehensive materials are available however it was identified that the procedure needed to be more explicit on expectations around recording of direct work; this has been added as a separate action.	
b. Review policy	Principal Social Worker	January 2018	Meeting held in January to review policy; policy fit for purpose a minor amendment suggested to the membership of the virtual team. Policy revised and changes submitted, although they will not be live until the next Tri.X update in September 2018.	
c. Reinstate the life story virtual team	Principal Social Worker	TBC	This action is being reviewed to assess whether it is the best way of providing support.	
d. Relaunch revised arrangements to all staff	Principal Social Worker	TBC	Dependent on c) above	
e. Deliver life story workshops	Principal Social Worker	TBC	Dependent on c) above.	
6. Ensure that personal education plans for children looked after involve children and young people and are specific about targets and achievements, and that the impact of pupil premium funds is monitored and used to best effect. Key success indicators: All looked after children have a PEP which is reviewed each term; high quality Personal Education Plans (PEPs) are seen in termly audits; regular analysis of pupil premium funding is undertaken and reported to the Virtual School Governing Body.				
a. Review PEP format	Virtual Headteacher	September 2017	New annual format of PEP ensures that targets from previous term(s) are monitored and providing greater oversight. The new PEP format was implemented in September 2017. An annual document being updated termly is working better,	

Action	Lead Officer	Timescales	Progress/Comments	RAG Rating
			progression is clearer,as is the impact of pupil premium.	
b. Review Children in our care (CIOC) Pupil Premium Plus policy	Virtual Head	March 2018	The new policy will be presented to the Virtual School Governing Board in June. There has been good engagement with CIOC Professionals (including Designated Teachers) regarding our proposed approach.	
c. Virtual School to offer mandatory training for practitioners in relation to PEPs and Pupil Premium plus (PP+).	Virtual School	November 2017	Additional termly training on target setting has been added to the training plan and will be a recurring event. General training will continue to be included in the Virtual School training plan for the 2018/19 academic year.	
d. Deliver mandatory training for social workers	Virtual Head	April 2018	These were delivered in April; further mop-up sessions will be held for those who were unable to attend.	
e. Hold regular PEP drop-in sessions for social workers	eLAC Manager	September 2018	In April, it was agreed that the eLAC Manager will hold regular drop-in sessions for social workers. These will begin in the new academic year, alongside the PEP updates. In the meantime, social workers have been provided with contact details for the team with an invitation to contact at any time for support, advice and guidance and the team have had some positive uptake on this.	
f. Build capacity within the Virtual School for monitoring use and impact of PP+ and ensuring compliance and quality within PEPs.	Virtual Head	March 2018	The Virtual School Headteacher intends to recruit a PEP Co-ordinator to scrutinise target setting, amongst other things (the successful candidate will be a qualified teacher as is standard in other local authorities). This can be funded using Pupil Premium, however there have been delays in getting approval to recruit to this post. From September 2018, there are increased statutory duties for the Virtual School Headteachers in relation to Previously Looked After Children and as a result the role requirements now need to be re-visited, which will create a further delay. In the meantime, the service are in discussions with a recently retired Virtual Headteacher with a view to commissioning this service.	

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g. Review recording of PEPs	Virtual Head; Service Lead, Quality Assurance (QA), Inspections & Systems	September 2018	PEPs are not recorded on the Protocol recording system; a demo of a Professional Portal took place in April and there is an agreement in principle that this is the way forward. Funding needs to be resolved and system configuration needs to be fully tested.	
7. Improve work experience and apprenticeship opportunities for care leavers. Key success indicators: increased number of care leavers in education, employment and training (EET).				
a. Ensure Employment and Skills Strategy includes provision for additional support to care leavers within the Council.	HR & Workforce Strategy Manager	January 2018	Strategy has been updated to explicitly reference care leavers as a priority: *5.1 We will develop new strategies to support care leavers into employment.*	
b. Explore apprenticeship opportunities for care leavers within the Council	HR & Workforce Strategy Manager; Leaving Care Manager	January – July 2018	A task and finish group was established to identify the key actions required to make a difference in this area. It has been agreed that the Council needs to lead by example by providing the apprenticeship opportunities, before we can approach partners. As a result, care leavers have been guaranteed an interview should they apply under the ongoing apprenticeship recruitment. All care leavers were written to, inviting them to the Council open evening in April and Personal Advisors supported a number of care leavers in accompanying them to the event. Work experience for care leavers outside of the apprenticeships programme is also being considered by HR colleagues, and opportunities through volunteering will be considered through Lancashire Volunteer Partnership.	
c. Specify the resource and support requirements necessary to ensure that care leavers are successful in completing their apprenticeships	HR & Workforce Strategy Manager	April 2018	A document has been developed which sets out the Council's commitment entitled 'Supporting our care leavers – Apprenticeships and work experience'. The Leaving Care Team will develop training for managers within the Council so that managers know what to expect, how to provide the appropriate support and manage their young person to give a better chance of success.	

Action	Lead Officer	Timescales	Progress/Comments	RAG Rating
			We will also have to consider our own internal HR policies to ensure the needs of care leavers can be met.	
d. Develop Work Ready course for care leavers	Leaving Care Manager	May 2018	A Work Ready course has been developed for care leavers, as a pilot with Training 2000. The first six weeks will be spent working at Training 2000, where they will learn employability skills such as CV development and interview skills. A 3 week work experience placement will then follow, moving the young people around so they can experience different positions. 13 young people started their course in May.	
e. Develop traineeship programme	Leaving Care Manager	May – September 2018	A traineeship programme has been developed in partnership between BwD Leaving Care, Blackburn Rovers Community Trust and the English Football League Trust (EFLT). This will see the delivery of a traineeship programme for 16-25 year olds. It will start in September in and will focus on personal social development and will require young people to undertaken tasters in different areas. The qualifications will be accredited by West Lancashire College, whilst on the course the young people will be covering: • Employability • Personal and Social Development • First Aid Qualification. • Level 1 Football or Netball Coaching Badge / or sport related depending on what the young people would like to cover.	
f. Increase offer of supported internships for pupils with Education, Health and Care Plans (EHCPs)	HR & Workforce Strategy Manager; Post-16 Manager	August 2018	The Post-16 Manager is exploring options for taking this forward in a small pilot, working with 2 or 3 test employers in collaboration with the LA (who would likely be the main pilot organisation). This would be with a view to upscaling the model incorporating any learning as part of that. We will also consider creation of supported internships for	

Action	Lead Officer	Timescales	Progress/Comments	RAG Rating
			young people with SEND (but not necessarily EHCP) once we have a successful model.	
g. Influence external partner organisations to consider creation of employment opportunities for care leavers.	Chief Executive; Director of Children's Services; HR & Workforce Strategy Manager	March 2019	As internal processes and support are proved to be successful, we will then look to expand on this with partners.	
8. Ensure that supervision for all staff is both regular and reflective, and promotes high-quality social work practice. Key success indicators: good quality supervision records; staff report feeling supported by their managers; no drift identified.				
a. Improve recording of personal supervisions	Head of Social Work Service; Principal Social Worker	March 2018	The main issue lies in capacity: personal supervisions are either not being completed and/or recorded by managers. This has not been helped by the lack of a single recording system by which managers can effectively monitor their compliance with the supervision policy (see next action).	
b. Consider how supervision is monitored and reported at a senior level	Head of Service, Planning, Performance & Commissioning	March 2018	The Corporate HR recording system does not provide a facility to record supervisions and monitor supervisions due/overdue. This may be a feature of future developments but in the absence of a confirmed solution, the department has created their own central recording system on Sharepoint, which was launched in April. This will enable managers to see at a glance any overdue/due supervisions but will also provide data for senior management which will be included as part of performance reports.	
9. Ensure that the performance monitoring framework analyses and reports on children's individual experiences, as well as the compliance of the activity undertaken by social workers. Key success indicators: Performance framework provides more child level data to enable managers to drill down into key areas; audits that focus on areas that matter most to our children and young people.				
a. Review performance framework – reports provided, indicators routinely included/analysed	Head of Service, Planning, Performance & Commissioning	January 2018	Refinement of weekly, monthly and quarterly reporting has been completed. There has been significant progress in combining most individual reports into a single master list of children and young people with a range of key indicators,	

Action	Lead Officer	Timescales	Progress/Comments	RAG Rating
			which is also now being used as the core of the data to be used in the permanence tracker (see c below)..	
b. Enable users to run their own interactive reports	Head of Service, Planning, Performance & Commissioning	June 2018	Alternative options are being explored to enable performance reports to be run on demand by managers. Various solutions are being considered all of which require support from our IT department. Access to one of the potential solutions has been provided in early June and is being tested by the PPP team.	
c. Development of a tracker for children and young people from the cusp of care to permanence	Head of Service, Planning, Performance & Commissioning	April 2018	Tracker for cases in pre-proceedings have been created and are being used and refined (see 4c) A full permanence tracker, similar to that used by Rochdale MBC in their recent inspection, is under development.	
d. Identify additional resource to increase reporting capacity	Head of Service, Planning, Performance & Commissioning	September 2018	The team have been successful in securing corporate approval to a Data Analyst Apprenticeship. Recruitment activity is underway with a successful apprentice expected in post September 2018. In the meantime, resource is being reconfigured to provide more capacity around reporting.	
e. Review QA framework	Service Lead, QA, Inspections & Systems	January 2018	The QA Audit programme has been refocused, less on compliance and more on the child's lived experience. The department now operates a quarterly thematic model of auditing and all toolkits have been revised. Feedback from managers so far has been positive as it is felt to create better learning opportunities.	
f. Involve children and young people in audit activity	Service Lead, QA, Inspections & Systems; AST Team Manager	September 2018	We have undertaken some early, brief consultation with young people who particularly liked the idea of using technology to capture their views. We are looking at ways of doing this through text platforms and young people portals. A small focus group of young people is being pulled together to help us develop this further.	