

APPENDIX A

Quarterly Assurance Report

Performance Data as at Q3 (Oct-Dec) 2023/24 or where latest monthly data is available until February 24.

Contents

1. Executive Summary	1
2 RBWM corporate cross-cutting.....	6
3 Adult Social Care & Health Directorate	28
4 Chief Executive Directorate	35
5 Children's Services & Education Directorate	37
7 Place Directorate.....	43
8 Resources Directorate.....	50

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1. Executive Summary

Performance

- 1.1 A new Council Plan (2024-28) inclusive of deliverables and a refreshed suite of performance indicators, was considered by the Corporate Overview & Scrutiny Panel on 25 March 2024 and Cabinet on 27 March 2024 and was presented to Full Council on 16 April 2024 for agreement and adoption.
- 1.2 An interim suite of performance indicators (“the Interim PMF”) was developed for reporting in 2023/24 as part of Quarterly Assurance reporting arrangements in the interests of good governance, while officers worked to develop the new Council Plan. This is the last report against the Interim PMF before the adoption of the new Council Plan in April 2024.
- 1.3 The Quarterly Assurance Report has been and will continue to be refined in line with feedback from both Cabinet and the Corporate Overview & Scrutiny Panel to ensure that it delivers the insights required for assurance and decision-making.
- 1.4 The Interim PMF has a total of 63 indicators. It is noted that the indicators reported in 2023/24 follow different frequencies (e.g. monthly, quarterly), and this report sets out the latest data available at the time of this report’s preparation – either Q3 (Oct-Dec) or Feb-24. This report’s preparation has preceded availability of Q4 data for indicators reported on a quarterly frequency.
- 1.5 Table 1 summarises the volume of indicators reported in this QAR for each Directorate with a breakdown by RAG status and an indication of the change since the last QAR was reported to Cabinet in Jan-24 shown in brackets. Of the 37 target-based indicators, 78% are either green or amber (29/37), 19% are red (7/37) and 3% (1/37) have no latest data available. Details of performance for each Directorate are set out in relevant sections of this report and a high-level summary of key messages across all Directorates is provided at 1.6.

Table 1: Latest available period performance with Directorate breakdown (previous QAR position identified in brackets to show change)

Directorate	Red	Amber	Green	Monitoring only	No data available	Total
RBWM corporate cross-cutting	1 (→ 1)	1 (↑ 0)	2 (↓ 3)	7		11
Adult Social Care & Health	2 (→ 2)	1 (↑ 0)	3 (↓ 4)	7		13
Children’s Services & Education	2 (↑ 1)	4 (↑ 1)	5 (↓ 9)	4		15
Place	1 (→ 1)	1 (→ 1)	7 → 7)	8	1	18
Resources	1 (↑ 0)	1 (↓ 4)	4 (↑ 2)	0		6
Total	7 (↑ 5)	8 (↑ 6)	21 (↓ 25)	26	1	63

Key messages: Successes:

- 1.6 **Finance: The council presented a balanced budget for 2024/25** to Cabinet and Full Council in February 2024 in a challenging environment of weak financial reserves, increased social care demand and costs, increased borrowing costs and increased contract costs. On 29 February 2024, Full Council agreed the 2024/25 budget. However, the council's financial position remains precarious with substantial risks and challenges in delivering the proposed savings and transformation set out in the budget.
- 1.7 **Children and young people: Children services sees a good progress, with 82% of their indicators marked as either amber or green, despite increasing targets for several indicators** during the annual review in Q3.
- 1.8 **Children and young people [Visits and reviews]: The proportion of children subject to Child protection plan visited within the last 10 working days is at record high of 97.4%** against a target of 95% and highest in the last 2 years.
- 1.9 **Additionally, the proportion of eligible children receiving age-based reviews are increasing, which is important in early identification of issues.** The % of eligible children receiving a 6–8-week review within 8 weeks is at 89.9% above the target of 87%, steadily increasing since Q1 (86.2%) and % of children with a review at 2-2.5 years of age is at 84.3% surpassing the target of 77.2% with a notable 29% increase in the number of children offered or due for a 2-2.5-year review in Q3 when compared to Q2.
- 1.10 **Adult Social Care: RBWM have been ranked 4th in England for Overall Satisfaction by people who have used the service.** This is one of seven survey measures in the national Adult Social Care Outcomes Framework (ASCOF) in 2023. RBWM have ranked in the top ten local authorities in five of the seven survey areas. This measure is monitored, rather than a target in the current framework so does not have a RAG rating.
- 1.11 **Revenues: At Feb-24, the % of council tax collected is 96.91%, just short of target of 97.0% (amber).** The collection rate of 96.91% has surpassed 22-23 England collection rates (96.02%). In cash terms, this equates to £108,290,876 collected from Apr-23 – Feb-24, **up £5.67m in comparison to Feb-23** (£102,619,368). At Feb-24 the % of Non-Domestic Rates (Business Rates) collected is 95.32%, above the target of 95.0%, flagging green.
- 1.12 **Complaints and compliments: There has been a quarter-on-quarter reduction in complaints** in relation to the **RBWM Formal Corporate Process** from 53 in Q1 to 36 in Q3, with reductions in complaints in relation to planning, revenue and benefits, resident contact services. Complaints concerning housing, are on an increasing trend, however the service is reviewing the data, key themes and learnings to identify how to reduce complaints in this area. **The volume of compliments for RBWM Formal Corporate Services is at its highest (125) in the last 7 quarters since Q1 22/23.**

Challenges:

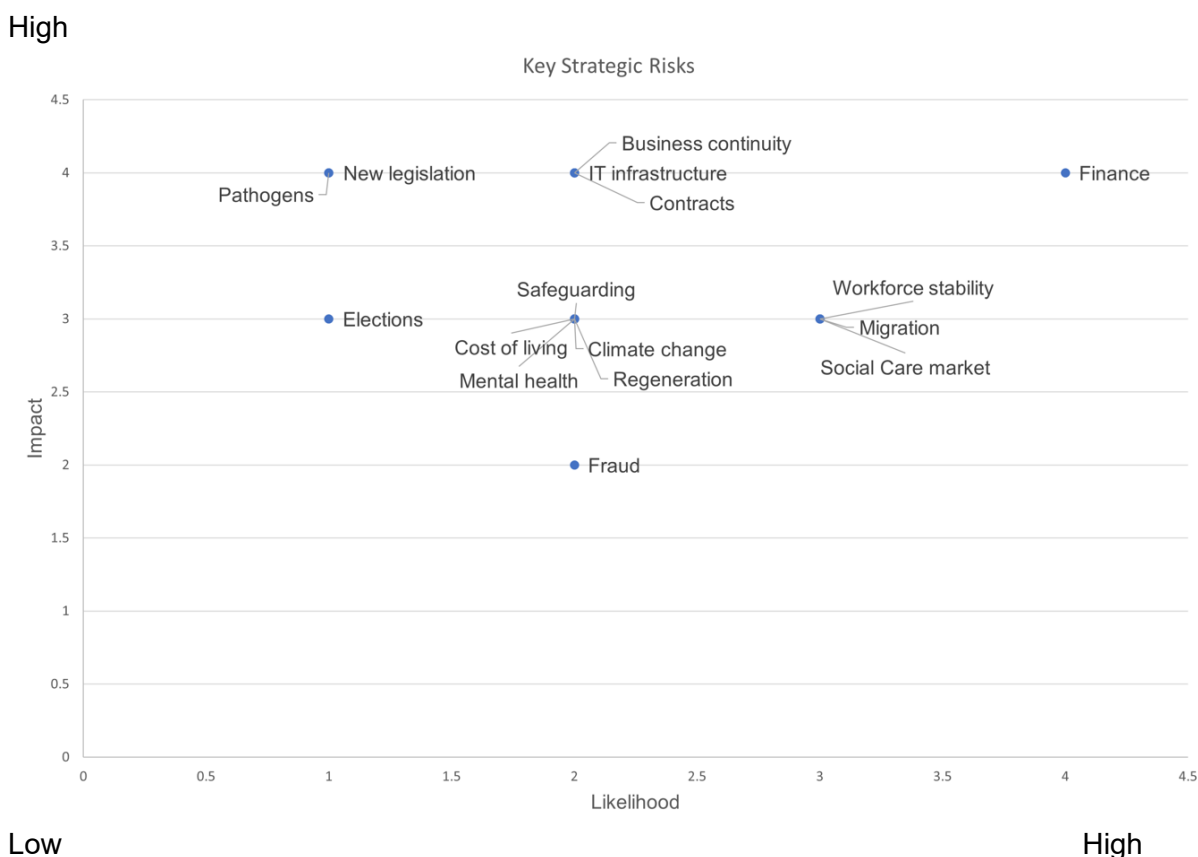
- 1.13 **Finance: Albeit presenting a balanced budget for 2024/25, the council's serious financial position remains the most acute challenge, with the forecast variance to the 2023-24 service revenue budget continuing to increase.** A separate Budget Monitoring report is provided to Cabinet monthly with full detail of the council's latest financial position. The % forecast variance to service revenue budget is at 10.2% (Jan-24) worsening from Sep-23 (6.8%). In cash terms, it is £9,647,000 (Jan-24).
- 1.14 **Adult Social care: The proportion of permanent admissions to a care home for those aged 65yrs+ (previously self-funded) has seen a large increase, from 20% (Jan-24) to 42.9% in Feb-24.** The service is working intensively to strengthen reablement services to support people to continue to live independently and good progress is being made, with fewer people being permanently admitted to care homes at 70% of target (lower is better). However those who choose to place themselves in a care home are finding that their money does not last as long and an increasing number are then seeking financial support from the Council and do not have a home to return to. The Care Quality team are working with care home providers to ensure that they are offering good advice and value to potential residents to give us as much visibility of new liabilities as even one additional placement puts the council under substantial increased financial strain. We continue to seek placement costs which match the market with providers who are judged Good or Outstanding by the CQC and have had to move some residents to achieve this financial parity when it is safe to do so.
- 1.15 **Children's social care: Demand for children's services continues to rise.** For Q3, the number of children referred per 10,000 population (cumulative) is at 421 above the target of 397.5 and flagging red, with an annual projected rate of 561, higher than the yearend target of 531. Like adult services, any additional placement adds to financial pressures. This is coupled with fewer staff in permanent roles and an increased reliance on agency staff to deliver services, also impacting on the council's finances. (Agency rate: 46.3% in Feb-24). Pay and conditions for children's social workers are being reviewed and strengthened to attract more permanent staff. There are a range of mitigations in place to address these challenges and these are set out in our transformation plans.
- 1.16 **Housing: A combination of rising demand and high housing costs continues to place pressure on the housing service, and the proportion of households in temporary accommodation placed out of borough is rising.** Cost of living rises, combined with a growing number of asylum seekers, continues to place considerable strain on the provision of temporary accommodation within the borough and remains a key challenge for the council. This is combined with the lack of council-owned housing stock, reliance on housing providers, and increasing prices within the private rental sector. The number of households in temporary accommodation has increased steadily from 223 in Apr-23 to 280 in Feb-24. The % of households in temporary accommodation within the borough is 35.7% in Feb-24 (red), declining steadily

from 46.2% in May-23 (amber). As of Feb-24, 64% (180/280) were placed out of borough. Of those placed out of borough, 78% (139/180) were placed in Slough.

Risk

1.17 Risks potentially carrying the most damaging impacts on our measurement scale are classified as key risks. The inclusion of risks within any level of risk register does not mean there is an immediate problem but signifies officers are aware of potential risks and have devised strategies for the implementation of relevant mitigation measures towards the accepted appetite position. Figure 1 shows the current strategic risks comparing probability Vs Impact, providing an update on new risks and risks that have shown an improvement in tables below. Table 2 sets out the current risk assessment status by Directorate.

Figure 1: Current Key Strategic Risks



Risk Name and Summary table

Name and Ref	Risk summary
Finance (HOF0006)	The council's financial position and not delivering the transformation plans integral to the 24/25 budget. Note, the transformation element will be captured as a separate risk going forward.
Migration (HOUS0003)	Increased levels of migration and movement of people.
Workforce stability (HR0026)	Workforce stability and challenges in recruiting.
Social care market (SDCHL0028)	State of the social care market and demand pressures for placements, both children's and adults.
Cost of living (SDCHIL0026)	Cost of living crisis leads to significant spikes in demand for support services and reactive services across the public sector.

Business Continuity (CORP0008)	Business continuity/emergency planning response to critical incidents.
IT infrastructure (HR0025)	IT infrastructure i.e. data storage infrastructure, systems access or total loss of council data centre.
Contracts (POLPER0020)	Failure to secure best value in terms of service delivery incl. contracts.
Regeneration (CORP0007)	Regeneration scheme uncertainties.
Safeguarding (SDCHIL0025)	Safeguarding adults and children.
Mental health (SDCHIL0027)	Mental health crisis accelerates with impact on RBWM to support consequences.
Climate Change (CLIM0012)	Climate change and the risks of our strategy to achieve the borough's net-zero carbon emissions target.
Fraud (HOF0015)	Fraud/corruption leads to loss of council resources.
New legislation (POLPER21)	Inadequate response to new legislation.
Pathogens (SDCHIL0029)	Impact of winter flu and possible future pathogen variants.
Elections (ELEC002)	Failure to successfully run an election.

New to Q3

Ref	Risk
Business continuity (CORP0008)	Business continuity/emergency planning response to critical incidents.

Improving Q2 – Q3

Q2	Q3	Risk
9	6	Mental health crisis accelerates with impact on RBWM to support consequences.
12	3	Impact of winter flu and possible future pathogen variants.

Reassessed

Q2	Q3	Risk
12	6	Climate change

All other assessments static Q2 -Q3.

Table 2: Current risk assessment status by Directorate

	High	Medium/ high	Medium	Low
RBWM strategic risks	1	3	8	4

Adults, Social Care and Health	0	0	3	0
Chief Executive	0	0	0	0
Children's Services and Education	1	0	0	2
Place	0	2	0	2
Resources	1	0	2	0

1.18 Cabinet Members are notified of the key risks where they are named as the risk owner, typically as part of a Member briefing. Officers are tasked with ensuring that any comments by Members are reflected in the assessment.

1.19 If any risks are of such low inherent impact that there is no good reason to continue referencing them as key risks then they are removed from the key risk registers. They are usually re-categorised as service area risks unless to do so would simply create extraneous "noise" and be of no management benefit. In which case they would be withdrawn.

2 RBWM corporate cross-cutting

Performance

2.1 Scorecard 1 sets out cross-cutting corporate indicators and reflects the latest data available at the time of this report's preparation. Across the metrics, directional arrows have been added for non-target-based metrics, where meaningful to indicate if the movement is favourable or not. This is in response to feedback from Corporate Overview & Scrutiny.

Scorecard 1: Corporate cross-cutting performance [please note a separate Budget Monitoring report is provided to Cabinet monthly with full detail of the council's latest financial position]

Corporate cross-cutting									
Information governance									
Measure	Date	Period Actual	Period trends	Last period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[RBWM:IG1] % of information requests processed within 20 working days or within agreed timelines	Jan 24	84.8%		88.7%	↓	89.3%	90.0%	90.0%	Monthly
Budget									
Measure	Date	Period Actual	Period trends	Last period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[RBWM:M1] % forecast variance to service revenue budget	Jan 24	10.2%		9.2%	↓	10.2%	0.0%	0.0%	Monthly
[RBWM:M1a] Forecast variance to service revenue budget (£000s)	Jan 24	£9,647		£8,663	↑	£9,647			Monthly
[RBWM:M3] Overdue debts (excluding Housing Benefits over-payments) (£000s)	Jan 24	£9,125		£8,547	↑	£9,125			Monthly
Complaints & Compliments									
Measure	Date	Period Actual	Period trends	Last period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[RBWM:C10] # of compliments received (RBWM Formal Corporate)	Dec 23	125		97	↑	342			Quarterly
[RBWM:C6b] # of contacts progressed as complaints (RBWM Formal Corporate)	Dec 23	36		43	↓	132			Quarterly
Workforce									
Measure	Date	Period Actual	Period trends	Last period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[RBWM:P01] Headcount	Feb 24	574		573		574			Monthly
[RBWM:P02] FTE	Feb 24	519.52		518.28		519.52			Monthly
[RBWM:P05] # of working days lost to sickness per headcount (YTD)	Feb 24	3.56		3.02	↓	3.56	5.32	5.80	Monthly
[RBWM:P06] % voluntary turnover (Month)	Feb 24	1.42%		1.24%		1.42%			Monthly
[RBWM:P07] % voluntary turnover (YTD)	Feb 24	13.12%		11.71%	↓	13.12%	11.83%	12.90%	Monthly

Key messages

- 2.2 **Finance:** The council's serious financial position remains the most acute challenge. In Jan-24 the % forecast variance to service revenue budget was 10.2% (red), worsening from 9.2% in Dec-23. In monetary terms this is a £9,647,000 variance in Jan-24 compared to £8,663,000 in Dec-23. At the time of preparation of the report, February figures were being finalised. The council has taken swift and decisive action to address overspend, including introducing a spending control panel which reviews all avoidable spend over £500 and working with each directorate to create robust and deliverable plans to increase income, reduce costs and deliver transformation. A separate Budget Monitoring report is provided to Cabinet monthly with full detail of the council's latest financial position. The council presented a balanced 2024/25 Budget and Medium-Term Financial Strategy in February 2024, however significant delivery risks remain.
- 2.3 **Workforce:** The council monitors a range of workforce-related indicators, including the number of working days lost to sickness and voluntary turnover, that are drawn from the council's internal HR system.

Corporate Overview & Scrutiny have suggested that it would be beneficial to incorporate additional indicators on staff vacancy rate and related financial impact. Indicators on staff in permanent roles and recruitment have been added to the new Council Plan while officers continue to discuss further measures.

Maintaining workforce stability is a key risk for the council and included on the corporate risk register (HR26), shown in Table 3, with key mitigations. However, the council is looking at ways to support recruitment and retention. The council recently consulted with staff and unions to increase annual leave entitlements for colleagues on the RBWM payroll. Staff will get an additional 3-days annual leave from April 24. 32 days of annual leave brings us in line with other Berkshire authorities.

2.3.1 **Working days lost to sickness:** The end of year target is to have fewer than 5.8 working days lost to sickness in total, with a set monthly target trajectory up to 5.8. In 2023/24 sickness has been consistently below the set target trajectory and therefore flagging as green with no concerns. The latest position at the time of this report's preparation is 3.56 (Feb-24), lower than last year (4.36 Feb-23). It is acknowledged that hybrid working has seen a reduction in sickness absence as staff who feel that they are well enough to work from home may choose to do so. Sickness is reported at a Directorate and service-level under "Workforce" in relevant sections of this report.

2.3.2 **Voluntary turnover:** It is acknowledged that some staff-churn is healthy for any organisation and so the year-end target for RBWM is for % voluntary turnover to be within an acceptable range of 12.9% at the end of the financial year. Monthly targets are profiled as a trajectory line up to that 12.9% year-end target. The latest position at the time of this report's preparation is

13.12%, which falls within the acceptable range of the Feb-24 target (11.83%) and therefore flagging green. Voluntary turnover is reported at Directorate and service-level under “Workforce” in relevant sections of this report.

- 2.4 **Information governance:** The council monitors the timeliness of processing Freedom of Information (FOI) requests, including Environmental Information Requests (EIRs) that relate to various environmental aspects. Monthly performance has decreased since Nov-23 (90.3%) and is at 84.8% (112/132) in Jan-24 and below the target (90%), though is within the tolerance thresholds. This could be attributable to many factors including requests that require additional information and complexity of requests. It is also noted that there was a considerably higher volume of requests (132) in Jan-24 (Dec-23: 53, Nov:23: 103). The year to date is at 89.3% (823/922), marginally below the target of 90%. This indicator will continue to be monitored.
- 2.5 **Complaints and compliments:** It is acknowledged that all complaints and compliments data is drawn from a live system and data may retrospectively change as complaints progress through the various stages of the process. The council publishes an Annual Compliments and Complaints Report, providing detailed focus on volumes of compliments and complaints including reasons for complaints, outcomes and lessons learnt. A Q3 snapshot of the system shows that volume of complaints steadily reduced since Q1 (53) to Q3 (36). The number of compliments is at 125, highest in the last 7 quarters since Q1 22/23.
- 2.6 “Universal services” such as waste & recycling, council tax, parking tend to see higher complaints volumes generally, however there can be volatility in volumes of complaints for these areas across quarterly reporting periods due to a range of factors including seasonality (e.g. annual billing for council tax, bin collection during holidays due to collection date changes). A higher proportion of complaints received in Q3 related to housing options (30.5%, 11/36) and this follows a quarter on quarter rise in housing options complaints since Q3 22/23, a trend that could be attributable to a combination of factors including increased demand, team vacancies and possible counting of banding appeals as complaints. The service is reviewing the data, key themes and learnings to identify how to reduce complaints in this area. Planning services, revenue and benefits service area and resident contact have seen a reduction in 6 complaints from Q2 23/24.

Risk

- 2.7 Senior management undertook a comprehensive re-evaluation and revision of the entire strategic risk register during December 2022 and January 2023 which informs much of the content of our current key strategic risk registers as per Table 3. Throughout the year the key operational and strategic risks are reviewed typically as part of a directorate management meeting to encourage discussion and challenge. A review and refresh of the strategic risk register will take place in 2024 once the new Council Plan is in place.

- 2.8 No risks have been removed or added from/to any our key risk registers in the last quarter. However the risk of “insufficient emergency response or business continuity planning (BCP) failure” which was classified as a chief executive operational risk in the last QAR is now classified as a key strategic risk.
- 2.9 Now that a balanced budget has been delivered the council’s chief financial risk has evolved towards its delivery from the transformation and efficiency targets.
- 2.10 Following consultation with the ELT the overall risk rating of climate change affecting the council has been reduced to medium/low. The impacts from this risk are likely to be spread across a range of possible outcomes. There is also an inherent lack of control by the council over most of emissions and therefore a reliance on behaviour change from others. It is thus potentially misleading to classify the entire risk as one of the council’s most pressing and urgent matters. Nevertheless we recognise the importance of the matter and retain the matter on our risk register.
- 2.11 Mitigation timescales will continue to be introduced into the risk commentaries to provide further granularity around the progress of outstanding control measures as far as possible.
- 2.12 It is not untypical for risk assessment values to remain unchanged at reviews. This is because our scoring methodology uses a four point scale with wide bandings so there is naturally less room for movement between the assessments.
- 2.13 The impact assessment measures how much disruption the council will face if the threat occurs. The probability assessment is the officer’s best judgement on the most feasible likelihood of the risk occurring. At the lower end of these scales 1 represents a minor impact and/or “very unlikely” and 4 represents an extreme risk and/or “very likely”. It is worth noting that likelihood judgements are subject to more volatility in their assessment – a event previously assessed as unlikely to happen might nevertheless now be about occur. Impact scoring judgements, however, tend to have only limited movement.
- 2.14 Mitigation measures are intended to reduce the probability of a risk’s occurrence or, if possible, of its impact.
- 2.15 A metric is also ascribed to the level of conviction the risk assessor has in the assessment score. By showing a confidence level the risk assessor can mitigate the problem that the decision makers may be expecting precise numerical calculations because (unless told otherwise by the risk assessor) the assessments get interpreted as completely accurate depictions of the risk.
- 2.16 Full detail of the process is contained in the council’s “approach to management of risk 1 April 2024 – 31 March 2025” approved by the audit and governance committee on 20 July 2023.

Table 3: Strategic Risks

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
<p>HOF6 – The council’s financial position and not delivering the transformation plans integral to the 24/25 budget. The transformation element will be captured as a separate risk going forward because although related, our overall financial situation is not limited to this.</p> <p>Our extremely low level of reserves, in conjunction with our restricted funding and the sharply rising cost of servicing a large amount of legacy debt means that our financial resilience is very low.</p> <p>The 2024/25 budget increases funding in specific areas, including social care, funded by a new set of transformation and efficiency targets.</p> <p>Delivering the transformation required at pace not only carries risk but will require the organisation to focus intently on that delivery over the next 12 months and avoid the temptation to divert resources, either monetary or in officer time, into any activities that do not deliver that change. This will require a culture shift from both officers and members.</p> <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> • A balanced budget for 24/25 delivered to Cabinet. • Monthly budget monitoring process. • Non-essential spend approval via SCP. • All capital expenditure from 23/24 is under review to minimise borrowing requirements and reduce spend where possible. • Annual line by line base budget review. • Improving debt recovery programme <p>Key mitigations in progress</p> <ul style="list-style-type: none"> • Transformation details are in the 24/25 budget papers. The headlines: service transformation, prevention and demand reduction, contract 	Executive Director Resources	16	16	8	Static	21/02/24

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
<p>management, income maximisation, asset management, economic growth.</p> <ul style="list-style-type: none"> Each directorate will have its own transformation programme which will report into a new Corporate Transformation Board to oversee delivery. The projects will be resourced using additional funding available under the flexible use of capital receipts (further detail in appendix G to the 2024/25 Draft Budget Cabinet report 20 February 2024). 						
<p>HR26 – Maintaining workforce stability. Problems in recruitment and retention of staff.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Provision for salary increases in MTFP. Continual review of terms and conditions and further national benchmarking. Salary gateways where appropriate. HR manager - recruitment and retention to work with senior managers to reduce agency spend. Comprehensive benefits and wellbeing packages in place. Increases in annual leave entitlements for all RBWM staff <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	Chief Executive	9	9	3	Static	21/02/24
<p>HOUS03 - Increasing migration and movement of people placed in local hotels could result in an increased demand on RBWM's critical front-line services.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Local Berkshire and national meetings to ensure RBWM is notified of when asylum seekers are appearing. Work with the Home Office, Clearsprings etc to try and find a solution to growing numbers of asylum seekers in hotels. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> Improve early notification process by having access to the asylum placement information portal. Recognise budget pressures and reflect in MTFP. 	Executive Director of Adult Social Care & Health/ Executive Director Children's Services and Education Executive Director of Place	9	9	3	Static	12/03/24

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
Confidence level in risk assessment metrics - medium. We are confident that this is almost certainly going to happen, but the level of impact is likely to be spread across a range of possible outcomes.						
<p>SDCHIL28 – Financial implications arising from the state of the social care market and demand pressures.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> • Implementation of robust management controls in Optalis to manage funding packages and spend. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> • Transitions strategy. • Commissioning plan for supported housing • Pan ICS commissioning task group for low volume of residents with highly complex needs. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	Executive Director of Adult Social Care & Health/ Executive Director Children's Services and Education	9	9	6	Static	22/01/24
<p>CORP0008 Insufficient emergency response or business continuity planning (BCP) failure resulting from the impact of and response to:</p> <ul style="list-style-type: none"> - malicious attacks on publicly accessible locations - storms - low temperatures - heatwaves - flooding <p>These are the most likely risk events that could have implications for a local authority, taken from HM Govt National Risk Register the most recent iteration as at Dec 23.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> • Joint Emergency Planning Unit contract provides support and guidance on business continuity. • Ran IT outage exercise in Feb 24 to test restoration based on a significant cyber-attack. 	Executive Director Place	8	8	8	Static	20/12/23

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
<ul style="list-style-type: none"> Waste suppliers have confirmed their processes and arrangements in the event of severe weather. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> BCP compliance exercise in progress. Approx 10% outstanding. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>						
<p>HR25 - IT infrastructure failure, cyber-crime, technological change.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Secure remote working. Networks protected by multiple security layers using firewall and other control technologies. Multiple data centres provide increased resilience. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> Go through cyber policy following external review. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	Executive Director Resources	8	8	3	Static	21/02/24
<p>POLPER20 - Failure to secure best value for contracted services.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Change control mechanisms. Exit clauses/strategies negotiated. Robust governance arrangements at Member and officer levels. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> Improve commercial management skills and capacity to assist services. Improve governance on decentralised contract management. <p>Confidence level: medium degree of confidence that the assessments accurately capture the current position in risk terms.</p>	Executive Director Resources	8	8	4	Static	21/02/24
<p>SDCHIL27 – a potential increase in residents suffering complex mental health disorders could impact on RBWM to support the consequences.</p> <p>Key mitigations in place:</p>	Executive Director of Adult Social	9	6	3	Improving	22/01/24

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
<ul style="list-style-type: none"> Engage with ICB and ICP to ensure that health services prioritise mental health services. Develop "Mental Health in School" teams across the borough Promote wellbeing and self-care options through public health and comms channels. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> One MHST team in Windsor cluster, ICB and NHSE plan to deliver all teams by 2025. Consulting on significant changes re: ICP financial position. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	Care & Health					
<p>SDCHIL25 - Major safeguarding issue leads to significant and preventable harm/death to vulnerable people.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Revised adult and children's safeguarding partnership arrangements implemented with external scrutineers engaged throughout. Single Point of Access and Early Help Hub is the single point of contact for all safeguarding and wellbeing concerns. Quality assurance framework developed in ASC. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	Executive Director of Adult Social Care & Health/ Executive Director Children's Services and Education	6	6	6	Static (target achieved). Going forward, this risk will now be captured in separate operational and strategic risk strands.	22/01/24
<p>CORP7 - Uncertainty around major schemes and commercial projects.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Prop Co's risk register details regeneration risks with joint venture partners with quarterly board review. Appraisal of all our projects so there's complete understanding of each individual scheme. 	Executive Director Place	6	6	6	Static	20/12/23

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
<ul style="list-style-type: none"> Introduction of improved governance for Prop Co including creation of new Shareholder Panel to hold company to account. <p>Key mitigations in progress: Ensure minimum EPC^[1] of E for our commercial and residential stock as per MEES^[2].</p>						
<p>SDCHIL26 - Cost of living crisis - increased levels of debt, community tension, anti-social behaviour.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Household support, now extended to 31/09/24. Voluntary sector engaged to assist. Continuing partnership built up for wrap around services. Active communication about ways of getting support (Here to Help). <p>Confidence level: low degree of confidence that the assessments accurately capture the current position in risk terms.</p>	Executive Director of Adult Services, Health and Communities	6	6	6	Static	22/01/24
<p>CLIM12 - Climate change – extreme weather conditions, carbon emissions.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Climate strategy approved Dec 2020. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> Develop a Climate Change Adaption plan. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	Executive Director Place	12	6	9	Improving	20/03/24
<p>POLPER21 - Legislation not responded to effectively leads to external intervention.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Assistant directors/managers keep up to date with service developments Legal advice on decisions is a mandatory part of our report writing mechanism. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	Executive Director Resources	4	4	4	Static	21/02/24

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
<p>HOF15 - Fraud and corruption leads to loss of council resources.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Strong protocols in place including anti-money laundering, prevention of bribery and anti-corruption policies. May 23 SWAP fraud risk assessment on all services with potential exposure. Inherent and residual risk rated to steer next steps. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> Counter Fraud Enforcement Unit to lead on countering/investigating fraud, RIPA, transparency etc. Contract wording being checked. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	Executive Director Resources	4	4	4	Static	21/02/24
<p>SDCHIL29 - Impact of winter flu and possible future pathogen variants.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Appointment of interim health protection post. Hospitals have critical incident plans e.g., postpone non-urgent operations. Priority that beds are available for seriously ill patients. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> Create health plan assurance document illustrating named responsibilities. <p>Confidence level: medium degree of confidence that the assessments accurately capture the current position in risk terms.</p>	Executive Director of Adult Social Care & Health	12	3	8	Improving	22/01/24
<p>ELEC02 - Failures in running an election leads to loss of confidence by electorate in RBWM.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Mandatory training for staff involved. Guidance provided by the Electoral Commission incl. polling station, verification and count centre risks. Election project group chaired by the RO, comprising senior officers. Group maintains an elections project risk register. 	Deputy Director of Law and Governance	3	3	3	Static	21/02/24

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.						

[\[1\]](#) Energy Performance Certificate

[\[2\]](#) Minimum Energy Efficiency Standards

Audit

2.17 The purpose of inclusion in this report is to monitor the implementation of the highest priority actions agreed (priority 1). The audits selected for monitoring are those where high corporate risks have been reported. These are listed in Table 4. Oversight of Internal Audit delivery is the responsibility of the Audit and Governance Committee.

Table 4: Audits Priority 1

Name of Audit	Priority 1 Action	Ref.	Responsible Officer	Agreed date for implementation	Progress Update
Business Continuity Planning	All services to complete a Business Impact Analysis (BIA)	917	ED Place		Self-assessed by service as complete. All services have completed their BIA.
	All services to complete a Business Continuity Plan (BCP)	943	ED Place	30/09/2023 Unable to progress	Since the last update, only one plan has been submitted. This has been raised to the Executive Director as a concern. Reminders were given during the exercise in February.
	A corporate BIA to exercise to be completed and incorporated in the corporate BCP	887	Service Manager – Joint Emergency Planning Unit		Self-assessed by service as complete. The Corporate Business Continuity Plan was shared with ELT and discussed through the exercise.
	A process of review of BCPs to be put in place	896	ED Place	31/12/2023	a) A list of critical council services has been agreed and shared with the procurement team.

Name of Audit	Priority 1 Action	Ref.	Responsible Officer	Agreed date for implementation	Progress Update
	for all high value contracts.			31/12/2024	b) A meeting with the procurement to review the process has been requested.
Contract Management	Implement a contract management framework and associated guidance	494	Procurement Manager	31/12/2023 31/12/2024	This is now included as a deliverable in the Council Plan
	Review the published contract register to ensure completeness and compliance with the Local Transparency Code 2015	495	Procurement Manager	31/12/2023 31/12/2024	This is now included as a deliverable in the Council Plan
	Complete analysis to identify spend where a contract is needed and agree how compliance can be achieved	496	Procurement Manager	31/03/2023	Self-assessed as complete in August 2023. Analysis completed and Agresso updated following spend reports and client updates.
	Deliver contract management training to all contract managers	497		31/03/2023 – Overdue	Cannot be delivered by HR. Asked Procurement to take forward if new posts are approved – TBC
	Analysis undertaken to identify and take action in	504	Head of HR	31/03/2024	Reviewed existing process via the Crown Commercial Services Framework. Identified all off-contract temps

Name of Audit	Priority 1 Action	Ref.	Responsible Officer	Agreed date for implementation	Progress Update
	relation to all agency off-contract spend			No revised date	and currently working on new process design. Have trialled the interim Procurement Officer role and taken on two temps via this framework. Working on the re-launch of using this framework.
	Procedure to authorise alternatives to the agency corporate contract to be agreed.	505	Head of HR	31/03/2024 No revised date	Met with Senior Finance BPs to agree the process and met with all Service Managers. Preparing for formal tendering process in July for new provider, as current agreement with current provider is until July 2025.
S106 Agreements	Agree a process which sets out roles and responsibilities and the arrangements for recording, monitoring and collecting financial contributions	1211	Service Lead Infrastructure		Follow-up audit completed and confirmed all actions have been completed in full.
	Agree a proactive approach to alerting a designated officer for each agreement when a contribution milestone is reached and payment is due.	1212	Service Lead Infrastructure		Follow-up audit completed and confirmed all actions have been completed in full.

Name of Audit	Priority 1 Action	Ref.	Responsible Officer	Agreed date for implementation	Progress Update
	To maintain a full audit trail. To consider using Exacom or similar as a management system for S106 agreements and payments.	1213	Service Lead Infrastructure		Follow-up audit completed and confirmed all actions have been completed in full.
Premises Health & Safety	Conduct a comprehensive review of all premises not solely occupied by RBWM staff. Where roles and responsibilities are not clearly defined, introduce Service Level Agreements (SLAs) to explicitly outline each party's roles and responsibilities related to health and safety.	2039	Executive Director of Place Services	31/03/2024	Executive Director and Prop Co have reviewed all council property assets to determine management responsibility and the identity of third-party occupiers with the Asset Management Team. New formal leases or licences have been put in place or are being put in place as part of a contract process. For Tinkers Lane, Property Services and the Asset Management Team are now directly involved in managing this property and have commissioned inspections and testing to ensure any necessary repairs are identified and resolved.

Name of Audit	Priority 1 Action	Ref.	Responsible Officer	Agreed date for implementation	Progress Update
					Self-assessed as on track for completion by 31/03/24.
	Ensure that all fire risk assessments for properties with lease or partnership arrangements are brought up to date. Ensure all fire extinguisher inspection certificates are stored for centralised monitoring.	2118	Head of Compliance and Operations, RBWM Property Company		Self-assessed as complete.

3 Adult Social Care & Health Directorate

Performance

3.1 Scorecard 2 sets out KPIs reported for the Adult Social Care & Health Directorate and reflects the latest data available at the time of this report's preparation.

Scorecard 2: Adult Social Care & Health Directorate

Adult Social Care & Health Directorate									
Health improvement									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[DA2:19] % of clients engaged in treatment that are 'showing substantial progress' (Drug & Alcohol)	Dec 23	44.0%		44.0%	➔	44.0%	55.4%	55.4%	Quarterly
% of service users (tier 3) who have successfully quit smoking at 4 weeks	Dec 23	56.7%		63.8%	➔	56.7%	60.0%	60.0%	Quarterly
% of service-users who lost any amount of weight at the end of active intervention	Dec 23	76.5%		85.0%	➔	76.8%	75.0%	75.0%	Quarterly
Complaints & Compliments									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[Opt:C1b] # of contacts progressed as complaints (Adults)	Dec 23	7		6		26			Quarterly
[Opt:C5] # of compliments received (Adults)	Dec 23	7		6		21			Quarterly
Adult social care									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
# of permanent admissions to care for those aged 65yrs+ per 100,000	Feb 24	54		37	➔	429	612	668	Monthly
% of older people (aged 65 and over) who were still at home 91 days after discharge from hospital	Mar 23	90.7%		90.8%		90.7%			Annual
% of permanent admissions to a care home for those aged 65yrs+ (previously self-funded)	Feb 24	42.9%		20.0%	➔	42.9%			Monthly
% of safeguarding concerns progressing to enquiry	Feb 24	41.3%		40.2%	➔	41.3%	34.0%	34.0%	Monthly
% of statutory service establishment posts filled with permanent staff	Feb 24	70.0%		69.0%	➔	70.0%	90.0%	90.0%	Monthly
[ASCOF] % of clients with Learning Disabilities in settled accommodation	Mar 23	75.1%		79.3%		75.1%			Annual
[ASCOF] % of Mental Health clients securing appropriate employment	Mar 22	11.0%				11.0%			Annual
[ASCOF] % satisfied/very satisfied with the care & support services they receive (exc LD customers)	Mar 23	73.5%		65.1%		73.5%			Annual

Key messages:

3.2 Adult Social Care is a highly regulated environment, and it is acknowledged that the indicators reported in Scorecard 2 are a sub-set of a larger and more detailed data-set that the service monitors routinely to provide assurance of delivery against its remit. The Care Quality Commission (CQC) are in the process of assessing Adult Social Care services for the Borough, as part of a new national assurance process, designed to test Council-led services every 2 -3 years.

3.3 **Adult social care:** 4/8 measures are annual indicators and have not changed since the last report to Cabinet in January 24. This includes three from the national Adult Social Care Outcomes Framework (ASCOF). The ASCOF dataset has a number of elements and all are ranked for the 153 local authorities in England. In 2023, the Council ranked:

- 1st for Social Care-related quality of life (ASCOF 1A)
- 2nd for proportion of people who use services who have control over their daily life (ASCOF 1B)
- 2nd for Proportion of adults with learning disabilities in paid employment (ASCOF 1E)
- 3rd for proportion of people who use services who find it easy to find information about services (ASCOF 3D1)
- 3rd for proportion of people who use services who feel safe (ASCOF 4A)
- 4th for overall satisfaction of people who use services with their care and support (ASCOF 3A)
- 6th for proportion of older people (65+) offered reablement following discharge from hospital (ASCOF 2B2)
- 9th for proportion of people who say those services have made them feel safe and secure (ASCOF 4B)

This is strong performance and improvement plans focus on the areas where we ranked lower, including the use of direct payments and increased independence for those with learning disabilities.

3.4 The Year to date position for the number of permanent admissions to care for those aged 65+yrs per 100,000 is at 429 well below the target of 612 and therefore green. However, the proportion of permanent admissions to a care home for those aged 65yrs+ (**previously self-funded**) has increased from 20% to 42.9% in Feb-24. This increase is partly due to RBWM having more care beds when compared to other neighbouring local authorities, who then become the council's financial responsibility if they become unable to self-fund, regardless of where their former home address was.

3.5 The service is continuing to see acute staffing challenges for qualified social worker posts, noting the % of statutory service establishment posts filled with

permanent staff sees a slight improvement from Jan-24 (69%) to 70% in Feb-24, although below the 90% target. The service has reshaped the base salary offer for Adult Social Workers since the 1 Jan 2024 which has resulted in some retention, however the continuing shortage of experienced staff and non-LGPS pension means we have not yet seen new recruits joining the service. The transformation programme includes a project to transfer these and other related statutory functions back to the Council in due course. Once completed there will be a specific recruitment campaign running in the second half of 2024 when the overall package on offer will be competitive across Berkshire, with a known CQC status. There is an inclusion of an indicator specifically focussed on social workers in permanent positions to closely monitor that in the 24-28 council plan. A reliance on agency staff has significant financial implications for the council and the corporate risk register includes “maintaining workforce stability” as a key risk (HR26) with mitigations including development of strategies to increase permanent recruitment / retention to reduce agency spend (see Table 3).

- 3.6 **Health improvement:** the indicators reported are drawn from a more detailed suite of indicators used to monitor key contracted services for drug and alcohol treatment, weight management and smoking cessation.
- 3.7 While the proportion of service-users who lost any amount of weight at the end of intervention 76.5% performed above target (75.0%) for Q3, this represents 13 out of 17 people in absolute numbers. The target number of service users to be enrolled is 300 per annum, with a target of 60% completing active intervention, which is not being met. Therefore, following a thorough decision-making process the decision was made not to extend the contract of the adult weight management service, meaning the service will stop on March 31st, 2024. Work is ongoing to develop a new service model to be in place for April 1st, 2025.
- 3.8 The proportion of clients engaged in drug and alcohol treatment showing “substantial progress” is 44.0%, below target (55.4%), equalling the national figure of 44% and sustaining its performance from last quarter (Q2 22/23: 44%). The cohort includes service-users who are new to treatment as well as service-users who have relapsed and been readmitted. Clients meeting the “Making Substantial Progress” indicator is improving, though at a slower rate due to data completeness, as the national requirements of this indicator changed. This was addressed in the Q2 Contract Management meeting and improvements should be evident by Q4. As the metric for the Number of Residents Engaged in Treatment and Support is a priority national indicator linked with the Government’s ambition in “From Harm to Hope” (10 year Drug Strategy) and the Supplementary Substance Misuse Treatment and Recovery Grant, this alternative metric will be used for the 24-28 Council Plan.
- 3.9 The proportion of service users engaged in the Stop Smoking service who had successfully quit smoking at 4 weeks in Q3 is 56.7% (59/104), this is just below the target of 60.0% (amber). Stop Smoking services often see a seasonal decline in 4 weeks successful quits during Q3 throughout October to December due to the additional stress and socialising associated with the build up to Christmas. In

Q3 of 2022/23 the proportion of service users engaged in the Stop Smoking service who had successfully quit smoking at 4 weeks was similar at 57.0% (57/100), while in Q4 of 22/23 this had increased to 62.0%. Following a conversation with the provider in the Q3 contract management meeting, improvements in meeting this target in Q4 should be evident.

Workforce

- 3.10 Scorecard 3 outlines workforce information for the Adult Social Care & Health Directorate across each of its service-delivery units. Please note that the workforce data does not include figures for Optalis. Working days lost to sickness for the Directorate and each of its service-delivery units has been consistently below the set target trajectory and therefore flagging as green with no concerns. There are no concerns at present in relation to voluntary turnover in relation to the Directorate and the service-delivery units identified in Scorecard 3 with the overall directorate figure at 14.04% falling within the acceptable range of 11.83% and therefore flagging green.
- 3.11 The Council have agreed to reduce the cohort of qualified social workers from 40 to 37, redeploying the budget to cover increased salaries from the 1st of January. The current level of social worker capacity - 33 people - is the lowest level of safe operation, and agency staff are used to maintain that level. Since the change of salary level, there has been no further loss of social workers although we have yet to have any new recruits either.

Scorecard 3: Workforce (Adult Social Care & Health Directorate)

Adult Social Care & Health Directorate Workforce								
Headcount								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Adult Social Care & Health Directorate	Feb 24	29		27				Monthly
Public Health	Feb 24	8		7				Monthly
Safeguarding Information & Advice	Feb 24	5		5				Monthly
Transformation & Community Partnerships	Feb 24	13		12				Monthly
FTE								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Adult Social Care & Health Directorate	Feb 24	24.34		22.43				Monthly
Public Health	Feb 24	7.70		6.60				Monthly
Safeguarding Information & Advice	Feb 24	2.68		2.68				Monthly
Transformation & Community Partnerships	Feb 24	12.46		11.65				Monthly
Working days lost to sickness per headcount YTD								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Adult Social Care & Health Directorate	Feb 24	0.73		0.76	➡	5.32	5.80	Monthly
Public Health	Feb 24	1.58		1.64	➡	5.35	5.80	Monthly
Safeguarding Information & Advice	Feb 24	0.29		0.29	➡	5.32	5.80	Monthly
Transformation & Community Partnerships	Feb 24	0.38		0.43	➡	5.32	5.80	Monthly
Voluntary turnover (Month)								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Adult Social Care & Health Directorate	Feb 24	0.00%		3.64%				Monthly
Public Health	Feb 24	0.00%		0.00%				Monthly
Safeguarding Information & Advice	Feb 24	0.00%		16.67%				Monthly
Transformation & Community Partnerships	Feb 24	0.00%		0.00%				Monthly
Voluntary turnover (YTD)								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Adult Social Care & Health Directorate	Feb 24	14.04%		14.55%	➡	11.83%	12.90%	Monthly
Public Health	Feb 24	35.29%		37.50%	➡	11.83%	12.90%	Monthly
Safeguarding Information & Advice	Feb 24	16.67%		16.67%	➡	11.83%	12.90%	Monthly
Transformation & Community Partnerships	Feb 24	0.00%		0.00%	➡	11.83%	12.90%	Monthly

Risk

3.12 Table 5 sets out the current key risks for the directorate.

Table 5: Adult Social Care & Health Directorate key risks

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<p>HSG0006 - Inadequate strategic planning between children's services, adults and health.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> • Robust management controls to manage funding packages and spend. • Review pathway for Optalis and AfC to deliver statutory services. <p>Key mitigations in progress</p> <ul style="list-style-type: none"> • Supported housing needs assessment exercise completed in 2022. Plan due 2026. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	8	8	6	Static	22/01/24
<p>HSG0009 - Failure to meet aspiration of suitably integrated health and social care.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> • Work with the NHS to develop the ICS as part of the NHS long term plan. • Strong governance - integrated health & social care commissioning board takes risk-based decisions on BCF progress/performance. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	6	6	6	Static	22/01/24
<p>HSG0007 - Increased demand resulting from adult social care demographics.</p> <p>Key mitigations in place:</p>	6	6	6	Static	22/01/24

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<ul style="list-style-type: none"> • Market management by strategic commissioning. • Collaborative commissioning with NHS and other East Berkshire authorities on a range of provision, including intermediate care. <p>Confidence level: medium degree of confidence that the assessments accurately capture the current position in risk terms.</p>					

4 Chief Executive Directorate Performance

4.1 There are no performance indicators reported by this Directorate.

Workforce

4.2 Scorecard 4 outlines workforce information for the Chief Executive's Directorate. There are no concerns in relation to sickness, with number of days lost to sickness well below the target for Feb-24 for both the Directorate and the service-delivery unit. In relation to % voluntary turnover (YTD) reporting red values (25.00% for Chief Executive Directorate and 25.81% for Strategy, Performance & Communications Service), this is due to staff leaving a small team earlier in the year, which significantly inflates reported percentages.

Scorecard 4: Workforce: Chief Executive's Directorate

Chief Executive Directorate: Workforce								
Headcount								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Chief Executive Directorate	Feb 24	16		16				Monthly
Strategy, Performance & Communications	Feb 24	15		15				Monthly
FTE								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Chief Executive Directorate	Feb 24	15.41		15.41				Monthly
Strategy, Performance & Communications	Feb 24	14.41		14.41				Monthly
Working days lost to sickness per headcount YTD								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Chief Executive Directorate	Feb 24	1.49		0.67	🔴	5.32	5.80	Monthly
Strategy, Performance & Communications	Feb 24	1.57		0.71	🔴	5.32	5.80	Monthly
Voluntary turnover (Month)								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Chief Executive Directorate	Feb 24	6.25%		6.25%				Monthly
Strategy, Performance & Communications	Feb 24	6.45%		6.45%				Monthly
Voluntary turnover (YTD)								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Chief Executive Directorate	Feb 24	25.00%		18.75%	🔴	11.83%	12.90%	Monthly
Strategy, Performance & Communications	Feb 24	25.81%		19.35%	🔴	11.83%	12.90%	Monthly

Risk

4.3 There are no current key operational risks for the directorate.

5 Children's Services & Education Directorate

Performance

5.1 Scorecard 5 sets out KPIs reported for the Children's Services & Education Directorate and reflects the latest data available at the time of this report's preparation.

Scorecard 5: Children's Services & Education Directorate

Children's Services & Education Directorate									
Domestic abuse									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
# of children in households of MARAC referrals (including repeats)	Dec 23	23		41		97			Quarterly
# of reports to police in RBWM (crimes + non-crimes)	Dec 23	724		840		2,276			Quarterly
Complaints & Compliments									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[AFC:C1b] # of contacts progressed as complaints (Children's)	Dec 23	11		31	↓	63			Quarterly
[AFC:C5] # of compliments received (Children's)	Dec 23	15		16		58			Quarterly
Children & young people									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[AFC:15] # of first-time entrants into youth justice system	Dec 23	6		3	↓	15	17	22	Quarterly
[AFC:16] # of children referred per 10,000 population (cumulative)	Dec 23	421.00		263.00	↓	421.00	397.50	530.00	Quarterly
[AFC:2] % of borough schools rated by Ofsted as good/outstanding	Dec 23	92.4%		93.8%	↓	92.4%	95.0%	95.0%	Quarterly
[AFC:21] % of children subject to a CPP for 2+ wks visited within last 10 working days	Dec 23	97.4%		86.4%	↑	97.4%	95.0%	95.0%	Quarterly
[AFC:3] % of EHCP assessments completed within 20wks (inc exceptions)	Dec 23	81.3%		89.7%	↓	89.7%	90.0%	90.0%	Quarterly
[AFC:33] % of fostered children placed with AfC IFA carers	Dec 23	63.8%		68.9%	↓	63.8%	60.0%	60.0%	Quarterly
[AFC:34] % of care-leavers living in suitable accommodation (19-21yr olds)	Dec 23	94.2%		96.7%	↓	94.2%	95.0%	95.0%	Quarterly
[AFC:35] % of care-leavers in education, training and employment (19-21yr olds)	Dec 23	53.6%		63.9%	↓	53.6%	60.0%	60.0%	Quarterly
[AFC:38] % of referrals closed in the period with a positive outcome	Dec 23	95.7%		96.6%	↓	95.4%	90.0%	90.0%	Quarterly
[AFC:6] % of eligible children receiving a 6-8wk review within 8wks	Dec 23	89.9%		89.1%	↑	88.4%	87.0%	87.0%	Quarterly
[AFC:7] % of children with a review at 2-2.5 years of age	Dec 23	84.3%		94.6%	↓	83.6%	77.2%	77.2%	Quarterly

Key messages:

- 5.2 Children's Services is a highly regulated environment, and the Children & Young People indicators reported in Scorecard 5 are a sub-set of a larger and more detailed data-set that the service monitors routinely to provide assurance of delivery against its remit.
- 5.3 **Children & Young People:** As part of annual review conducted during Q3, the children services (Achieving for Children) have increased its targets for a number of indicators, despite that, 82% (9/11) indicators are either amber or green and 18% (2/11) are red.
- 5.3.1 **Visits and Reviews:** % of children subject to Child protection plan visited within the last 10 working days is at 97.4% (112/115), against a target of 95% and highest in the last 2 years. Likewise, the % of eligible children receiving a 6–8-week review within 8 weeks is at 89.9% (301/335) in Q3 Vs a target of 87%, steadily increasing since Q1 (86.2%) and % of children with a review at 2-2.5 years of age is at 84.3% (343/407) Vs the target of 77.2%. This is despite an 10% increase in the number of children eligible for a 6–8-week review and a 29% increase the number of children offered or due for a 2-2.5 year review in Q3 when compared to Q2.
- 5.3.2 **Education, Health Care Plan:** The percentage of Education, Health Care Plan (EHCP) assessments completed within 20wks (inc exceptions) has been on decline since Q1 23/24 (95.7%, 44/46) to Q3 (81.3%, 26/32) and below the target of 90% (flagging red). However, the performance is well above national average (47.6%). This is mainly due to some short-term recruitment and retention issues within the Special Education Needs (SEN) service. It is acknowledged that due to the comparatively low numbers of EHCP assessments carried out within our small local authority, even one or two late assessments will have a significant statistical impact on our quarterly performance figures. However, there are currently no concerns in relation to this indicator.
- 5.3.3 **Care Leavers:** The service has significantly increased the targets for both the care-leavers metrics, aspiring to be at 95% for percentage of care-leavers living in suitable accommodation from 80% (last year). At Q3, performance is at 94.2% (65/69) against the target of 95% (amber), nonetheless higher than latest available national figures (88%) and regional figures (86%). Targets for the percentage of care-leavers in education, training and employment (19-21yr olds) was raised from 50% last year to 60% in 23/24. Performance is at 53.6% (37/69) below target of 60% and flagging red for the first time in the last 3 years. The leaving care service works closely with our Virtual College to support young people into education, training and employment however there are currently a number of young people who are unable to work due to being parents or struggling with mental health concerns.

- 5.3.4 **Children referral:** For Q3, the number of children referred per 10,000 population (cumulative) is at 421 below the target of 397.5 and flagging red, however this is lower than last year (-36, Q3 22/23: 457). The projected annual rate is 561 above the yearend target of 530. The latest South East data indicates the projected annual rate of referrals for the region is likely to be around 655 for this year therefore considerably higher. Top 3 referral sources continue to be: Police, Schools and Health. Most commonly seen referral reasons are Domestic Abuse, Physical Abuse, Neglect and then Mental Health.
- 5.3.5 **Domestic Abuse:** Q3 data for the number of children in households of MARAC (multi-agency risk assessment conference) referrals (including repeats) is 23 (-18, Q2: 41) and the number of reports to police in RBWM (crimes + non-crimes) is 724 (-116, Q2: 840). The RBWM Domestic Abuse Executive Group has led on a number of initiatives to raise awareness and enhance our response to domestic abuse in the borough, particularly regarding coercive control and perpetrator interventions. Thames Valley Police has commissioned SafeLives across all 11 MARACS to carry out an independent review to ensure consistency across Thames Valley and to ensure they are following the MARAC principles and relevant information sharing. Higher referral rates alone do not necessarily indicate a rise in the level of child safeguarding incidents or concerns; indeed higher referral rates can highlight strong safeguarding awareness and information-sharing from partners which provide greater opportunity for early intervention. Our Think Family project aims to support our cross-functional response and recovery for families, and thereby how we can help de-escalate rising crises in households that might otherwise see child safeguarding circumstances deteriorate; whole-system responses to domestic abuse is expected to be a key component of this project.

Workforce

- 5.4 Scorecard 6 outlines workforce information for the Children's Services & Education Directorate and there are no concerns in relation to either working days lost to sickness or the % voluntary turnover YTD for the Directorate. The vacancy rate in front line social worker posts is 39% in Q3, same as Q2. The agency rate in front line social worker posts is at 46.3% in Q3, higher than Q2 (41.5%). A project is in place to improve our recruitment and retention of social workers including a review of base salaries and terms and conditions, 'conversion' conversations with agency staff.

Scorecard 6: Workforce (Children's Services & Education Directorate)

Children's Services & Education Directorate: Workforce								
Headcount								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Children's Services & Education Directorate	Feb 24	2		2				Monthly
FTE								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Children's Services & Education Directorate	Feb 24	2.00		2.00				Monthly
Working days lost to sickness per headcount YTD								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Children's Services & Education Directorate	Feb 24	2.00		2.00	+	5.32	5.80	Monthly
Voluntary turnover (Month)								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Children's Services & Education Directorate	Feb 24	0.00%		0.00%				Monthly
Voluntary turnover (YTD)								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Children's Services & Education Directorate	Feb 24	0.00%		0.00%	+	11.83%	12.90%	Monthly
Achieving for Children: Workforce								
Measure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
Vacancy rate in front line social worker posts	Dec 23	39.0%		39.0%	→			Quarterly
Agency rate in front line social worker posts	Dec 23	46.3%		41.5%	↑			Quarterly

Risk

5.5 Table 7 sets out the current key risks to the directorate.

Table 7: Children's Services & Education Directorate key risks

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
SSS019 - Maintain a satisfactory level of health or development for children with complex and multiple needs.	12	12	6	Static	20/12/23
Key mitigations in place:					

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<ul style="list-style-type: none"> Capital funding to increase the number of special units attached to mainstream schools Intensive Support team work to avoid children coming into the care of the council/reunify with their family when safe to do so. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> RBWM to have one of 33 new special free schools being created nationally. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>					
<p>SSS017 - Failure to improve standards in our schools.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Termly meetings with all Heads and Chairs of Governors, engaging regional Ofsted lead as appropriate, to drive education agenda. Maintain the education and early years link approach with risk assessed identification of challenging schools. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	4	4	4	Static	20/12/23
<p>SSS018 - Exposure to health and safety risks in schools.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Ongoing programme of fire safety works. Asbestos management surveys in place. Electrical testing up to date. 	4	4	4	Static	20/12/23

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.					

7 Place Directorate

Performance

- 7.1 Scorecard 7 sets out KPIs for the Place Directorate and reflects the latest data available at the time of this report's preparation.
- 7.2 Overall performance across the indicators reported here is broadly favourable with 90% (9/10) indicators either amber or green, albeit with key challenges in relation to Housing particularly. Following feedback from the Corporate Overview & Scrutiny Panel on 29 Jan 24, Officers have identified suitable indicators that has wider impacts on residents and their experience for inclusion in Council Plan 2024-28.

Scorecard 7: Place Directorate

Place Directorate									
Planning applications									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[P:1] % of major planning applications processed in time	Dec 23	85.7%		100.0%	↓	89.5%	65.0%	65.0%	Quarterly
[P:2] % of minor planning applications processed in time	Dec 23	82.9%		77.1%	↑	80.4%	70.0%	70.0%	Quarterly
[P:3] % of other planning applications processed in time	Dec 23	81.4%		83.6%	↓	83.0%	85.0%	85.0%	Quarterly
Community safety									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
# of ASB incidents & complaints	Dec 23	102		155		399			Quarterly
# of ASB interventions	Dec 23	1		0		1			Quarterly
# of group dispersals across the borough	Dec 23	25		46		162			Quarterly
Environmental health & Trading standards									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[HEHTS:01] % food businesses that are broadly compliant with food law	Feb 24	90.2%		89.2%	↑	90.2%	80.0%	80.0%	Monthly
[HEHTS:02] # of properties/dwellings improved formally and informally	Dec 23	2		8		2			Quarterly
[HEHTS:03] % of complaints (noise) that result in abatement notices	Feb 24	0.0%		0.0%		0.0%			Monthly
[HEHTS: 04] # of test purchase operations (TPOs) for age restricted products	Dec 23	2		1		7			Quarterly

Leisure centres									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
# of attendances at leisure centres	Feb 24	230,462		216,941		2,349,394	1,818,221	2,010,286	Monthly
Highways									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
(Vol:4) % of 24hr orders responded to on time	Feb 24	100.0%		98.0%	+	98.9%	98.0%	98.0%	Monthly
(Vol:5) % of emergency 2hr orders responded to on time	Feb 24	100.0%		100.0%	+	99.8%	98.0%	98.0%	Monthly
Waste management & recycling									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
(4.2.1) % of household waste sent for reuse, recycling	Mar 23	52.1%		51.2%	+	51.7%	50.0%	50.0%	Quarterly
(Ser:1) Average no. missed collections per 100,000 collections	Feb 24	8.00		14.00	+	16.36	60.00	60.00	Monthly
Housing									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
# of households in temporary accommodation	Feb 24	280		269	+	280			Monthly
% of households in temporary accommodation that is located within the borough	Feb 24	35.7%		37.5%	-	35.7%	50.0%	50.0%	Monthly
% successful homelessness prevention activity for households subject to the Prevention/Relief duty	Feb 24	7.7%		1.9%	+	7.0%			Monthly

Key messages:

7.3 **Leisure centre attendances:** During Feb-24, there were 230,462 attendances to leisure centres, above the target of 205,163. Year to date attendance is at 2,349,394 Vs a target of 1,818,221 (green), already exceeding the yearend target of 2,010,286. (+339,108). It should be noted that an error has been identified in the attendance figures reported from May 2023. One site was recording a cumulative figure for one activity; therefore, figures have been revised downwards, nevertheless are still above the target. As expected, the attendance levels show a dip in December before increasing in January and February 2024 due to the festive period.

7.4 **Environment Health & Trading Standards:** Performance is strong in relation to the % of food businesses that are broadly compliant with food law at 90.2% (Feb-24) against a target of 80%. [*Broadly Compliant: Food business establishments whose compliance levels have been assessed as equivalent to a Food Hygiene rating of 3 (generally satisfactory), 4 (good) or 5 (very good) at their most recent food hygiene inspection.*] Performance has been above target for the whole year and seen a steady improvement since Aug-23. This could be

attributed to the consistent scoring method by officers and increased competition between businesses to maintain high standards driving compliance.

- 7.5 **Planning applications:** Performance is broadly stable, with processing of both major and minor planning applications well above set targets for the year (Major 85.7% vs 65% target; Minor 82.9% vs 70% target). Processing of other planning applications shows a gradual decline from Q1 (84%) and while Q3 performance is short of target (85%) at 81.4% (amber), there are no current concerns.
- 7.6 **Housing:** The number of households in temporary accommodation (TA) is 280 in Feb-24, rising from 223 in Apr-23 and at its highest point in the last 3 years. The % of households in temporary accommodation within the borough is 35.7% in Feb-24, below the target of 50% and following a month-on-month downward trend since May-23 (46.2%). This remains a key challenge for the council with contributing factors including: no council-owned housing stock, the continuing cost of living crisis, increases in property prices and rents, and evictions from private rented sector. Additional pressures faced by the Housing Service include providing housing for asylum seekers exiting hotels following confirmation of refugee status. Individuals receiving refugee status are given 28 days' notice to leave Home Office accommodation. Other factors include the Government's decision to freeze Local Housing allowance rates for 2023/24. It is acknowledged that increases in rent for private rental properties, coupled with other factors like loss of jobs or cost of living crisis, also sees an increase in rough sleepers who are not placed in temporary accommodation. As at Feb-24 there were 280 households in temporary accommodation, 180 of which (64%) were placed out of borough. Of those placed out of borough, 78% (139/180) were placed in Slough.
- 7.7 The factors affecting temporary accommodation demand also have an impact on the number of rough sleepers in the borough. In Feb-24 there were 23 known rough sleepers which is a significant rise since Feb-23 where 12 were recorded. The housing service continues to provide a 3-stage pathway for rough sleepers to obtain support and access to healthcare, addiction services, education and housing.
- 7.8 The council largely relies on private rented sector to secure temporary accommodation and is looking to recruit an officer to bridge and nurture relationships with private rented sector, however there have been two failed recruitment drives. The cost of temporary accommodation increasing beyond the council's capacity to fund is a key risk on the Directorate's risk register (HOUS02), shown in Table 8, with key mitigations in progress including seeking out new providers, negotiating lower costs and ceasing high-cost placements.
- 7.9 **Waste management & recycling:** The average number of missed collections per 100,000 collections for Feb-23 show a year-to-date average of 16.36 missed collections per 100,000, well below the target of 60. We will continue to investigate any issues of reported missed bins and we are already aware of some localised issues with some residents and are working with both Councillors and residents to resolve this. Additionally, senior officers are also working closely with

the waste operator to resolve any further issues. The service is also looking to investigate the methodology used for gathering figures for this metric to ensure their accuracy. The recycling rate data is awaiting national verification from Defra and is shown up to March 2023 indicating an increase in recycling taking place across the borough. Latest waste management data has not been provided for this report due to the team being acutely short-staffed and with a wide range of services in its remit in addition to waste and recycling. Resource has now been identified to update the figures following necessary training and the latest information should be available for the next report. There is potential to run a promotion campaign to encourage residents to recycle more, however with staff shortages this campaign is yet to be confirmed. The service is proactively using resources as effectively as it can to support the waste agenda, including looking at opportunities with contractors and partners for financial contributions to support campaigns in relation to food waste and food minimisation.

Workforce

7.10 Scorecard 8 outlines workforce information for the Place Directorate across each of its service-delivery units. The number of working days lost to sickness is below the set target trajectory and flagging green. Although worsening than Jan-24 at directorate and all service areas (with the exception of Neighbourhood services), this follows the trend at the RBWM level, attributable to the cold winter season.

7.11 Although the % of voluntary turnover (YTD) for Housing and Public Protection and Planning services are flagging red, the year-to-date position for both the services shows an improving monthly trend in terms of moving closer to the target trajectory line. The council’s transformation programme is looking at service re-design around these services which usually see staff churn due to the nature of their business.

Scorecard 8: Workforce (Place Directorate)

Place Workforce								
Headcount								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate	Feb 24	214		213				Monthly
Housing and Public Protection	Feb 24	71		71				Monthly
Placemaking, Partnerships and Sustainability	Feb 24	43		43				Monthly
Neighbourhood Services	Feb 24	47		46				Monthly
Planning	Feb 24	52		52				Monthly

FTE								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate	Feb 24	199.50		198.50				Monthly
Housing and Public Protection	Feb 24	69.47		69.47				Monthly
Placemaking, Partnerships and Sustainability	Feb 24	35.28		35.28				Monthly
Neighbourhood Services	Feb 24	44.13		43.13				Monthly
Planning	Feb 24	49.62		49.62				Monthly

Working days lost to sickness per headcount YTD								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate	Feb 24	3.59		3.02	🔴	5.32	5.80	Monthly
Housing and Public Protection	Feb 24	4.99		3.88	🔴	5.32	5.80	Monthly
Placemaking, Partnerships and Sustainability	Feb 24	1.77		1.44	🔴	5.32	5.80	Monthly
Neighbourhood Services	Feb 24	4.62		4.41	🟢	5.32	5.80	Monthly
Planning	Feb 24	2.00		1.78	🔴	5.32	5.80	Monthly

Voluntary turnover (Month)								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate	Feb 24	0.47%		1.90%				Monthly
Housing and Public Protection	Feb 24	1.60%		3.20%				Monthly
Placemaking, Partnerships and Sustainability	Feb 24	0.00%		0.00%				Monthly
Neighbourhood Services	Feb 24	0.00%		2.06%				Monthly
Planning	Feb 24	0.00%		1.80%				Monthly

Voluntary turnover (YTD)								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate	Feb 24	15.17%		14.73%	🟢	11.83%	12.90%	Monthly
Housing and Public Protection	Feb 24	20.80%		19.20%	🟢	11.83%	12.90%	Monthly
Placemaking, Partnerships and Sustainability	Feb 24	4.65%		4.65%	🔴	11.83%	12.90%	Monthly
Neighbourhood Services	Feb 24	8.16%		8.25%	🔴	11.83%	12.90%	Monthly
Planning	Feb 24	23.42%		23.42%	🟢	11.83%	12.90%	Monthly

Risk

7.12 Table 8 sets out the key risks to the directorate.

Table 8: Place Directorate key risks

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<p>HOUS02 - Costs of temporary accommodation increasing beyond capacity to fund.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> • Prioritise and manage placements to ensure full occupancy. • Homelessness and Rough Sleeping Strategy 18-23. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> • Seek out new providers, negotiating lower cost and ceasing high-cost placements. • Look at alternative options such as social housing stock levels and private landlords. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	9	9	6	Static	20/12/23
<p>HPLAND019 – Failure to undertake inspections of council trees and delivering works.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> • Safety works are raised through the Arboriculture Services Framework. • Inspections targeted at trees in urban areas, as this is where impacts on tree health are the most frequent and significant. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> • Revenue budget proposals for inspections put forward for 24/25 <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	9	9	8	Static	20/12/23
<p>IST02 - Flood risk is not sufficiently dealt with by preventative and responsive measures.</p> <p>Key mitigations in place</p>	4	4	4	Static	20/12/23

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<ul style="list-style-type: none"> • RBWM emergency plan and flooding risk management strategy • Multi agency response plan coordinated by flood risk manager. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> • Follow up strategic and EOC outcomes from October 23 flooding exercise. Date: tba. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>					
<p>PPS013 - Failure to assess resources and demands resulting from cold weather.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> • A comprehensive annual winter maintenance plan is in place detailing the roles and responsibilities of contractors. • Risk assessments behind road treatment strategy. Contractors also have their own risk assessments for carrying out the works. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	2	2	2	Static	20/12/23

8 Resources Directorate

Performance

8.1 Scorecard 9 sets out KPIs for the Resources Directorate and reflects the latest data available at the time of this report's preparation. Overall, there are no concerns in relation to the indicators reported. Recruitment for long standing vacancies in the collections team and in the benefits team is reflected in the improvement in performance of indicators.

Scorecard 9: Resources Directorate

Resources Directorate									
Revenues									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
(RB:1) Percentage of Council Tax collected	Feb 24	96.91%		94.45%	➡	96.91%	97.00%	98.50%	Monthly
(RB:2) Percentage of Non Domestic Rates (Business Rates) collected	Feb 24	95.32%		90.85%	➡	95.32%	95.00%	98.30%	Monthly
Customer service									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
(LRS:4) % of calls answered within 2 mins (monthly)	Feb 24	96.6%		98.7%	➡	87.0%	80.0%	80.0%	Monthly
(LRS:5) % of calls abandoned after 5 secs (monthly)	Feb 24	2.4%		2.4%	➡	3.5%	4.0%	4.0%	Monthly
Benefits Claims									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
(RB:5) Average # of days to process new claims (Housing Benefits)	Feb 24	11.59		11.59	➡	13.73	12.00	12.00	Monthly
(RB:6) Average # of days to process changes in circumstances (Housing Benefits)	Feb 24	9.94		9.31	➡	7.16	5.00	5.00	Monthly

Key messages

8.2 **Revenues:** At Feb-24, the % of council tax collected is 96.91%, just short of target of 97.0% (amber), however already exceeding the 22-23 England collection rates (96.02%). In cash terms, this equates to £108,290,876 collected from Apr-23 – Feb-24, up £5.67m in comparison to Feb-23 (£102,619,368). At Feb-24 the % of Non-Domestic Rates (Business Rates) collected is 95.32%, above the target of 95.0%, flagging green after 6 months since Aug-23.

8.1 **Benefits claims:** Performance in relation to the average number of days to process both new claims and changes in circumstances for Housing Benefits is monitored monthly through internal systems and reported into the Department for Work and Pensions (the DWP) who will then adjust figures to enable benchmarking with regional and national comparators. Feb-24 figures for **processing new claims** is 11.59 below the target of 12 days and flagging green.

Year-to-date performance for **processing new claims** is 13.73 days in Feb-24, above target (12.00) but within acceptable tolerance thresholds and so flagging amber. It is acknowledged that the service has always set an aspirational target of 12 days whilst the national average is 20 days to process new benefits claims. Latest available benchmarking data (Sep-23) shows RBWM to be outperforming both regional and national performance: RBWM 15 days / South East 19 days / England 20 days. At Feb-24, **processing change in circumstances** is at 9.94 days, flagging red. Nevertheless, the year-to-date performance for **processing changes in circumstances** is 7.16 days, just above target (5.00) and flagging amber. Recruitment and training of new staff in the benefits team has seen an improvement on new claims processing, whereas change in circumstance cases is more complex depending on the history of the claim, therefore as officers gain more experience, processing times are expected to reduce. It is also acknowledged that nationally the volume of change in circumstances cases are reducing as more working age claimants migrate to universal credit. Latest available benchmarking data (Sep-23) shows RBWM to be outperforming regional and national performance: RBWM 6 days / South East 7 days / England 8 days.

- 8.2 **Customer service:** The customer contact centre continues to perform well in relation to calls answered within 2 minutes (87% YTD, 90,527 / 104,018) and calls abandoned after 5 seconds (3.4% YTD, 3,653 / 104,018), both metrics flagging green (YTD) since Nov-23.

Workforce

- 8.3 Scorecard 10 outlines workforce data for the Resources Directorate. In February 2024, the number of working days lost to sickness per headcount (YTD) is below the target at the directorate and all service levels (except for Revenues, Benefits, Library, and Resident Services) and therefore green. However, there was a decrease in performance compared to January 2024, aligning with trends observed in RBWM and other directorates, possibly due to seasonal factors like winter.
- 8.4 For Feb-24, % Voluntary turnover (YTD) is either amber or green for the directorate and all services, except Finance, which has seen staff leaving in the last few months, but interims have been recruited to ensure the service gears to the busy period of financial year end closures.

Scorecard 10: Workforce (Resources Directorate)

Resources Directorate Workforce									
Headcount									
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency	
^Resources Directorate	Feb 24	313		315				Monthly	
Finance	Feb 24	54		53				Monthly	
HR, Corporate Projects and IT	Feb 24	62		62				Monthly	
Law & Governance	Feb 24	41		42				Monthly	
Revenue, Benefits, Library and Resident Services	Feb 24	154		156				Monthly	
FTE									
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency	
^Resources Directorate	Feb 24	278.27		279.94				Monthly	
Finance	Feb 24	52.06		51.06				Monthly	
HR, Corporate Projects and IT	Feb 24	60.47		60.47				Monthly	
Law & Governance	Feb 24	36.64		37.64				Monthly	
Revenue, Benefits, Library and Resident Services	Feb 24	127.10		128.77				Monthly	
Working days lost to sickness per headcount YTD									
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency	
^Resources Directorate	Feb 24	3.92		3.36	🔴	5.32	5.80	Monthly	
Finance	Feb 24	1.72		1.31	🔴	5.32	5.80	Monthly	
HR, Corporate Projects and IT	Feb 24	1.85		1.32	🔴	5.32	5.80	Monthly	
Law & Governance	Feb 24	2.33		2.19	🟢	5.35	5.80	Monthly	
Revenue, Benefits, Library and Resident Services	Feb 24	6.06		5.19	🔴	5.32	5.80	Monthly	

Voluntary turnover (Month)								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Resources Directorate	Feb 24	1.96%		0.33%				Monthly
Finance	Feb 24	3.70%		1.87%				Monthly
HR, Corporate Projects and IT	Feb 24	1.56%		0.00%				Monthly
Law & Governance	Feb 24	2.50%		0.00%				Monthly
Revenue, Benefits, Library and Resident Services	Feb 24	1.60%		0.00%				Monthly

Voluntary turnover (YTD)								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Resources Directorate	Feb 24	11.09%		9.11%	▲	11.83%	12.90%	Monthly
Finance	Feb 24	20.37%		16.82%	▼	11.83%	12.90%	Monthly
HR, Corporate Projects and IT	Feb 24	12.50%		10.94%	▼	11.83%	12.90%	Monthly
Law & Governance	Feb 24	10.00%		7.41%	▲	11.83%	12.90%	Monthly
Revenue, Benefits, Library and Resident Services	Feb 24	7.46%		6.06%	▲	11.83%	12.90%	Monthly

Risk

8.5 Table 9 sets out the current key risks to the directorate.

Table 9: Resources Directorate key risks

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<p>POLPER19 - Failure to comply with council constitution and code of conduct.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> Scheme of delegation and report writing sign off. There is no opportunity for an individual member to make a significant decision in isolation. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> Constitution working group undertaking a review of the constitution. <p>Confidence level: strong degree of confidence that the assessments</p>	8	8	4	Static	21/02/24

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
accurately capture the current position in risk terms.					
<p>PEN01 - Not bringing the fund back to a fully funded position by the agreed date of 31 March 2040.</p> <p>Pension inflation (10.1% in April 2023 and 6.7% in April 2024¹) is significantly above the planned 2%, so liabilities have considerably increased beyond forecast which worsens funding levels and puts pressure on future contributions.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> • Triannual valuation signed off on 19 March 2023 including consideration of climate risk. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> • Arrange independent test of systems and recommend any further cyber security measures to implement. <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>	8	12	8	Worsening	16/01/24
<p>HR27 - There is a risk that the council must shut down the current CRM because it goes end of life, fails the necessary mitigations and this happens before the new CRM becomes operational.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> • System not currently end of life and platform managed by external supplier • Agreed testing schedule and alterations made on testing outcomes. <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> • Contract awarded - new CRM system should be installed, 	8	8	4	Static	21/02/24

¹ This figure is based on September 2023 CPI of 6.7%, which as it is already known can be factored into the deficit.

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<p>fully supported and operational Nov 24. Phase 1 should be completed by Aug 24.</p> <p>Confidence level: strong degree of confidence that the assessments accurately capture the current position in risk terms.</p>					