

Peter Sloman
CHIEF EXECUTIVE

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To: Councillor Brock (Chair) Councillors Page, Barnett-Ward, Duveen, Emberson, Ennis, Jones, Skeats, Stevens and White

Direct: 2 0118 9372303

12 June 2020

Your contact is: Simon Hill - Committee Services (simon.hill@reading.gov.uk)

#### **NOTICE OF MEETING - POLICY COMMITTEE 22 JUNE 2020**

A meeting of the Policy Committee will be held on Monday, 22 June 2020 at 6.30 pm. This will be an Online meeting using MS Teams Live Events. The Agenda for the meeting is set out below.

#### ITEMS FOR CONSIDERATION IN CLOSED SESSION

1. EXCLUSION OF THE PRESS AND PUBLIC

The following motion will be moved by the Chair:

"That, pursuant to Section 100A of the Local Government Act 1972 (as amended) members of the press and public be excluded during consideration of the following items on the agenda, as it is likely that there would be disclosure of exempt information as defined in the relevant Paragraphs of Part 1 of Schedule 12A (as amended) of that Act"

- 2. DECLARATIONS OF INTEREST FOR CLOSED SESSION ITEMS
- 3. WHITLEY LIBRARY CHURCH 5 24

#### **ITEMS FOR CONSIDERATION IN PUBLIC SESSION**

- 4. CHAIR'S ANNOUNCEMENTS
- 5. DECLARATIONS OF INTEREST
- 6. MINUTES 25 36
- 7. PETITIONS AND QUESTIONS

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| To receive | e any petition: | s from the | public ar | nd any | questions |
|------------|-----------------|------------|-----------|--------|-----------|
| from the   | public and Cou  | uncillors. |           |        |           |

| 8.  | DECISION BOOKS   |                 | 37 - 38      |
|-----|--|-----------------|--------------|
| 9.  | COUNCIL RECOVERY PROGRAMME - CORONAVIRUS PANDEMIC  | BOROUGH<br>WIDE | 39 - 50      |
|     | This report outlines the Council's approach to the Recovery phase of the Coronavirus (Covid-19) Pandemic.  |                 |              |
| 10. | 2019/20 QUARTER 4 PERFORMANCE REPORT   | BOROUGH<br>WIDE | 51 - 108     |
|     | This report sets out the provisional revenue and capital outturn positions for the Council's General Fund and Housing Revenue Account for 2019/20.   | WIDE            |              |
| 11. | COVID-19 - FINANCIAL IMPLICATIONS  | BOROUGH<br>WIDE | 109 -<br>124 |
|     | This report sets out the projected financial impact of Covid-<br>19 on the Council's revenue and capital budgets up to 31<br>March 2021.   | WIDE            | 124          |
| 12. | WHITLEY LIBRARY  | CHURCH          | 125 -<br>132 |
|     | This report advises the Committee of the outcome of a marketing exercise to dispose of the freehold of Whitley Library and seeks authority to dispose of the freehold interest on the terms set out in the report. |                 | 132          |
| 13. | NEW EMERGENCY DUTY SERVICE CONTRACT - SOCIAL CARE AND HOMELESS PROVISION   | BOROUGH<br>WIDE | 133 -<br>140 |
|     | This report seeks approval to enter into a joint arrangement with Bracknell Forest Borough Council to supply the out of hours Emergency Duty Service for Reading.  |                 |              |
| 14. | ICT FUTURE OPERATING MODEL BUSINESS CASE   | BOROUGH<br>WIDE | 141 -<br>200 |
|     | This report presents the Outline Business Case for the ICT Future Operating Model and seeks approval of the recommended option and authority to proceed with procurement and implementation.                       | WIDE            | 200          |
| 15. | ONLINE MEETING PROTOCOLS - AUDIT & GOVERNANCE COMMITTEE AND TRAFFIC MANAGEMENT SUB-COMMITTEE   | BOROUGH<br>WIDE | 201 -<br>212 |
|     | This report sets out further arrangements to enable additional Council meetings to take place online during the current Covid-19 pandemic.   |                 |              |
| 16. | ANNUAL SAFEGUARDING REPORT 2018/19   | BOROUGH<br>WIDE | 213 -<br>340 |

To present the West of Berkshire Safeguarding Report, which provides a current overview of safeguarding in Reading and the wider local area.



# Agenda Item 3

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

Document is Restricted



By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

Document is Restricted



## Agenda Item 6

#### POLICY COMMITTEE MEETING MINUTES - 18 MAY 2020

**Present:** Councillor Brock (Chair);

Councillors Page (Vice-Chair), Duveen, Emberson, Ennis, Rowland,

Skeats, Stevens, Terry and White

**Apologies:** Councillors

#### **RESOLVED ITEMS**

#### 91. MINUTES

The Minutes of the meeting held on 27 April 2020 were agreed as a correct record and would be signed by the Chair.

#### 92. PETITIONS AND QUESTIONS

Questions on the following matters were submitted by members of the public:

|    | Questioner       | Subject   | Reply       |
|----|------------------|---|-------------|
| 1. | Roger Lightfoot  | New Pools   | Cllr Brock  |
| 2. | Peter Burt       | Reducing Traffic and Increasing Sustainable Transport | Cllr Page   |
| 3. | Peter Burt       | Policy Committee Arrangements                         | Cllr Brock  |
| 4. | Rebecca Curtayne | Adult Social Care                                     | Cllr Brock  |
| 5. | Rebecca Curtayne | Health of Reading's Diverse Community                 | Cllr Hoskin |

Questions on the following matters were submitted by Councillors:

|    | Questioner | Subject                                    | Reply      |
|----|------------|--|------------|
|    |            |  |            |
| 1. | Cllr White | Domestic Abuse Increase                    | Cllr Brock |
| 2. | Cllr White | Promoting Walking, Cycling and Road Safety | Cllr Page  |
| 3. | Cllr White | Plan to Recovery from the Coronavirus      | Cllr Page  |
|    |            | Lockdown                                   | -          |

(The full text of the questions and responses was made available on the Reading Borough Council website).

#### 93. DECISION BOOKS

The Assistant Director of Legal & Democratic Services submitted a report listing the Decision Books that had been published since the previous meeting of the Committee held on 27 April 2020.

In relation to Decision Book 589, 'One Reading Community Hub - Operating Days Options', Councillor White requested that consideration should be given to keeping the Hub open on Bank Holidays to avoid the facility being closed on two consecutive days.

#### Resolved -

That Decision Book Nos 592-593 be noted.

#### 94. COVID-19 RESPONSE UPDATE

The Executive Director of Economic Growth & Neighbourhood Services submitted a report updating on the Council's response to the Covid-19 emergency response, following the declaration of a major incident on 20 March 2020 by the Thames Valley Local Resilience Forum in response to the Covid-19 pandemic. The report described the Council's emergency response in relation to some of the key issues which had to be addressed, which included:

- Personal Protective Equipment (PPE)
- Setting up and operating the One Reading Community Hub
- Rough Sleeping
- Workforce
- Testing
- Building capacity into bereavement services and leading on the LRF's Temporary Place of Rest.
- Rebilling Business Ratepayers to take account of reliefs announced, the payment of grants to businesses; and
- Rebilling of Council Tax payers in receipt of the Council's local Council Tax Reduction Scheme to reflect the £150 Hardship Relief announced.

The report also provided an overview of the current legal and financial issues arising from the emergency.

#### Resolved -

That the Council's response to the Covid-19 pandemic as set out in the report be noted.

#### 95. REVISION OF HACKNEY CARRIAGE FARES

The Executive Director of Economic Growth & Neighbourhood Services submitted a report on a proposed fare increase, which had been received from the Reading Taxi Association. The Licensing Applications Sub-Committee 3 had considered the proposal at its meeting on 6 February 2020 (Minute 21 refers) and had authorised an increase in hackney carriage fares by means of a decrease in yardage after the flag drop to 133 yards for all daytime fares, subject to no objections being received as a result of advertising the proposed increase in a local newspaper. During the consultation period on the increase an objection was received on the basis of the unhelpfulness of some individual drivers. The objection was not strictly relevant to the issue out for consultation and therefore it was

recommended that the fare increase should be implemented and the objector be asked to report specific instances of perceived driver unhelpfulness to the Licensing Team for advice. In addition, the Lead Councillor for Strategic Environment, Planning & Transport, Tony Page, said he would be personally raising the substance of the objection with the Reading Taxi trade.

The proposed fare increase was based on a decrease in the yardage for day time fares only. After the flag drop, it was recommended to reduce the current yardage from 145 yards (0-2miles) and 140 yards (over 2miles) to 133 yards for all day time distances, which would equate to an average increase of 3.50%. However, as there was no proposal to reduce the yardage for night time fares, the overall average percentage over day and night fares would equate to an increase of 1.75%. This recommendation was consistent with the decision of the Licensing Applications Sub-Committee 3.

In addition, due to the Coronavirus pandemic the implementation of the fare increase would pose a serious practical difficulty. Officers would have to oversee the replacement of programmable chips in the taxi meters of around 240 cars. This was not feasible in the present circumstances because it would expose staff to unnecessary risks of engaging with a wide range of people and vehicles. It was therefore recommended that given the constraints of current circumstances, the taxi trade would be advised that implementation would only take place when it was safe to do so.

The report had appended the following supporting documentation:

Appendix I - Current and proposed table of fares

Appendix II - Letter from the Vice chair Reading Taxi Association

Appendix III - National fares table

Appendix IV - Response from RCDA in respect of the proposed fare increase

Appendix V - Email objection to fare increase

Appendix VI - Hackney Carriage Vehicle Driver Conditions.

#### Resolved -

- (1) That the objection to the fare increase, attached as Appendix V to the report, and summarised in paragraph 5.1.4 be deemed not strictly relevant to the consultation on the Hackney Carriage Fares increase on the grounds set out in paragraph 5.2.2 of the report;
- (2) That the Hackney Carriage fare increase be allowed to proceed as previously advertised, that being an increase in hackney carriage fares by means of a decrease in yardage after the flag drop to 133 yards for all daytime fares, however the taxi trade be advised that implementation could only take place when it was safe to do so in the present circumstances because it would expose staff to unnecessary risks of engaging with a wide range of people and vehicles.

#### 96. RE-PROFILING OF £9M CAPITAL INVESTMENT IN HIGHWAY MAINTENANCE

The Executive Director of Economic Growth & Neighbourhood Services submitted a report providing an update on the £9m capital investment in the Highways Maintenance programme and seeking approval for a reprofiling of the project given the current Covid-19 emergency situation. The report recommended reducing the Contract value of the minor road surfacing in year 1 (2020/21) to £1m with reduction to £0.25m pre-patching and reduced pavements / footways programme to £0.25m, making a total Year 1 value of £1.5m. Consequently, there would be an increase in Years 2 & 3 to £3.75m each year subject to capital funding being available. The implications of the recommendation were summarised as follows:

- the area of surfacing and number of roads & pavements / footways that could be resurfaced would be reduced by approximately 50% but it would provide a manageable programme should Covid 19 restrictions persist to later this year.
- It would still follow the contract tender preparation timescales being worked to for the current planned programme.
- The likelihood of delivering a 50% reduced programme in late Autumn would be more realistic and manageable with any slippage completed early Spring in March 2021.
- This option would also reduce the risk of causing too much traffic disruption by avoiding squeezing a full programme of works into a condensed timeframe.
- The contract programmes would be kept within separate financial years and half of the agreed year 1 investment would still be delivered.
- It should be noted that the current condition of residential (unclassified) roads that were originally included in year 1 would continue to deteriorate reducing the expected improvement in overall road condition.
- A reduced programme may increase the cost per m2 rate thereby reducing the total surfacing area and number of roads than could be resurfaced, which would reduce the expected improvement in road condition.
- The revised programme would provide flexibility should the Council need to review its capital expenditure plans as a result of COVID 19.

#### Resolved -

That Option 1, as set out in the report at paragraph 5.2 and summarised above, be taken forward which would implement a reduced Year 1 programme of £1.5m, with the balance of £7.5m being delivered over Years 2 & 3 subject to capital funding remaining available.

#### 97. REALLOCATION OF ROAD SPACE - READING'S ACTIVE TRAVEL PROPOSALS

(In accordance with Section 100B (4)(b) of the Local Government Act 1972, the Chair had agreed to allow this item to be considered as a matter of urgency to respond promptly to recent Government additional statutory guidance on the reallocation of road space in order to support local authorities to manage their road networks in response to the coronavirus outbreak).

The Executive Director of Economic Growth & Neighbourhood Services submitted a report seeking scheme and spend approval for a number of highway schemes which would reallocate road space to pedestrian and cycle space in response to the need to support sustainable transport modes during the Coronavirus pandemic. The report explained that the Coronavirus pandemic continued to have a significant impact on how residents and businesses could operate. Social distancing requirements were likely to remain in place to keep people safe for some time. The Government had also advised people to avoid public transport, where possible, as people began to return to work and school. The Council needed to respond swiftly to changing travel demands by increasing active travel opportunities which would increase walking and cycling.

The report stated that whilst the Government had issued guidance and was allocating funding to active travel proposals the details had yet to emerge. The report set out an initial tranche of schemes for implementation including proposals for Gosbrook Road, Reading Bridge and Sidmouth Street. Further smaller and local projects were also being considered with the hope that they could be brought forward for implementation. It was recommended to use the Council's approved Capital Programme funding (for transport projects) to commence initial delivery of these proposed schemes. However, given the limitations of the Capital Programme, additional active travel schemes would need to be funded from the Government's Active Travel fund.

The report explained that the schemes had been prepared to address the key Government guidance in the following sequence - i) short term - reallocating road space to walking and cycling to enable mobility whilst maintaining social distancing and reflecting the necessary restrictions on public transport (both in terms of frequency and occupancy) (ii) medium-long term - reallocating road space from private transport to public transport and active travel to meet public health, air quality and carbon objectives. Some schemes may achieve both and current circumstances presented a unique opportunity to take them forward.

The Government had stated that these measures could be introduced temporarily, either in isolation or as a combined package of measures. Some interventions, including new lightly-segregated cycle lanes, would not require Traffic Regulation Orders (TROs). Local authorities should monitor and evaluate any temporary measures they installed, with a view to making them permanent, and embedding a long-term shift to active travel as part of the passage from restart to recovery.

#### Resolved -

- **(1)** That scheme and spend approval be granted for the following short-term projects, as set out in Section 5 of the report:
  - Gosbrook Road:
  - Sidmouth Street:
  - Reading Bridge;
  - Cycle and bus lanes on Oxford Road;
  - Whitley Street Local Centre;
  - Southampton Street / Silver Street;

- Redlands Road;
- (2) That, subject to Government funding as part of the £250m active travel pack being available, the Executive Director for Economic Growth and Neighbourhood Services be granted delegated authority for scheme and spend approval, in consultation with the Leader, Lead Councillor for Strategic Environment, Planning and Transport and the Chair of the Strategic Environment, Planning and Transport Committee, to approve further schemes set out in this report, as follows:

#### **Medium-Term Projects**

- Blagrave Street;
- Basingstoke Road;
- London Road;
- 20mph speed limit review;

#### **Long-Term Projects**

- Scheme from the Centre to East Reading through a joined-up approach to the provision of sustainable transport facilities on Kings Road and London Road;
- Enhancements in West Reading including on Bath Road and further opportunities along the Oxford Road to deliver the new sections of bus lane as a part of the agreed corridor study and enhance and complement the current scheme;
- Opportunities in North Reading, including improved access to Christchurch Bridge alongside walking and cycling enhancements in Caversham local centre and on Caversham Bridge;
- Progression of measures in South Reading including on Basingstoke Road as referenced above, Shinfield Road and the A33 public transport scheme;
- Enhancements to walking and cycling routes to/from and through the town centre alongside improving the quality of the urban realm;
- (3) That a further report be submitted to a future Traffic Management Sub-Committee or Strategic Environment, Planning and Transport Committee on additional active travel initiatives in due course noting the criteria set out in this report;
- (4) That, a further report be submitted to Policy Committee on the funding of these schemes, grant applications and possible amendments to the Capital Programme as soon as further details from Government had been published;

(5) That the Executive Director of Economic Growth & Neighbourhoods and other appropriate officers be authorised to bid for all funding opportunities in order to support this initiative.

(The meeting started at 6.30 pm and closed at 8.30 pm)



**Present:** Councillor Brock (Chair);

Councillors Page (Vice-Chair), Duveen, Emberson, Hoskin, Pearce,

Skeats, Stevens, Terry and White

#### **RESOLVED ITEMS**

#### 1. PETITIONS AND QUESTIONS

A questions on the following matter was submitted by a Councillor:

|    | Questioner | <u>Subject</u>  | Reply       |
|----|------------|---|-------------|
| 1. | Cllr White | Outsourcing of Leisure and Greenwich<br>Leisure Bailout | Cllr Hoskin |

(The full text of the question and response was made available on the Reading Borough Council website).

#### 2. ANNUAL COUNCIL MEETING CANCELLATION & ARRANGEMENTS

The Assistant Director of Legal & Democratic Services submitted a report recommending that the Annual Council Meeting due to be held on 2 June 2020 was cancelled and setting out the alternative arrangements for making various appointments for the forthcoming year in the absence of the Annual Meeting. The report had appended the recommended appointments to Committees, Sub-Committees, other Bodies and appointments to outside organisations; and proposed meetings calendars for 2020/21 which had been prepared to hold a reduced number of online meetings, running until the end of August, as well as a possible full schedule of meetings in anticipation that some of the Covid-19 restrictions would be lifted by September.

The report explained that Local Authorities had been given permission to cancel or postpone their Annual Meetings this year as prescribed by the Coronavirus Act and the subsequent Regulations, which were issued in April 2020. A consequence of the proposed cancellation was that the election of the new Mayor would not be able to take place as planned. Instead the Committee was being asked to approve the appointment of the Mayor and Deputy Mayor, until it was possible to confirm them at a future Council Meeting. Additionally, the report requested approval for the appointment of the Leader and Deputy Leader; Lead Councillors; and Chairs of Committees and Sub-Committees. Appendix A listed the proposed memberships of Committees; Sub-Committees; and other bodies as well as their Chairs and Vice-Chairs. Appendix B listed the Council's appointments to outside bodies.

The Committee was reminded that the Annual Council Meeting also considered, from time-to-time, changes to the Constitution; and Delegations, which included the Monitoring Officer's ability to grant a general dispensation to members in certain circumstances. As a result of the current Covid-19 pandemic, it was intended that the

Constitution and any other matters, some of which may not have been explicitly set out in the report, would remain unchanged until such time that the Council decided to review them.

The Chair, Councillor Brock, and Vice-Chair, Councillor Page, announced a few amendments to the recommended appointments, which had been included in the papers, as follows:

- Councillor Barnett-Ward would replace Councillor James on the Licensing Applications Committee;
- Councillor Edwards would replace Councillor McEwan as the Governor representative on the Berkshire Healthcare Foundation Trust;
- Councillor Brock would replace Councillor McEwan on the Royal Berkshire NHS
- Councillor Stevens would replace Councillor Woodward on the University of Reading Court, as this appointment was linked to The Mayoralty;
- Councillor Page was the appointee to the Berkshire Local Transport Body and Bus Lane Adjudication Service Joint Committee and Councillor Debs Absolom should be recorded as his substitute (deputy) on those two bodies.

#### Resolved -

- (1) That, in accordance with Regulation 6(c) of the Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020, the Annual Council Meeting due to be held on 2 June 2020 be cancelled until such time as guidance on social distancing allowed;
- (2) That, in accordance with Standing Order 3, notice be given that the Leader of the Council shall petition the Chief Executive (Head of Paid Service) to call an Extraordinary Council Meeting for the purpose of confirming the appointment of the Mayor, at the appropriate time;
- (3) That, subject to formal confirmation at an Extraordinary Council Meeting, Councillor David Stevens be appointed Mayor of this Borough and Councillor Rachel Eden be appointed Deputy Mayor for the 2020/21 Municipal Year;
- (4) That the appointments set out below be confirmed:

Leader of the Council - Councillor Jason Brock Deputy Leader - Councillor Tony Page

Lead Councillors & Portfolios:

Adult Social Care - Councillor Tony Jones Children - Councillor Liz Terry Corporate & Consumer Services - Councillor Ellie Emberson

Culture, Heritage & Recreation - Councillor Karen Rowland
Education - Councillor Ashley Pearce
Health, Wellbeing & Sport - Councillor Graeme Hoskin
Housing - Councillor John Ennis
Neighbourhoods & Communities - Councillor Adele Barnett-Ward
Strategic Environment, Planning & Transport - Councillor Tony Page;

(5) That Chairs and Vice-Chairs of Committees & Sub-Committees be as set out below:

| Committee                    | Chair               | Vice-Chair        |
|------------------------------|---------------------|-------------------|
|                              |                     |                   |
| Adult Social Care,           | Councillor McEwan   | Councillor        |
| Children's Services &        |                     | Challenger        |
| Education                    |                     |                   |
| Audit & Governance           | Councillor Stevens  | Councillor Davies |
| Health & Wellbeing Board     | Councillor Hoskin   | Dr A Ciecierski   |
| Housing, Neighbourhoods      | Councillor Davies   | Councillor        |
| & Leisure                    |                     | Lovelock          |
| Licensing Applications       | Councillor Edwards  | Councillor        |
|                              |                     | Woodward          |
| Planning Applications        | Councillor McKenna  | Councillor Sokale |
| Personnel                    | Councillor Emberson | Councillor Brock  |
| Investigating & Disciplinary | Councillor Brock    | Councillor Page   |
| Committee                    |                     |                   |
| Appeals Committee            | Councillor Lovelock | Councillor        |
|                              |                     | Edwards           |
| Policy                       | Councillor Brock    | Councillor Page   |
| Standards                    | Mrs T Barnes        | Councillor        |
|                              |                     | Edwards           |
| Strategic Environment,       | Councillor Gittings | Councillor Eden   |
| Planning & Transport         |                     |                   |
|                              |                     |                   |
| Sub-Committee                | Chair               | Vice-Chair        |
|                              |                     |                   |
| Mapledurham Playing          | Councillor Edwards  | Councillor Ayub   |
| Fields Trustees'             |                     |                   |
| Traffic Management           | Councillor Ayub     | Councillor Debs   |
|                              |                     | Absolom           |
| Licensing Applications       | Councillor Edwards  | Councillor        |
| Sub-Committee 3              |                     | Woodward          |

(6) That the appointments to Committees, Sub-Committees and other bodies be approved as set out in Appendix A to the report, as well as the appointments and arrangements in place for reduced membership online meetings of Policy Committee and Planning Applications Committee, also described in Appendix A, and subject to Councillor Barnett-Ward

replacing Councillor James as a member of the Licensing Applications Committee;

- (7) That the appointments to outside organisations be approved as set out in Appendix B to the report, subject to the following changes:
  - Berkshire Healthcare Foundation Trust (Governor representative) -Councillor Edwards to replace Councillor McEwan;
  - Royal Berkshire NHS Trust Councillor Brock to replace Councillor McEwan:
  - University of Reading Court Councillor Stevens to replace Councillor Woodward;
  - Councillor Debs Absolom being formally recorded as Councillor Page's substitute (deputy) on the Berkshire Local Transport Body and the Bus Lane Adjudication Service Joint Committee;
- (8) That the alternative calendars of meetings for 2020/21, which had been prepared either to hold a reduced number of online meetings or a full schedule of meetings in preparation for the lifting of restrictions in relation to the Covid-19 pandemic, be approved as set out in Appendix C to the report.

(The meeting started at 6.30 pm and closed at 6.53 pm)

## READING BOROUGH COUNCIL AG

## Agenda Item 8

#### REPORT BY ASSISTANT DIRECTOR OF LEGAL AND DEMOCRATIC SERVICES

TO: POLICY COMMITTEE

DATE: 22 JUNE 2020

TITLE: DECISION BOOKS

LEAD COUNCILLOR BROCK PORTFOLIO: LEADER OF THE COUNCIL

**COUNCILLOR:** 

SERVICE: LEGAL & DEMOCRATIC WARDS: BOROUGHWIDE

**SERVICES** 

LEAD OFFICER: MICHAEL GRAHAM TEL: 0118 937 3470

JOB TITLE: ASSISTANT DIRECTOR, E-MAIL: michael.graham@reading.gov.uk

LEGAL AND DEMOCRATIC SERVICES

#### PURPOSE OF THE REPORT AND EXECUTIVE SUMMARY

1.1 The Decision Book process was amended on 25 March 2020 to disapply the previous councillors' call-in arrangements within the 10-day period after its publication and replace it with the ability to seek a review of the decision retrospectively, and to keep the changes in force temporarily during the ongoing Covid-19 situation.

- 1.2 To complement the amended process the list of Decision Books published will be reported to Policy Committee as a standing item on the agenda.
- 1.3 The following Decision Books have been published since the previous report to Policy Committee on 18 May 2020:

| No. | Title   | Date    |
|-----|---|---------|
| 594 | Nomination of School Governor                                 | 19/5/20 |
| 594 | 594 Procurement of Personal Protective Equipment              |         |
| 595 | Share Purchase Reading Community Energy Society               | 21/5/20 |
| 596 | Contract Award - Measured Term Contract for Electrical Repair | 28/5/20 |
|     | & Rewiring Extension of Contract - Electrical Testing         |         |
| 597 | Coronavirus Job Retention Scheme                              | 29/5/20 |
| 598 | Local Authority Discretionary Grant Fund                      | 29/5/20 |
| 599 | Appointment of School Governors                               | 5/6/20  |
| 600 | Appointment of School Governors                               | 9/6/20  |

#### 2. RECOMMENDED ACTION

2.1 That the Decision Book Reports be noted.



## Agenda Item 9

#### READING BOROUGH COUNCIL

#### REPORT BY CHIEF EXECUTIVE

TO: POLICY COMMITTEE

DATE: 22 JUNE 2020

TITLE: COUNCIL RECOVERY PROGRAMME - CORONAVIRUS PANDEMIC

LEAD CLLR JASON BROCK PORTFOLIO: LEADERSHIP

**COUNCILLOR:** 

SERVICE: ALL WARDS: BOROUGHWIDE

LEAD OFFICER: PETER SLOMAN TEL: 01889 372067

JOB TITLE: CHIEF EXECUTIVE E-MAIL: peter.sloman@reading.gov.uk

#### 1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 This report outlines the Council's approach to the Recovery phase of the Coronavirus (Covid-19) Pandemic. This follows on from the report to Policy Committee on 24 March 2020 which explained the Council's initial response to the Pandemic (and a further update on 18 May 2020).
- 1.2 In order to plan and deliver the necessary work required in the Recovery phase, the Council will work with its partners in Berkshire and the Thames Valley Local Resilience Forum under the requirements of the Civil Contingencies Act 2004 and relevant guidance. A number of different structures have been implemented for this work and these are described in the report.

#### 2. RECOMMENDED ACTION

Policy Committee is asked:

2.1 To endorse the Council's response to the Recovery.

Appendix 1 - Pandemic Response Strategic Framework and Underlying Principles

Appendix 2 - Reading BC Recovery Structure Diagram

Appendix 3 - Local Resilience Forum Multi Agency Recovery Structure Diagram

#### 3. POLICY CONTEXT

- 3.1 The Government published "Our Plan to Rebuild: the UK Government's Covid-19 recovery strategy" on 11 May 2020 with a number of elements to support the gradual removal of lockdown restrictions whilst limiting the transmission of the virus. These strategies are being implemented throughout the country, e.g. phased reopening of schools and opening non-essential retail. The Government's approach to recovery is based upon a strategy of, "saving lives; saving livelihoods" and a "return to life as close to normal as possible, for as many people as possible, as fast and fairly as possible ... in a way that avoids a new epidemic, minimises lives lost and maximises health, economic and social outcomes".
- 3.2 The roadmap in the strategy envisages the way in which restrictions can be lifted on a step-by-step basis, e.g. for workers, for schools, on public transport, in public spaces, Page 39

whilst protecting the clinically vulnerable. Within the strategy there are fourteen supporting programmes:

- (i) NHS and care capacity and operating model
- (ii) Protecting care homes
- (iii) Smarter shielding of the most vulnerable
- (iv) More effective, risk-based targeting of protection measures
- (v) Accurate disease monitoring and reactive measures
- (vi) Testing and tracing
- (vii) Increased scientific understanding
- (viii) "Covid-19 Secure" guidelines
- (ix) Better distancing measures
- (x) Economic and social support to maintain livelihoods and restore the economy
- (xi) Treatments and vaccines
- (xii) International action and awareness
- (xiii) Public communication, understanding and enforcement
- (xiv) Sustainable government structures
- 3.3 Members will note the broad range of activity which the Council will be expected to lead locally or support in partnership with others: protecting care homes; shielding of the most vulnerable; testing and tracing; economic and social support ... to restore the economy; public communication, understanding and enforcement.
- Following an emergency such as a pandemic, local authorities are expected to work under the guidance which accompanies the Civil Contingencies Act 2004: "Emergency Response and Recovery October 2013". The concept of Recovery within this guidance is wider than the Government strategy referred to above.
- 3.5 Within the guidance, it is noted that, Recovery is a complex and long running process that will involve many more agencies and participants than the Response phase. It is defined as the process of rebuilding, restoring and rehabilitating the community following an emergency. Local communities may also look upon an emergency as an opportunity to regenerate an area. Regeneration is about transformation and revitalisation. It is a complex social and developmental process rather than just a remedial process. There are four interlinked categories of impact that individuals and communities will need to recover from:
  - (i) Humanitarian (inc. Health)
  - (ii) Economic
  - (iii) Infrastructure
  - (iv) Environmental
- 3.6 The manner in which Recovery processes are undertaken is critical to their success. Recovery is best achieved when the affected community is able to exercise a high degree of self-determination. Regeneration is both visual and psychological. This transformation can be physical, social and economic, achieved through building new homes or commercial buildings, raising aspirations, improving skills and improving the environment whilst introducing new people and dynamism to an area.
- 3.7 While the Response phase to an emergency can be relatively short, the Recovery phase may endure for months, years or even decades.
- 3.8 The management of Recovery is best approached from a community development perspective. It is most effective when conducted at the local level with the active participation of the affected community and a strong reliance on local capacities and expertise. Recovery is not just a matter for the statutory agencies the private sector, the voluntary sector and the wider community will play a crucial role.

- 3.9 The starting point of a Recovery process is an impact assessment, a process which has been commenced by the Thames Valley Local Resilience Forum. This process is iterative and based upon the input of the different partners.
- 3.10 The Council structures stood up for the Response phase of the pandemic, Gold and Silver command have done their job in dealing with a number of issues. Some of these workstreams have come to an end, others continue. The Response phase is still relevant, for example to support infection control in care homes, the Test and Trace function, and to deal with any possible second wave or local lockdowns under the local outbreak control plan. At the same time, new structures are proposed for the Recovery which will take account of the long term need to work with partners in a wider geographical context.
- 3.11 During the Response phase the Council identified a strategic framework for the duration of the emergency and recovery period during which its priority objectives are to:
  - Support and protect vulnerable children and adults by ensuring the social care system continues to function effectively
  - Support the people who are most vulnerable and isolated in our communities
  - Support businesses and the local economy, and secure Reading's economic recovery
- 3.12 During the emergency Response phase a number of initiatives have been delivered under this strategic framework:

One Reading Community Hub - working with the voluntary sector, to provide support and shielding to the most vulnerable people in Reading. We also registered 1,000 volunteers.

**Place Leadership** - we brought together our key strategic partners within Reading to start the process of a coordinated recovery and renewal.

**Safeguarding** - ensuring regular weekly contact with 60 residents who were assessed as having higher levels of needs and vulnerabilities.

**Care Homes** - we provided a safe place for patients to be further assessed and recuperate after they were discharged from hospitals to ensure that we were not exposing vulnerable people to the virus in care settings.

**Schools** - we supported our schools and early years settings to provide education for key workers and vulnerable children. Our own Kennet Day Nursey also continued to provide a service.

**ICT and HR** - we gave staff the tools and support they needed to work effectively from home accelerating the Windows 10 roll-out and doubling the VPN capacity.

 ${\bf Excess}$   ${\bf deaths}$  - we put in place robust plans and infrastructure to manage excess deaths arising from the pandemic.

**Homelessness** - housing all our rough sleepers and homeless and putting in support to help them adjust to the changes.

**PPE** - we ensured that all those agencies in Reading who needed access to emergency PPE to provide a frontline service got what they needed.

**Democracy** - we created a new governance structure to ensure that democratic oversight and accountability was effective.

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**Business support** - we credited over 1,400 businesses with rate relief worth £53m and have allocated £24m in grants to support 1,750 small businesses through the crisis and we have launched a further discretionary grant fund.

**Cultural services** - we offered instant online library membership generating 500 new members and 10,000 downloads of ebooks and e-magazines. Reading Museum launched online resources that have been downloaded over 50,000 times, and generated over 1.2million views of their social media.

- 3.13 This strategic framework for the pandemic (See Appendix 1 for the supporting detail of the framework) sat alongside the Council's Corporate Plan 2018-2021 (which was refreshed in Spring 2019) and which set out the following six priorities:
  - Securing the economic success of Reading
  - Improving access to decent housing to meet local needs
  - Protecting and enhancing the lives of vulnerable adults and children
  - Keeping Reading's environment clean, green and safe
  - Promoting health, education, culture & wellbeing
  - Ensuring the Council is fit for the future
- 3.14 Full details of the Council's Corporate Plan and the actions which will deliver the priorities are published on the <u>Council's website</u> and demonstrate how the Council meets its legal obligation to be efficient, effective and economical.
- 3.15 As the Council now approaches the Recovery phase, it must again review its priorities for the foreseeable future in order that it can respond to the challenges now emerging as well as those to come. The existing corporate programme supporting the Corporate Plan continues, albeit that work under the programme has been refocussed to prioritise the Recovery aims.

#### 4. THE PROPOSAL

4.1 Covid-19 has had significant impacts on the Council, our residents and our businesses:

#### Impacts on the Council

- Expected backlog of demand across a number of services
- Greater and more complex demand
- Demand from a greater range of customer types (with different expectations)
- Reduced revenue generation and income opportunities lost
- Increase in costs
- Delivery of savings programmes stalled or diminished
- Demands on staff to be adaptable and to cope with the threat of the virus, ill health and caring for dependents

#### Impacts on our residents

- Long-term health and well-being impacts of isolation re mental health, poverty, immobility
- Financial difficulties and homelessness
- Dealing with death and grief
- Inequalities for BAME people
- Disproportionate effects in our more deprived areas
- Escalation of health conditions from lockdown or those who have been affected by the virus
- Job losses and skills gaps opening up

#### Impacts on our businesses

Severe effect on income and cashflow

- Risk of bankruptcy
- Increased indebtedness
- Likely to be a sustained period of low growth in all scenarios
- Stalled housing and commercial developments
- 4.2 As we mobilise for the Recovery, we need to identify the outcomes which we seek. These are suggested as:
  - A thriving place and economy, with space to support all sizes of business, where people want to come and live, work and visit.
  - An environment and economy underpinned by net zero carbon principles.
  - A relentless focus to solve our health and wealth inequalities alongside our partners.
  - A Council that embraces new ways of working for staff and new ways of accessing services for customers.
  - A skilled population that feels part of a cohesive community and shares the benefits of the economic recovery.
  - A financially sustainable operating model for the Council that delivers for our citizens.
- 4.3 Set out below are the Council's proposed strategic priorities for the Recovery phase of the pandemic. These priorities should be seen as a supplement to, but in no way a replacement of, the Corporate Plan, acknowledging that the context of the crisis requires a shift in focus. Recovery planning needs to be kept under constant review whilst the Response phase continues.
- 4.4 The Recovery plan seeks to cover the period from now until the end of the calendar year. It is envisaged that the impact assessment we will undertake, and the outcome of the Recovery work, will feed into the next Corporate Plan which will cover the period from 2021-2025. This will be considered by Members in January 2021.
- 4.5 The overall vision for the Recovery phase is:

To ensure Reading can be a thriving, virus-resilient community.

- 4.6 To achieve this there are three strategic objectives:
- 1) To ensure the Council itself is resilient and fit for the future:
  - Protecting the health and wellbeing of our staff and customers
  - Ensuring future resilience to pandemic viruses
  - Learn the lessons from the emergency response and prepare for a potential second wave of the virus
  - Restore services
  - Adapting services so they meet the needs of a community living with the virus
  - Ensuring we have the best possible online service access and great communication and engagement mechanisms available for the public
  - Ensuring we are financially secure and making efficient use of resources
- 2) To help people be safe and communities thrive:
  - Promoting the health, well-being and resilience of the community
  - Dealing with hardship
  - Assistance for those who have either had the virus and are recovering or those who have lost someone to the virus

- Provide information, support and assurance to the whole population disrupted by the pandemic
- Working to protect the vulnerable, people who are shielding and those who cannot leave home
- Safeguarding people with mental health problems, physical disabilities, the elderly and children at risk
- Developing creative solutions for delivering social care in the new context
- Strengthening our partnerships with voluntary and third sector organisations to help ensure Reading's residents can access vital support
- Preventing homelessness and supporting rough sleepers who were temporarily housed in the crisis stage into longer term solutions
- Helping the NHS and Public Health England promote the health of the community, supporting the test, track and trace efforts and providing support and advice to schools and other public services on keeping people safe
- Ensuring that schools can offer education for all children and that children with special educational needs are looked after well
- Ensuring that our parks, open spaces and riverside areas are excellent places for exercise, leisure and cultural activities
- Consider plans for memorials and other marks of respect

#### 3) To secure the economic future of Reading:

- Protecting business and the economy as much as we can through the worst period
  of the crisis and help to re-launch the town's retail, cultural and leisure economy
  when it is safe to do so
- Ensuring our transport infrastructure plays its part in a recovery that delivers (a) better air quality, (b) a healthier local climate and population, (c) our zero-carbon plans, based on improved opportunities for walking and cycling, the restoration of safe public transport as soon as possible, and harnessing new sustainable technologies in the way we plan and travel in the future.
- Ensuring that environmental sustainability is complemented by social and economic sustainability, emphasising economic inclusion and socially-conscious models of business
- Working to help those affected by redundancy, unemployment and exclusion into further education, skills, training or work
- Support for learners and recent leavers who need educational and career support to move to the next stage of their life
- Effectively managing business support schemes
- Working with key partners (Reading UK, TVBLEP, Berkshire Coordinating Recovery Group) to progress the place shaping and economic recovery plans
- 4.7 Ensuring the Council is itself resilient and fit for the future is a strategy which is applicable to the Council's own operations and delivery of services. This strategy will be delivered through the **Operational Recovery Group** led by Jackie Yates, Executive Director of Resources.
- 4.8 Helping people be safe and communities thrive is a strategy which needs to be delivered with partners, particularly the voluntary sector in Reading and the health and social care sector. This strategy will be led by the **Social Regeneration and Voluntary Sector Group** led by Seona Douglas, Executive Director of Adult Care and Health Services.

- 4.9 Securing the economic future of Reading will require wide participation from businesses and partners and will be delivered through the **Economic Recovery and Renewal Group** led by Frances Martin, Executive Director of Economic Growth and Neighbourhood Services.
- 4.10 All three groups will report into Corporate Management Team which will be the strategic co-ordinating group for Council's Recovery programme. Jackie Yates is the overall strategic lead for Recovery. A secretariat led by James Crosbie and reporting to Jackie Yates will support the Recovery function. This will ensure a co-ordinated function across the three groups so that cross cutting themes, issues and interdependencies can be reported into CMT. Appendix 2 illustrates the framework and the relationship between the different groups and priorities.
- 4.11 The structures set up in Reading mirror similar structures in the Thames Valley area under the Local resilience Forum. In discussion with other councils in Berkshire it has been agreed that the Thames Valley area is not a natural and cohesive economic area around which to build economic recovery and that therefore regional structures should be considered at the county level. Appendix 3 shows the corresponding structures under the Local Resilience Forum.

#### 5. CONTRIBUTION TO STRATEGIC AIMS

5.1 Members will note that the aims overlap the Pandemic Strategic Framework and the Council's Corporate Plan and are consistent with both.

#### 6. ENVIRONMENTAL AND CLIMATE IMPLICATIONS

6.1 The Council declared a Climate Emergency at its meeting on 26 February 2019 (Minute 48 refers). It will be important for recovery plans to reflect the commitments made in, and the urgency of, this declaration and section 4.5 above seeks to reflects this. A draft Reading Climate Change Strategy for 2020-25, produced by the Reading Climate Change Partnership with the Council's support, is currently the subject of public consultation. The consultation period has been extended partly to ensure that account can be taken of both the challenges and opportunities which the response to Covid-19 presents in working towards the aim of a net zero carbon Reading by 2030. Recovery will be relevant for the ongoing development and implementation of the strategy and reported to Members in due course.

#### 7. COMMUNITY ENGAGEMENT AND INFORMATION

7.1 Section 138 of the Local Government and Public Involvement in Health Act 2007 places a duty on local authorities to involve local representatives when carrying out "any of its functions" by providing information, consulting or "involving in another way". We have already started to consult with the voluntary sector and business community on how we should co-ordinate our work in the Recovery phase. Work has commenced on qualitative consultation through a customer focus group to inform the activities which will arise from the Recovery programme.

#### 8. EQUALITY IMPACT ASSESSMENT

- 8.1 Under the Equality Act 2010, Section 149, a public authority must, in the exercise of its functions, have due regard to the need to—
  - eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act
  - advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it

- foster good relations between persons who share a relevant protected characteristic and persons who do not share it
- 8.2 It is imperative, that in planning for the Recovery we look to protect the most vulnerable and marginalised in our society. Our revised priorities facilitate this. We will continually review our progress to ensure that we do not leave behind any section of our community.

#### 9. LEGAL IMPLICATIONS

9.1 The legal framework for responding to emergencies including the Recovery, is dealt with earlier in this report. There are no other legal issues arising directly from this report.

#### 10. FINANCIAL IMPLICATIONS

10.1 There have been significant financial implications in responding to this emergency both in terms of additional costs as well as reduced income levels and officers have put in place procedures to record and track both. Additionally, the refocusing of staff to deal with this emergency has meant that some savings are delayed or will not be delivered as planned. The Council's monthly budget monitoring arrangements will be used to formally report on the financial position. There will be additional costs arising as a result of the Recovery phase. However, our current estimates indicate that the Council could face a combined impact of increase of costs and a loss of income which amounts to approximately £15m in 2020-21 with further implications into subsequent years. A report on the Financial Implications of Covid 19 appears elsewhere on the agenda and in the absence of further Government funding, officers are reviewing options to mitigate the gap which will be the subject of future reports to Members.

#### 11. BACKGROUND PAPERS

There are none.

# Covid-19 response: strategic framework

#### Reading Borough Council, 23 March 2020

The challenge of tackling the spread and impact of the Covid-19 virus is greater than anything we have seen in a generation. The situation has developed at phenomenal speed and we can be in no doubt that life will be very different over the coming months. Families, communities and businesses are trying to come to terms with the implications of social distancing, high levels of sickness, absence, and self-isolation. The impact is felt in many ways, such as less social contact, loneliness, reduced economic activity, concern for job security, and fear for loved ones. We know that people will become ill, some of them seriously, and that we should expect many more deaths before the pandemic is under control. And we anticipate an increase in safeguarding and vulnerability issues that will impact on the health and wellbeing of at-risk groups including elderly people, those who are homeless, those who use food banks, asylum seekers, those at risk of domestic abuse and those with existing multiple and complex needs.

At the Council we are clear what we need to do to play our part in leading the response in Reading, and we have the staff, the skills, the infrastructure, the partners and most importantly the will to do it.

Our response is underpinned by key principles that guide how we work:

- We will work with others, collaborating with partners across the voluntary, business and public sectors to deliver a coordinated response.
- We will prioritise the most critical services and redeploy people and resources from other areas as necessary.
- We will safeguard the resilience and wellbeing of our staff. We will be adaptable
  in how we work, enabling home working and flexible hours wherever possible,
  and ensure people do not lose out if needing to self-isolate or care for
  dependents.
- We will communicate regularly through a variety of channels to ensure that residents, communities, voluntary groups, businesses and partners feel informed and engaged.



#### We have a three-point strategic framework:

## 1. Support and protect vulnerable children and adults by ensuring the social care system continues to function effectively.

We will maintain effective social care services for adults and children by:

- Ensuring key services are fully operational including the Adult Social Care 'front door' service for people in need, and the Children's Multi-disciplinary Referral access point.
- Ensuring social workers are available to undertake assessments and can access resources to keep people safe.

We will support others to deliver their services by:

- Providing equipment, advice and support to carers, residential and nursing homes and home care services where possible within our resources.
- Ensuring schools can provide support for the children of key workers, and for vulnerable groups.

#### 2. Support the people who are most vulnerable and isolated in our communities.

We will deliver our statutory public health responsibilities by doing all we can within our resources and our ability, and that of our partners in the voluntary sector and the NHS, to protect the health and wellbeing of residents and communities in Reading.

We will focus our efforts on key vulnerable groups including elderly people, those who are homeless, those who use food banks, asylum seekers, those at risk of domestic abuse and those with existing multiple and complex needs by:

- Working closely with providers and voluntary organisations to deliver services, target vulnerable groups and maintain robust safeguarding.
- Amending our service delivery to promote social distancing, for example delivering services online, in smaller groups or using appropriate protective clothing.
- Supporting people in financial hardship with advice and funds where we can.

We will play a lead role in coordinating the voluntary and community sector response by:

- Establishing a One Reading Community Hub to coordinate and support the recruitment and registration of volunteers, connecting what people need with the help available.
- Ensuring that community and voluntary support efforts have robust governance and safeguarding mechanisms in place.

#### 3. Support businesses and the local economy, and secure Reading's economic recovery

We will support our local businesses and the local economy by:

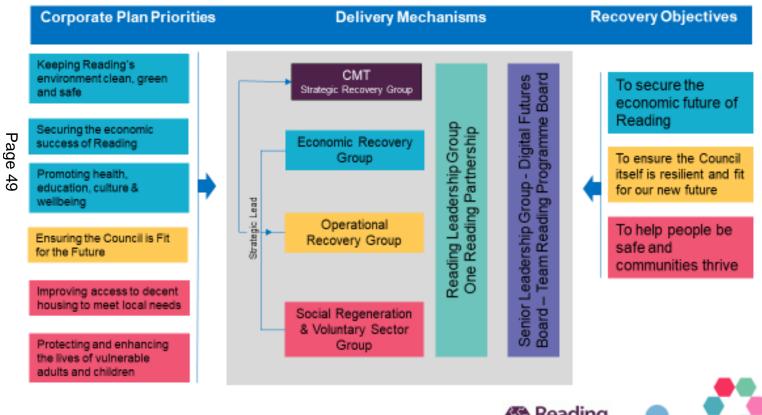
- Establishing a One Reading Forum for anchor institutions to ensure employers get the support they need.
- Ensuring Business Rates and grants to businesses are distributed quickly and efficiently.
- Lobbying the Government for rapid implementation of Covid-19 budget decisions that support businesses, workers and the economy.

We will respond to the situation now, and plan for the future, working with partners to mitigate the effects of the crisis and plan for the long-term recovery of the town, its residents, communities, businesses and economy.



T We will work Together E We will drive Efficiency A We will be Ambitious M We will Make a Difference

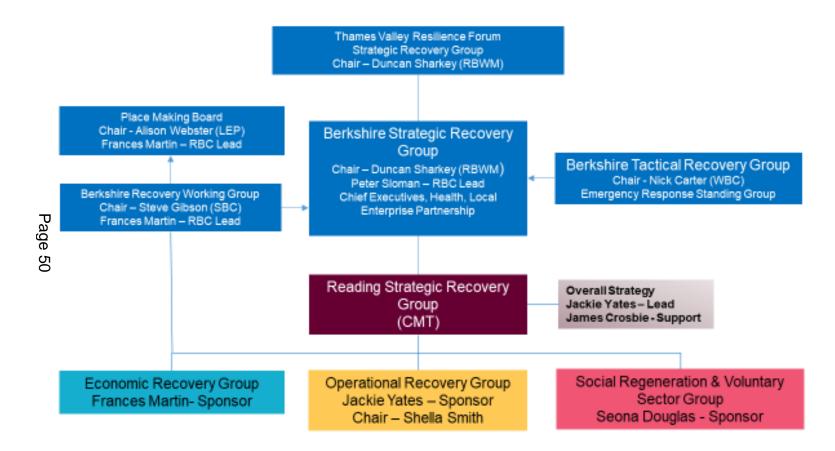
### Reading Covid-19 Recovery Strategy













## Agenda Item 10

#### READING BOROUGH COUNCIL

#### REPORT BY EXECUTIVE DIRECTOR OF RESOURCES

TO: POLICY COMMITTEE

DATE: 22 JUNE 2020

TITLE: QUARTER 4 PERFORMANCE REPORT (2019/20)

LEAD CLLR EMBERSON PORTFOLIO: CORPORATE & CONSUMER

COUNCILLOR: SERVICES

SERVICE: FINANCE AND WARDS: BOROUGHWIDE

CUSTOMER SERVICES

LEAD OFFICER: PETER ROBINSON TEL:

JOB TITLE: INTERIM ASSISTANT E-MAIL: peter.robinson@reading.gov.uk

**DIRECTOR FINANCE** 

#### 1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 This report sets out the provisional revenue and capital outturn positions for the Council's General Fund and Housing Revenue Account for 2019/20. Further changes are not expected at this stage however, it should be noted in particular that business rates income cannot be completely finalised until the Government NNDR3 form and 2019/20 pooling arrangements are finalised. The NNDR3 form was issued in mid-May with the deadline extended to 31 July, though the Council's aim is to submit in June. The outturn is also subject to audit and any material issues arising will need to be adjusted for.
- 1.2 The provisional General Fund revenue outturn position is a (£3.065m) underspend. This is a deterioration of £0.050m from the forecast as at the end of Quarter 3 (Period 9). This position is prior to any service carry forward requests. The impact of the Covid-19 pandemic is projected to account for £1.053m of additional revenue cost and income pressures in the final month of the year.
- 1.3 The provisional Housing Revenue Account outturn position is a (£1.710m) return to reserves as at the end of March 2020. This compares to a forecast drawdown from the HRA reserve of £1.852m as at Quarter 3 and reflects a variance of (£3.562m) from the Quarter 3 position and (£12.176m) from the budget.
- 1.4 The provisional General Fund Capital Programme outturn is a (£3.806m) net underspend as at the end of March 2020 against the revised net budget of £66.507m, agreed as part of the budget setting process in February 2020.
- 1.5 The provisional HRA Capital Programme outturn is a (£1.401m) net underspend against the net budget of £15.343m.
- 1.6 £7.716m of savings were delivered in 2019/20 against the target of £12.720m. £2.465m of non-deliverable savings were deleted as part of 2020/21 budget setting, therefore £2.539m of non-delivered 2019/20 savings will be carried forward into 2020/21.

- 1.7 The carry forward of non-delivered savings and the financial impact of Covid-19 significantly increase the risk of delivering the 2020/21 budget and Medium-Term Financial Strategy as originally approved in February 2020. Options to mitigate the projected financial gap are currently being worked on by officers and further reports will be brought forward in due course.
- 1.8 The report also sets out performance against the measures of success published in the Council's Corporate Plan.
- 1.9 Further detail supporting this report is included in the following appendices:
  - Appendix 1 General Fund Outturn;
  - Appendix 2 Housing Revenue Account (HRA) Outturn
  - Appendix 3 Capital Programme Outturn
  - Appendix 4 Savings;
  - Appendix 5 Delivery Fund;
  - Appendix 6 Reserves Position as at 31st March 2020
  - Appendix 7 Performance Outturn; and

#### 2. RECOMMENDED ACTION

#### That Policy Committee notes:

- 2.1 The provisional General Fund revenue outturn position for 2019/20 is a (£3.065m) underspend;
- 2.2 The provisional Housing Revenue Account outturn position for 2019/20 is a (£1.710m) transfer to the HRA reserve;
- 2.3 The provisional General Fund Capital Programme outturn position for 2019/20 is a (£3.806m) net underspend;
- 2.4 The provisional HRA Capital Programme outturn position for 2019/20 is a (£1.401m) net underspend;
- 2.5 That £7.716m of agreed savings have been delivered in year with £2.539m of non-delivered savings being carried forward into 2020/21;
- 2.6 That £3.068m of Capital Receipts have been used to fund transformation in accordance with the Capitalisation Directive (Appendix 3);
- 2.7 The performance achieved against the Corporate Plan success measures as set out in Section B of this report and Appendix 7.

#### That Policy Committee approves:

- 2.8 The service requests to roll-forward funds totalling £0.518m into 2020/21 to complete agreed programmes of work;
- 2.9 That in light of the impact of the Covid-19 pandemic the remaining underspend of £2.547m is set aside to bolster reserves.

- 2.10 That the £1.093m overspend in 2019/20 relating to Brighter Future for Children is funded by the Council.
- 2.11 The net roll-forwards of budget within the Capital Programme totalling £4.169m; resulting in a revised Capital Programme net budget of £121.963m for 2020/21.
- 2.12 The net roll-forwards of budget within the HRA Capital Programme totalling £1.533m; resulting in a revised HRA Capital Programme net budget of £31.795m

#### 3. POLICY CONTEXT

- 3.1 The Council approved it's 2019/20 Budget in February 2019. This included assumptions around available resources and agreed efficiencies. Savings delivery has been monitored throughout the year and any approved costs associated with transformation savings have been tracked by the Corporate Programme Board.
- 3.2 Council in June 2018 approved Shaping Reading's Future Our Corporate Plan 2018-21. The Plan reflects the Council's priorities for Reading and provides direction for staff in delivering services to meet the needs of the communities within the Borough whilst working to a budget and MTFS agreed at Council in February 2019.
- 3.3 This report is structured into two parts. The first (Section A, paragraphs 4 to 11) reports on financial performance, whilst the second (Section B, paragraphs 12) reports on performance in delivering against the Corporate Plan.

#### A. Financial Performance

#### 4. General Fund Revenue Summary

- 4.1 The provisional outturn position of the General Revenue Fund is an underspend of (£3.065m) against the net budget of £137.268m. This is a net deterioration of £0.050m compared to the forecast position reported to Members as at the end of Quarter 3 (period ending 31st December 2019).
- 4.2 It is estimated that the Covid-19 pandemic resulted in revenue cost and income pressures of £1.053m in 2019/20. The impact on individual Directorate budgets is set out below. The financial impact of Covid-19 is being monitored and will be reported through future budget monitoring reports.
- 4.3 The 2019/20 budget assumed a £4.464m transfer to reserves to bolster the Council's financial resilience. The provisional net underspend of (£3.065m), increases the total amount transferable to reserves to £7.529m.

Table 1. General Revenue Fund Summary by Directorate

|                            | Revised<br>Budget | Outturn | Variance | Variance<br>Reported<br>at Quarter<br>3 | Movement<br>Since<br>Quarter 3 |
|----------------------------|-------------------|---------|----------|---|--------------------------------|
| Directorate                | £m                | £m      | £m       | £m                                      | £m                             |
| Adult Care & Health        |                   |         |          |   |                                |
| Services                   | 36.053            | 35.806  | (0.247)  | (0.008)                                 | (0.239)                        |
| Economic Growth and        |                   |         |          |   |                                |
| Neighbourhood Services     | 18.193            | 19.980  | 1.787    | 0.399                                   | 1.388                          |
| Resources                  | 15.026            | 14.960  | (0.066)  | 0.116                                   | (0.182)                        |
| Children's Services (BFfC) |                   |         |          |   |                                |
|                            | 47.898            | 48.991  | 1.093    | 1.608                                   | (0.515)                        |
| Children's Services (RBC)  | 0.695             | 0.695   | 0.000    | 0.000                                   | 0.000                          |
| Service Total              | 117.865           | 120.432 | 2.567    | 2.115                                   | 0.452                          |
| Corporate Budgets          |                   |         |          |   |                                |
| Capital Financing Costs    | 13.680            | 13.776  | 0.096    | (0.400)                                 | 0.496                          |
| Contingency                | 4.228             | 0.000   | (4.228)  | (4.228)                                 | 0.000                          |
| s31 Grants (Business Rate  |                   |         |          |   |                                |
| Reliefs)                   | (2.200)           | (5.033) | (2.833)  | (2.889)                                 | 0.056                          |
| Other Corporate Budgets    | (0.769)           | 0.564   | 1.333    | 2.287                                   | (0.954)                        |
| Transfers to/(from)        |                   |         |          |   |                                |
| Reserves                   | 4.464             | 4.464   | 0.000    | 0.000                                   | 0.000                          |
| Corporate Items Total      | 19.403            | 13.771  | (5.632)  | (5.230)                                 | (0.402)                        |
| TOTAL                      | 137.268           | 134.203 | (3.065)  | (3.115)                                 | 0.050                          |

4.4 Further detail on the variances are set out below and in Appendix 1 attached.

### 4.5 Adult Care and Health Services (DACHS)

- 4.5.1 Adult Care and Health Services provisional outturn is a small underspend of (£0.247m) against a budget of £36.053m. This is an improvement of (£0.239m) from the position forecast at Quarter 3.
- 4.5.2 The net impact of Covid-19 on Adult Care and Health Services in 2019/20 is estimated as £0.033m and is reflected in the outturn position. This net position reflects the following variations:

#### Commissioning & Performance

4.5.3 Commissioning & Performance are reporting an underspend of (£0.064m) due to staffing vacancies within the service.

#### **Adults Services Operations**

4.5.4 Adults Services operations are reporting a net overspend of £0.372m. This position includes a pressure on placement expenditure of £1.178m due to undelivered savings including increased use of assistive technology, increased take up of direct payments and Commissioning related savings on placement expenditure including the out of borough placements and the homecare framework, as well as demands on the service due to client need increasing. This is partially off-set by an underspend on staffing budgets of (£0.410m)

due to vacancies across the service during the year as well as an overachievement of income of (£0.396m).

#### Directorate & Other

4.5.5 The Directorate cost centre is reporting an underspend of £0.220m. This includes an underspend on staffing budgets of (£0.260m) and an overachievement of income of (£0.105m) off-set by a £0.145m overspend on non-staffing budgets.

#### **Public Health**

4.5.6 Public Health is reporting a balanced position with the grant fully utilised during the financial year. This position includes a (£0.060m) drawdown from the Public Health earmarked reserve (per Appendix 6) required due to delayed savings expected to be delivered in 2020/21, this is £0.140m less than anticipated drawdown due to less expenditure than anticipated on Drug and Alcohol prevention.

#### **Preventative Services**

- 4.5.7 Preventative Services are reporting an underspend of (£0.355m) as a result of staffing underspends due to in year vacancies and an underspend on the advocacy service.
- 4.5.8 The Service has requested that the £0.240m underspend on the Wellbeing Hub is carried forward into 2020/21. Carrying forward the budget would enable the original 3-year programme to be commissioned from 2020/21. This request is not included in the outturn position and is requested to be funded from the overall net underspend of £3.065m.

### 4.6 <u>Economic Growth and Neighbourhood Services (DEGNS)</u>

- 4.6.1 Economic Growth and Neighbourhood Services' (DEGNS) provisional outturn position is a net overspend of £1.787m, which is an increase of £1.388m from the position forecast at Quarter 3.
- 4.6.2 The impact of Covid-19 on Economic Growth and Neighbourhood Services in 2019/20 is estimated at £0.707m of additional pressures predominantly due to a reduction in income generation on Parking and Bus Lane enforcement, Planning and Regulatory services fees and the usage of the council's Culture and Leisure offer during the 2<sup>nd</sup> half of March 2020.
- 4.6.3 The remaining £0.681m, adverse movement is detailed below but is largely attributed to the adverse movement on Planning & Regulatory Services income.
- 4.6.4 The Directorate position includes a drawdown of (£0.390m), from the Redundancy Earmarked Reserve (per Appendix 6). The total drawdown on this reserve across all directorates is (£0.420m). This net position reflects the following variations:

#### **Transportation**

- 4.6.5 The provisional outturn on Transportation is a net underspend of (£0.163m).
- 4.6.6 Covid-19 has had an adverse impact on Parking Services and Bus Lane enforcement income during the 2<sup>nd</sup> half of March 2020, the estimated impact of which is £0.403m. Previously a surplus of (£0.566m) was anticipated on the service area.

#### Planning & Regulatory Services

- 4.6.7 The provisional outturn on Planning & Regulatory Services is a net overspend of £0.818m.
- 4.6.8 Building Control has a (£0.068m) underspend due to staffing vacancies in year.
  - Planning services has a £0.212m overspend, of which £0.115m is a shortfall on Planning Application Fees. The remaining pressure of £0.097m is due to costs associated with bringing in external support re conservation, archaeology, ecology and sundry professional advice to support the adoption of the local plan.
- 4.6.9 The Regulatory Services position is an overspend of £0.674m largely due to two significant regulatory enforcement cases which are being pursued in the courts, the cost of which is £0.520m above the budgeted figure in these services. There is a net £0.114m shortfall on alcohol and entertainment licencing income only partially negated by a staffing underspend in the service, a £0.061m shortfall on HMO licencing income partially negated by a staffing underspend on the service. This is reduced by a (£0.021m) underspend on taxi licences due to a slight income overachievement and staffing underspend.

### Housing & Neighbourhood Services (General Fund)

4.6.10 The provisional outturn on Housing and Neighbourhood Services is an underspend of (£0.498m) primarily due to non-ringfenced grants received for use in 2019/20 that were not anticipated.

#### **Cultural Services**

- 4.6.11 The provisional outturn on Cultural Services is an overspend of £0.789m.
- 4.6.12 The Arts and Theatre service has a pressure of £0.288m broken down as follows; £0.099m on the Hexagon, £0.083m on the Concert Hall and £0.064m on South Street theatre, all of which are due to the cost of delivering shows. Whilst income targets have been achieved, and in some cases exceeded, it has not been by sufficient to negate these costs. The remaining £0.042m pressure is on marketing Reading's cultural offer.
- 4.6.13 Leisure Services has a provisional overspend of £0.102m, of which £0.114m is an income shortfall on Play services due to the delay of the Prospect Park redesign. There is a (£0.019m) income overachievement on the in-house Leisure Service, with the remaining a £0.007m overspend on Parks Service.
- 4.6.14Library Services has a £0.056m overspend due to premises and operating costs exceeding the budget.
- 4.6.15 There is an £0.084m underachievement of income on the Town Hall as a result of the delays to the intensification project.
- 4.6.16 There is a £0.295m income shortfall on New Directions in year. This is not expected to recur in future years.
- 4.6.17 There is a (£0.036m) underspend across the Archives service.

#### **Environmental & Commercial Services**

- 4.6.18 The provisional outturn on Environmental & Commercial Services is an overspend of £0.516m.
- 4.6.19 There has been an underspend of (£0.856m) on the council's RE3 waste contract due to household tonnage levels being lower than budgeted. This is negated by a £0.245m pressure on Business Development due to income shortfalls on Billboard Advertising and other commercial activities. A £0.567m pressure on Neighbourhood Services due to a £0.320m pressure within Grounds Maintenance (a £0.232m shortfall on income generation and £0.088m agency cover for long term sickness). A £0.247m pressure on Refuse Collection due to savings of £0.284m not being achieved, but partially offset by one off service efficiencies elsewhere in year. There is also an overspend in Streetcare of £0.560m, which is due to a £0.395m overspend predominantly on Street Lighting, a £0.092m overspend on street cleansing, and a £0.054m pressure on drainage, with the residual £0.019m across the rest of the service.

#### Regeneration & Assets

- 4.6.20 The provisional outturn on Regeneration & Assets is an overspend of £0.338m.
- 4.6.21 Assets and Development has an net pressure of £0.686m comprising: an under achievement of income of £1.151m on commercial properties due to a shortage of viable purchasing opportunities over the course of the year and unbudgeted running costs of £0.222m offset by a (£0.570m) surplus on garages, (£0.133m) underspend on Valuations running costs and a residual £0.016m pressure on the remainder of the service.
- 4.6.22 Corporate Property Services has a (£0.260m) underspend arising from staff vacancies as well as a net underspend of (£0.068m) on the running costs of the corporate maintenance service.
- 4.6.23 There is a (£0.038m) income over achievement on Sustainability and a £0.018m pressure across Education Asset Management, Facilities Management and Property Development.

#### **DEGNS Overhead Account**

- 4.6.24 The provisional outturn on the DEGNS Overhead Account is an underspend of (£0.013m) due to staffing vacancies due to posts being vacant for some of the financial year.
- 4.6.25 This position includes the drawdown of (£0.037m) from the Climate Change earmarked reserve (per Appendix 6) in order to fund the term Head of Climate Change role. This role is a 2-year fixed term and is fully funded from the Climate Change reserve.

#### 4.7 Resources

- 4.7.1 The Directorate of Resource's (DoR) provisional outturn position is a (£0.066m) underspend.
- 4.7.2 The net impact of Covid-19 on the Directorate in 2019/20 is estimated as £0.288m of additional pressures.

4.7.3 This overall position includes a drawdown of (£0.030m) from the Redundancy Earmarked Reserve (per Appendix 6). The total drawdown on this reserve across all directorates is £0.420m. This net position reflects the following variations:

### **Customer & Corporate Improvement**

4.7.4 The provisional outturn on Customer & Corporate Improvement is an overspend of £0.078m. As previously reported, this is due to a pressure on income budgets in the Bereavement Service. The pressure has been partially mitigated by an overachievement of Registrars income due to the increase in price of certificates and no corresponding drop in demand, until the latter half of March when the service halted all but death registrations as a result of Covid-19. The pressure was also offset by underspends in staffing budgets due to turnover of staff and challenges in recruiting.

### **Human Resources and Organisational Development**

4.7.5 The provisional outturn on Human Resources and Organisational Development is an overspend of £0.043m. This is due to a combination of lost income of £0.023m at Kennet Day Nursery; £0.015m within the Health & Safety Emergency Planning Service; and £0.005m of other net pressures.

#### Audit & Insurance

4.7.6 The provisional outturn for Audit & Insurance is an underspend of (£0.036m) due to inyear staff vacancies.

#### **Procurement**

4.7.7 The provisional outturn for Procurement is an underspend of (£0.040m). This is due to an underspend on supplies and services and a delay in recruitment during the year. The underspend is lower than previously forecast due to the service incurring additional costs in relation to the set-up of the One Community Hub as part of the Council's response to Covid-19.

#### 4.7.8 Financial Services

4.7.9 The provisional outturn for Financial Services is an overspend of £0.185m. This is due to the increase in costs of providing the facility to allow electronic payments across the council; use of agency staff to cover vacant posts; and an increase in court fees not recovered as prosecution and enforcement of non- payment was halted in March due to Covid-19. Additionally, the housing benefit administration grant received was less than originally budgeted.

#### Legal & Democratic Services

4.7.10 The provisional outturn for Legal & Democratic Services is an overspend of £0.067m. This is due to the underachievement of income of £0.207m within the corporate legal budget from capital receipts and \$106 administration fees and £0.030m in respect of land charges. These pressures are partially offset by an overachievement of income of (£0.138m) for the Joint Legal Team and a (£0.032m) underspend within Democratic Services, mainly due to Members Allowances not being as much as anticipated following the review that took place in 2019/20.

- 4.7.11 The provisional outturn on IT & Digital is an underspend of (£0.278m). This variance has arisen due to underspends on staffing due to vacancies as well as delayed expenditure as the service moves towards a new future operating model.
- 4.7.12 The service has requested that this underspend of £0.278m is rolled-forward into 2020/21 to enable projects to go ahead as planned. This request is not included in the outturn position and is requested to be funded from the overall net underspend of £3.065m.

#### Chief Executive & Communications

4.7.13 The provisional outturn on Chief Executive & Communications is an underspend of (£0.085m) due to underspends on staffing budgets as well as planned expenditure in Communications not materialising as staff focussed on the Council's Covid-19 response.

#### 4.8 Children's Services delivered by BFfC

- 4.8.1 Brighter Futures for Children's (BFfC) provisional outturn position is a net overspend of £1.093m. This is an improvement on the position as at the end of Quarter 3 of (£0.515m) and a significant improvement on the 2018/19 outturn position which was a £1.942m overspend.
- 4.8.2 The net cost of Covid-19 on 2019/20 is estimated at £0.025m of additional pressures.
- 4.8.3 The key variances for BFfC's financial overspend for 2019/20 are summarised below:
  - The increase in the number of Children Looked After and other allowances account for £2m of the overspend within the Children's Social Care Service.
  - The continued increase of the Emergency Duty Service joint arrangement has resulted in an overspend of £0.055m.
  - The other significant overspend is the continued use of Agency Social Workers which accounts for £0.390m of the total overspend for Children's Social Care. This is a much improved position compared to 2018/19.
  - The premises overspend of £0.070m regarding the additional SLA charges for BFfC.
  - Covid-19 costs account for £0.025m of the overspend position for BFfC, with an estimate provided for the potential impact on 2020/21 accounts.
- 4.8.4 BFfC have mitigated the increased pressures by holding vacancies within the Early Help and Preventative Services and within the Education Services (£1.05m). Additionally, Children's Centres premises have underspent by (£0.046m). School Transport has underspent by (£0.088m), and application of grant for School Improvement has mitigated the overspend by a further (£0.1m).

#### 4.9 Children's Services retained by the Council

4.9.1 Children's Services retained by the Council's provisional outturn position is a balanced budget.

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#### 4.10 Corporate Items

- 4.10.1 In addition to Directorate budgets there are a number of financing and corporate-wide budgets. These include; Capital Financing Costs; the Contingency and other corporate items.
- 4.10.2 Corporate Items are reporting a provisional underspend of (£5.632m). This is predominantly the result of the Corporate contingency held against high risk savings and income delivery not being applied to service lines (£4.228m); as well as (£2.833m) higher than budgeted s31 grant being received in respect of Business Rate Reliefs. As the 2020/21 budget for s31 grants was re-aligned to the projected allocations per the 2020/21 NNDR1 return the underspend relating to s31 grants should be a one-off benefit in 2019/20 only.
- 4.10.3 These underspends are off-set by net overspends of £0.096m on Capital Financing Costs relating to net interest, and £1.333m on Other Corporate budgets comprising:
  - £1.435m of corporate savings that were not delivered in year and subsequently removed from the budget;
  - the (£0.766m) provision in respect of utilities cost inflation and low pay not being required in 2019/20; and
  - other variances on budgets including those for external audit fees, net to a £0.664m overspend.
- 4.10.4 This position includes the following drawdowns from earmarked reserve (per Appendix 6):
  - £0.150m from the Schools Deficit Liability Reserve
  - £0.758m from the Pension Liabilities Reserve

#### 5. Requested Roll-Forwards

- 5.1 It is recommended that the following roll-forward requests as set out in paras. 4.5.8 and 4.7.12 above, totalling £0.518m, are agreed in order to enable planned programmes of work to go ahead as planned:
  - £0.240m to a new reserve in respect of Preventative Services
  - £0.278m to the existing IT & Digital Reserve
- 5.2 Approval of these service requests will reduce the amount of the available underspend to bolster reserves as outlined at budget setting from £3.065m to £2.547m.

### 6 Housing Revenue Account (HRA)

6.1 The provisional outturn for the Housing Revenue Account (HRA) is an underspend compared to budget of £12.176m. This has arisen due to the budgeted drawdown of £10.466m, actually being a reserve contribution of £1.710m. This is an improvement of (£3.562m) on the forecast position reported at Quarter 3. The main reasons for the

- improvement from the Quarter 3 forecast are due to rent collection, major works and capital financing as set out below.
- 6.2 The Rent Collection rate was 97.88% for 2019/20, which is above the budgeted level of 97.40% leading to rent collection of (£0.990m) above the budgeted level. There was also a (£0.255m) underspend on the anticipated contribution to the HRA bad debt provision due to the rent collection rate being above the budgeted level.
- 6.3 The major works have underspent by (£5.393m) mainly due to a delay on the Coley water mains and fire sprinkler project as a result of a necessary redesign of the scheme once the contractor was on site. There was also a significant underspend on the re-wiring budget as anticipated work has not been required following inspections that have taken place.
- 6.4 There was a (£4.969m) underspend on capital financing costs as MRP was budgeted for but is no longer payable due to the change in policy.
- 6.5 There is also a total underspend of (£0.248m) on Managing Tenancies including costs of cleaning and energy.
- 6.6 There are also (£0.321m) of net underspends across all other HRA budgets due to lower than anticipated costs of service provision and vacant posts.
- 6.7 The approved HRA budget assumed a drawdown of HRA reserves of £10.466m in 2019/20 to end the year at £33.189m. However, as a result of the £1.710m underspend which is then transferred to HRA reserve, the Housing Revenue Account Reserve is £35.617m as at 31 March 2020.

#### 7 General Fund Capital Programme

- 7.1 The provisional General Fund Capital outturn is a (£3.806m) net underspend as at the end of March 2020 against the revised net budget of £66.507m, agreed as part of the budget setting process in February 2020. A net £4.169m of budget is requested to be slipped between 2019/20 and 2020/21 per Appendix 3.
- 7.2 The provisional outturn is expenditure of £85.239m of which £22.538m was funded from specific grants or other contributions leaving net expenditure to be funded from capital receipts or borrowing of £62.701m.
- 7.3 Key variances per Directorate are set out below.
- 7.4 Corporate Schemes include the Delivery Fund and Equal Pay which are both funded from capital receipts. The Delivery Fund is reporting a net underspend of (£1.481m) which is requested to be rolled forward to 2020/21. Equal pay costs of £0.199m have been incurred in year and these can by legislation be funded by capital receipts rather than revenue.
- 7.5 Adult Social Care & Health Services has one project which has underspent by (£0.117m) due to delays on the Social Care Premises initial scoping works.
- 7.6 Education schemes are reporting a net underspend of (£0.321m), of which £1.745m was to be grant funded. This grant can be carried forward to spend in 2020/21.
- 7.7 Economic Growth & Neighbourhood Services has a net underspend of (£0.774m). The key variances are highlighted below:

- (£2.174m) slippage on the Green Park station scheme which is wholly grant or contribution funded, the scheme is still expected to complete in 2020/21.
- (£4.780m) slippage on the South Reading Mass Rapid Transit which is wholly grant or contribution funded, the bulk of the expenditure is expected to be incurred between 2020/21.
- (£0.721m) underspend on Replacement Vehicles in part due to vehicles expected to arrive in 2019/20 which will now arrive in 2020/21. The budget is requested to be slipped into 2020/21.
- (£0.837m) underspend on Accommodation Review, with the project slipping into 2020/21 as office staff and the records and museum archives have not yet moved. Expected completion date in 2200/21, however this is further delayed currently due to Covid-19.
- (£0.292m) underspend on Central Pool, the next phase of the project to remove the diving pool has been delayed as it relied upon a legal agreement with SSE. This has now been resolved SSE are looking to undertake the works in June. Expected completion date September/October 20. The budget is requested to be slipped into 2020/21.
- £0.676m overspend on Corporate buildings/Health & safety works due to more condition programme works than anticipated being carried out, including works on the Town Hall project. At the stage it looks like the programme for this financial year will underspend due to delays in procurement and site works as a result of COVID-19.
- 7.8 Resources has a net underspend of (£1.387m). This primarily relates to the underspend of (£1.349m) on the Loan to RTL scheme which did not take place in 2019/20. Therefore the budget is requested to be slipped into 2020/21.

#### 8 HRA Capital Programme

- 8.1 The provisional HRA Capital outturn is a (£1.401m) net underspend against the net budget of £15.343m.
- 8.2 The provisional outturn is expenditure of £14.379m of which £0.437m was funded from a specific grant leaving net expenditure to be funded from the HRA of £13.942m.
- 8.3 This variance is primarily due to further slippage across the following schemes; (£0.584m) Major Works, (£0.400m) Hexham Road and (£0.664m) New Build & Acquisitions.

#### 9 Transformation Programme and Savings Delivery

- 9.1 The Council had a challenging savings target for 2019/20 of (£12.720m) to meet current and expected funding pressures. This total was made up of (£9.559m) of in-year savings as per the 2019/20 MTFS and (£3.161m) of savings rolled forward from 2018/19.
- 9.2 A total of (£7.716m) of savings were delivered in 2019/20. £2.465m of savings were removed as part of the 2020/21 budget setting process on the basis that they were no longer deemed deliverable and therefore the residual (£2.539m) will be carried forward

for delivery in 2020/21. Further details regarding the delivery of savings is set out in Appendix 4.

9.3 The following table summarises the final savings delivery for 2019/20:

Table 2. General Funds Savings Tracker Summary

| Directorate         | Savings<br>Target<br>2019/20 | Savings<br>Delivered<br>2019/20 | Non-<br>Delivered<br>Savings<br>2019/20 | Savings<br>Removed at<br>2020/21<br>Budget<br>Setting | Savings<br>Carried<br>Forward to<br>2020/21 |
|---------------------|------------------------------|---------------------------------|---|---|---|
|                     | £m                           | £m                              | £m                                      | £m  | £m  |
| Adult Care & Health | 3.586                        | 2.063                           | 1.523                                   | 0.800   | 0.723                                       |
| Economic Growth &   |                              |                                 |   |   |   |
| Neighbourhood       | 6.323                        | 4.496                           | 1.827                                   | 0.275   | 1.552                                       |
| Resources           | 0.976                        | 0.757                           | 0.219                                   | 0.105   | 0.114                                       |
| Corporate           | 1.835                        | 0.400                           | 1.435                                   | 1.285   | 0.150                                       |
| Total               | 12.720                       | 7.716                           | 5.004                                   | 2.465   | 2.539                                       |

- 9.4 The successful delivery of agreed savings remains critical to achieving the underlying balanced base budget position agreed as part of the MTFP. Accordingly, all savings have been rigorously monitored throughout 2019/20 and mitigations sought so far as possible for any identified delay in implementation or delivery.
- 9.5 The following table shows the revised savings required over the period 2020/21-2022/23:

Table 3. Savings Targets 2020/21-2022/23

| Directorate         | Savings<br>Target | Savings<br>Target | Savings<br>Target | Total  |
|---------------------|-------------------|-------------------|-------------------|--------|
|                     | 2020/21           | 2021/22           | 2022/23           |        |
|                     | £m                | £m                | £m                | £m     |
| Adult Care & Health | 3.100             | 2.887             | 2.948             | 8.935  |
| Economic Growth &   |                   |                   |                   |        |
| Neighbourhood       | 7.219             | 5.106             | 5.296             | 17.621 |
| Resources           | 0.697             | 0.679             | 0.357             | 1.733  |
| BFfC                | 4.128             | 4.062             | 0.000             | 8.190  |
| Corporate           | 0.200             | 0.000             | 0.000             | 0.200  |
| Total               | 15.344            | 12.734            | 8.601             | 36.679 |

#### 10 Delivery Fund

- 9.1 Costs of service transformation and the delivery of future ongoing savings are able to be charged to capital (and financed from new capital receipts) due to the introduction of the Flexible Capital Receipts Regulations in force for the years 2017/18 to 2020/21.
- 9.2 £3.068m was spent in delivering 2019/20 savings. Including previous years, a total of £7.569m has been invested from the Delivery Fund to assist in delivering identified savings proposals.
- 9.3 Further details on the Delivery Fund are set out in Appendix 5.

#### 10 Reserves

10.1 The impact of the 2019/20 outturn position on the Council's reserves, as proposed in Appendix 6 is set out in the following table:

Table 4. Reserves Summary

|           | Balance<br>as at 1<br>April<br>2019 | Proposed from Reservaturn |       | Balance as<br>at 31 March<br>2020 | Projected<br>Balance at<br>31 March<br>2020 | Movement |
|-----------|-------------------------------------|---------------------------|-------|-----------------------------------|---|----------|
|           |                                     | (To)                      | From  |                                   |   |          |
|           | £m                                  | £m                        | £m    | £m                                | £m  | £m       |
|           | nd Reserves                         |                           |       |                                   |   |          |
| Minimum   |                                     |                           |       |                                   |   |          |
| Balance   | (7.500)                             | (0.000)                   | 0.000 | (7.500)                           | (7.500)                                     | 0.000    |
| Earmarked |                                     |                           |       |                                   |   |          |
| Reserves  | (32.440)                            | (7.529)                   | 1.888 | (38.081)                          | (37.954)                                    | (0.127)  |
| Total     |                                     |                           |       |                                   |   |          |
| General   |                                     |                           |       |                                   |   |          |
| Fund      | (0.0.0.40)                          | ( <b>-</b> )              |       |                                   |   | (0.40-)  |
| Reserves  | (39.940)                            | (7.529)                   | 1.888 | (45.581)                          | (45.454)                                    | (0.127)  |
| Schools   | (0.403)                             | (0.4(0)                   | 0.443 | (0.000)                           | 0.000                                       | (4.700)  |
| Reserves  | (0.603)                             | (0.469)                   | 0.163 | (0.909)                           | 0.800                                       | (1.709)  |
| Housing   |                                     |                           |       |                                   |   |          |
| Revenue   |                                     |                           |       |                                   |   |          |
| Account   |                                     |                           |       |                                   |   |          |
| Reserves  | (43.655)                            | (1.710)                   | 0.000 | (45.365)                          | (41.803)                                    | (3.562)  |
| Total     |                                     |                           |       |                                   |   |          |
| Revenue   |                                     |                           |       |                                   |   |          |
| Reserves  | (84.198)                            | (9.708)                   | 2.051 | (91.855)                          | (86.457)                                    | (5.398)  |

- 10.2 The General Fund Reserve balance of £7.500m represents 5% of the Council's 2020/21 revenue budget and was assessed as a robust and sustainable level per the Chief Finance Officer's Report on the Robustness of the Council's 2020/21 budget.
- 10.3 Transfers from earmarked reserves totalling £2.051m are proposed in Appendix 6 in line with 2019/20 provisional outturn positions as set out in the main body of this report.
- 10.4 It is proposed that a total of £7.529m, comprising of the £4.464m budgeted transfer to reserves and the General Fund underspend of £3.065m are transferred to earmarked reserves as set out in Appendix 6 (which includes service roll-forward requests of £0.518m). The total earmarked reserve balance at 31 March 2020 would therefore be £38.081m which is £0.127m higher in total than the estimated £37.954m projected at 2020/21 budget setting.
- 10.5 Schools reserves are ringfenced for local authority managed schools.
- 10.6 The £1.710m underspend on the Housing Revenue Account (HRA) is ringfenced and must be transferred to the HRA reserve. The HRA reserve balance as at 31 March 2020 is therefore £35.617m. The North Whitley PFI reserve balance of £9.748m is also contained within the overall HRA reserves, therefore total HRA reserves as at 31 March 2020 are £45.365m.

### 11 Impact on 2020/21 Budget and Medium-Term Financial Strategy

- 11.1 The provisional outturn figures, as set out above, will have the following impact in 2020/21 and future years:
  - an overall General Fund Reserve balance of £45.454m was assumed as part of 2020/21 budget setting. Based on the provisional outturn there is therefore an overall net improvement of (£0.127m). Approval of the £0.518m of service requests will reduce the amount of the available underspend to bolster reserves as outlined at budget setting from £3.065m to £2.547m.
  - £2.539m of non-delivered 2019/20 savings have been rolled forward into 2020/21. These savings were assumed as delivered in the 2020/21 base budget setting and require delivering.
- 11.2 The Covid-19 pandemic is projected to have a far more significant impact on the Council's finances in 2020/21, particularly with regards to underachievement of income realised through charging for Council services that are either fully or partially closed throughout the year or where demand has reduced due to lockdown restrictions etc and through non-delivery of savings as the Council has focussed on managing the crisis and recovery.
- 11.3 Officers are actively monitoring the impact of the Pandemic and the impact will be reported as part of future monitoring reports. Officers are also reviewing options as to how to address closing of the projected financial gap and further reports on this will also be brought forward in due course.

#### B. Corporate Plan Performance

#### 12 Corporate Plan Performance

12.1 A summary of the Council's performance, as at 31st March 2020 against the success measures published in its Corporate Plan is set out below:

| Status | 18/19 Year End | 19/20 Year End |
|--------|----------------|----------------|
| Green  | 52%            | 54%            |
| Amber  | 14%            | 14%            |
| Red    | 34%            | 32%            |

- 12.2 The full suite of thirty-nine<sub>1</sub> measures and progress against targets as at the end of March 2020 are set out in Appendix 7 attached. This uses a graphical approach and presents an overview for the Corporate Plan and each Priority. This format has been used in the short term whilst we develop our new software.
- 12.3 Summary reporting is now being built into the Council's new performance software (InPhase) at a Corporate Plan priority and Directorate level. Reporting with the system will be used exclusively from the next quarterly report for the period April June 20/21.

#### Corporate Plan performance 2020/21

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<sup>&</sup>lt;sup>1</sup> 2 survey measures, which take place every two years, have no trend information so no status assigned. Status to be updated when all results received (currently results for 6 outstanding)

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12.4 In light of the Covid-19 Pandemic and associated work pressures placed on senior officers, it is proposed the existing Corporate Plan measures and targets continue for 2020/21. It has been agreed that a new Corporate Plan will be developed for 2021/22 to align with the approval of the Council's Medium-Term Financial Plan in February 2021.

#### Service Plans 2020/21

12.5 As in previous years' Service Plans should be completed to ensure there is a link—from the Corporate Plan to service plans and team's plans, and subsequently individual appraisals - the Golden Thread. Normally plans should be in place at the start of the Financial Year. However, due to the Covid-19 pandemic there has been a delay in completion as senior managers have been focused on managing the crisis and the deadline was extended. Where Plans are not in place a similar approach is proposed for 2020/21 as per the Corporate Plan.

### Key areas where we are performing well and areas for improvement year end 2019/20

12.6 Paragraphs 12.7 - 12.12 below provide a summary of the areas where we are performing well and the areas for improvement which show significant variance.

#### 12.7 Securing the economic success of Reading

| Measure   | 2018/19 | 2019/20          | 2019/20 | 2019/20 | Performance against   |
|---|---------|------------------|---------|---------|---|
|   | Outturn | Q3               | Outturn | Target  | target  |
| Performing well   |         |                  |         |         |   |
| The percentage of people who are economically active                                    | 80.8%   | 81.2%            | 81.7%   | 80.9%   | The percentage of economically active people in Reading marginally increased over the last 3 months of the year. Reading (81.7%) continues to be below the average for the South East region (80.8%). There is a lag on the data which covers the period to December 19               |
| Areas for Improve   | ment    |                  |         |         |   |
| Reduction in percentage of young people Not in Education, Employment or Training (NEET) | 4       | Not<br>Available | 3.1     | 1.9%    | We are actively tracking our NEET young people, with over 86% having a recent contact in the last month, and 13.7% have been contacted in the past 6 months with no young people not being contacted 7 months or more, the only LA within our statistical neighbour cohort hitting 0% |

# 12.8 Ensuring access to decent housing to meet local needs

| Measure  | 2018/19<br>Outturn | 2019/20<br>Q3 | 2019/20<br>Outturn | 2019/20<br>Target | Performance against target  |
|--|--------------------|---------------|--------------------|-------------------|---|
| Performing Well  |                    |               |                    |                   |   |
| Total number of cases where positive action was successful in preventing homelessness - cumulative | 421                | 514           | 673                | 440               | This measure has exceeded the target set by 233 cases and a 252-case improvement on 18/19 result. This figure covers both cases that are prevented from becoming homeless and those whose homelessness was resolved |
| Percentage of Houses of Multiple Occupation (HMO's) licensed under mandatory licensing schemes     | 30%                | 54%           | 55%                | 32%               | Continued work with HMO owners to secure new and renewal licence applications has resulted in a 25% improvement on last year  |

## 12.9 Protecting & enhancing the lives of vulnerable adults and children

| Timeliness of Early Help  Pecrease the permanent new admissions to Residential or Older People (65+) (cumulative)  This quarter saw continued strong progress against this target which reflects the ethos of personalisation and ensuring people are supported to return home wherever possible. With the right care and support and access to new technologies, aids and adaptations people can live a good life at home in the community, whether this be in extra care or supported living. As at the end of March 2020; 83 Older People at an average of 6.92 per month had been newly permanently admitted whereas at the same point in 2019 there had been 88 people admitted at an average of 7.33 per month.  Timeliness of Early Help  93%  99%  95%  A consistent focus on timeliness has resulted in a | Measure Performing Well  | 2018/19<br>Outturn | 2019/20<br>Q3 | 2019/20<br>Outturn | 2019/20<br>Target | Performance against target  |
|--|--|--------------------|---------------|--------------------|-------------------|---|
| Early Help 93% 99% 95% timeliness has resulted in a  | Decrease the permanent new admissions to Residential or Nursing care per 100,000 population for Older People (65+) | 442                | 270.94        | 408.87             | year per          | strong progress against this target which reflects the ethos of personalisation and ensuring people are supported to return home wherever possible. With the right care and support and access to new technologies, aids and adaptations people can live a good life at home in the community, whether this be in extra care or supported living.  As at the end of March 2020; 83 Older People at an average of 6.92 per month had been newly permanently admitted whereas at the same point in 2019 there had been 88 people admitted at an average of 7.33 per |
| I ACCOCCIMONIC I I I I I I I I I I I I I I I I I I   |  | 93%                | 99%           | 95%                | 95%               |   |

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| completed within timescale 5 weeks)  Areas for Improvement  Reducing the number of days that people are unable to leave hospital because of social care delays (bed days)  1322  1342  1645  1272  1322  1342  1545  1578  Percentage of children looked after who have resperienced 3-placements in past 12 months  Percentage of children looked after who have resperienced 3-placements in past 12 months  weeks)  within timescale. The quality of intervention is reflected by a low re-referral rate (2%) of cases closed to Early Help in 2019/20 not re-presenting to children and continued to children as a challenging target which was not met due to several factors. Most importantly there was significant pressure across the national and local health system over Winter which led to pressure on both hospitals and the provider / care market. In Reading we worked proactively with our partners to facilitate fast and safe discharges for most people. Unfortunately, there were a small number of individuals which high challenging needs who could not return home and required unique placements. These sometimes took several providers to assess and feedback. This led to delays as the individuals were deemed 'medically fit'. Moving into 2020/21 we have new frameworks and providers that we are working with to ensure capacity and a faster discharge process.  This indicator; although indicating a downward trend, has been influenced by children achieving permanence. Several babies moved from residential assessment placements with their mothers, to foster and then adoptive placements. This is a positive outcome for them. Better matching profiles have been created to a sie onesure children are placed in the best matches with carers, when coming into care. This however has been influenced by the lack which cares, when coming into care. This however has been influenced by the lack weight cares, when coming into care. This however has been influenced by the lack   | (Percentage    |          |          |         |          | Assessments completed         |
|--|----------------|----------|----------|---------|----------|-------------------------------|
| timescale 5 weeks)  Areas for Improvement  Reducing the number of days that people are unable to leave hospital because of social care delays (bed days)  1322 1342 1645 1272  1322 1342 1645 1272  1322 1342 1645 1272  Percentage of children looked after who have new frameworks and providers to assess and feedback. This led to delays as the individuals were deemed 'medically fit'. Moving into 2020/21 we have new frameworks and providers that we are working with to ensure capacity and a faster discharge process.  Percentage of children looked after who have the children are placements. This is a positive outcome for them. Better matching profiles have been created to a seesure children are placed in the best matches with cares, when coming into care. This however has been influenced have been careed to a sloe sensure children are placed in the best matches with cares, when coming into care. This however has been influenced by the lack who could not return the provider of the country o |                |          |          |         |          |                               |
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| Percentage of children looked after who have experienced 3+ placements in past 12 months  1322 1342 1545 15.2 11.5 1 |                |          |          |         |          | _                             |
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| Percentage of children looked after who have experienced 3+ placements in past 12 months  12.5  11.5  15.2  15.2  15.2  16.2  17.3  18.3   |                |          |          |         |          |                               |
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| Percentage of children looked after who have experienced 3+ placements in past 12 months    International of the placements in past 12 months   International of the placements in past 12 months   International of the placement in past 12 months   International  |                |          |          |         |          | -                             |
| Percentage of children looked after who have experienced 3+ placements in past 12 months  12.5  11.5  15.2  15.2  16.2  17.5  17.5  18.6   |                |          |          |         |          | led to delays as the          |
| Percentage of children looked after who have experienced 3+ placements in past 12 months  12.5  11.5  15.2  11.5  2020/21 we have new frameworks and providers that we are working with to ensure capacity and a faster discharge process.  This indicator; although indicating a downward trend, has been influenced by children achieving permanence. Several babies moved from residential assessment placements with their mothers, to foster and then adoptive placements. This is a positive outcome for them. Better matching profiles have been created to also ensure children are placed in the best matches with carers, when coming into care. This however has been influenced by the lack  |                |          |          |         |          |                               |
| Percentage of children looked after who have experienced 3+ placements in past 12 months  12.5  15.2  15.2  16.2  17.5  18.2  18.3  19.3  19.3  19.3  19.3  10.5   |                |          |          |         |          | 'medically fit'. Moving into  |
| that we are working with to ensure capacity and a faster discharge process.  This indicator; although indicating a downward trend, has been influenced by children achieving permanence. Several babies moved from residential assessment placements with their mothers, to foster and then adoptive placements. This is a positive outcome for them. Better matching profiles have been created to also ensure children are placed in the best matches with carers, when coming into care. This however has been influenced by children are with their mothers, to foster and then adoptive placements. This is a positive outcome for them. Better matching profiles have been created to also ensure children are placed in the best matches with carers, when coming into care. This however has been influenced by the lack   |                |          |          |         |          | 2020/21 we have new           |
| Percentage of children looked after who have experienced 3+ placements in past 12 months  12.5  15.2  15.2  16.2  17.5  17.5  18.1 placements in past 12 months  18.2  19.3  19.3  10.5  10.5  10.6  10.7  10.7  11.5  11.5  11.5  12.7  13.7  14.5  15.2  15.2  15.2  15.2  16.2  17.5  18.3  19.3  1 |                |          |          |         |          | frameworks and providers      |
| Percentage of children looked after who have experienced 3+ placements in past 12 months  12.5  15.2  15.2  16.5  17.5  17.5  17.5  18.6  19.6  19.7  19.7  19.7  19.8  19.8  19.8  10.8   |                |          |          |         |          | that we are working with to   |
| Percentage of children looked after who have experienced 3+ placements in past 12 months  12.5  15.2  15.2  This indicator; although indicating a downward trend, has been influenced by children achieving permanence. Several babies moved from residential assessment placements with their mothers, to foster and then adoptive placements. This is a positive outcome for them. Better matching profiles have been created to also ensure children are placed in the best matches with carers, when coming into care. This however has been influenced by the lack  |                |          |          |         |          | ensure capacity and a faster  |
| Percentage of children looked after who have experienced 3+ placements in past 12 months  12.5  15.2  15.2  16.5  17.5  18.6  19.6  19.6  19.6  10.6  10.6  10.6  10.6  10.6  10.6  10.6  10.6  10.7  11.6  11.7  11.7  11.8  12.8  12.8  13.8  14.8  15.9  15.9  15.9  15.9  15.9  15.9  15.9  15.9  15.9  15.9  16.9  17.9  18.9  18.9  18.9  19.9   |                |          |          |         |          | · ·                           |
| Percentage of children looked after who have experienced 3+ placements in past 12 months  12.5  15.2  15.2  16.2  17.5  18.5  18.6  19.6  19.6  19.6  19.6  19.6  10.7  10.7  10.8  10.8  10.8  10.8  10.8  10.8  10.8  10.8  10.8  11.8  11.8  11.8  11.8  12.8  12.8  13.8  14.8  15.9  15.1  15.2  15.2  15.2  16.2  17.3  18.8  18.8  18.8  19.8  10.8  19.8  19.8  19.8  19.8  19.8  19.8  19.8  19.8  19.8  19.8  19.8   |                |          |          |         |          | , _                           |
| Percentage of children looked after who have experienced 3+ placements in past 12 months  12.5  13.5  15.2  14.5  15.2  15.2  15.2  15.2  15.2  15.2  15.2  15.2  15.2  15.2  15.2  15.2  15.2  15.2  15.2  15.2  16.2  17.5  18.3  19.3  19.5   |                |          |          |         |          |                               |
| Percentage of children looked after who have experienced 3+ placements in past 12 months  12.5  13.5  15.2  15.2  15.2  15.2  15.2  15.2  16.2  17.5  18.2  19.5  19.5  19.5  19.6  19.6  19.6  19.6  19.6  19.6  19.6  19.7  19.7  19.7  19.8   |                |          |          |         |          |                               |
| Percentage of children looked after who have experienced 3+ placements in past 12 months  12.5  11.5  15.2  11.5  11.5  11.5  12.5  13.8  13.8  14.9  15.2  15.2  15.2  15.2  15.2  15.2  15.2  16.3  17.5  18.3  18.3  19.5  19.5  19.6   |                |          |          |         |          |                               |
| children looked after who have experienced 3+ placements in past 12 months  12.5  11.5  15.2  11.5  12.5  13.5  13.6  13.8  13.8  14.8  15.9  15 |                |          |          |         |          | <del>-</del>                  |
| children looked after who have experienced 3+ placements in past 12 months  12.5  11.5  15.2  11.5  15.2  11.5  15.2  11.5  12.5  13.8  13.8  13.8  13.8  13.8  14.9  15.2  15.2  15.2  15.2  15.2  16.3  17.5  18.8  18.8  18.8  19 | Percentage of  |          |          |         |          |                               |
| experienced 3+ placements in past 12 months  12.5  11.5  15.2  11 then adoptive placements. This is a positive outcome for them. Better matching profiles have been created to also ensure children are placed in the best matches with carers, when coming into care. This however has been influenced by the lack  |                |          |          |         |          |                               |
| placements in past 12 months  This is a positive outcome for them. Better matching profiles have been created to also ensure children are placed in the best matches with carers, when coming into care. This however has been influenced by the lack  | after who have | 42 E     | 11 E     | 15.2    | 4.4      | - I                           |
| placements in past 12 months  This is a positive outcome for them. Better matching profiles have been created to also ensure children are placed in the best matches with carers, when coming into care. This however has been influenced by the lack  | experienced 3+ | 12.5     | 11.5     | 15.2    | 11       | 1                             |
| profiles have been created to also ensure children are placed in the best matches with carers, when coming into care. This however has been influenced by the lack   |                |          |          |         |          | - I                           |
| to also ensure children are placed in the best matches with carers, when coming into care. This however has been influenced by the lack  | past 12 months |          |          |         |          |                               |
| placed in the best matches with carers, when coming into care. This however has been influenced by the lack  |                |          |          |         |          | 1 ·                           |
| with carers, when coming into care. This however has been influenced by the lack   |                |          |          |         |          |                               |
| into care. This however has been influenced by the lack  |                |          |          |         |          | ·                             |
| been influenced by the lack  |                |          |          |         |          | _                             |
| Page 68  |                |          |          |         |          |                               |
|  |                | <u> </u> |          | Page 68 | <u> </u> | been initiaenced by the tack  |

|  | of local provision or emergency placements; and |
|--|---|
|  | 2 3.  |
|  | hence led to children                           |
|  | experiencing multiple                           |
|  | moves, before finding the                       |
|  | right match in placement.                       |

## 12.10 Keeping Reading's environment clean, green and safe

| Measure   | 2018/19               | 2019/20     | 2019/20 | 2019/20    | Performance against   |  |  |  |
|---|-----------------------|-------------|---------|------------|---|--|--|--|
| Percentage of household waste sent for re-use, recycling and composting | Outturn 32%           | Q3<br>36.5% | 35.3%   | Target 35% | This figure is projected to increase further with the introduction of food waste collections and a smaller bin for waste sent to landfill                       |  |  |  |
| Areas for Improve   | Areas for Improvement |             |         |            |   |  |  |  |
| Reduction in total recorded crime rates (per 1,000 population           | 7.126                 | 8.358       | 8.358   | 7.864      | Reading has seen a slight increase in the number of crimes / 1,000 since the beginning of 2019/20 and this is very much in line with the similar group average. |  |  |  |

## 12.11 Promoting Health, Education, Culture & Wellbeing

| Measure   | 2018/19 | 2019/20 | 2019/20 | 2019/20 | Performance against   |
|---|---------|---------|---------|---------|---|
|   | Outturn | Q3      | Outturn | Target  | target  |
| Performing Well   |         |         |         |         |   |
| Percentage of<br>adults (aged 18+)<br>classified as<br>overweight or<br>obese | 59.2%   | 55.7%   | 55.7%   | 60%     | "Eat 4 Health" adult weight management course was delivered in Reading for the 2019-20 year. With 120 people attended 12 courses across Reading. 90% of people lost weight, 59% of whom lost 3% or more of their body weight which is of clinical significance and benefit. A wider review of obesity in Berkshire West is complete and the recommendations from this will be taken forward to inform future service provision in Reading in 2021/22. |

# 12.12 Ensuring the Council is fit for the future

| Measure   | 2018/19<br>Outturn | 2019/20<br>Q3 | 2019/20<br>Outturn | 2019/20<br>Target | Performance against target   |
|---|--------------------|---------------|--------------------|-------------------|--|
| Performing well   | I                  |               |                    | <u>J</u>          | 3  |
| Council agency<br>Spend                                   | 6642m              | 3.625m        | 4,929m             | 9m                | Agency spend has reduced during 19/20 with a focus on permanent recruitment resulting in less spend on temporary and agency staff,   |
| Areas for Improve   | ment               |               |                    |                   |  |
| Percentage of<br>Council Tax<br>collected<br>(cumulative) | 96.41%             | 82.61%        | 96.17%             | 97.1%             | Final collection is 0.83% behind target set and sees a reduction against the overall collection compared to the prior year of 0.24%. We had seen month on month improvement compared to prior year until the final month, this could be multiple factors, i.e. Covid-19 plus outstanding payment file issues. We do however continue to monitor prior year collection. |

#### 13. CONTRIBUTION TO STRATEGIC AIMS

- 13.1 The Council's Corporate Plan priorities take account of our need to ensure that we are financially sustainable so that we can continue to shape and influence the future of Reading and play our part in protecting the most vulnerable and shaping the Town's future by:
  - Securing the economic success of Reading;
  - Improving access to decent housing to meet local needs;
  - Protecting and enhancing the lives of vulnerable adults and children;
  - Keeping Reading's environment clean, green and safe;
  - Promoting great education, leisure and cultural opportunities for people in Reading;
     and
  - Ensuring the Council is fit for the future.

### 14. COMMUNITY ENGAGEMENT AND INFORMATION

14.1 Budget-related communications and consultations will continue to be a priority over the next three years as we work to identify savings.

#### 15. ENVIRONMENTAL IMPACT

15.1 The Council declared a Climate Emergency at its meeting on 26 February 2019. The Corporate Plan monitors our progress in reducing our carbon footprint (Appendix 7). There are no specific environmental and climate implications to report in relation to the recommendations set out in this report.

#### 16. EQUALITY IMPACT ASSESSMENT

16.1 The equality duty is relevant to the development of the Budget and Corporate Plan. The specific savings and income proposals included in the budget are subject to consultation and equality impact assessments where required and these are being progressed as appropriate.

#### 17. LEGAL IMPLICATIONS

- 17.1 The Local Government Act 2003 requires that the Authority reviews its Budget throughout the year and takes any action it deems necessary to deal with the situation arising from monitoring. Currently monitoring reports are submitted to Policy Committee quarterly throughout the year and therefore comply with this requirement.
- 17.2 There are no legal requirements to have a Corporate Plan. Nevertheless, considering the size and complexity of the services we provide and have responsibility for, it is sensible to have a strategic document for the organisation which sets out key priorities and activities against a robust and sustainable financial strategy.

#### 18. FINANCIAL IMPLICATIONS

18.1 The financial implications are set out in the body of the report.

#### 19. BACKGROUND PAPERS

- Shaping Reading's Future Our Corporate Plan 2018-21
- Budget Report to Full Council February 2019
- Budget Report to Full Council February 2020
- Quarter 3 2019/20 Monitoring Report Policy Committee, March 2020



Appendix 1 - General Fund Outturn 2019/20

|  | Budget<br>£'000s | Outturn<br><i>£'000</i> s | Variance<br>£'000s |
|--|------------------|---------------------------|--------------------|
| Service Areas                                | £ 0003           | £ 000S                    | E UUUS             |
| Commissioning & Performance                  | 793              | 729                       | (64)               |
| Adults Services Operations                   | 33,839           | 34,211                    | 372                |
| Directorate & Other                          | 1,000            | 780                       | (220)              |
| Public Health                                | (292)            | (292)                     | 0                  |
| Preventative Services                        | 713              | 378                       | (335)              |
| Adult Care and Health Services               | 36,053           | 35,806                    | (247)              |
| Transportation                               | 650              | 487                       | (163)              |
| Planning & Regulatory Services               | 1,901            | 2,719                     | 818                |
| Housing & Neighbourhood Services             | 1,417            | 919                       | (498)              |
| Cultural Services                            | 3,393            | 4,182                     | 789                |
| Environmental & Commercial Services          | 13,681           | 14,197                    | 516                |
| Regeneration & Assets                        | (3,468)          | (3,130)                   | 338                |
| DEGNS Overhead Account                       | 619              | 606                       | (13)               |
| Environment and Neighbourhood Services       | 18,193           | 19,980                    | 1,787              |
| Customer & Corporate Improvement             | 2,550            | 2,628                     | 78                 |
| Human Resources & Organisational Development | 1,636            | 1,679                     | 43                 |
| Audit & Insurance                            | 1,453            | 1,417                     | (36)               |
| Procurement                                  | 338              | 298                       | (40)               |
| Financial Services                           | 2,630            | 2,815                     | 185                |
| Legal & Democratic Services                  | 1,713            | 1,780                     | 67                 |
| IT & Digital Transformation                  | 4,162            | 3,884                     | (278)              |
| Chief Executive & Communications             | 544              | 459                       | (85)               |
| Resources                                    | 15,026           | 14,960                    | (66)               |
| Children's Services delivered by BFfc        | 47,898           | 48,991                    | 1,093              |
| Children's Services retained by Council      | 695              | 695                       | 0                  |
| children's services retained by council      | 117,865          | 120,432                   | 2,567              |
| Corporate Items                              | 117,003          | 120,432                   | 2,307              |
| Capital Financing Costs                      | 13,680           | 13,776                    | 96                 |
| Contingency                                  | 4,228            | 0                         | (4,228)            |
| s31 Grants (Business Rate Reliefs)           | (2,200)          | (5,033)                   | (2,833)            |
| Other Corporate Budgets                      | (769)            | 564                       | 1,333              |
| Transfers to/(from) Reserves                 | 4,464            | 4,464                     | 0                  |
| Transfers to thomy reserves                  | 19,403           | 13,771                    | (5,632)            |
|  | 17,100           | 10,771                    | (0,002)            |
| Total Expenditure                            | 137,268          | 134,203                   | (3,065)            |
|  |                  |                           |                    |
| Funded by                                    |                  |                           |                    |
| Business Rates                               | (41,957)         | (41,957)                  | 0                  |
| Council Tax                                  | (91,109)         | (91,109)                  | 0                  |
| New Homes Bonus                              | (3,739)          | (3,739)                   | 0                  |
| NNDR Rebate (2018-19)                        | (463)            | (463)                     | 0                  |
| ,  | (137,268)        | (137,268)                 | 0                  |
|  |                  |                           |                    |

Appendix 2 - Housing Revenue Account (HRA) Outturn 2019/20

|                                   | Budget   | Outturn  | Variance |
|-----------------------------------|----------|----------|----------|
|                                   | £'000s   | £'000s   | £'000s   |
|                                   |          |          |          |
| Responsive Repairs                | 2,294    | 2,397    | 103      |
| Planned Maintenance               | 2,715    | 2,817    | 102      |
| Major Works                       | 15,678   | 10,285   | (5,393)  |
| Managing Tenancies                | 1,371    | 1,218    | (153)    |
| Management, Policy & Support      | 5,618    | 5,331    | (287)    |
| PFI                               | 7,066    | 6,827    | (239)    |
| Rent Collection                   | 1,304    | 1,049    | (255)    |
| Building Cleaning, Energy & other | 2,883    | 2,788    | (95)     |
| Capital Financing                 | 10,269   | 5,300    | (4,969)  |
| HRA Income                        | (38,732) | (39,722) | (990)    |
| Movement to/(from) Reserve        | (10,466) | 1,710    | 12,176   |
| Net Controllable Budget           | 0        | 0        | 0        |

# General Fund Capital Programme

| General Fund Capital Programme   | 2019/20            | O Approved           | l Budget         | 2019/20                | Provisional          | Outturn          | 20                 | 19/20 Variar         | nce              | 2019/20            | 0 Roll Forwa<br>Requests | rd/ Back         | 2020/2             | 1 Approved           | Budget           | 2020/              | 21 Revised E         | Budget           |
|--|--------------------|----------------------|------------------|------------------------|----------------------|------------------|--------------------|----------------------|------------------|--------------------|--------------------------|------------------|--------------------|----------------------|------------------|--------------------|----------------------|------------------|
| Scheme Name  | Spend<br>(£,000's) | Funding<br>(£,000's) | Net<br>(£,000's) | Spend<br>(£,000's)     | Funding<br>(£,000's) | Net<br>(£,000's) | Spend<br>(£,000's) | Funding<br>(£,000's) | Net<br>(£,000's) | Spend<br>(£,000's) | Funding<br>(£,000's)     | Net<br>(£,000's) | Spend<br>(£,000's) | Funding<br>(£,000's) | Net<br>(£,000's) | Spend<br>(£,000's) | Funding<br>(£,000's) | Net<br>(£,000's) |
| Delivery Fund  | 4,539              | -                    | 4,539            | 3,058                  |                      | 3,058            | (1,481)            | -                    | (1,481)          | 1,481              | -                        | 1,481            | 4,069              | -                    | 4,069            | 5,550              | -                    | 5,550            |
| Equal Pay  | 4.500              | -                    | -                | 199                    | -                    | 199              | 199                | -                    | 199              | -                  | -                        | - 4 404          | -                  |                      | -                | -                  | -                    |                  |
| Corp Total   | 4,539              | -                    | 4,539            | 3,257                  | -                    | 3,257            | (1,282)            | -                    | (1,282)          | 1,481              | -                        | 1,481            | 4,069              | (0.2)                | 4,069            | 5,550              | - (02)               | 5,550            |
| e-Marketplace & Equipment Renewal Portal Software                                | -                  | -                    | -                |                        |                      | -                | -                  | -                    | -                | -                  | -                        | -                | 170                | (93)                 | 77               | 170                | (93)                 | 77               |
| Mobile Working and Smart Device<br>Replacement of Community Re-ablement Software | -                  | -                    | -                |                        |                      | -                | -                  | -                    | -<br>-           | -<br>-             | -                        | -                | 150<br>85          | -                    | 150<br>85        | 150<br>85          | -                    | 150<br>85        |
| Social Care Premises   | 150                | -                    | 150              | 33                     |                      | 33               | (117)              | -                    | (117)            | 117                | -                        | 117              | 1,000              | -                    | 1,000            | 1,117              | -                    | 1,117            |
| DACHS Total  | 150                | -                    | 150              | 33                     | -                    | 33               | (117)              | -                    | (117)            | 117                | -                        | 117              | 1,405              | (93)                 | 1,312            | 1,522              | (93)                 | 1,429            |
| Additional School Places - Contingency   | -                  | -                    | -                |                        | -                    | -                | -                  | -                    | -                | -                  | -                        | -                | 500                | (500)                | -                | 500                | (500)                | -                |
| Avenue Expansion   | 184                | (184)                | -                | 101                    | (101)                | (0)              | (83)               | 83                   | (0)              | 83                 | (83)                     | 0                | 9                  | (9)                  | -                | 92                 | (92)                 | 0                |
| Blessed Hugh Faringdon - Asperger Unit 30 place                                  | 316                | (316)                | -                | 331                    | (331)                | -                | 15                 | (15)                 | -                | (15)               | 15                       | -                |                    |                      | -                | (15)               | 15                   | -                |
| expansion (SEN)  |                    |                      |                  |                        |                      |                  |                    |                      |                  |                    |                          |                  |                    |                      |                  |                    |                      |                  |
| Civitas- Synthetic Sports Pitch  | 10                 | (10)                 | -                | -                      | -                    | -                | (10)               | 10                   | -                | 10                 | (10)                     | -                | 319                | (319)                | -                | 329                | (329)                | -                |
| Cranbury College at JMA  | 75                 | (75)                 | -                | -                      | -                    | -                | (75)               | 75                   | -                | 75                 | (75)                     | -                | 819                | (819)                | -                | 894                | (894)                | -                |
| Crescent Road Playing Field Improvements   | -                  | -                    | -                | 0                      | (0)                  |                  | 0                  | (0)                  | -                | (0)                | 0                        | -                | 314                | (314)                | -                | 314                | (314)                | -                |
| Critical Reactive Contingency: Health and safety                                 | 300                | (300)                | -                | 270                    | (270)                | -                | (30)               | 30                   | -                | 30                 | (30)                     | -                | 727                | (727)                | -                | 757                | (757)                | -                |
| (Schools)  |                    |                      |                  |                        |                      |                  |                    |                      |                  |                    |                          |                  |                    |                      |                  |                    |                      |                  |
| DFC  |                    |                      | -                | 530                    | (530)                | 0                | 530                | (530)                | 0                |                    |                          |                  |                    |                      |                  |                    |                      |                  |
| Foster Carer Extensions  | 100                | -                    | 100              | -                      | -                    | -                | (100)              | -                    | (100)            |                    | -                        | -                | 100                | -                    | 100              | 100                | -                    | 100              |
| Care Home Works  |                    |                      |                  | 75                     |                      | 75               | 75                 | -                    | 75               |                    |                          |                  |                    |                      |                  |                    |                      |                  |
| Green Park Primary School  | 2,906              | (2,906)              | -                | 2,030                  | (2,030)              |                  | (876)              | 876                  | -                | 876                | (876)                    | -                | -                  | -                    | -                | 876                | (876)                | -                |
| Heating and Electrical Programme - Manor Pry Power                               | 3                  | (3)                  | -                | 3                      | (3)                  | -                | -                  | -                    | -                | -                  | -                        | -                | 154                | (154)                | -                | 154                | (154)                | -                |
| Heating and Electrical Renewal Programme   | 399                | (399)                | _                | 74                     | (74)                 | _                | (325)              | 325                  |                  | 325                | (325)                    | _                | 929                | (929)                | _                | 1,254              | (1,254)              |                  |
| Initial Viability work for the Free School at Richfield                          | 100                | (100)                | _                | 51                     | (51)                 | _                | (49)               | 49                   | _                | 49                 | (49)                     | _                | 160                | (160)                | _                | 209                | (209)                | _                |
| Avenue   | 100                | (100)                |                  | 01                     | (01)                 |                  | (17)               | 1,                   |                  | 17                 | (17)                     |                  | 100                | (100)                |                  | 207                | (207)                |                  |
| Katesgrove Primary Trooper Potts Building  | 10                 | (10)                 | _                | 8                      | (8)                  | _                | (2)                | 2                    | _                | 2                  | (2)                      | _                | 6,981              | (6,981)              | _                | 6,983              | (6,983)              | _                |
| Meadway Early Years Building Renovation  | 148                | (148)                | _                | 10                     | (10)                 |                  | (138)              | 138                  | _                | 138                | (138)                    | _                | 100                | (100)                | _                | 238                | (238)                | _                |
| Moorlands Primary School 1FE Expansion   |                    | ( )                  | _                | 5                      | <b>(</b> )           | 5                | 5                  | _                    | 5                |                    | ( /                      | -                |                    | ( )                  | -                |                    | ( )                  | _                |
| New ESFA funded schools - Phoenix College  | 500                | (500)                | _                | 423                    | (423)                | _                | (77)               | 77                   | _                | 77                 | (77)                     | -                | 6,300              | (5,400)              | 900              | 6,377              | (5,477)              | 900              |
| New ESFA funded schools - St Michaels  | 2,517              | (2,517)              | _                | 2,441                  | (2,441)              | _                | (76)               | 76                   | _                | 76                 | (76)                     | -                | 101                | (101)                | -                | 177                | (177)                | -                |
| Primary Schools Expansion Programme - 2013-2017                                  | 250                | (250)                | _                | 215                    | (215)                |                  | (35)               | 35                   | _                | 35                 | (35)                     | -                | 490                | (490)                | -                | 525                | (525)                | -                |
| Schools - Fire Risk Assessed remedial Works                                      | 199                | (199)                | _                | 6                      | (6)                  | _                | (193)              | 193                  | _                | 193                | (193)                    | _                | 203                | (203)                | _                | 396                | (396)                | _                |
| Thameside SEN Expansion  | 66                 | (66)                 | _                | O                      | (0)                  | _                | (66)               | 66                   | _                | 66                 | (66)                     | _                | -                  | (200)                | _                | 66                 | (66)                 | _                |
| The Heights Permanent Site Mitigation  | 984                | (758)                | 226              | 556                    | (556)                | _                | (428)              | 202                  | (226)            | 428                | (202)                    | 226              | 918                | (801)                | 117              | 1,346              | (1,003)              | 343              |
| The Heights Temporary School   | 71                 | (71)                 | -                | 18                     | (18)                 |                  | (53)               | 53                   | (223)            | 53                 | (53)                     | -                | -                  | -                    | -                | 53                 | (53)                 | -                |
| DCEEHS Total   | 9,138              | (8,812)              | 326              | 7,147                  | (7,067)              |                  | (1,991)            | 1,745                | (246)            | 2,502              | (2,275)                  | 226              | 19,124             | (18,007)             | 1,117            | 21,626             | (20,282)             | 1,343            |
| Abbey Quarter  | 53                 | (53)                 | -                | 63                     | (63)                 |                  | 10                 | (10)                 | (0)              | (10)               |                          | 0                | 457                | (457)                | -                | 447                | (447)                | 0                |
| Accommodation Review - Henley Road Cemetery                                      | 39                 | -                    | 39               | 56                     | `-                   | 56               | 17                 | -                    | 17               | , ,                |                          | -                | -                  | -                    | -                | -                  | -                    | -                |
| Accommodation Review - Phase 2A & B  | 133                | -                    | 133              | -                      | -                    | -                | (133)              | -                    | (133)            | 133                | -                        | 133              | -                  | -                    | -                | 133                | -                    | 133              |
| Accommodation Review - Phase 2C (19 Bennet Road)                                 | 4,230              | -                    | 4,230            | 3,526                  | -                    | 3,526            | (704)              | -                    | (704)            | 704                |                          | 704              | 1,824              | -                    | 1,824            | 2,528              | -                    | 2,528            |
| Accommodation Review - Town Hall   | 291                | _                    | 291              | 447                    | _                    | 447              | 156                | _                    | 156              |                    |                          | _                | _                  | _                    |                  | _                  | _                    |                  |
| Additional Storage Capacity at Mortuary  | Z 7 1<br>-         | _                    | 271              | 777                    | _                    | -                | -                  | _                    | 130              |                    |                          | _                | 15                 | _                    | 15               | 15                 | -                    | 15               |
| Air Quality Monitoring   | -<br>64            | (64)                 |                  | 108                    | (64)                 | 44               | 44                 | _                    | 44               |                    |                          |                  | 33                 | (33)                 | -                | 33                 | (33)                 | -                |
| Bridges and Carriageways   | 2,350              | (1,623)              | -<br>727         | 2,924                  | (1,843)              |                  | 574                | (220)                | 354              | (574)              | 220                      | (354)            | 1,669              | (1,259)              | 410              | 1,095              | (1,039)              | 56               |
| Car Park Investment Programme  | 2,330              | (226)                | -                | <b>2</b> 17 <b>2</b> 7 | (1,040)              | -                | (226)              | 226                  | -                | 226                | (226)                    | (304)            | 226                | (226)                | -                | 452                | (452)                | -                |
| Car Parking - P&D, Red Routes, Equipment   | 350                | (100)                | 250              | 376                    | (100)                | 276              | 26                 | -                    | 26               | (26)               | (220)                    | (26)             | 200                | (100)                | 100              | 174                | (100)                | 74               |
| Cattle Market Car Park   | 20                 | (20)                 | -                | 570                    | (100)                | -                | (20)               | 20                   | _                | 20                 | (20)                     | (20)             | 503                | (503)                | -                | 523                | (523)                | -                |
| CCTV   | 50                 | (50)                 | _                |                        |                      | _                | (50)               | 50                   | _                | 50                 | (50)                     | _                | -                  | (303)                | _                | 50                 | (50)                 | _                |
| Cemeteries and Crematorium   | 96                 | -                    | 96               | 102                    | _                    | 102              | 6                  | -                    | 6                | (6)                | (00)                     | (6)              | 100                | _                    | 100              | 94                 | -                    | 94               |
| Central Library - Reconfiguration/Refurbishment                                  | 50                 | _                    | 50               | .02                    | -                    | -                | (50)               | _                    | (50)             | 50                 |                          | 50               |                    | _                    | -                | 50                 | _                    | 50               |
| Feasibility  |                    |                      |                  |                        |                      |                  | (00)               |                      | (00)             |                    |                          |                  |                    |                      |                  |                    |                      | 0.0              |
| Central Pool Regeneration  | 775                | (483)                | 292              | 188                    | (188)                | 0                | (587)              | 295                  | (292)            | 587                | (295)                    | 292              | _                  | _                    | _                | 587                | (295)                | 292              |
| Chestnut Walk Improvements   | 120                | (38)                 |                  | 105                    | (38)                 |                  | (15)               | -                    | (15)             | 15                 | -                        | 15               | 40                 | (25)                 | 15               | 55                 | (25)                 | 30               |
| Christchurch Meadows Paddling Pool   | -                  | -                    | -                |                        | -                    | -                |                    | -                    | -                |                    |                          | -                | 35                 | -                    | 35               | 35                 | -                    | 35               |
| on istendion meadows i adding roof   | -                  | -                    | -                |                        | -                    | -                | · ·                | -                    | -                | I                  |                          | -                | I 30               | -                    | 30               | 30                 | -                    | 33               |

| CII Local Fundo Community   |              |                  |       |              |              |            |                          |             |            |           |         |       | FO           | (52)                                    |              | F2           | (52)           |       |
|---|--------------|------------------|-------|--------------|--------------|------------|--------------------------|-------------|------------|-----------|---------|-------|--------------|---|--------------|--------------|----------------|-------|
| CIL Local Funds - Community CIL Local Funds - Heritage and Culture    | -            | -                | -     |              | - 1          | -          | -                        |             | -          |           |         | _     | 52<br>115    | (52)<br>(115)                           | -            | 52<br>115    | (52)<br>(115)  | -     |
| CIL Local Funds - Leisure and Play                                    | 265          | (265)            | _     | 157          | (157)        | (0)        | (108)                    | 108         | (0)        | 108       | (108)   | 0     | 338          | (338)                                   | _            | 446          | (446)          | 0     |
| CIL Local Funds - Transport   | -            |                  | _     |              | (121)        | -          | -                        | -           | -          |           | (100)   | -     | 435          | (435)                                   | -            | 435          | (435)          | -     |
| CIL Local Funds -Neighbourhood Allocation                             | 239          | (239)            | -     |              |              | -          | (239)                    | 239         | -          | 239       | (239)   | -     | 238          | (238)                                   | -            | 477          | (477)          | -     |
| Corporate Office Essential Works                                      | -            | -                | -     |              | -            | -          | -                        | -           | -          |           |         | -     | 50           | -                                       | 50           | 50           | - 1            | 50    |
| Dee Park Regeneration - Housing Infrastructure Fund                   | -            | -                | -     |              | -            | -          | -                        | -           | -          |           |         | -     | 6,000        | (6,000)                                 | -            | 6,000        | (6,000)        | -     |
| (school)  |              |                  |       |              |              |            |                          |             |            |           |         |       |              |   |              |              |                |       |
| Defra Air Quality Grant - Bus Retrofit                                | 803          | (803)            | -     | 803          | (803)        | (0)        | (0)                      | -           | (0)        |           |         | -     | 388          | (388)                                   | -            | 388          | (388)          | -     |
| Defra Air Quality Grant - Go Electric Reading                         | 1            | (1)              | -     | 3            | (3)          | (0)        | 2                        | (2)         | (0)        | (2)       | 2       | 0     | 54           | (54)                                    | -            | 52           | (52)           | 0     |
| Development of facilities at Prospect Park/Play                       | -            | -                | -     |              | -            | -          | -                        | - (2.2)     | -          |           |         | -     | 550          | (475)                                   | 75           | 550          | (475)          | 75    |
| Disabled Facilities Grants (Private Sector)                           | 1,104        | (1,104)          | -     | 1,143        | (1,143)      | 0          | 39                       | (39)        | 0          | 100       | (100)   | -     | 1,055        | (1,055)                                 | -            | 1,055        | (1,055)        | -     |
| Eastern Area Access Works   | 100          | (100)            | -     |              |              | -          | (100)                    | 100         | -          | 100       | (100)   | -     | 100          | (100)                                   | -            | 200          | (200)          | -     |
| Electric Vehicle Charging Points Food Waste and Smaller Bins          | -            | -                | -     |              | -            | -          | -                        | - 1         | -          |           |         | -     | 200<br>1,489 | -                                       | 200<br>1,489 | 200<br>1,489 | -              | 200   |
| Green Park Station  | 6,500        | (6,500)          | -     | 4,326        | (4,326)      | (0)        | (2,174)                  | 2,174       | (0)        | 2,174     | (2,174) | 0     | 1,489        | (11,500)                                | 1,489        | 1,489        | (13,674)       | 1,489 |
| Green Faix Station  | 0,300        | (0,300)          | _     | 4,320        | (4,320)      | (0)        | (2,174)                  | 2,174       | (0)        | 2,174     | (2,174) | U     | 11,500       | (11,300)                                | -            | 13,074       | (13,074)       | U     |
| Grounds Maintenance Workshop Equipment                                | -            | -                | -     | 24           | -            | 24         | 24                       | -           | 24         | (24)      |         | (24)  | 50           | -                                       | 50           | 26           | -              | 26    |
| Homes for Reading - Share Redemption Loan                             | 7,000        | -                | 7,000 | 7,000        | -            | 7,000      | (0)                      | -           | (0)        |           |         | -     | -            | -                                       | -            | -            | -              | -     |
| Invest in Corporate buildings/Health & safety works                   | 1,500        | -                | 1,500 | 2,176        | -            | 2,176      | 676                      | -           | 676        | (676)     |         | (676) | 1,768        | -                                       | 1,768        | 1,092        | -              | 1,092 |
| Invest to save energy savings - Street lighting                       | _            | _ [              | _     | 419          | (419)        | (0)        | 419                      | (419)       | (0)        |           |         | _     | 258          | _                                       | 258          | 258          |                | 258   |
| Leisure Procurement   | 375          | _                | 375   | 330          | -            | 330        | (45)                     | -           | (45)       | 45        |         | 45    | 5,662        | (750)                                   | 4,912        | 5,707        | (750)          | 4,957 |
| Local Traffic Management and Road Safety Schemes                      | 130          | (130)            | _     | 114          | (114)        | (0)        | (16)                     | 16          | (0)        | 16        | (16)    | 0     | 359          | (359)                                   |              | 375          | (375)          | 0     |
| Lowfield Rd temporary accommodation                                   | 100          | (100)            |       | //1          | ` '          | 41         | 41                       | -           | 41         | 10        | (10)    | J     | 007          | (337)                                   |              | 0,0          | (373)          | J     |
| LTP Development   | 200          | (200)            | _     | 41           | (1)          | 0          | (199)                    | 199         | 0          | 199       | (199)   | (0)   | 200          | (200)                                   |              | 399          | (399)          | (0)   |
| NCN Route 422   | 423          | (423)            | _     | 204          | (204)        | (0)        | (219)                    | 219         | (0)        | 219       | (219)   | 0     | -            | (200)                                   | -            | 219          | (219)          | 0     |
| New Kit/Vehicles for Commercial Services Dvlpt                        | -            | (420)            | _     | 204          | (204)        | -          | (217)                    |             | (0)        | 217       | (217)   | -     | 122          | _                                       | 122          | 122          | (217)          | 122   |
| Oxford Rd Community Centre  | 181          | _                | 181   | 34           |              | 34         | (147)                    |             | (147)      | 147       |         | 147   | -            | _                                       | -            | 147          | - 1            | 147   |
| Oxford Road Corridor Works  | 4            | (4)              | -     |              |              | -          | (4)                      | 4           | -          | 4         | (4)     | -     | 318          | (318)                                   | _            | 322          | (322)          | -     |
| Playground equipment and Refreshment: Boroughwide                     | -            | -                | -     | 13           | -            | 13         | 13                       | -           | 13         | (13)      | ` '     | (13)  | 494          | (44)                                    | 450          | 481          | (44)           | 437   |
|   |              |                  |       |              |              |            |                          |             |            |           |         |       |              |   |              |              |                |       |
| Pinch Point Schemes   |              |                  |       | 17           |              | 17         | 17                       | -           | 17         |           |         |       |              |   |              |              |                |       |
| Private Sector Renewals   | 200          | -                | 200   | 123          | -            | 123        | (77)                     | -           | (77)       |           |         | -     | 300          | -                                       | 300          | 300          | -              | 300   |
| Provision of Gypsy & Traveller Accommodation                          |              | -                | -     |              | -            | -          | -                        | -           | -          |           |         | -     | -            | -                                       | -            | -            | -              | -     |
| Pumping Station Upgrade Scheme (new)                                  | -            | -                | -     |              | -            | -          | -                        | -           | -          |           | (0)     | -     | 250          | -                                       | 250          | 250          | -              | 250   |
| re3 extending range of recyclables                                    | 8            | (8)              | -     | -            |              | -          | (8)                      | 8           | -          | 8         | (8)     | -     | 86           | (53)                                    | 33           | 94           | (61)           | 33    |
| Reading Football Club Social Inclusion Unit to SRLC                   | -            | - 1              | -     |              | -            | -          | -                        | -           | -          |           |         | -     | 1,496        | (1,496)                                 | -            | 1,496        | (1,496)        | -     |
| Reading Town Centre Design Framework                                  | 86           | (86)             | -     |              |              | -          | (86)                     | 86          | -          | 86        | (86)    | -     | -            | -                                       | -            | 86           | (86)           | -     |
| Reading West Station  | 199          | (199)            | -     | 60           | (60)         | (0)        | (139)                    | 139         | (0)        | 139       | (139)   | 0     | 3,400        | (3,400)                                 | -            | 3,539        | (3,539)        | 0     |
| Renewable Energy  | -            | -                | -     |              | -            | -          | -                        | -           | -          |           |         | -     | 500          | -                                       | 500          | 500          | -              | 500   |
| Replacement Vehicles  | 1,399        | -                | 1,399 | 678          | -            | 678        | (721)                    | -           | (721)      | 721       |         | 721   | 176          | -                                       | 176          | 897          |                | 897   |
| Rogue Landlord Enforcement  | 75<br>       | (75)             | -     |              |              | -          | (75)                     | 75          | -          | <b>75</b> | (75)    | -     | -            | - (00.4)                                | -            | 75           | (75)           | -     |
| S106 individual schemes list  | 50           | (50)             | -     |              |              | -          | (50)                     | 50          | -          | 50        | (50)    | -     | 284          | (284)                                   | -            | 334          | (334)          | -     |
| Salix Decarbonisation Fund  | -<br>175     | (175)            | -     | 154          | -<br>(1 E 4) | (0)        | (21)                     | - 21        | -          | 21        | (21)    | -     | 600          | (227)                                   | 600          | 600          | (250)          | 600   |
| Small Leisure Schemes   | 175<br>1,650 | (175)            | -     | 154<br>2,492 | (154)        | (0)<br>(0) | <mark>(21)</mark><br>842 | 21<br>(842) | (0)<br>(0) | 21        | (21)    | 0     | 237<br>227   | (237)<br>(227)                          | -            | 258<br>227   | (258)<br>(227) | U     |
| Smart City Cluster project and C-ITS South Reading MRT (Phases 1 & 2) | 362          | (1,650)<br>(362) | -     | 2,492        | (2,492)      | (0)        | (362)                    | 362         | 0          | 362       | (362)   | (0)   | 221          | (221)                                   | -            | 362          | (362)          | (0)   |
| South Reading MRT (Phases 3 & 4)                                      | 6,947        | (6,947)          | _     | 2,529        | (2,529)      | (0)        | (4,418)                  | 4,418       | (0)        | 4,418     | (4,418) | 0     | 2,536        | (2,536)                                 | _            | 6,954        | (6,954)        | 0     |
| South Reading MRT (Phases 5 & 6)                                      | -            | (0,717)          | _     | 2,027        | (2,027)      | -          | (1,110)                  | -           | -          | 1,110     | (1,110) | -     | 1,000        | (1,000)                                 | _            | 1,000        | (1,000)        | -     |
| St George's Church Affordable Housing scheme                          | 317          | (317)            | _     | 317          | (317)        | 0          | 0                        |             | 0          | (0)       | -       | (0)   | -            | (.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | _            | (0)          | -              | (0)   |
| The Keep  | 94           | -                | 94    | -            | -            | -          | (94)                     | - 1         | (94)       | 94        |         | 94    | -            | -                                       | -            | 94           | -              | 94    |
| Town Centre Improvements  | -            | -                | -     |              | -            | -          | -                        | -           | -          |           |         | -     | 450          | -                                       | 450          | 450          | - 1            | 450   |
| Town Centre Street Trading Infrastructure                             | -            | -                | -     | 6            | -            | 6          | 6                        | -           | 6          | (6)       |         | (6)   | 40           | -                                       | 40           | 34           | -              | 34    |
| Town Hall Equipment   | -            | -                | -     |              | -            | -          | -                        | -           | -          |           |         | -     | 205          | -                                       | 205          | 205          | -              | 205   |
| Traffic Management Schools  | 95           | (95)             | -     |              |              | -          | (95)                     | 95          | -          | 95        | (95)    | -     | 295          | (295)                                   | -            | 390          | (390)          | -     |
| Tree Planting   | 3            | -                | 3     | 23           | -            | 23         | 20                       | -           | 20         | (20)      |         | (20)  | 50           | -                                       | 50           | 30           | -              | 30    |
| Waste Operations - In Cab Waste Management System                     | 70           | -                | 70    | 70           | -            | 70         | -                        | -           | -          |           |         | -     | -            | -                                       | -            | -            | -              | -     |
| West Reading Transport Study - Southcote/Coley                        | 35           | -                | 35    | 49           | -            | 49         | 14                       | -           | 14         |           |         | _     | -            | _                                       | _            | -            |                | _     |
| Improvements  |              |                  |       |              |              |            |                          |             |            |           |         |       |              |   |              |              |                |       |
| Western Area Access Works   | 128          | (128)            | -     | -            | -            | -          | (128)                    | 128         | -          | 128       | (128)   | -     | -            | -                                       | -            | 128          | (128)          | -     |
| Highway Infrastructure Works  | -            | -                | -     |              | - [          | -          | -                        | -           | -          |           |         | -     | 3,000        | -                                       | 3,000        | 3,000        | -              | 3,000 |

| Harden Public Open Spaces to Prevent Incursion  | 44     | -        | 44     | 24     | - [      | 24     | (20)     | -     | (20)    | 20     |          | 20    | 35      | -        | 35      | 55      | - [      | 55      |
|---|--------|----------|--------|--------|----------|--------|----------|-------|---------|--------|----------|-------|---------|----------|---------|---------|----------|---------|
| Salix Re-Circulation Fund                       | 73     | -        | 73     | 221    | -        | 221    | 148      | -     | 148     | (148)  |          | (148) | 588     | -        | 588     | 440     | -        | 440     |
| Sun Street - Final Phase                        | 589    | (454)    | 135    | 552    | (454)    | 98     | (37)     | -     | (37)    | 37     |          | 37    | 145     | -        | 145     | 182     | -        | 182     |
| DEGNS Total                                     | 40,271 | (22,972) | 17,299 | 31,997 | (15,472) | 16,525 | (8,274)  | 7,500 | (774)   | 9,785  | (8,800)  | 985   | 52,797  | (34,552) | 18,245  | 62,582  | (43,352) | 19,230  |
| Customer Digital Experience                     | -      | -        | -      |        |          | -      | -        | -     | -       | -      | -        | -     | 750     | -        | 750     | 750     | -        | 750     |
| Future ICT Operating Model                      | 100    | -        | 100    | 448    |          | 448    | 348      | -     | 348     | (348)  | -        | (348) | 5,429   | -        | 5,429   | 5,081   | -        | 5,081   |
| ICT Infrastructure (Invest to save)             | 1,000  | -        | 1,000  | 1,222  |          | 1,222  | 222      | -     | 222     | (222)  | -        | (222) | 667     | -        | 667     | 445     | -        | 445     |
| Loan To RTL (Bus replacement programme)         | 1,500  | -        | 1,500  | 151    |          | 151    | (1,349)  | -     | (1,349) | 1,349  | -        | 1,349 | 5,000   | -        | 5,000   | 6,349   | -        | 6,349   |
| Loan To RTL (Project Voyager)                   | 5,200  | -        | 5,200  | 5,200  |          | 5,200  | -        | -     | -       | -      | -        | -     | -       | -        | -       | -       | -        | -       |
| Oracle Capital Works - financed through reduced | 247    | -        | 247    | 276    |          | 276    | 29       | -     | 29      | (29)   | -        | (29)  | 100     | -        | 100     | 71      | -        | 71      |
| rental  |        |          |        |        |          |        |          |       |         |        |          |       |         |          |         |         |          |         |
| Purchase of Commercial Property                 | 35,205 | -        | 35,205 | 35,177 |          | 35,177 | (28)     | -     | (28)    | -      | -        | -     | 80,000  | -        | 80,000  | 80,000  | -        | 80,000  |
| Re-Procurement / Reimplementation of Finance    | -      | -        | -      |        |          | -      | -        | -     | -       | -      | -        | -     | 100     | -        | 100     | 100     | -        | 100     |
| System  |        |          |        |        |          |        |          |       |         |        |          |       |         |          |         |         |          |         |
| Universal Digital Systems                       | 941    | -        | 941    | 332    |          | 332    | (609)    | -     | (609)   | 609    | -        | 609   | 1,005   | -        | 1,005   | 1,614   | -        | 1,614   |
| DoR Total                                       | 44,193 | -        | 44,193 | 42,806 | -        | 42,806 | (1,387)  | -     | (1,387) | 1,359  | -        | 1,359 | 93,051  | -        | 93,051  | 94,410  | -        | 94,410  |
| Grand Total                                     | 98,291 | (31,784) | 66,507 | 85,239 | (22,538) | 62,701 | (13,052) | 9,246 | (3,806) | 15,245 | (11,075) | 4,169 | 170,446 | (52,652) | 117,794 | 185,691 | (63,727) | 121,963 |
|   |        |          |        |        |          |        |          |       |         |        |          |       |         |          |         |         | · ·      |         |

# HRA Capital Programme

|  |                    |                      |        |                    |                      |                  |         |                      |         |       | Requests             |       |        |                      |        |                    |                      |                  |
|--|--------------------|----------------------|--------|--------------------|----------------------|------------------|---------|----------------------|---------|-------|----------------------|-------|--------|----------------------|--------|--------------------|----------------------|------------------|
| Scheme Name                                  | Spend<br>(£,000's) | Funding<br>(£,000's) |        | Spend<br>(£,000's) | Funding<br>(£,000's) | Net<br>(£,000's) | •       | Funding<br>(£,000's) |         | •     | Funding<br>(£,000's) |       | •      | Funding<br>(£,000's) |        | Spend<br>(£,000's) | Funding<br>(£,000's) | Net<br>(£,000's) |
| Major Repairs                                | 7,866              | (437)                | 7,429  | 7,282              | (437)                | 6,845            | (584)   | -                    | (584)   | 584   |                      | 584   | 11,066 |                      | 11,066 | 11,650             | -                    | 11,650           |
| Hexham Road                                  | 1,400              |                      | 1,400  | 1,000              |                      | 1,000            | (400)   | -                    | (400)   | 400   | -                    | 400   | 950    |                      | 950    | 1,350              | -                    | 1,350            |
| Disabled Facilities Grants                   | 670                |                      | 670    | 747                |                      | 747              | 77      | -                    | 77      | (77)  | -                    | (77)  | 500    |                      | 500    | 423                | -                    | 423              |
| Fire Safety Works                            | 1,128              |                      | 1,128  | 1,134              |                      | 1,134            | 6       | -                    | 6       | (6)   | -                    | (6)   | 977    |                      | 977    | 971                | -                    | 971              |
| New Build & Acquisitions - Phase 1           | 1,174              |                      | 1,174  | 1,175              |                      | 1,175            | 1       | -                    | 1       | (1)   | -                    | (1)   | 214    |                      | 214    | 213                | -                    | 213              |
| New Build & Acquisitions - Phase 2           | 2,729              |                      | 2,729  | 2,065              |                      | 2,065            | (664)   | -                    | (664)   | 664   | -                    | 664   | 12,205 | (1,111)              | 11,094 | 12,869             | (1,111)              | 11,758           |
| New Build & Acquisitions - Phase 3           | 569                |                      | 569    | 705                |                      | 705              | 136     | -                    | 136     | (136) | -                    | (136) | 8,381  | (3,601)              | 4,780  | 8,245              | (3,601)              | 4,644            |
| New Build & Acquisitions - (Ex General Fund) | 133                |                      | 133    | 139                |                      | 139              | 6       | -                    | 6       | (6)   | -                    | (6)   | 77     |                      | 77     | 71                 | -                    | 71               |
| Extra care (cedar court)                     |                    |                      | -      | 132                |                      | 132              | 132     |                      | 132     |       |                      | -     |        |                      | -      |                    |                      | -                |
| Housing Mngt System                          | 111                |                      | 111    |                    |                      | -                | (111)   | -                    | (111)   | 111   | -                    | 111   | 604    |                      | 604    | 715                | -                    | 715              |
| Grand Total                                  | 15,780             | (437)                | 15,343 | 14,379             | (437)                | 13,942           | (1,401) | -                    | (1,401) | 1,533 | -                    | 1,533 | 34,974 | (4,712)              | 30,262 | 36,507             | (4,712)              | 31,795           |
|  |                    |                      |        |                    |                      |                  |         |                      |         |       |                      |       |        |                      |        |                    |                      |                  |

2019/20 Variance

2019/20 Roll Forward/ Back 2020/21 Approved Budget 2020/21 Revised Budget

2019/20 Approved Budget 2019/20 Provisional Outturn

Funded By

### Appendix 4

|               |  | Delivered Savings | Undelivered Savings | Savings Removed at | Savings Carried |
|---------------|--|-------------------|---------------------|--------------------|-----------------|
| C             | CAVINGS AND INCOME DRODOCAL  | 2019-20           | 2019-20             | 2020-21 Budget     | Forward to      |
| Service       | SAVINGS AND INCOME PROPOSAL  | £'000             | £'000               | Setting            | 2020-21         |
|               |  |                   |                     | £'000              | £'000           |
| DACHS         | Review of alternative delivery models for Public Health                              | 553               |                     |                    |                 |
|               | Extension of Review & Right Sizing Project   | 500               |                     |                    |                 |
| DACHS         | Locality Team Realignment (Mental Health and Locality Team Restructure)              | 235               |                     |                    |                 |
|               | Changes to the Adult Social Care Front Door  | 220               |                     |                    |                 |
| DACHS         | Reducing Adult Social Care contracts spend (Commissioning Delivery Model)            | 146               | 254                 |                    | 254             |
|               | PID6 Learning Disabilities (In-house provider services)                              | 100               |                     |                    |                 |
| DACHS         | Implementation of Business Support restructure                                       | 84                |                     |                    |                 |
|               | Better use of Apprenticeship Levy  | 52                |                     |                    |                 |
| DACHS         | Increased usage of Direct Payments   | 50                | 150                 |                    | 150             |
|               | Charles Clore Court  | 50                |                     |                    |                 |
| DACHS         | Group Homes Rental Increase  | 40                |                     |                    |                 |
| DACHS         | Undertake a commissioning exercise with the voluntary sector to secure Preventative  | 18                |                     |                    |                 |
|               | and non-prescribed (non mandated) Public Health Services at a reduced rate           |                   |                     |                    |                 |
| DACHS         | Home care project - Electronic Time Recording & Double Up care Packages              | 15                |                     |                    |                 |
| <b>Д</b> АСНS | Delivery Models for Commissioning, Prevention & Quality Services                     |                   | 750                 | (750)              | 0               |
| <b>D</b> ACHS | Increased usage of Assistive Technology and Equipment                                |                   | 200                 | , ,                | 200             |
| ~             | Digitisation Saving  |                   | 69                  |                    | 69              |
| <b>®</b> ACHS | Deputies - Review the charging policy and implementation of CASPAR software to       |                   | 50                  | (50)               | 0               |
|               | improve efficiencies   |                   |                     | ` '                |                 |
| DACHS         | Extension of Front Door Project; Stretch for Front Door Project Linked with 3        |                   | 50                  |                    | 50              |
|               | Conversation Model   |                   |                     |                    |                 |
| DACHS T       | otal   | 2,063             | 1,523               | (800)              | 723             |
| DEGNS         | Continue to review existing property holdings and increase income from commercial    | 726               | 519                 | (50)               | 469             |
|               | property acquisitions  |                   |                     |                    |                 |
| DEGNS         | Review public car parking provision borough-wide/Off street parking contract back in | 400               |                     |                    |                 |
|               | house: Public car parking provision borough-wide                                     |                   |                     |                    |                 |
| DEGNS         | Reduce expenditure on homelessness, Bed and Breakfast and temporary                  | 350               |                     |                    |                 |
|               | accommodation  |                   |                     |                    |                 |
| DEGNS         | Review existing Parking Permit Charges   | 256               |                     |                    |                 |
|               | Reduce use of nightly paid emergency accommodation (inc B&B)                         | 200               |                     |                    |                 |
| DEGNS         | Increase Charge on Green Waste Collection  | 180               |                     |                    |                 |
| DEGNS         | Environment Contract Renegotiation - Savings through renegotiation of existing       | 150               |                     |                    |                 |
|               | contract   |                   |                     |                    |                 |
| DEGNS         | Waste Operations   | 121               | 163                 |                    | 163             |
| DEGNS         | Car park management process savings through IT improvements and staff reductions     | 100               |                     |                    |                 |
|               |  |                   |                     |                    |                 |
| DEGNS         | Extend residents parking permit areas.   | 100               |                     |                    |                 |

| Service           | SAVINGS AND INCOME PROPOSAL   | Delivered Savings<br>2019-20<br>£'000 | Undelivered Savings<br>2019-20<br>£'000 | Savings Removed at<br>2020-21 Budget<br>Setting<br>£'000 | Savings Carried<br>Forward to<br>2020-21<br>£'000 |
|-------------------|---|---------------------------------------|---|--|---|
| DEGNS             | Transformation and rationalisation of the Neighbourhood Support Team, including waste minimisation support.   | 100                                   |   |  |   |
| DEGNS             | Additional income raised from property holdings, running cost savings and management and staff savings in relation to the management of property.                           | 87                                    |   |  |   |
| DEGNS             | Increase Trade Waste Collection and Disposal service turn over by 100%  | 86                                    |   |  |   |
| DEGNS             | Licensing Income  | 84                                    |   |  |   |
| DEGNS             | Increase in savings - Waste operations -service efficiencies and further Trade Waste expansion  | 77                                    |   |  |   |
| DEGNS             | Increased provision of Red Routes thus increased enforcement income (invest to save with initial capital investment £40K)   | 75                                    |   |  |   |
| DEGNS             | More efficient use of staff transport by increased use of pool cars   | 73                                    |   |  |   |
| DEGNS             | Reduction on Training Budget  | 68                                    |   |  |   |
| DEGNS             | Reconfiguring the services of the Homelessness Pathway contracts, the Floating Support contract and the Street Outreach contract  | 61                                    |   |  |   |
| <del>ည</del> ြGNS | Extension of mandatory HMO Licensing and development and implementation of a discretionary scheme   | 60                                    | 190                                     | (75)   | 115   |
| <b>D</b> EGNS     | Capitalisation of Salaries  | 57                                    |   |  |   |
| <b>S</b> EGNS     | Saving proposals for Highways Engineering including new LED street lighting and increased income generation   | 55                                    |   |  |   |
| DEGNS             | Continue to invest to save in Reading Commercial Services to increase trading surplus   | 50                                    |   |  |   |
| DEGNS             | Explore utilisation of Re3 facilities to introduce trade use of the public recycling centre to generate income  | 50                                    |   |  |   |
| DEGNS             | Income from visa verification programme starting at central library   | 50                                    |   |  |   |
| DEGNS             | Introduce Enforcement on the Kings Road and Forbury Road bus lanes  | 50                                    |   |  |   |
| DEGNS             | Introduce further areas of pay and display in the town centre, and other local centres such as Caversham, Shinfield, Tilehurst, Oxford Road, Wokingham Road and London Road | 50                                    |   |  |   |
| DEGNS             | Introduce weekend charging for Hospital & University Pay & Display (P&D)  | 50                                    |   |  |   |
| DEGNS             | Introduction of Red Routes  | 50                                    |   |  |   |
| DEGNS             | Out of Hours Car Parking Charges - raise income from out-of-hours car parking on Council sites, for example use at evenings and weekends.                                   | 50                                    |   |  |   |
| DEGNS             | Seek alternative funding for Real Time Passenger Information  | 50                                    |   |  |   |
| DEGNS             | Undertake a review of existing provision to inform the closure of a number of public conveniences   | 50                                    |   |  |   |
| DEGNS             | Grant Funding of Community Centres  | 46                                    |   |  |   |
|                   | Deletion of one Full Time Equivalent post in Housing Needs  | 41                                    |   |  |   |
|                   | Further efficiencies in Cultural Services   | 40                                    |   |  |   |

| Service       | SAVINGS AND INCOME PROPOSAL   | Delivered Savings<br>2019-20<br>£'000 | Undelivered Savings<br>2019-20<br>£'000 | Savings Removed at<br>2020-21 Budget<br>Setting<br>£'000 | Savings Carried<br>Forward to<br>2020-21<br>£'000 |
|---------------|---|---------------------------------------|---|--|---|
|               | Reduce contract value for housing related support to young people   | 35                                    |   |  |   |
| DEGNS         | Reduce frequency of public parks grass cutting  | 32                                    |   |  |   |
|               | Housing Property Services-income generation to general fund   | 30                                    |   |  |   |
| DEGNS         | Additional administrative charges vis community Infrastructure Levy: Increase income from CIL admin fees  | 25                                    |   |  |   |
| DEGNS         | Cease the classical programme season at the Hexagon.  | 25                                    |   |  |   |
| DEGNS         | Charge Time for Work Related to Investment Purchases / Disposals  | 25                                    |   |  |   |
| DEGNS         | Corporate Facilities Management reductions  | 25                                    |   |  |   |
| DEGNS         | Increase income following refurbishment of South Street and introduction of membership schemes for both South Street and the Hexagon.   | 25                                    |   |  |   |
| DEGNS         | Review of enforcement contracts   | 25                                    |   |  |   |
| DEGNS         | Revise existing access restriction Beresford Road junction with Portman Road and convert into bus gate  | 25                                    |   |  |   |
| DEGNS         | Townhall and Museum Additional Income   | 20                                    | 100                                     |  | 100   |
| <b>Ņ</b> ŧGNS | Increased income from Greenwave Fares (Reading Buses)   | 20                                    |   |  |   |
|               | Introduce 'Live Screening' of high profile performances   | 20                                    |   |  |   |
|               | Increase on-street pay & display charges  | 19                                    |   |  |   |
|               | Stop Providing Grit Bins on the Public Highway  | 14                                    |   |  |   |
| DEGNS         | Implement an invest to save for a new tree gang   | 13                                    |   |  |   |
| DEGNS         | Increased income through further increase in rents for Reading Borough Council owned/managed temporary accommodation.   | 10                                    |   |  |   |
| DEGNS         | Invest to save opportunity - increased on street P&D  | 10                                    |   |  |   |
| DEGNS         | Develop room hire option at the Hexagon   | 5                                     |   |  |   |
| DEGNS         | Creation of 2 new works gangs, one for additional grounds maintenance work and one for external arboricultural and tree surveying works   |                                       | 150                                     | (150)  | 0   |
| DEGNS         | Review and Restructure of Cleaning Services   |                                       | 125                                     |  | 125   |
| DEGNS         | Reduction in professional specialist, management, enforcement and administrative resources; an increase to pre-planning application fees and increase in planning application fee income. |                                       | 120                                     |  | 120   |
| DEGNS         | Digitisation saving   |                                       | 69                                      |  | 69  |
| DEGNS         | Review of Neighbourhood and Streetcare Services fees and charges and enforcement activity.  |                                       | 69                                      |  | 69  |
| DEGNS         | Parks & Open Spaces Invest to Save  |                                       | 65                                      |  | 65  |
| DEGNS         | Reduce costs further in Library Services  |                                       | 49                                      |  | 49  |
| DEGNS         | Theatres Fees and Charges Increases   |                                       | 40                                      |  | 40  |
|               | Town Centre Street Trading -New Pitches   |                                       | 30                                      |  | 30  |
| DEGNS         | Explore creation of co-ordinated enforcement operation across Regulatory & Transportation services  |                                       | 29                                      |  | 29  |

| Service        | SAVINGS AND INCOME PROPOSAL  | Delivered Savings<br>2019-20<br>£'000 | 2019-20<br>£'000 | Savings Removed at<br>2020-21 Budget<br>Setting<br>£'000 | Savings Carried<br>Forward to<br>2020-21<br>£'000 |
|----------------|--|---------------------------------------|------------------|--|---|
|                | Review and increase all allotment rental charges and review plot sizes   |                                       | 26               |  | 26  |
|                | Additional income from advertising   |                                       | 25               |  | 25  |
| DEGNS          | Charge for pre-application for planning  |                                       | 25               |  | 25  |
| DEGNS          | Introduce a 24 hours a day, 7 days a week charge for all Town Centre Pay & Display   |                                       | 25               |  | 25  |
| DEGNS          | Commercialisation - Alternative to Market testing  |                                       | 8                |  | 8   |
| <b>DEGNS T</b> | otal   | 4,496                                 | 1,827            | (275)  | 1,552   |
| DOR            | Revenues and Benefits Service Market Testing   | 260                                   |                  |  |   |
| DOR            | Housing Benefit overpayment recovery   | 245                                   |                  |  |   |
| DOR            | Agency Contract  | 100                                   |                  |  |   |
| DOR            | Service Reductions in supplies and services, especially consultancy with recruitment being successful  | 30                                    |                  |  |   |
| DOR            | Apprentice Levy Savings  | 29                                    |                  |  |   |
| DOR            | Increased use of Apprenticeship Levy to fund training  | 26                                    |                  |  |   |
| Ðr<br>age<br>e | Additional savings will be made across the ICT service including reducing spend on applications and contract spend and achieving a staff reduction in the Corporate Team | 20                                    |                  |  |   |
| <b>99</b> 0R   | Realignment of commissioned Tackling Poverty, Thriving Communities and Community Buildings services  | 17                                    |                  |  |   |
| DOR            | Digitisation saving  | 15                                    | 54               |  | 54  |
| DOR            | Kennet Day Nursery - Set a surplus target for provision and working with other organisations to achieve 85% occupancy  | 10                                    |                  |  |   |
| DOR            | Further stretch of income from event sponsorship and selling advertising within event publications/e-publications/email bulletins.                                       | 5                                     |                  |  |   |
| DOR            | Income generation from charging for services, assuming new delivery model for legal services implemented   |                                       | 90               | (90)   | 0   |
| DOR            | Convert Locum solicitors into Permanent Solicitors   |                                       | 33               |  | 33  |
| DOR            | EU Settlement card service   |                                       | 27               |  | 27  |
| DOR            | Increase Income from fees and charges across the registration and bereavement service  |                                       | 15               | (15)   | 0   |
| DOR Tota       | al   | 757                                   | 219              | (105)  | 114   |
|                | Management and Staffing Review   |                                       | 592              | (592)  | 0   |
| CORP           | Reading Buses  |                                       | 480              | (480)  | 0   |
| CORP           | Compulsory closure of Civic Offices for non-essential services   |                                       | 200              | (100)  | 100   |
| CORP           | Increased Fee income following review of Fees and Charges  |                                       | 113              | (113)  | 0   |
| CORP           | Proposal to review staff terms and conditions and update the policy framework to reflect modern and best practice  |                                       | 50               |  | 50  |

### Appendix 4

| Service         | SAVINGS AND INCOME PROPOSAL            | Delivered Savings<br>2019-20<br>£'000 | Undelivered Savings<br>2019-20<br>£'000 | Savings Removed at<br>2020-21 Budget<br>Setting<br>£'000 | Savings Carried<br>Forward to<br>2020-21<br>£'000 |
|-----------------|--|---------------------------------------|---|--|---|
| CORP            | Reduction in Treasury Management Costs | 400                                   |   |  |   |
| CORP To         | tal                                    | 400                                   | 1,435                                   | (1,285)  | 150   |
| <b>Grand To</b> | otal                                   | 7,716                                 | 5,004                                   | (2,465)  | 2,539   |

The original Delivery Fund (Capital Receipts) funding of £13,576m was formally approved in February 2018. An updated spend profile was approved in February 2020.

All requested resources to be funded by Capital Receipts have been aligned with key priorities and plans; such as the Corporate Plan, seven Corporate Programme Workstreams, Savings, and Transformation.

The following report outlines key information for the maintenance of the Delivery Fund, and will be provided to CMT on a monthly basis.

#### Section 1: Summary of resources by Directorate to be funded by Capital Receipts

Table 1 summarises the Delivery Fund (Capital Receipts) programme totalling £13,576m over the 5 year period (2017-2022)

|       | Number of requests   | Approved resources (£000) as per Capital Programme/ Capital Receipts Strategy |       |       |       |       |        |  |  |  |
|-------|----------------------|---|-------|-------|-------|-------|--------|--|--|--|
| Nu    | Nulliber of requests | 17/18   | 18/19 | 19/20 | 20/21 | 21/22 | Total  |  |  |  |
| Total | 116                  | 1,319   | 3,182 | 4,540 | 4,069 | 467   | 13,576 |  |  |  |

Note: These figures include a contingency pot of £2,179k

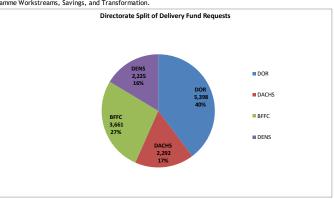
| TABLE 1     |                    |       |                           |       |       |       |        |  |  |
|-------------|--------------------|-------|---------------------------|-------|-------|-------|--------|--|--|
| Directorate | Number of requests |       | Approved resources (£000) |       |       |       |        |  |  |
|             |                    | 17/18 | 18/19                     | 19/20 | 20/21 | 21/22 | Total  |  |  |
| DOR         | 46                 | 755   | 909                       | 752   | 2,516 | 467   | 5,398  |  |  |
| DACHS       | 17                 | 462   | 802                       | 910   | 118   | -     | 2,292  |  |  |
| BFFC        | 22                 | 52    | 1,093                     | 1,544 | 972   | -     | 3,661  |  |  |
| DENS        | 32                 | 50    | 379                       | 1,334 | 463   | -     | 2,225  |  |  |
| Total       | 117                | 1,319 | 3,182                     | 4,540 | 4,069 | 467   | 13,576 |  |  |

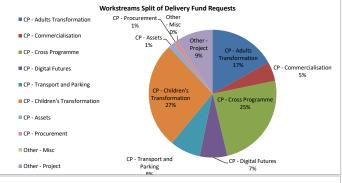
Table 2: Summary of resources by workstreams

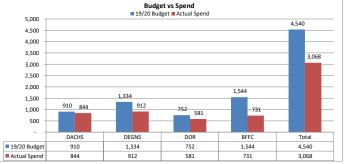
| Workstream                | Number of requests | 17/18 | 18/19 | 19/20 | 20/21 | 21/22 | Total  |
|---------------------------|--------------------|-------|-------|-------|-------|-------|--------|
| CD Adults Transformation  | 17                 | 462   | 802   | 910   | 118   | 0     | 2,292  |
| - Commercialisation       | 13                 | 20    | 139   | 185   | 319   | 0     | 663    |
| - Cross Programme         | 13                 | 156   | 207   | 350   | 2,250 | 365   | 3,328  |
| 🕩 - Digital Futures       | 14                 | 391   | 216   | 221   | 115   | 0     | 943    |
| Transport and Parking     | 11                 | 0     | 203   | 778   | 69    | 0     | 1,050  |
| Children's Transformation | 23                 | 66    | 1,093 | 1,544 | 972   | 0     | 3,675  |
| CP - Assets               | 3                  | 0     | 9     | 109   | 75    | 0     | 193    |
| CP - Procurement          | 3                  | 0     | 112   | 51    | 0     | 0     | 163    |
| Other - Misc              | 0                  | 0     | 0     | 0     | 0     | 0     | 0      |
| Other - Project           | 21                 | 224   | 400   | 392   | 151   | 102   | 1,268  |
| Total                     | 118                | 1,319 | 3,182 | 4,540 | 4,069 | 467   | 13,576 |

Section 2: Outturn Position 2019-20
Table 3 shows the 2019/20 budget (including unspent funds from 2018/19). These are requests that have been approved by CMT.

| TABLE 3     |              |         |          |  |  |  |  |
|-------------|--------------|---------|----------|--|--|--|--|
| Directorate | 19/20 Budget | Outturn | Variance |  |  |  |  |
| Directorate | £'000        | £'000   | £'000    |  |  |  |  |
| DACHS       | 910          | 844     | - 66     |  |  |  |  |
| DEGNS       | 1,334        | 912     | - 422    |  |  |  |  |
| DOR         | 752          | 581     | - 171    |  |  |  |  |
| BFFC        | 1,544        | 731     | - 813    |  |  |  |  |
| Total       | 4,540        | 3,068   | - 1,472  |  |  |  |  |







#### Section 3: Delivery Fund Requests.

Requests for transformation funds will come under 4 category's:

1. New request for additional delivery funding - not relating to any previous delivery fund requests

Example: bringing in independent expert help (cost of £100k) to initiate a new project to realise a new saving or mitigate existing savings

2. New request within current delivery fund envelope - not relating to any previous delivery fund requests

Example: bringing in independent expert help (cost of £100k) to initiate a new project to realise a new saving or mitigate existing savings (possible due to other delivery fund projects being underspent or not going ahead/approved)

3. Change request within current delivery fund envelope - relating to previous delivery fund request

Example: taking a different approach to achieving an existing saving/transformation (e.g., previously, paying £50k back fill for internal employee) by bringing in independent expert help (cost of £100k) to work on existing project 4. Re-approval of original delivery fund request - unchanged request requiring re-approval

Example: bringing in independent expert help (cost of £100k) to work on existing project, as originally planned

Section 4: Delivery Fund Contingency
List of CMT - approved Delivery Fund Contingency (Linked to existing projects)

| Lead Officer | Dir       | Ref Number | 18-19 | 19-20 | 20-21 | 21-22 | Total | Finance<br>endorsed | Director<br>endorsed | Description                      |
|--------------|-----------|------------|-------|-------|-------|-------|-------|---------------------|----------------------|----------------------------------|
| Shella Smith | Resources | DUF-CORP   | 0     | 0     | 20    | 0     | 20    | KN                  | JY                   | Psychometric Assessment Training |

# Appendix 6

|         |                                      |   | Balance<br>31.03.19<br>£ '000 | 2019/20<br>Transfers In<br>£ '000 | 2019/20<br>Transfers Out<br>£ '000 | Balance<br>31.03.20<br>£ '000 |
|---------|--------------------------------------|---|-------------------------------|-----------------------------------|------------------------------------|-------------------------------|
|         | General Fund Reserves                |   |                               |                                   |                                    |                               |
|         | General Fund Minimum<br>Balance      | Minimum level of unallocated reserves, 5% of net revenue budget   | (7,500)                       |                                   |                                    | (7,500)                       |
|         | Earmarked Reserves                   |   |                               |                                   |                                    |                               |
|         | Emergency Planning/Brexit Reserve    | To cover for unforseen emergencies not budgeted for and costs arising from Brexit   | (305)                         | (410)                             |                                    | (715)                         |
| Pag     | Other Reserves                       | A variety of small reserves held to cover future unforseen expenditure  | 0                             |                                   |                                    | 0                             |
| Page 86 | Communications Reserve               | To allow for investment in communications strategies and engaging with the public   | (200)                         |                                   |                                    | (200)                         |
|         | Housing Benefit Subsidy Loss Reserve | To provide for any potential clawback from central government of housing benefit subsidy following audit of the annual housing subsidy claim. | (150)                         | (150)                             |                                    | (300)                         |
|         | Public Health                        | The Public Health Grant is ring-fenced so any underspend is carried forward and spent in future years   | (620)                         |                                   | 60                                 | (560)                         |
|         | Schools Deficit Liability            | To fund potential deficits of schools that may become academies in the future   | (800)                         | (200)                             | 150                                | (850)                         |
|         | Climate Change                       | To allow for investment to address the climate emergency  | (250)                         |                                   | 37                                 | (213)                         |
|         | Legal and Taxation Reserve           | To meet potential one-off legal or tax liabilities  | 0                             | (300)                             |                                    | (300)                         |
|         | Organisational Change                | To help meet the cost of the Council's change programmes that cannot be charged to capital  | (2,323)                       | (772)                             |                                    | (3,095)                       |

|         |  |  | Balance<br>31.03.19 | 2019/20<br>Transfers In | 2019/20<br>Transfers Out | Balance<br>31.03.20 |
|---------|--|--|---------------------|-------------------------|--------------------------|---------------------|
|         |  |  | £ '000              | £ '000                  | £ '000                   | £ '000              |
|         | <b>General Fund Reserves</b>                   |  |                     |                         |                          |                     |
|         | Pension Liabilities                            | To cover potential future Pension Fund liabilities arising from employer pension contribution rate fluctuations  | (1,100)             | (758)                   | 758                      | (1,100)             |
|         | Commercial Property Liabilities                | To manage urgent liabilities associated with the Council's property  | (500)               | (1,200)                 |                          | (1,700)             |
|         | Revenue Grant Unapplied Reserve                | To hold Revenue Grant balances where the conditions for use have been met but relevant expenditure has not yet been incurred   | (3,214)             |                         |                          | (3,214)             |
| Pag     | Self insurance                                 | To meet estimated liabilities in connection with internally-<br>held risks related to the Council's Insurance programme  | (5,541)             |                         |                          | (5,541)             |
| Page 87 | Capital Financing Smoothing Reserve            | To smooth funding across the period of the Medium Term Financial Strategy  | (2,338)             | (1,801)                 |                          | (4,139)             |
|         | IT and Digital Reserve                         | To replace IT and digital equipment that has passed its useful life to improve operational efficiency  | (1,500)             | (778)                   |                          | (2,278)             |
|         | Flexible Capital Receipts Reserve              | To allow for potential slippage in the delivery of capital receipts to fund transformation as well as funding beyond the end of the flexible capital receipts directive in 2021/22 | (8,137)             |                         |                          | (8,137)             |
|         | Direct Revenue Financing of Capital<br>Reserve | To support the capital programme to bring down the associated revenue costs of capital financing such as external interest and Minimum Revenue Provision (MRP                      | 0                   |                         |                          | 0                   |
|         | Redundancy Reserve                             | To fund costs of redundancy  | (500)               | (920)                   | 420                      | (1,000)             |
|         | Demographic & Cost-Led Pressures               | To provide for potential cost pressures arising from demographic or other demand led services  | (2,000)             |                         |                          | (2,000)             |
|         | Abortive Capital Cost Reserve                  | To provide for the cost of feasibilty studies that do not progress into capital schemes  | (500)               |                         |                          | (500)               |

| Appendix ( | 6 |
|------------|---|
|------------|---|

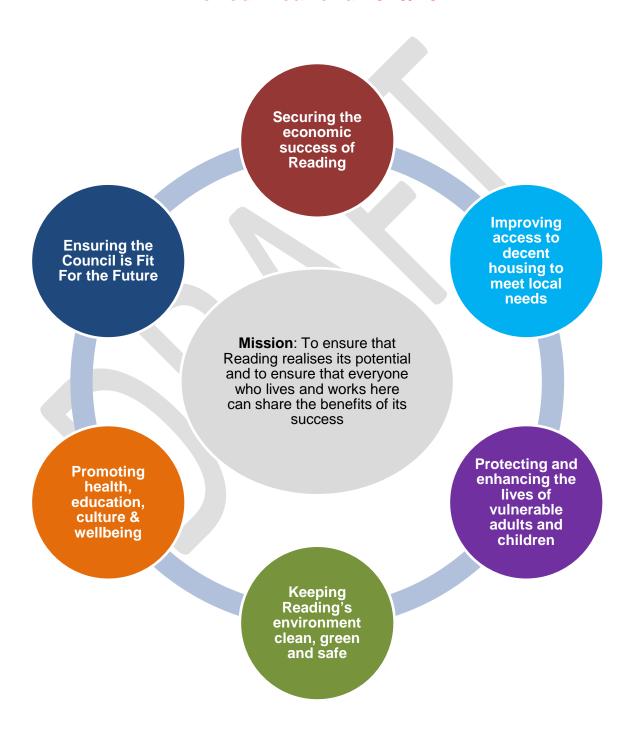
|                                   |   | Balance<br>31.03.19 | 2019/20<br>Transfers In | 2019/20<br>Transfers Out | Balance<br>31.03.20 |
|-----------------------------------|---|---------------------|-------------------------|--------------------------|---------------------|
| Conoral Fund Docoruos             |   | £ '000              | £ '000                  | 900' £                   | £ '000              |
| General Fund Reserves             |   | (2,000)             |                         |                          | (2,000)             |
| Business Rates Smoothing          | To provide for the potential downturn in the economy that would reduce the level of Business Rates        | (2,000)             |                         |                          | (2,000)             |
| Advice & Wellbeing Hub            | To enable the original 3-year programme to be commissioned from 2020/21                                   | 0                   | (240)                   |                          | (240)               |
| Total Earmarked Reserves          |   | (32,440)            | (7,529)                 | 1,888                    | (38,081)            |
| Total General Fund Reserv         | /es   | (39,940)            | (7,529)                 | 1,888                    | (45,581)            |
| Ringfenced Reserves               |   |                     |                         |                          |                     |
| Schools Reserves                  |   | (0.000)             | (4(0)                   |                          | (0 (77)             |
| School Balances                   | Schools are able to carry forward any underspends on their budgets  | (2,208)             | (469)                   |                          | (2,677)             |
| Dedicated Schools Grant           | This is in deficit due to overspends in high needs block. This is planned to be repaid by 31st March 2023 | 1,606               |                         | 163                      | 1,769               |
|                                   |   | (603)               | (469)                   | 163                      | (909)               |
| Housing Revenue Account           | Reserves  |                     |                         |                          |                     |
| HRA/Major Repairs Account Balance | Represents the balance carried forward on these accounts  | (33,907)            | (1,710)                 |                          | (35,617)            |
| North Whitley PFI                 | To provide a smoothing reserve for PFI payments   | (9,748)             |                         |                          | (9,748)             |
|                                   |   | (43,655)            | (1,710)                 | -                        | (45,365)            |

|                        | Balance<br>31.03.19<br>£ '000 | 2019/20<br>Transfers In<br>£ '000 | 2019/20<br>Transfers Out<br>£ '000 | Balance<br>31.03.20<br>£ '000 |
|------------------------|-------------------------------|-----------------------------------|------------------------------------|-------------------------------|
| General Fund Reserves  |                               |                                   |                                    |                               |
| Total Revenue Reserves | (84,198)                      | (9,708)                           | 2,051                              | (91,855)                      |

# Shaping Readings Future – Our Corporate Plan 2018-21

# **Performance Report**

Period: Year end 2019/20



## **EXECUTIVE SUMMARY**

This report sets out how the Council has performed at year end 2019/20 to deliver the mission and priorities for Reading Borough Council as set out in the Corporate Plan for 2018-21. Our priorities are:



Securing the economic success of Reading



Improving access to decent housing to meet local needs



Protecting and enhancing the lives of vulnerable adults and children



Keeping Reading's environment clean, green and safe



Promoting health, education, culture & wellbeing



**Ensuring the Council is Fit For the Future** 

The report focuses on progress against the Council's priorities and the 39<sup>1</sup> headline performance measures that directorates have identified that best demonstrate progress in achieving the outcomes.

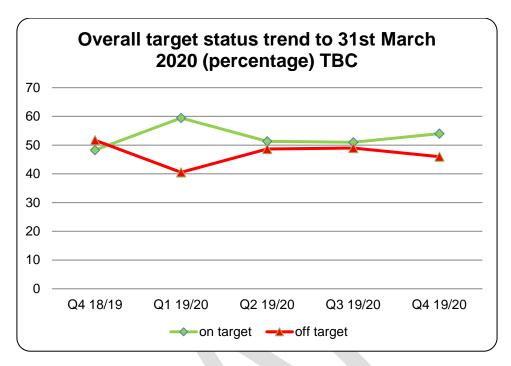
Through service plans the Council carries out wider work to measure performance and quality. This report is intended to provide an overview of the contribution that the Council makes across all its activities to improving Reading as a place to live, work and visit.

1

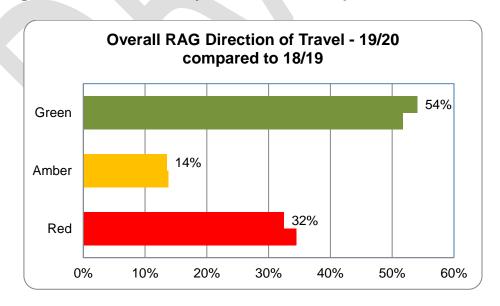
<sup>1 37</sup> are reported annually. 2 measures are based on survey results scheduled for alternate years

## Performance Overview year end 18/19 compared to Year 19/20<sup>2</sup>

## **Target Status**



## Percentage overall status trend year end 18/19 compared to 19/203



<sup>&</sup>lt;sup>2</sup> Results for 6 measures are currently outstanding so the above charts could change

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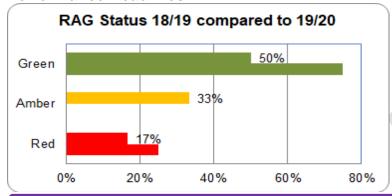
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<sup>&</sup>lt;sup>3</sup> 19/20 results have percentage figures against the RAG Status



# PRIORITY: Securing the economic success of Reading

#### **Performance Headlines**





# **Areas Performing Well or Improving**

(Measures which have achieved target)

To be updated once all results received



Percentage of people aged 18 -64 who are economically active



# **Areas for Improvement**

(Measures which have not achieved targets and direction of travel worsened)

To be updated once all results received



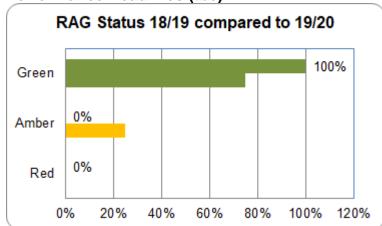
Reduction in percentage of young people Not in Education, Employment or Training (NEET)

| Priority  | Measure of Success   | Type -<br>Local /<br>National | Good<br>- High<br>or low | 2018/19  | 2019/20<br>Q3        | 2019/20<br>Result                       | 2019/20<br>Target | Directio<br>n of<br>travel | Average for comparator group | Comments   |
|---|--|-------------------------------|--------------------------|----------|----------------------|---|-------------------|----------------------------|------------------------------|--|
| Securing the<br>Economic<br>Success of<br>Reading | Average journey times to the town centre by public transport                                     | National                      | High                     | 22 mins  | Annual               | To<br>Follow                            | 21 mins           |                            |                              | On-going work with Reading buses to secure improvements to pinch points where possible and reduce journey times  |
| Securing the<br>Economic<br>Success of<br>Reading | Percentage of people<br>aged 16 - 64 who are<br>economically active                              | National                      | High                     | 80.80%   | 81.2%                | 81.7%                                   | 80.90%            |                            | 81.90%                       | Economically active people in Reading have marginally decreased over the past 3 months.  Reading is below the average for the South East region (82%). Latest data covers the period to Jan 19 – Dec 19  |
| Securing the<br>Economic<br>Success of<br>Reading | Growth in Business<br>Rates Tax Base   | National                      | High                     | 3.47%    | Annual               | Due 22/05                               | 2.00%             |                            | Not Available                | Debit increase in comparison to 31/03/2019 (£137,981,990) against 30/06/2019 (144,374,753), the raw increase being 4.63%. Factor the current net rates against the increase in multiplier to adjust the net debit to 141,140,288 bringing the current increase to 2.29%. This can fluctuate throughout the year as RV's are bought in and removed from the lists and exemptions applied.   |
| Securing the<br>Economic<br>Success of<br>Reading | Superfast broadband coverage   | National                      | High                     | On track | 98.82%               | 98.82%                                  | 100%              |                            |                              | BT Openreach had been keeping to their remedial Plan target's, however the impact of COVID-19 has had a significant impact on the roll-out achievable so estimates have now been received suggesting a 21/22 revised final completion with slippage likely of 6 months to July 21.  Current coverage percentage 98.82% but with prospects remaining good of achieving final completion target, albeit on a lengthened timeframe. |
| Securing the<br>Economic<br>Success of<br>Reading | Reduction in percentage<br>of young people Not in<br>Education, Employment<br>or Training (NEET) | National                      | Low                      | 4.00%    | Not<br>Availabl<br>e | 3.1%<br>NEET<br>6.9% inc<br>Unknow<br>n | 1.90%             | _                          |                              | As at April 2020, our year 12 NEETs figure at 2.2% is significantly lower than our statistical neighbours We are actively tracking our NEET young people, with over 86% having a recent contact in the last month, and 13.7% have been contacted in the past 6 months with no young people not being contacted 7 months or more, the only LA within our statistical neighbour cohort hitting 0%                                  |
| Securing the Economic Success                     | Gross Value Added<br>(GVA) per worker  | National                      | High                     | £64,152  | Annual               | 64152                                   | £67,410           |                            |                              | Gross Value Added (GVA) is the measure of the value of goods and services produced in an area. Annual measure  |



# Improving access to decent housing to meet local needs

## **Performance Headlines (tbc)**





# **Areas Performing Well or Improving**

(Measures which have achieved target and direction of travel improved) To be updated once all results received



Total number of cases where positive action was successful in preventing homelessness



Numbers of families in bed & breakfast accommodation (shared facilities) - snapshot (Excellent performance



Percentage of Houses of Multiple Occupation (HMO's) licensed under mandatory licensing schemes

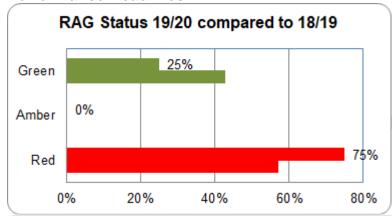


# **Areas for Improvement**



# Protecting and enhancing the lives of vulnerable adults and children

#### **Performance Headlines**





# **Areas Performing Well or Improving**

(Measures which have achieved target and direction of travel improved)



Decrease the permanent new admissions to Residential or Nursing care per 100,000 population **Older People (65+)** 



Timeliness of Early Help Assessments (Percentage completed within timescale 5 weeks)



# **Areas for Improvement**

(Measures which have not achieved targets and direction of travel worsened



Reducing the number of days that people are unable to leave hospital because of social care delays (bed days)



Increase the number of service users (Adults) receiving direct payments



permanent new admissions to Residential or Nursing care per 100.000 for adults **under 65** 



#### Children Looked after

- Numbers
- Placements within 20 miles
- 3+ Placements in year

Classification: OFFICIAL

| Priority   | Measure of Success  | Type -<br>Local /<br>National | Good<br>- High<br>or low | 2018/19 | 2019/20<br>Q3 | 2019/20<br>Result | 2019/20<br>Target | Direction of travel | Average for comparator group | Comments  |
|--|---|-------------------------------|--------------------------|---------|---------------|-------------------|-------------------|---------------------|------------------------------|---|
| Protecting & enhancing the lives of vulnerable Adults & Children | Reducing the number of days that people are unable to leave hospital because of social care delays (bed days) | National                      | Low                      | 1322    | 1342          | 1645              | 1273              | •                   | 3.70% of bed days            | This was a challenging target which was not met across the year due to several factors. Most importantly there was significant pressure across the national and local health system over Winter which led to pressure on both hospitals and the provider / care market. In Reading we worked proactively with our partners to facilitate fast and safe discharges for most people. Unfortunately, there were a small number of individuals which high challenging needs who could not return home and required unique placements. These sometimes took several providers to assess and feedback as to whether they could provide the right support to these patients. This led to delays as the individuals were deemed 'medically fit'. Moving into 2020/21 we have new frameworks and providers that we are working with to ensure capacity and a faster discharge process.  Note – due to the COVID19 Pandemic, national collection of DToC data was suspended in March 2020 |
| Protecting & enhancing the lives of vulnerable Adults & Children | Increase the number of service users (Adults) receiving direct payments                                       | National                      | High                     | 17.87%  | 18.83%        | 19.68%            | 22%               |                     | 24%<br>(CIPFA<br>2018/19)    | The percentage of people with a Direct Payment has not reached its annual target although there has been a significant upward trajectory in year and 'year on year' so progress continues to slowly improve. All new cases are now considered for Direct Payments at point of delivery and the secondment of a DP advisor to focus purely on this area of service has had genuine benefits for the uptake and skillset of staff offering Direct Payments. It is hoped that this area will continue to grow over the coming months as the Directorate is committed to increasing choice and control for people who require services and this ties in with the emergence of a PA market.  |

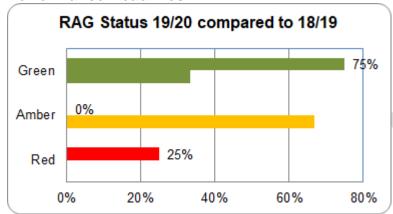
| Priority   | Measure of Success  | Type -<br>Local /<br>National | Good<br>- High<br>or low | 2018/19 | 2019/20<br>Q3 | 2019/20<br>Result | 2019/20<br>Target              | Direction of travel | Average for comparator group  | Comments – to be updated  |
|--|---|-------------------------------|--------------------------|---------|---------------|-------------------|--------------------------------|---------------------|-------------------------------|---|
| Protecting & enhancing the lives of vulnerable Adults & Children | Decrease the permanent<br>new admissions to<br>Residential or Nursing<br>care per 100,000<br>population for Older<br>People (65+) | National                      | Low                      | 442     | 270.94        | 408.87            | 550 per<br>year per<br>100,000 |                     | 579.4<br>(England<br>2018/19) | This quarter saw continued strong progress against this target which reflects the ethos of personalisation and ensuring people are supported to return home wherever possible. With the right care and support and access to new technologies, aids and adaptations people can live a good life at home in the community, whether this be in extra care or supported living.  As at the end of March 2020; 83 Older People at an average of 6.92 per month had been newly permanently admitted whereas at the same point in 2019 there had been 88 people admitted at an average of 7.33 per month. |
| Protecting & enhancing the lives of vulnerable Adults & Children | Decrease the permanent<br>new admissions to<br>Residential or Nursing<br>care per 100,000 for<br>adults under 65                  | Local                         | Low                      | 15.8    | 12.01         | 15.71             | 13                             | •                   | 13.9<br>(England<br>2018/19)  | This target saw an increase in the last quarter which saw it go above target. Small numbers create significant shifts in the overall result and although most people under 65 can live with care and support in their own community setting there were some individuals with very complex needs who required a 24-hour care environment to maintain their health and safety.  As at the end of March 2020; 17 Younger People at an average of 1.42 per month had been newly permanently admitted. At the same point in 2019 there had also been 17 people admitted at an average of 1.42 per month. |
| Protecting & enhancing the lives of vulnerable Adults & Children | Timeliness of Early Help<br>Assessments<br>(Percentage completed<br>within timescale 5<br>weeks)                                  | Local                         | High                     | 93%     | 99%           | 95%               | 95%                            |                     |                               | A consistent focus on timeliness has resulted in a high % of Early Help Assessments are completed within timescale. The quality of intervention is reflected by a low re-referral rate (2%) of cases closed to Early Help in 2019/20 not re-presenting to children's services within 6 months.  |

| Priority   | Measure of Success   | Type -<br>Local /<br>National | Good<br>- High<br>or low | 2018/19 | 2019/20<br>Q3 | 2019/20<br>Result | 2019/20<br>Target | Direction of travel | Average for comparator group | Comments – to be updated  |
|--|--|-------------------------------|--------------------------|---------|---------------|-------------------|-------------------|---------------------|------------------------------|---|
| Protecting & enhancing the lives of vulnerable Adults & Children | Percentage of placements for children looked after within 20 3miles                      | Local                         | High                     | 68%     | 70%           | 69%               | 75%               | •                   | 81.7% (Stat<br>Neighbours)   | There has been a dedicated response to reducing the number of children placed outside 20 miles. 'Achieving Best Outcome Panels' provide a forum to review children's placements / care packages and secure their permanence, which has had a positive impact on this performance indicator. In order to maintain this downward trend our strategic focus is on increasing our provision locally.  |
| Protecting & enhancing the lives of vulnerable Adults & Children | Percentage of children looked after who have experienced 3+ placements in past 12 months | Local                         | High                     | 12.5%   | 11.5%         | 15.2%             | 11%               | •                   | 10.5% (Stat<br>Neighbours)   | This indicator; although indicating a downward trend, has been influenced by children achieving permanence. Several babies moved from residential assessment placements with their mothers, to foster and then adoptive placements. This is a positive outcome for them. Better matching profiles have been created to also ensure children are placed in the best matches with carers, when coming into care. This however has been influenced by the lack of local provision or emergency placements; and hence led to children experiencing multiple moves, before finding the right match in placement. |
| Protecting & enhancing the lives of vulnerable Adults & Children | Reduced number of children looked after  | National                      | Low                      | 268     | 288           | 277               | 260               | •                   |                              | Prior to Covid-19 BFfC's children looked after numbers reduced to 277 after peaking in October at 291. There is evidence of increased risk for very young children and an increase in the number of children subject to child protection plans, some of which is attributable to the impact of lockdown. There is an anticipated increase in referrals to social care as the lockdown is eased and potentially an increase in demand across all children's social care. Robust senior management monitoring and systems remain in place to oversee demand management.                                       |



# Keeping Reading's environment clean, green and safe

#### **Performance Headlines**





# **Areas Performing Well or Improving**

(Measures which have achieved target and direction of travel improved)



Increased Percentage of household waste sent for re-use, recycling and composting



RBC Carbon Footprint (TBC)



# **Areas for Improvement**

(Measures which have not achieved targets and direction of travel worsened)



Total recorded crime rates (per 1,000 population

Classification: OFFICIAL

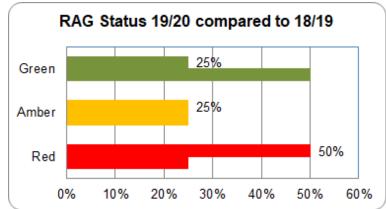
# Corporate Plan measures Appendix 7

|          | Priority  | Measure of Success   | Type -<br>Local /<br>National | Good -<br>High<br>or low | 2018/19          | 2019/20<br>Q3         | 2019/20<br>Result   | 2019/20<br>Target | Direction<br>of travel | Average for comparator group | Comments   |
|----------|---|--|-------------------------------|--------------------------|------------------|-----------------------|---------------------|-------------------|------------------------|------------------------------|--|
| P        | Keeping Readings<br>Environment<br>clean, green and<br>safe | Increased Percentage of<br>household waste sent<br>for re-use, recycling and<br>composting                                   | National                      | High                     | 32.00%           | 36.5%                 | 35.3%               | 35%               |                        |                              | This figure is projected to increase further with the introduction of food waste collections and a smaller bin for waste sent to landfill  |
|          | Keeping Readings<br>Environment<br>clean, green and<br>safe | Reading Borough<br>Carbon Footprint (kilo<br>tonnes of CO2 emissions<br>eq)  | National                      | Low                      | 556kTe<br>(2017) | Annual<br>Figure      | To<br>Follow        | 658 KTe           |                        | not<br>applicable            | Reading's CO2 emissions were 556kTe in 2017 (the most recent year for which data is available), significantly below the 2020 target of 658kTe set in the current Reading Climate Change Strategy 2013-20. Emissions fell at a similar rate to the previous year. The adoption of the goal of a 'carbon neutral Reading by 2030' in the climate emergency declaration in Feb 2019 will require more ambitious reductions in emissions in future years. The indicator will therefore be reassessed to reflect this when the 3rd Reading Climate Change Strategy is finalised later this year |
| Page 102 | Environment clean, green and safe                           | Improvement in NO2 in Air Quality Monitoring Area (as measured annual average concentration um3) over the course of the plan | Local                         | Low                      | 35               | Annual<br>Figure      | To<br>Follow        | 34                |                        |                              | The programme to retrofit Reading Buses via grant funding has been delayed due to technical and supply chain issues. The current full delivery timetable is June 2020  |
|          | Keeping Readings<br>Environment<br>clean, green and<br>safe | Improved Satisfaction with clean streets   | Local                         | High                     | every 2<br>years | every<br>two<br>years | No<br>result<br>due | every 2<br>years  | N/A                    |                              | Next survey scheduled to take place in 2020/21   |
|          | Keeping Readings<br>Environment<br>clean, green and<br>safe | Improved satisfaction with local areas as a place to live  | Local                         | High                     | every 2<br>years | every<br>two<br>years | No<br>result<br>due | every 2<br>years  | N/A                    |                              | Next survey scheduled to take place in 2020/21   |
|          | Keeping Readings<br>Environment<br>clean, green and<br>safe | Reduction in total<br>recorded crime rates<br>(per 1,000 population  | National                      | High                     | 7.126            | 8.358                 | 8.358               | 7.864             | •                      | 7.864                        | Reading has seen a slight increase in the number of crimes / 1,000 since the 2019/20 and this is very much in line with the similar group average. Reading remains about average within the our Most Similar Group.  |
|          |   |  |                               |                          |                  |                       |                     |                   |                        |                              |  |



# Promoting health, education, culture & wellbeing

#### **Performance Headlines**





# **Areas Performing Well or Improving**

(Measures which have achieved target and direction of travel improved)



Percentage of adults (aged 18+) classified as overweight or obese



Increased participation at Council Cultural Venues (Town Hall & Museum, Hexagon, South Street)



Active Lives Survey – levels of activity



# **Areas for Improvement**

(Measures which have not achieved targets and direction of travel worsened)



Smoking prevalence in adults in routine and manual occupations (18-64) – current smokers



- Secondary Fixed Term exclusions
- Gap in attainment KS2

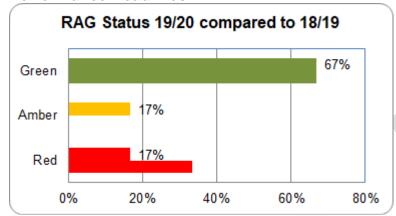
|        | Priority  | Measure of Success   | Type -<br>Local /<br>National | Good<br>- High<br>or low | 2018/19 | 2019/20<br>Q3 | 2019/20<br>Result | 2019/20<br>Target | Direction of travel | Average<br>for<br>comparato<br>r group  | Comments  |
|--------|---|--|-------------------------------|--------------------------|---------|---------------|-------------------|-------------------|---------------------|---|---|
|        | Promoting Health,<br>Education,<br>Culture &<br>Wellbeing | Reduction in Secondary<br>Fixed Term exclusions -  | National                      | Low                      | 528     | Annual        | 723               | 700               | •                   | 1088                                    | Result for 18/19 below target and substantially below comparator group. This could be evidence of the early impact of our work with schools therapeutic thinking. 19/20 Data as at August 19  |
| •      | Promoting Health,<br>Education,<br>Culture &<br>Wellbeing | Key Stage 2 results<br>(Reading, Writing, Maths<br>expected level+) - gap in<br>attainment                 | National                      | Low                      | 28.3    | Annual        | 30.2              | 9                 | •                   | 22.1<br>(Statistical<br>Neighbours<br>) | Our performance continues to outperform the comparator group with the disadvantage gap reducing year on year. However, Govt changes to both curriculum and the new Ofsted framework may impact on further reductions.                             |
| Page   | Promoting Health,<br>Education,<br>Culture &<br>Wellbeing | Level 3 results<br>(Attainment 8) - gap in<br>attainment   | National                      | Low                      | 35.8    | Annual        | 30.6              | 17                |                     | 25.2<br>Statistical<br>Neighbours       | Data remains as provisional data until results published in Feb 2020. (*Provisional) 19/20 data for August 19   |
| ge 104 | Promoting Health,<br>Education,<br>Culture &<br>Wellbeing | Increased Percentage of schools rated good or outstanding  | National                      | High                     | 94%     | 91.7%         | 91.7%             | 94%               |                     | 90%                                     | We are already meeting the 19/20 target. The new Ofsted framework introduced from September 2019 may mean that our performance drops until the new framework is embedded in schools.  |
| •      | Promoting Health,<br>Education,<br>Culture &<br>Wellbeing | Increased participation<br>at Council Cultural<br>Venues (Town Hall &<br>Museum, Hexagon,<br>South Street) | Local                         | High                     | 326,200 | 120,100       | 340,394           | 334,500           |                     | N/A                                     | Includes the impact of venue closures in March.   |
|        | Promoting Health,<br>Education,<br>Culture &<br>Wellbeing | Levels of activity –<br>active at least 150<br>minutes per week<br>(Active Lives Survey)                   | Local                         | High                     | 65.50%  | 68%           | 68%               | 66%               |                     |   | Annual Sport England Survey results released Sept 19 show increase in participation rates. High potential statistical error due to sample size limits confidence. Procurement of new Leisure partner to be considered at policy Committee 20/1/20 |
|        |   |  |                               |                          |         |               |                   |                   |                     |   |   |

|          | Priority  | Measure of Success  | Type -<br>Local /<br>National | Good<br>- High<br>or low | 2018/19            | 2019/20<br>Q3      | 2019/20<br>Result      | 2019/20<br>Target | Direction of travel | Average<br>for<br>comparato<br>r group | Comments – to be updated  |
|----------|---|---|-------------------------------|--------------------------|--------------------|--------------------|------------------------|-------------------|---------------------|--|---|
|          | Promoting Health,<br>Education,<br>Culture &<br>Wellbeing | Smoking prevalence in adults in routine and manual occupations (18-64) – current smokers. | National                      | Low                      | 27.0%<br>(2018)    | 28.3%<br>(2019)    | 28.3%<br>(2019)        | 26.5%<br>(2019)   |                     | 25.4%<br>(England<br>2019)             | Prevalence in this sub-group has increased marginally but remains within the range of both the national average and those of council areas most like Reading. Work continues with the provider to ensure that the service is targeted in areas of greatest need - for example clinics are held in areas of greatest socio-economic deprivation. The provider is also paid a higher tariff for achieving quits in targeted groups like this. During the period of COVID19 Lockdown, our providers have adapted to ensure continued support is available, particularly our target group as listed here. |
| Page 105 | Promoting Health,<br>Education,<br>Culture &<br>Wellbeing | Percentage of adults<br>(aged 18+) classified as<br>overweight or obese                   | National                      | Low                      | 59.2%<br>(2016/17) | 55.7%<br>(2017/18) | 55.7%<br>(2017/1<br>8) | 60%<br>(18/19)    |                     | 62%<br>(England<br>2017/18)            | "Eat 4 Health" adult weight management course was delivered in Reading for the 2019-20 year. With 120 people attended 12 courses across Reading. 90% of people lost weight, 59% of whom lost 3% or more of their body weight which is of clinical significance and benefit. A wider review of obesity in Berkshire West is complete and the recommendations from this will be taken forward to inform future service provision in Reading in 2021/22.   |



# PRIORITY: Ensuring the Council is Fit For the Future

#### **Performance Headlines**





# **Areas Performing Well or Improving**

(Measures which have achieved target and direction of travel improved)



Increase in take up of online services

– number of people signed up for an online account



Improve customer satisfaction with our front of house



Council agency spend (excluding Brighter Futures for Children)



# **Areas for Improvement**

(Measures which have not achieved targets and direction of travel worsened)



Percentage of Council Tax collected



Delivery of Medium-Term Financial Strategy – total budget requirement

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|   | Priority   | Measure of Success  | Type -<br>Local /<br>National | Good -<br>High<br>or low | 2018/19 | 2019/20<br>Q3                    | 2019/20<br>Result | 2019/20<br>Target        | Directio<br>n of<br>travel | Average for comparator group | Comments  |
|---|--|---|-------------------------------|--------------------------|---------|----------------------------------|-------------------|--------------------------|----------------------------|------------------------------|---|
|   | Ensuring our<br>Council is fit for<br>the future | Improve customer satisfaction with our front of house service   | Local                         | High                     | 85%     | 95%                              | 86%               | 85%                      |                            | Not Available                | Satisfaction with customer services, those rating the service excellent or good, continues to exceed the target set   |
|   | Ensuring our<br>Council is fit for<br>the future | Increase in take up of<br>online services –<br>number of people<br>signed up for an online<br>account | Local                         | High                     | 80,477  | 91,266                           | To<br>Follow      | 80,425                   |                            | Not Available                | There are currently 91,266 registered online account users exceeding the annual target set by almost 10,000. The increase relates to xxx  |
|   | Ensuring our<br>Council is fit for<br>the future | Delivery of Medium-<br>Term Financial<br>Strategy – total budget<br>requirement                       | Local                         | High                     | 142.9m  | 129,688<br>(Forecast<br>Outturn) | 135,108           | 137,268                  |                            | Not Available                | The provisional outturn on the General Fund revenue account is a £2.160m underspend on budget. Please see the cover report and appendix 1 for the detail  |
| ` | Ensuring our<br>Council is fit for<br>the future | Reducing council<br>agency spend<br>(excluding Brighter<br>Futures for Children)                      | Local                         | Low                      | 6.642   | 3.625                            | 4.9289m           | 9.5m                     | <b>\</b>                   | Not Available                | Cumulative agency spend has exceeded the target set for 19/20.  Agency spend has reduced during 19/20 by over 1.5m with a focus on permanent recruitment resulting in less spend on temporary and agency staff,   |
|   | Ensuring our<br>Council is fit for<br>the future | Percentage of Council<br>Tax collected  | National                      | High                     | 96.41%  | 82.84%                           | 96.17%            | 97.1%<br>(83.57%<br>Dec) | •                          | 97.03%                       | Final collection is 0.83% behind target set and sees a reduction against the overall collection compared to the prior year of 0.24%. We had seen month on month improvement compared to prior year until the final month, this could be multiple factors, i.e. Covid-19 plus outstanding payment file issues. We do however continue to monitor prior year collection |
|   | Ensuring our<br>Council is fit for<br>the future | Percentage of<br>Business Rates<br>collected  | National                      | High                     | 97.89%  | 78.02%                           | 97.71%            | 97.25%<br>(81.4%<br>Dec) |                            | 97.38%                       | Collection target achieved, although marginally lower than previous year by 0.18%   |

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#### READING BOROUGH COUNCIL

#### REPORT BY EXECUTIVE DIRECTOR OF RESOURCES

TO: POLICY COMMITTEE

DATE: 22 JUNE 2020

TITLE: COVID-19 - FINANCIAL IMPLICATIONS

LEAD CLLR BROCK PORTFOLIO: LEADERSHIP

**COUNCILLOR:** 

SERVICE: ALL WARDS: BOROUGHWIDE

LEAD OFFICER: PETER ROBINSON TEL:

JOB TITLE: INTERIM ASSISTANT E-MAIL: peter.robinson@reading.gov.uk

DIRECTOR FINANCE

#### 1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1. This report sets out the projected financial impact of Covid-19 on the Council's revenue and capital budgets up to 31 March 2021. The figures reflect the amounts included on the Council's second Covid-19 return submitted to the Ministry of Housing Communities and Local Government (MHCLG) on 15 May 2020.
- 1.2. The figures will continue to be refined and reported as we move forward.
- 1.3 The financial implications of Covid-19 have been assessed, estimated and modelled on a quarterly basis up to 31 March 2021. The financial implications included on the April return to MHCLG were modelled up to 30 September 2020 (Quarter 2). It was felt prudent to extend estimated costs to March 2021 in light of the Prime Minister's recent announcements regarding the gradual easing of lockdown which indicate a protracted period of recovery.
- 1.4 The Council has to date received a total of £8.3m in general support funding from Central Government in two tranches: £3.8m and £4.5m respectively.
- 1.5 Net pressures to the end of Quarter 2 have reduced from £14.2m to £7.7m as assumptions and estimates have been refined and the second tranche of government funding has been received.
- 1.6. Based on the latest projections, the total net additional cost to the Council including BFfC, as a result of Covid-19 up to 31 March 2021 is £15.6m.
- 1.7 £1.1m of the total net cost was incurred in 2019/20. The net impact in 2020/21 compared to budget is a projected pressure of £14.5m.
- 1.8 The report identifies £3.4m of 2020/21 MTFS savings as being at risk as a result of Covid-19. Assumed income will be delayed, albeit a significant percentage may only be temporary whilst lockdown and recovery ensue.

- 1.9 The Council's Medium-Term Financial Strategy includes all prior year savings and income targets within the base budget for future years. Without further action, there is therefore a significant risk that the Council's 2021/22 budget will need to find equivalent levels of savings to address the gap which will arise if these savings are not realised or mitigated on an ongoing basis.
- 1.10 In addition, it is highly likely that Council Tax and Business Rates collection will be impacted. Whilst it is too early to quantify with any certainty, as the strength of economic recovery will be a key factor, projected losses, based on a comparison between April 2020 collection (adjusted to account for the additional business rate relief) and 2019/20 collection rates, indicate a potential total loss of £7.559m with the Council's share being £5.149m. This amount would be a hit to the 2021/22 budget in addition to the lost savings/income outlined above.
- 1.11 HRA rent collection is being closely monitored and will be kept under review. Whilst the collection rate for April was at 97.48% slightly above the budgeted collection rate of 97.40% it is lower than the pre-Covid collection rate of 98.75%.
- 1.12 The Council's Capital Programme cannot be delivered as originally planned due to delays caused by lockdown restrictions and social distancing, risks associated with investment property investment and slippage of capital receipt forecasts.
- 1.13 The estimates of the impact of Covid 19 on the Council include:
  - Actual and projected expenditure arising directly as a result of the pandemic necessary to either maintain existing services or to provide additional capacity/services as necessary;
  - Actual and projected income lost due to reduced demand and cessation of services; and the
  - Projected impact on the delivery of agreed MTFS savings as a result of the refocussing of staff to respond to the Pandemic.
- 1.14 All councils are required to provide a monthly return to MHCLG setting out the estimated financial impact of Covid-19 on their respective authority. Going forward, the Council's regular financial performance reports will incorporate the updated projections.

#### 2. RECOMMENDED ACTIONS

2.1. That Members note the projected financial impact of Covid-19 as set out in this report and that further reports on both the forecast position and outcomes arising in respect of next steps, will be brought to this Committee in due course.

Appendix 1 Financial Implications by Directorate

#### 3. POLICY CONTEXT

- 3.1. Central Government have so far announced a total of £3.2 billion of funding to support local authorities in responding to the Covid-19 pandemic, made up of two tranches of £1.6 billion, each tranche being allocated on a different basis. The Council's total share of this funding is £8.333m:
  - £3.839m of the 1st tranche which was received on 27 March 2020 and;
  - £4.494m of the 2<sup>nd</sup> tranche which was received on 14 May 2020
- 3.2 The grant is expected to cover costs incurred in the response including: social care, support to vulnerable residents, lost income, homelessness etc. The grant is not ringfenced but is expected to be used largely to support social care and provider costs, albeit not transfers from hospital that require additional support and which the CCG are expected to fund.
- 3.3 It is not clear at this stage whether any further funding for local authorities will follow.
- 3.4 Separately, the Council has received £24.7m from Government in order to fund grant payments to small businesses through the Small Business Grant Fund.
- 3.5 The Council will also receive £53.6m of additional Section 31 grants in respect of compensation for additional business rate reliefs primarily in respect of retail businesses. These grants are intended to compensate for correlating decreases to the Collection Fund balance as a result of reduced business rate bills.
- 3.6 Central Government has announced a £500m hardship fund to support billing authorities in delivering additional relief (£150 per Council Tax bill) to Council Tax payers in receipt of support through the Council Tax Reduction Scheme in their area. The relief will be delivered through reductions to Council Tax bills. The Council's allocation is £0.953m.

#### 4 THE PROPOSAL

#### **Current Position**

4.1 The following table summarises the net overall pressure on the Council:

Table 1. Estimated Net Cost of Covid-19 on the Council

| Directorate     | 19/20 | 20/21 | 20/21 | Total to | 20/21 | Total  | Total per | Increase/  |
|-----------------|-------|-------|-------|----------|-------|--------|-----------|------------|
|                 | Q4    | Q1    | Q2    | end of   | Q3&Q4 | (£m)   | April     | (Decrease) |
|                 | (£m)  | (£m)  | (£m)  | Q2 (£m)  | (£m)  |        | Report    | on Q2      |
|                 |       |       |       |          |       |        | to Q2     | (£m)       |
|                 |       |       |       |          |       |        | (£m)      |            |
| DACHS           | 0.033 | 0.513 | 0.528 | 1.074    | 0.485 | 1.559  | 2.812     | (1.738)    |
| DEGNS           | 0.707 | 6.122 | 4.748 | 11.577   | 6.819 | 18.396 | 12.201    | (0.624)    |
| Children's      |       |       |       |          |       |        |           |            |
| Services (RBC)  | 0.000 | 0.000 | 0.000 | 0.000    | 0.000 | 0.000  | 0.098     | (0.098)    |
| Children's      |       |       |       |          |       |        |           |            |
| Services (BFfC) | 0.025 | 0.729 | 0.487 | 1.241    | 0.192 | 1.433  | 0.834     | 0.407      |
| Resources       | 0.288 | 1.053 | 0.445 | 1.786    | 0.381 | 2.167  | 1.713     | 0.073      |
| Corporate       | 0.000 | 0.000 | 0.000 | 0.000    | 0.000 | 0.000  | 0.000     | 0.000      |

| Capital                   |       |       |       |         |       |         |         |         |
|---------------------------|-------|-------|-------|---------|-------|---------|---------|---------|
| Pressures                 | 0.007 | 0.341 | 0.000 | 0.348   | 0.000 | 0.348   | 0.348   | 0.000   |
| Total Net                 |       |       |       |         |       |         |         |         |
| Pressures                 | 1.060 | 8.758 | 6.208 | 16.026  | 7.877 | 23.903  | 18.006  | (1.980) |
| Gov't Funding             |       |       |       |         |       |         |         |         |
| (1st Tranche)             |       |       |       | (3.839) |       | (3.839) | (3.839) | (0.000) |
| Gov't Funding             |       |       |       |         |       |         |         |         |
| (2 <sup>nd</sup> Tranche) |       |       |       | (4.494) |       | (4.494) | (0.000) | (4.494) |
| Total Net                 |       |       |       |         |       |         |         |         |
| Pressures                 |       |       |       | 7.693   |       | 15.570  | 14.167  | (6.474) |
| 2019/20                   |       |       |       | 1.060   |       | 1.060   | 1.088   | -       |
| 2020/20                   |       |       |       | 6.633   |       | 14.510  | 13.079  | (6.474) |

4.2 Table 2 below represents the figures in Table 1 by type of pressure:

Table 2. Estimated Cost Pressures as a Result of Covid-19

|                                  | 19/20<br>Q4<br>(£m) | 20/21<br>Q1<br>(£m) | 20/21<br>Q2<br>(£m) | Total<br>to end<br>of Q2<br>(£m) | 20/21<br>Q3&Q4<br>(£m) | Total<br>(£m)   | Total per<br>April<br>Report<br>to Q2<br>(£m) | Increase/<br>(Decrease)<br>on Q2<br>(£m) |
|----------------------------------|---------------------|---------------------|---------------------|----------------------------------|------------------------|-----------------|---|--|
| Additional<br>Expenditure -      | 0.240               | 4 202               | 2.040               | 7 220                            | 0.002                  | 0.222           | 0.440   | (0.800)                                  |
| General<br>Reduced<br>Income     | 0.268               | 4.202<br>5.235      | 3.940               | 7.339<br>9.967                   | 0.893<br>5.366         | 15.333          | 8.148<br>11.506                               | (0.809)                                  |
| Impact on<br>Savings<br>Delivery | 0.000               | 0.871               | 0.949               | 1.820                            | 1.618                  | 3.438           | 2.996   | (1,176)                                  |
| Total<br>Pressures               | 1.060               | 10.308              | 7.758               | 19.126                           | 7.877                  | 27.003          | 22.650  | (3.524)                                  |
| Assumed CCG<br>Funding           | (0.000)             | (1.550)             | (1.550)             | (3.100)                          | (0.000)                | (3.100)         | (4.644)                                       | 1.544                                    |
| Total<br>Council<br>Pressure     | 1.060               | 8.758               | 6.208               | 16.026                           | 7.877                  | 23.903          | 18.006  | (1.980)                                  |
| Government Funding               |                     |                     |                     | (8.333)                          |                        | (8.333)         | (3.839)                                       | (4.494)                                  |
| Total Net<br>Pressures           |                     |                     |                     | 7.693                            |                        | 15.570          | 14.167  | (6.474)                                  |
| 2019/20<br>2020/20               |                     |                     |                     | 1.060<br>6.633                   |                        | 1.060<br>14.510 | (1.088)<br>13.079                             | (6.474)                                  |

- 4.3 Excluding the second tranche of Government funding (£4.5m) the primary reasons for the improved six-month position are improved income loss and savings delivery projections. Further details of the gross financial implications by Directorate are set out in Appendix 1 attached.
- Medium Term Financial Strategy Implications
   General Fund Revenue Account

- 5.1. As set out above, the projected impact on the Council's 2020/21 budget is £14.5m. However, recent Central Government announcements such as the timing and level of lock down restrictions and the extension of the employee furloughing scheme indicate that recovery is likely to be protracted and coupled with an economic downturn. It is therefore likely that the ramifications of Covid-19 will extend and impact beyond 31 March 2021.
- 5.2. The MTFP 2020/21 2022/23 assumed a balanced position without recourse to reserves based on agreed savings.
- 5.3. This report identifies £3.4m of 2020/21 savings at risk as a result of Covid-19. The Medium-Term Financial Strategy assumes all prior year savings within future years base budgets. Therefore, unless these savings are delivered, or mitigated on an ongoing basis there will be a budget gap going into 2021/22 and future years.
- 5.4. Similarly, if income levels such as car parking and leisure etc. do not return to previous levels in 2021/22 alternative income streams or savings will need to be delivered.

#### Collection Fund Impact in 2021/22

- 5.5 Council Tax and Business Rates are the main sources of funding for the Council's revenue budget. The Council's council tax demand for 2020/21 is £96m and its share of budgeted business rates is £34.4m. Growth of these funding sources is built into the MTFS.
- 5.6 MTFS projections for 2021/22 onwards assume a nil Collection Fund surplus/deficit each year. Therefore, any significant non-recoverable collection of these income streams has the potential to have a material impact on the Council's budget and MTFS. Early projections of the impact of Covid 19 on collection rates suggest there could be a Collection Fund deficit of £5.1m on the 2021/22 budget.
- 5.7 The following table shows the potential impact of non-collection based on a comparison of collection between April 2019 and April 2020 and a mid-point between worst- and best-case projections for the rest of 2020/21, that if realised would impact on 2021/22. The April 2020 collectable debit for Business Rates has been adjusted (reduced) to take into account the £53.6m of additional business rate reliefs.

Table 3.

|   | Council Tax | <b>Business Rates</b> |
|---|-------------|-----------------------|
|   | £m          | £m                    |
| Total Net Collectable Debit (all preceptors)  | 111.587     | 91.931                |
| % collected as at April 2020                  | 10.17%      | 9.40%                 |
| % collected as at April 2019                  | 10.88%      | 10.67%                |
| Total amount collected April 2020             | 11.347      | 8.599                 |
| Expected amount to be collected in April 2020 |             |                       |
| based on April 2019 collection rate           | 12.145      | 9.758                 |
| Collection Shortfall April 2020               | 0.798       | 1.159                 |
| Estimated Collection Shortfall for 2020/21*   | 3.900       | 3.699                 |
| Council Share of Collection Fund Balance (%)  | 85.56%      | 49.00%                |
| Council Share of Collection Fund Balance (£)  | 3.337       | 1.813                 |

### **Capital Programme**

- 5.8 The Council's Capital Programme is anticipated to underspend significantly in 2020/21 due to lockdown and social distancing requirements, the capacity of the Council's own staff to initiate projects, contractors furloughing their staff and the likelihood of recession. Additionally, due to current conditions it is unlikely that the Council would be in a position to progress significant property investment purchases due to the associated risks of reductions in property values and the potential lack of demand from tenants. However, the extent and financial implications need to be crystalised. The realisation of capital receipts used to fund capital expenditure and thereby reduce the Council's need to externally borrow are also expected to reduce which may conversely put pressure on the Council's revenue budget.
- 5.10 However, reducing the requirement to externally borrow to fund the Capital Programme will result in revenue savings as the revenue costs of capital financing are avoided.

#### Reserves

5.11 The Council has only recently returned to a sustainable financial footing in terms of its general and earmarked reserve levels. Whilst the Council could choose to use earmarked reserves to bridge the projected gap in 2020/21 this would not resolve the underlying budget gap going into future years. It is therefore not a realistic long-term solution and if adopted in the short term would require additional savings to be found in future years to return reserves back to a sustainable level.

#### Other Issues

- 5.12 Reading Transport Limited (RTL) have furloughed staff and are operating a much-reduced service in line with Government expectations that enables access to the Covid-19 Bus Services Support Grant.
- 5.13 Discussions are underway with RTL regarding the re-structuring of existing loan repayments due to the Council, as well as a previously agreed loan drawdown facility of £0.700m in respect of hybrid conversions in order to smooth RTL's cashflow requirements. RTL have previously requested the availability of a further loan facility re its bus replacement programme. Following discussion these orders have been placed on hold.
- 5.14 RTL have indicated that without additional government support they are likely to require a further cash injection later in the year to maintain the operation. A meeting has been set up with the company to discuss their recovery plans.

#### **Next Steps**

- 6.1 In light of the potential impact of Covid 19 on both the Council's current and future years' budgets, and in the absence of any certainty over further government support, it is imperative that action is taken to mitigate these pressures.
- 6.2 To that end, following the Chancellor's announcement on 12 May 2020 that the Government's Coronavirus Job Retention Scheme, also known as the Furlough Scheme, has been extended to 31 October 2020, the Council has agreed to furlough staff (Decision Book report of 29<sup>th</sup> May refers) in areas where due to Covid 19; services are suspended and unlikely to be operational or severely reduced for some considerable

time, e.g. at The Hexagon, South Street, Reading Play, the Museum, Town Hall and Leisure Centres.

Casual staff, which the Council has continued to pay as a 'good will' gesture at their average rate regardless of whether their hours have reduced or stopped will also be included. Staff who are unable to work from home because they are shielding or have caring responsibilities as a result of Covid 19 will also be considered for the scheme. It is estimated that this could ease the pressure on the Council's budget by up to £330k per month.

- 6.3. The Council has also recently taken the decision to recommence its traffic and parking enforcement activity (it is too early to estimate the impact of this in terms of the Council's finances), and Officers will seek to reinstate the Council's full debt recovery procedures as soon as possible in order to mitigate losses. Our procedures are in line with the best practice debt recovery processes specified in the Citizens' Advice Council Tax Protocol.
- 6.4 Officers will also undertake a review of the Council's Medium Term Financial Strategy, including the Capital Programme to identify options for bridging the gap on a sustainable basis and report back to this Committee in the summer at which point the financial impact of the pandemic will be clearer.

## Appendix 1 - Covid-19 Financial Implications by Directorate

#### 1. Adult Social Care and Health - £1.559m Net Pressure (£2.812m in April)

1.1. The following table summarises the actual and projected additional expenditure, reduced income and impact on savings delivery as a result of Covid-19 for the Adult Social Care and Health:

Table 4.

|                        | 19/20<br>Q4<br>(£m) | 20/21<br>Q1<br>(£m) | 20/21<br>Q2<br>(£m) | Total<br>to end<br>of Q2<br>(£m) | 20/21<br>Q3&Q4<br>(£m) | Total<br>(£m) | Total<br>per<br>April<br>Report<br>to Q2<br>(£m) | Increase/<br>(Decrease)<br>on Q2<br>(£m) |
|------------------------|---------------------|---------------------|---------------------|----------------------------------|------------------------|---------------|--|--|
| Additional Expenditure | 0.033               | 1.886               | 1.900               | 3.819                            | 0.130                  | 3.949         | 6.791  | (2.972)                                  |
| Reduced                | 0.033               | 1.000               | 1.700               | 3.017                            | 0.130                  | 3.747         | 0.791  | (2.772)                                  |
| Income                 | 0.000               | 0.000               | 0.000               | 0.000                            | 0.000                  | 0.000         | 0.000  | 0.000                                    |
| Impact on              |                     |                     |                     |                                  |                        |               |  |  |
| Savings<br>Delivery    | 0.000               | 0.178               | 0.178               | 0.355                            | 0.355                  | 0.710         | 0.665  | (0.310)                                  |
| Total                  |                     |                     |                     |                                  |                        |               |  |  |
| Pressures              | 0.033               | 2.064               | 2.078               | 4.174                            | 0.485                  | 4.659         | 7.456  | (3.282)                                  |
| Assumed                |                     |                     |                     |                                  |                        |               |  |  |
| CCG<br>Funding         | (0.000)             | (1.550)             | (1.550)             | (3.100)                          | (0.000)                | (3.100)       | (4.644)  | 1.544                                    |
| Total Net              | (0.000)             | (1.550)             | (1.550)             | (3.100)                          | (0.000)                | (3.100)       | (1.011)  | 1.511                                    |
| Pressures              | 0.033               | 0.514               | 0.528               | 1.074                            | 0.485                  | 1.559         | 2.812  | (1.738)                                  |

#### Additional Expenditure - £3.949m (£6.791m in April)

## 1.2. Commissioning & Improvement - £0.570m (£0.520m in April)

A lump sum payment of 3% has been made to providers covering the 13 weeks April-June and a similar payment for the 13 weeks July-September is assumed within the above figure (subject to an assessment of the situation in early June). Providers have been asked to complete proformas showing the expenditure they have incurred to ensure the 3% is sufficient. The LGA guidance suggests a 10% payment to care providers and some local authorities have paid providers on this basis. A further 7% payment for Reading (bringing our support up to 10%) would cost £1.2m.

Some Providers have started to flag with commissioners that the 3% lump sum isn't sufficient to cover the additional costs incurred as a result of Covid-19. The key costs being the provision of adequate PPE to staff and covering the cost of significant numbers of voids. In a Care Home setting, voids occur when people die, and the beds will not be filled in the near future. This is either due to, Covid-19 being present in the home, or a slowdown of patients being discharged from hospital. For Domiciliary Care Providers, voids occur when there is a slowdown in patients being discharged from hospital and care packages being refused due to the risk of COVID19. In cases where these issues could impact on the longer-term financial sustainability of the provider, the Council may need to consider providing additional financial support to

ensure we have adequate capacity for the future and can meet our duties within the Care Act.

- 1.3. Adult Social Care Operations (Hospital Discharges) - £3,100m (£4,644m per April) To support the NHS, social care is being asked to discharge patients earlier than usual. The CCG have committed to fund all Council expenditure relating to Hospital Discharges including additional staff expenditure, additional homecare hours and care packages. These are being tracked by the department and the funding claimed from the CCG. The final submission to the CCG was for £4.467m (slightly revised from the figure previously reported in April of £4.644m) of planned expenditure for the period April-September and some of the planned activity has been deemed no longer required. The first claim to the CCG has been submitted for April 2020 totalling £0.600m. This contains some upfront costs, and based on current demands on the service, it is now expected that expenditure will be contained within the indicative grant value of £3.100m (Reading's anticipated share of the £1.3bn discharge fund based on adult relative needs formula). Therefore, this forecast has reduced significantly from the April report, and the associated assumed level of CCG funding has reduced by an equal and offsetting amount.
- 1.4. Adult Social Care Operations (Other Covid-19) £0.031m (£1.575m per April)
  Adult Social Care and Finance are tracking the cost of placements created as a result of the Covid-19 pandemic (non-hospital discharge). However, due to the number of deaths across the service, placement costs are currently reducing on a weekly basis rather than increasing. Therefore, at this stage, costs have been removed from this line. However, it is anticipated that once the worst of the pandemic is over, and social distancing measures begin to be relaxed, the demand on Adult Social Care will increase due to an increased flow out of hospital. Also, additional and enhanced care packages maybe required due to the breakdown of carer placements and emergency placements required due to emerging safeguarding risks.
- 1.5. Adult Social Care Operations (PPE) £0.248m (£0.052m per April)

  Additional PPE for front line staff estimated at £5k per week for a full year effect on the assumption that PPE requirements will remain in place during lockdown and recovery periods.

#### Impact on Savings Delivery - £0.710m (0.665m per April)

1.6 A review of 2020/21 MTFS savings as well as 2019/20 non achieved & non mitigated savings has been undertaken and a total of £0.710m is considered to be unlikely to be delivered in 2020/21. The savings include increased use of technology and increasing the number of people on direct payments and are deemed not deliverable at this stage due to the focus of staff resources on Covid-19.

#### Assumed Additional Funding - (£3.100m) (£4.644m per April)

- 1.7. The additional funding of £3.100m relates to the reimbursement of costs forecast to be incurred in respect of hospital discharges which the CCG have committed to fund as set out above. The forecast funding has reduced in line with the expenditure forecast so there is no overall financial impact to the Council.
- 2. <u>Economic Growth and Neighbourhood Services £18.396m Total Net Pressures</u> (£12.201m per April)

2.1. The following table summarises the actual and projected additional expenditure, reduced income and impact on ability to deliver savings as a result of the Covid-19 pandemic for the Economic Growth and Neighbourhood Services Directorate:

Table 5.

| Table 5.   | 1      |         |         |        |         |         |         |           |
|------------|--------|---------|---------|--------|---------|---------|---------|-----------|
|            | 19/20  | 20/21   | 20/21   | Total  | 20/21   | Total   | Total   | Increase/ |
|            | Q4     | Q1      | Q2      | to end | Q3&Q    | (£m)    | per     | (Decrease |
|            | (£m)   | (£m)    | (£m)    | of Q2  | 4 (£m)  | ` ′     | April   | ) on Q2   |
|            | (=:::) | (====)  | (====,  | (£m)   | (       |         | Report  | (£m)      |
|            |        |         |         | (2)    |         |         | to Q2   | (2)       |
|            |        |         |         |        |         |         | (£m)    |           |
| Additional |        |         |         |        |         |         | (2111)  |           |
| Expenditur |        |         |         |        |         |         |         |           |
| e          | 0.000  | 0.692   | 0.541   | 1.233  | 0.571   | 1.804   | (0.005) | 1.238     |
| Reduced    |        |         |         |        |         | 14.06   |         |           |
| Income     | 0.707  | 4.799   | 3.575   | 9.081  | 4.985   | 6       | 10.077  | (0.996)   |
| Impact on  |        |         |         |        |         |         |         |           |
| Savings    |        |         |         |        |         |         |         |           |
| Delivery   | 0.000  | 0.632   | 0.632   | 1.264  | 1.262   | 2.526   | 2.129   | (0.865)   |
| Total      |        |         |         |        |         | 18.39   | 12.20   |           |
| Pressures  | 0.707  | 6.123   | 4.748   | 11.578 | 6.818   | 6       | 1       | (0.623)   |
| Assumed    |        |         |         |        |         |         |         |           |
| additional | (0.000 | (0.000) | (0.000) | (0.000 |         |         |         |           |
| funding    | )      | )       | )       | )      | (0.000) | (0.000) | (0.000) | (0.000)   |
| Total Net  |        |         |         |        |         | 18.39   | 12.20   |           |
| Pressures  | 0.707  | 6.123   | 4.748   | 11.578 | 6.818   | 6       | 1       | (0.623)   |

Additional Expenditure - £1.804m ((£0.005m) in April)

2.2. Housing and Neighbourhood Services Homeless Accommodation - £1.801m (£0.302m per April)

Bed & Breakfast - £1.801m based on 120 beds occupied and the Council only being able to recoup 25% of the cost (£80 per bed per night) based on an iterative improvement per quarter to 31 March 2021, by which time the current expectation is that demand can be managed within budget moving forward. However, this is will need to be closely monitored alongside future requirements relating to lockdown restrictions easing and the position of the economy.

- 2.3. Regeneration & Assets Facilities Management £0.093m (0.040m per April)
  Cleaning Contract the estimated costs of additional cleaning (including casual cleaning) is £0.062m for 6 months reducing to £0.031m for the latter half of the year.
- 2.4. **DEGNS Overhead Accounts Utilities (£0.090m) saving ((£0.106m) per April)** £2.5m spend in 18/19 full year, assuming costs are still at that level and there is a 10% usage reduction in April-June and a 5% reduction in July-September 20 this would lead to a £0.090m saving.

Reduced Income - £14.066m (£10.077m in April)

#### 2.5. Transportation - £6,666m (£4,830m in April)

- Car Parking Income currently the expected shortfall is approximately £0.102m income per week, due to government guidance not to travel as well as Council decision to provide free parking to key workers. A 100% reduction for the period April May with incremental improvements down to a 25% reduction by March 2021 will cost £3.375m in lost income.
- Bus Lane Enforcement assuming 100% reduction for the period April May with incremental improvements down to a 25% reduction by March 2021 the modelled impact will be lost income of £1.434m
- Special Parking Areas/Red routes assuming 100% reduction for the period April
   May with incremental improvements down to a 25% reduction by March 2021
   the modelled impact will be lost income of £0.905m
- Park & Ride assumed 100% lost income to June 2020 due to advice to avoid public transport and lockdown being imposed; assumed uptake increases to 50% from July for the remainder of the year due to social distancing measures -£0.386m
- Residents Parking assumed small reduction of £0.163m
- Total of £0.403m transport income shortfall in total as estimated for the last 2 weeks in March 2020

#### 2.6. Planning and Regulatory Services - £2.152m (£0.981m in April)

- Building Control assuming a 50% reduction for the period April March 21 the impact will be lost income of £0.219m.
- HMO Licences assuming a 75% reduction for the period April September 20 the impact will be lost income of £0.295m.
- Planning Apps assuming a 50% reduction for the period April March 21 the impact will be lost income of £0.635m.
- Planning fees and charges assuming a 75% reduction for the period April -September 20 and 50% October - March 21 the impact will be lost income of £0.161m.
- Taxi licence fees -assuming a 75% reduction for the period April September 20 and 50% October March 21 the impact will be lost income of £0.288m.
- Alcohol & Entertainment Licenses -assuming a 75% reduction for the period April March 21 the impact will be lost income of £0.335m.
- Consumer protection & food safety -assuming a 75% reduction for the period April March 21 the impact will be lost income of £0.137m.
- Total of £0.082m income shortfall in total as estimated for the last 2 weeks in March 2020

#### 2.7. Cultural Services - £4.078m (£2.236m in April)

- Hexagon The estimated income after paying promoters including booking fees and bar income is £1.305m to March 21. The assumption is that either these shows are cancelled completely and refunded or re-scheduled later in the year and thus displacing other potential bookings combined with limited take up for the remainder for the year
- Town Hall assumed closed until end of September 20 with 75% reduction in income for the remainder of the year - £0.620m
- South Street assumed 100% income shortfall for the year £0.168m

- Leisure total forecast income and expenditure pressures of £1.387m for the year.
- Libraries assumed 100% shortfall income for first 6 months and 50% for the rest of the year £0.180m due to closures of buildings and a worst-case recovery estimate.
- Play services assumed lost income of £0.153m for the year in respect of cancelled boot sales and festivals (excluding Reading Festival)
- Park Services assumed lost income of £0.062m for the year
- Total of £0.203m income shortfall in total as estimated for the last 2 weeks in March 2020

#### 2.8. Environment and Commercial Services - £0.419m (£0.228m in April)

• Total assumed income shortfall of £0.419m for the year including March 2020

## 2.9. Regeneration and Assets - £0.548m (£1.500m in April)

• Property portfolio & lettings - shortfall of rental income estimated at £0.548m for the year based on a 10% reduction

# 2.10. Reading Festival - £0.203m (£0.000 in April)

 Reading Festival has been cancelled therefore a 100% income shortfall of £0.203m

#### Impact on Savings Delivery - £2.526m (£2.129m in April)

2.11. A review of 2020/21 MTFS savings as well as 2019/20 non achieved & non mitigated savings has been carried out and a total of £2.526m is considered to be unlikely to be delivered in 2020/21 at this stage. This includes income from commercial investments, revenue savings from the closure of Darwin Close and increases to parking income.

## 3. Children's Services (RBC) - £0.000 Total Net Pressure (£0.098m in April)

3.1. The following table summarises the actual and projected additional expenditure, reduced income and impact on ability to deliver savings as a result of the Covid-19 for the Children's Services (RBC):

Table 6.

|             | 19/20 | 20/21 | 20/21 | Total  | 20/21 | Total | Total | Increase/ |
|-------------|-------|-------|-------|--------|-------|-------|-------|-----------|
|             | Q4    | Q1    | Q2    | to end | Q3&Q4 | (£m)  | per   | (Decrease |
|             | (£m)  | (£m)  | (£m)  | of Q2  | (£m)  |       | April | ) on Q2   |
|             |       |       |       | (£m)   |       |       | Repor | (£m)      |
|             |       |       |       |        |       |       | t to  |           |
|             |       |       |       |        |       |       | Q2    |           |
|             |       |       |       |        |       |       | (£m)  |           |
| Additional  |       |       |       |        |       |       |       |           |
| Expenditure | 0.000 | 0.000 | 0.000 | 0.000  | 0.000 | 0.000 | 0.000 | 0.000     |
| Reduced     |       |       |       |        |       |       |       |           |
| Income      | 0.000 | 0.000 | 0.000 | 0.000  | 0.000 | 0.000 | 0.098 | (0.098)   |

| Impact on Savings |        |        |        |        |        |        |         |         |
|-------------------|--------|--------|--------|--------|--------|--------|---------|---------|
| Delivery          | 0.000  | 0.000  | 0.000  | 0.000  | 0.000  | 0.000  | 0.000   | 0.000   |
| TOTAL             |        |        |        |        |        |        |         |         |
| <b>PRESSURES</b>  | 0.000  | 0.000  | 0.000  | 0.000  | 0.000  | 0.000  | 0.098   | (0.098) |
| ASSUMED           |        |        |        |        |        |        |         |         |
| ADDITIONA         | (0.000 | (0.000 | (0.000 | (0.000 | (0.000 | (0.000 | (0.000) |         |
| L FUNDING         | )      | )      | )      | )      | )      | )      | )       | (0.000) |
| TOTAL NET         |        |        |        |        |        |        |         |         |
| PRESSURES         | 0.000  | 0.000  | 0.000  | 0.000  | 0.000  | 0.000  | 0.098   | (0.098) |

### Reduced Income - £0.000m (RBC) (£0.098m per April)

3.2. Estimates have been revised and there are now currently no anticipated financial impacts of Covid-19 on those Children's Services that have been retained by the Council.

## 4. <u>Children's Services (BFfC) - £1.433m Total Net Pressures (£0.834m per April)</u>

4.1. The following table summarises the actual and projected additional expenditure, reduced income and impact on ability to deliver savings as a result of the Covid-19 for the Children's Services (BFfC):

Table 7.

| Table 7.    |         |         |         |                |         |         |         |            |
|-------------|---------|---------|---------|----------------|---------|---------|---------|------------|
|             | 19/20   | 20/21   | 20/21   | Total to       | 20/21   | Total   | Total   | Increase/  |
|             | Q4 (£m) | Q1 (£m) | Q2 (£m) | end of         | Q3&Q4   | (£m)    | per     | (Decrease) |
|             | ` ` ′   | _ ` ,   | , ,     | Q2 (£m)        | (£m)    | ` ,     | April   | on Q2      |
|             |         |         |         | <b>L</b> _ (=) | (2)     |         | Report  | (£m)       |
|             |         |         |         |                |         |         |         | (LIII)     |
|             |         |         |         |                |         |         | to Q2   |            |
|             |         |         |         |                |         |         | (£m)    |            |
| Additional  |         |         |         |                |         |         |         |            |
| Expenditure | 0.001   | 0.521   | 0.347   | 0.869          | 0.192   | 1.061   | 0.233   | 0.636      |
| Reduced     |         |         |         |                |         |         |         |            |
| Income      | 0.024   | 0.208   | 0.140   | 0.372          | 0.000   | 0.372   | 0.601   | (0.229)    |
| Impact on   |         |         |         |                |         |         |         |            |
| Savings     |         |         |         |                |         |         |         |            |
| Delivery    | 0.000   | 0.000   | 0.000   | 0.000          | 0.000   | 0.000   | 0.000   | 0.000      |
| TOTAL       |         |         |         |                |         |         |         |            |
| PRESSURES   | 0.025   | 0.729   | 0.487   | 1.241          | 0.192   | 1.433   | 0.834   | 0.407      |
| ASSUMED     |         |         |         |                |         |         |         |            |
| ADDITIONAL  |         |         |         |                |         |         |         |            |
| FUNDING     | (0.000) | (0.000) | (0.000) | (0.000)        | (0.000) | (0.000) | (0.000) | (0.000)    |
| TOTAL NET   | ,       | ,       | , ,     |                | ,       |         |         | ,          |
| PRESSURES   | 0.025   | 0.729   | 0.487   | 1.241          | 0.192   | 1.433   | 0.834   | 0.407      |

## Additional Expenditure - £1.061m & Reduced Income - £0.372m

4.2. Table 8 below summarises the potential financial impacts of Covid-19 on BFfC:

Table 8. Financial Impact of Covid-19 on BFfC

|                          | 2019/20 (2 w                      | ,                         | 2020/21 (based on end<br>of school term/5<br>months) |                |  |
|--------------------------|-----------------------------------|---------------------------|--|----------------|--|
| Potential Risk           | Additional<br>Expenditure<br>(£m) | Loss of<br>Income<br>(£m) | Additional<br>Expenditure<br>(£m)                    | Loss of Income |  |
| Children Centres Closing | (LIII)                            | (LIII)                    | (LIII)   | (£m)<br>0.024  |  |
| Nursery close for many   |                                   |                           |  | 0.021          |  |
| families                 |                                   | 0.007                     |  | 0.082          |  |
| Schools Service Level    |                                   |                           |  | 0.002          |  |
| Agreements               |                                   |                           |  | 0.230          |  |
| Additional Staff Costs   | 0.001                             |                           | 0.079  |                |  |
| School Holiday travel    |                                   |                           | 0.015  |                |  |
| Fines for non-attendance |                                   |                           |  |                |  |
| at school                |                                   | 0.017                     |  | 0.012          |  |
| Retainer of Placements   |                                   |                           | 0.249  |                |  |
| PVI Sustainability       |                                   |                           | 0.050  |                |  |
| School Meals             |                                   |                           | 0.212  |                |  |
| IT Software              |                                   |                           | 0.009  |                |  |
| PPE (including delivery  |                                   |                           |  |                |  |
| costs)                   |                                   |                           | 0.033  |                |  |
| Additional Social        |                                   |                           |  |                |  |
| Workers - post covid-19  |                                   |                           |  |                |  |
| lockdown                 |                                   |                           | 0.192  |                |  |
| Additional LAC           |                                   |                           | 0.221  |                |  |
| TOTAL                    | 0.001                             | 0.024                     | 1.060  | 0.348          |  |
| TOTAL (NET)              |                                   | 0.025                     |  | 1.408          |  |

# 5. Resources - £2.167m Total Net Pressures (£1.713m per April)

5.1. The following table summarises the actual and projected additional expenditure, reduced income and impact on ability to deliver savings as a result of the Covid-19 pandemic for the Resources Directorate:

Table 9.

|                           | 19/20<br>Q4<br>(£m) | 20/21<br>Q1<br>(£m) | 20/21<br>Q2<br>(£m) | Total<br>to end<br>of Q2 | 20/21<br>Q3&Q4<br>(£m) | Total<br>(£m) | Total<br>per<br>April   | Increase/<br>(Decrease)<br>on Q2 |
|---------------------------|---------------------|---------------------|---------------------|--------------------------|------------------------|---------------|-------------------------|----------------------------------|
|                           |                     | ` ,                 | ` ,                 | (£m)                     | ,                      |               | Report<br>to Q2<br>(£m) | (£m)                             |
| Additional<br>Expenditure | 0.227               | 0.764               | 0.080               | 1.071                    | 0.000                  | 1.071         | 0.781                   | 0.290                            |
| Reduced<br>Income         | 0.061               | 0.228               | 0.225               | 0.514                    | 0.380                  | 0.894         | 0.730                   | (0.216)                          |

| Impact on  |         |         |         |         |         |         |         |         |
|------------|---------|---------|---------|---------|---------|---------|---------|---------|
| Savings    |         |         |         |         |         |         |         |         |
| Delivery   | 0.000   | 0.062   | 0.140   | 0.202   | 0.000   | 0.202   | 0.202   | 0.000   |
| TOTAL      |         |         |         |         |         |         |         |         |
| PRESSURES  | 0.288   | 1.054   | 0.445   | 1.787   | 0.380   | 2.167   | 1.713   | (0.074) |
| ASSUMED    |         |         |         |         |         |         |         |         |
| ADDITIONAL |         |         |         |         |         |         |         |         |
| FUNDING    | (0.000) | (0.000) | (0.000) | (0.000) | (0.000) | (0.000) | (0.000) | (0.000) |
| TOTAL NET  |         |         |         |         |         |         |         |         |
| PRESSURES  | 0.288   | 1.054   | 0.445   | 1.787   | 0.380   | 2.167   | 1.713   | (0.074) |

Additional Expenditure - £1.071m (£0.781m per April)

## 5.2. Customer Services & Corporate Improvement - £0.055m (£0.055m per April)

- £0.039m for website of the current website hosting arrangement as a consequence of staff being diverted away from work on migrating to the new website as a result of the Pandemic.
- Annual revenue implications of new cremator purchase £0.011m
- £0.005m for setting up home working

## 5.3. HR and Organisational Development - £0.370m (£0.080m per April)

- Emergency Planning PPE £0.070m
- Costs relating to Temporary Place of Rest £0.300m though it is expected that these costs will be shared out between Berkshire/Thames Valley authorities, but no methodology has yet been agreed so have assumed worst case.

# 5.4. Procurement Community Hub - £0.191m (£0.191m per April)

The set-up of the Community Hub has incurred the following costs:

- Call centre set up £0.130m
- Packing supplies for deliveries to vulnerable & sheltered residents £0.005m
- Food supplies for vulnerable and sheltered residents £0.020m
- Security for The One Reading Hub £0.030m
- Firmstep licenses £0.006m

## 5.5. Financial Services - £0.010m (£0.010m per April)

£0.010m for the purchase of equipment to enable home working

#### 5.6. Legal and Democratic - £0.160m (£0.160m per April)

• Courts are currently closed and looking to introduce new ways of operating that utilise digital technology. If attendance is allowable through Microsoft Teams for telephone hearings, then the cost will be small. However, if through BT Conferencing then the estimated cost based on 20 hearings per week is approximately £0.080m. In addition, Counsel Fee costs in relation to covering hearings is estimated to cost £0.080m based on 5 per week over 26 weeks. The maximum total projected cost is therefore estimated to be £0.160m.

#### 5.7. IT and Digital - £0.233m (£0.233m per April)

• £0.233m for software licences and laptops etc.

#### 5.8. Communications - £0.052m (£0.052m per April)

- Social media product & licenses (Orla) for co-ordinating all social media messages in an organised and timely manner - £0.050m
- Additional external printing £0.002m

## Reduced Income - £0.894m (£0.730m per April)

## 5.9. Customer Services and Corporate improvement - £0.428m

 Registrars, Crematoria and Cemeteries - assumed £0.370m shortfall in income in 2020/21 based on registrars re-opening to the public from Q3. £0.058m shortfall for March 2020

#### 5.10. HR and Organisational Development - £0.444m

• Loss of income from the nursery approx. including lost grant funding on number of placements £0.441m for 20/21 and £0.003m for March 2020

#### 5.11, Communications - £0.022m

Impact on Savings Delivery - £0.202m

## 5.12. Customer Services & Corporate Improvement - £0.124m

• Project management - delay of savings being achieved, by about 60% (total savings £0.206m so £0.124m)

## 5.13. HR and Organisational Development - £0.078m

- Exec recruitment, total saving £0.056m. Possible 6 month delay to delivery -£0.028m
- Staff terms and conditions, total saving £0.050m. Unlikely to be resolved in 2020/21 therefore 100% of saving at risk £0.050m

# Agenda Item 12

#### **READING BOROUGH COUNCIL**

#### REPORT BY DIRECTOR OF ECONOMIC GROWTH AND NEIGHBOURHOOD SERVICES

TO: POLICY COMMITTEE

DATE: 22 JUNE 2020

TITLE: WHITLEY LIBRARY - DISPOSAL

LEAD COUNCILLOR PORTFOLIO: CORPORATE & CONSUMER

COUNCILLOR: EMBERSON SERVICES

SERVICE: PROPERTY & ASSET WARDS: CHURCH

LEAD OFFICER: GIORGIO FRAMALICCO TEL: 0118-9372604 (ext. 72604)

JOB TITLE: DEPUTY DIRECTOR OF E-MAIL: giorgio.framalico@reading.gov.

uk

PLANNING,

TRANSPORT & REGULATORY SERVICES

#### 1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 To advise the Committee of the outcome of a marketing exercise to dispose of the freehold of Whitley Library and to seek authority to dispose of the freehold interest on the terms set out in this report.
- 1.2 To advise the Committee that the disposal also includes an area of land currently used under a licence by an adjacent owner for garden land and driveway purposes and that part of this land can be excluded from the Whitely Library sale and sold to the adjacent owner to enable them to retain and regularise their driveway.
- 1.3 Elsewhere on this meeting's agenda in closed session commercial information in relation to this decision was presented and this should be considered when making a decision as regards the recommendation.

Appendix A - Location plan.

#### 2. RECOMMENDED ACTION

- 2.1 That the Whitley Library be disposed of to Bidder A in accordance with the terms set out in paragraph 4.2 of this report.
- 2.2 That the Executive Director for Economic Growth and Neighbourhood Services be given delegated authority to agree terms for a supplementary minor disposal of adjacent land in accordance with paragraph 4.4 of the report

2.3 In the event that the offer price is subsequently reduced or the purchaser does not perform to an acceptable timescale the Executive Director of Economic Growth & Neighbourhood Services be given delegated authority in consultation with the Leader of the Council and the Lead Councillor for Corporate and Consumer Services to reengage with other bidders as appropriate or remarket the property for disposal at best consideration.

#### 3. POLICY CONTEXT

- 3.1 The Whitley Library site is edged on the attached Plan Appendix 1.
- 3.2 As part of the Community Hubs projects, Policy Committee approved the relocation of the Whitley library service to the South Reading Youth & Community Centre, Northumberland Ave. This formed part of a wider capital project to create a new multi-functional community hub which also includes a day nursery, children's centre, youth facilities, community café and other space for community lettings and other shared uses.
- 3.3 As part of the Hubs programme on 10<sup>th</sup> April 2017, Policy Committee (Minute 114 community hub spend approval) also resolved:

That the disposal of the Whitley and Southcote Library sites on the open market and through the Community Letting Policy process be agreed, and that the results of the marketing exercise be reported back to a future meeting of Policy Committee for decision.

- 3.4 The disposal also includes a triangle of land hatched on the enclosed plan in order to maximise the disposal opportunity of the Whitley Library site and to provide the option for associated off street parking subject to planning permission being obtained.
- 3.5 The hatched land and the land shaded black on the enclosed plan are currently Licenced to an adjacent neighbour for use as garden land and driveway
- 3.6 It will be necessary for the Council to serve 3 months' notice to terminate the licence.
- 3.7 Reading Borough Council's Third Sector Policy Statement states that when a Council asset is declared surplus in accordance with Corporate Asset Management Plan criteria and is therefore not required for operational or service delivery purposes by the Council or a partner organisation, it will be advertised for disposal usually on a freehold basis.
- 3.8 Third Sector organisations can bid for a surplus property and all bids received will be considered by Policy Committee. Additionally, Third sector organisations will also be able to bid for a leasehold interest rather than the freehold of the premises, subject to certain criteria.

#### 4. THE PROPOSAL

#### 4.1 Current Position:

- 4.1.1 A range of preparatory work was undertaken including collating property compliance and condition information, placing Tree Preservation Orders on qualifying trees, locally listing the property and securing in principle planning preapplication support for a conversion of the building to 3 x 1 bed units.
- 4.1.2 The purchaser would be required to respect the Local Listing of the building and the Preservation Orders placed on the qualifying trees.
- 4.1.3 Officers then invited three firms of chartered surveyors to submit a fee quote in relation to the marketing of the property resulting in the appointment of Dunster & Moreton (D&M).
- 4.1.4 D&M were formally instructed and marketed the property for 8 weeks with bids returns due on 19<sup>th</sup> December 2019.
- 4.1.5 The disposal was also advertised on the RVA website in accordance with the Council's Third Sector Policy.
- 4.1.6 A total of five offers were received through both processes.
- 4.1.7 A letter from D&M summarising the offers together with a tabulated summary are enclosed with the confidential report. The letter from D&M recommends the Council proceeds with Bidder A.
- 4.1.8 Officers have also undertaken a criteria based assessment of the Third Sector bids, weighing up the overall benefits of the bids including the scale of the financial offer. This assessment is enclosed with the confidential report and concords with the recommendation given by D&M to dispose of the property to Bidder A.

#### 4.2 Proposed Option: Whitley Library

4.2.1 It is proposed that the Property be sold to the Bidder A on the following terms:

Offer: £X (as set out in confidential report) for the

freehold interest

Use: D1 Community use

Offer conditions: Use unconditional on planning

Not subject to 3<sup>rd</sup> party funds

Offer comments: Bidder A has offered the highest price and it has been

confirmed that they have the ability to progress the

purchase at the purchase price.

Bidder A has confirmed that despite the Covid 19 emergency they are still willing and able to proceed

with the purchase at the offer price.

Bidder A have advised that is it their intention to use the building for Community purposes, to link with the wider community and to hire rooms to other community groups

4.2.2 In the event that the offer price is subsequently reduced or the Purchaser does not perform to an acceptable timescale it is recommended that the Executive Director of Economic Growth & Neighbourhood Services be given delegated authority in consultation with the Leader of the Council and the Lead Councillor for Corporate and Consumer Services to reengage with other bidders as appropriate or remarket the property for disposal at best consideration.

#### 4.3 Other Options Considered

4.3.1 Dispose to another bidder:

This would result in accepting a bid that is not the best offer.

4.3.2 Not to dispose of the property:

The property would remain vacant pending identifying an alternative use and continue to cost the Council in terms of empty property costs.

#### 4.4 Proposed Option: Land adjacent

That the land shaded black on the enclosed plan be sold to the adjacent neighbour on terms to be agreed under delegation to the Executive Director of Economic Growth & Neighbourhood Services in consultation with the Leader of the Council for continued use as a domestic driveway to the property only.

#### 5.0 CONTRIBUTION TO STRATEGIC AIMS

- 5.1 The Council has adopted a Strategic Framework (March 2020) which sets out the Council's key priorities including:
  - To keep social care services running for the children and adults who need them;
  - To support vulnerable and isolated people during the crisis;
  - To support business and the economy, which will secure the long term recovery of Reading.
- 5.2 The disposal of the Property supports the aim of remaining financially sustainable to deliver service priorities in accordance with the Medium-Term Financial Strategy.
- 5.3 In accordance with the Council's Corporate Plan the proposed use will provide an additional community facility in Whitley which will help to promote health, education, culture and wellbeing.

#### 6. ENVIRONMENTAL AND CLIMATE IMPLICATIONS

6.1 The building has been unoccupied since the library moved to South Reading Community Centre as part of the Community Hub programme which brought the council and partners services into one building. The building, which is locally listed, will be reused for the purposes set out in this report. Alterations to the fabric of the building, if required, would need to be meet building regulations including standards related to energy efficiency.

#### 7. COMMUNITY ENGAGEMENT AND INFORMATION

7.1 The disposal was subject to an open market and Third Sector marketing exercise and generated a range of interest from the community/voluntary sector.

#### 8. EQUALITY IMPACT ASSESSMENT

- 8.1 Under the Equality Act 2010, Section 149 the Council must, in the exercise of its functions, have due regard to the need to:
  - Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act.
  - Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
  - Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 8.2 The Council has reviewed the scope of the proposals as outlined within this report and considers that the proposals have no direct impact on any groups with protected characteristics.

#### 9. LEGAL IMPLICATIONS

- 9.1 The Assistant Director of Legal and Democratic Services will complete the necessary contract documentation.
- 9.2 The offer from Bidder A being the highest offer represents Best Consideration to the Council in terms of S123 of the Local Government Act 1972.

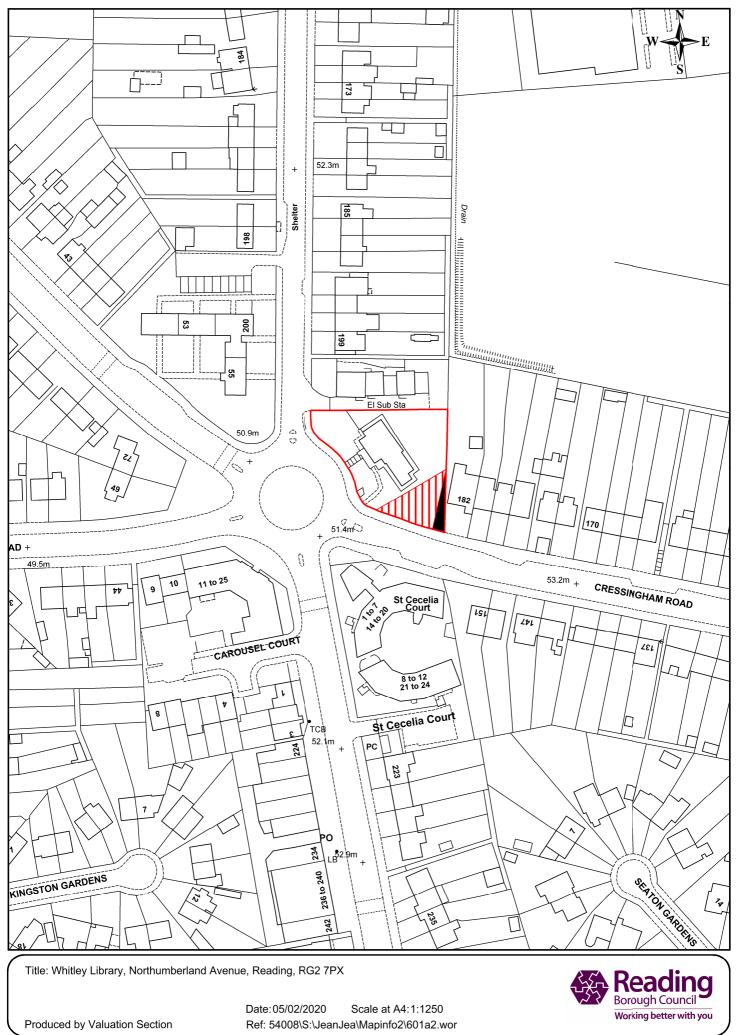
#### 10. FINANCIAL IMPLICATIONS

10.1 The Council would obtain a capital receipt in 2020/21 to support the Councils Medium Term Financial Strategy. Further financial information is set out in the confidential report set out elsewhere on this agenda.

#### 11. BACKGROUND PAPERS

11.1 Not for publication







#### READING BOROUGH COUNCIL

#### REPORT BY EXECUTIVE DIRECTOR OF ADULT CARE & HEALTH SERVICES

TO: POLICY COMMITTEE

DATE: 22 JUNE 2020

TITLE: NEW EMERGENCY DUTY SERVICE CONTRACT - SOCIAL CARE &

**HOMELESS PROVISION** 

LEAD CLLR TONY JONES PORTFOLIO: ADULT SOCIAL CARE

**COUNCILLOR:** 

SERVICE: ADULT SOCIAL CARE WARDS: ALL

LEAD OFFICER: MELISSA WISE TEL: Ext 74945

JOB TITLE: ASSISTANT E-MAIL: Melissa.wise@reading.gov

DIRECTOR .uk

COMMISSIONING, TRANSFORMATION & PERFORMANCE

#### 1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1.1 The Emergency Duty Service (EDS) is a joint arrangement responsible for all social services emergencies and statutory duties, which arise outside normal office hours (including out of hours homelessness support). The service is hosted, and managed, within the People's Directorate of Bracknell Forest Council, and is responsible for all client groups (Adults & Children's' Social Care Emergencies) of the six local authorities of Berkshire.
- 1.1.2 EDS provides a service to individuals and families in social crisis which requires an immediate and/or urgent response. EDS' role is to carry out an initial screening of the presenting situation and establish a safe and viable solution pending follow up by the appropriate local authority's day time services. In terms of volume, during 2019/20 approximately 500 referrals from Reading service users were actioned by the EDS per month.
- 1.1.3 The current agreement for the service expires in June 2020. A new agreement is to run for a seven-year period from June 2020 May 2027 which still includes all six Berkshire local authorities. To ensure continuity of service in the event of any of the parties wishing to terminate, a minimum of twelve months' notice by either the host authority or partner is required.
- 1.1.4 To note, Brighter Futures for Children access this service as part of a Service Level Agreement with the Council. The total contract value is £2,766,330. This paper makes recommendations for a proposed replacement contract.

#### 2. RECOMMENDED ACTION

2.1 That Policy Committee agree to granting delegated authority to the Executive Director of Adult Social Care and Health Services in consultation with the Lead Councillor for Adult Social Care and the Assistant Director of Legal and Democratic Services to enter into a joint arrangement with Bracknell Forest Borough Council to supply out of hours Emergency Duty Service for Reading.

#### 3. POLICY CONTEXT

3.1 The Emergency Duty service is a statutory service that needs to be provided by all local authorities under the Care Act 2014. Namely in Part 1 of the Act - Care & Support the duty to:

'The general duty of a local authority, in exercising a function under this Part in the case of an individual, is to promote that individual's well-being' and "Well-being", in relation to an individual, means that individual's well-being so far as relating to any of the following—.... (b) physical and mental health and emotional well-being; (c) protection from abuse and neglect..... (h) suitability of living accommodation

- 3.2 The service positively reflects Readings Council's equality and diversity policies and procedures, ensuring that services take account of issues of ethnicity, race, culture, disability, religion, sexuality and gender.
- 3.3 The service promotes community safety by being available to those in crisis 365 days per year, 24 hours per day. It offers a reliable support to other professional services, for example the police, fire service and the NHS.

#### 4. THE PROPOSAL

#### 4.1 Current Position

The current service is provided by Bracknell Forest BC under a joint arrangement as outlined below.

- 4.2 The Council has a statutory duty to respond to social care emergencies 24 hours a day, 7 days a week. The Council discharges this duty through a joint contract which provides an emergency social work service outside of normal office hours, in partnership with the other authorities in Berkshire, led by Bracknell Forest BC.
- 4.3 The service was originally an internal service when Berkshire was a County Council. When the County Council split into the 6 unitary authorities, Bracknell retained the staff and facilities used for running the service and an agreement was put in place that Bracknell would continue to run the service on behalf of the other Berkshire authorities.
- 4.4 The joint arrangement has been renewed a number of times over the years, the current iteration of the contract expires on the 06<sup>th</sup> June 2020.
- 4.5 The objectives of the Service are:

- To respond to emergency referrals where immediate Social Care intervention is required to safeguard a vulnerable child or adult;
- To offer a single point of access whereby all referrals/calls will be screened, signposted, advice and information offered or, if meeting statutory criteria, be passed to the social worker for action;
- To undertake initial screening for those individuals who find themselves in need of emergency accommodation.

#### 4.6.1 Options Proposed

- 4.6.1 Enter into a new joint arrangement with Bracknell Forest Borough Council for the provision of the service (Recommended Option)
- 4.6.1.1 Directors of Adult Social Services across the Berkshire local authorities have been in dialogue regarding this service over the last 18 months. Individual local authorities have, over this period, reviewed alternative options for delivery. In December 2019, on the back of a joint workshop, they all committed to proceeding with a joint arrangement across the six authorities. This is due to the challenges and financial implications of delivering an individual stand-alone service per authority and also the commitment from Bracknell Forest Council to modernise the service offer and provide an alternative financial model to ensure equity across the service. It is therefore recommended that the Council signs up to the new joint contract proposed by Bracknell Forest.
- 4.6.1.2This service offers value for money by reducing the cost of the first year of the service by over £37,000. The costs will be reviewed annually to ensure costs match use and benefits for Reading service users. In addition, a new and improved monitoring schedule and reporting system based on outcomes for our service users will be implemented. This includes 19 KPI's, and will enable more data and management information to be analysed and used effectively.
- 4.6.1.3The lead authority has provided consultation forums to gain feedback from partners to make improvements to the new contract and the new monitoring takes advantage of new reporting and management information available through the year. Internally, Reading BC plans to review the service regularly with Brighter Futures for Children to ensure spend and outcomes are closely monitored.

#### 4.6.2 Other Options Considered

#### 4.6.2.2 To do nothing

This service is a statutory requirement for local authorities. Doing nothing will mean the current contract comes to an end in June 2020 and the service will cease. This would leave the Council in breach of its statutory duties and put vulnerable people at risk unnecessarily. This option is therefore not recommended.

#### 4.6.2.3 Deliver an EDS Service for Reading internally

The Council analysed the costs of running this service internally and they were prohibitively high, and higher than the current service, in terms of additional staffing that would need to be taken on, supplements to unsocial hours payments and overheads for operating the service. It would be poor value for money to attempt to set this service up as an internal service and run it

ourselves. In the current climate we would not be in a position to run this service as a stand-alone. This option is therefore not recommended.

4.6.2.4 Advertise the opportunity to find an alternative provider for the service Whilst it is possible that there are other organisations that could provide this service, such contracts normally only achieve value for money by sharing costs across multiple authorities. As a lone authority we would seek to buy into an existing service or expect a provider to deliver a service just for Reading. The chance of buying into an existing service is small as most contracts are closed services and research has shown us that going on our own would cost more money as we wouldn't benefit from the economies of scale or the spreading of overhead costs. However the new arrangement that has been committed to by the Directors of Adult Social Care will give Reading an opportunity to review the service on an on-going basis during the life of the contract and consider options in the future. This option is therefore not recommended.

#### 5. CONTRIBUTION TO STRATEGIC AIMS

- 5.1 The Council's current Corporate Plan priorities have been reframed during the pandemic to provide clarity of purpose and the three point strategic framework that has been adopted is based around the following three broad priorities:
  - To support and protect vulnerable children and adults by ensuring the social care system continues to function effectively;
  - To support the people who are most vulnerable and isolated in our communities;
  - To support businesses and the local economy, and secure Reading's economic recovery.
- 5.2 The proposed contract is relevant to the first two of these priorities.
- 5.3 The Council's six priorities remain in place, and the strategic priorities above for the pandemic sit alongside them. This contract supports the most relevant priority, "Protecting and enhancing the lives of vulnerable adults and children".

#### 6 ENVIRONMENTAL AND CLIMATE IMPLICATIONS

- 6.1 The Council declared a Climate Emergency at its meeting on 26 February 2019.
- 6.2 The Council aims to minimise the impact of any climate or environmental change wherever and whenever possible. As the EDS service is predominantly a call/referral service there is likely to be a low environmental and climate impact. Public transport will be used where possible but in these exceptional times we will abide by the Government rules during the Covid 19 period to support vulnerable children and adults where transport is required out of hours.
- 6.3 It is acknowledged that there are certain activities which would not in normal times reflect the approach we would take in accordance with the declaration, such as the provision and supply of Personal Protective Equipment, which is often single use, not recyclable and therefore will have a carbon impact if this is required to be used during the current Covid 19 pandemic.

#### 7. COMMUNITY ENGAGEMENT AND INFORMATION

- 7.1 Consultations between the six local authorities in Berkshire and the Clinical Commissioning Groups began in early 2019.
- 7.2 The lead authority, Bracknell Forest has reviewed usage, costs and staffing requirements, held a number of events to inform stakeholders of intentions and to provide a forum for questions to be answered.

#### 8. EQUALITY IMPACT ASSESSMENT

- 8.1 Under the Equality Act 2010, Section 149, a public authority must, in the exercise of its functions, have due regard to the need to:
  - eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
  - advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
  - foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 8.2 An Equality Impact Assessment was considered, however there is no change to the service provided to people and no evidence or reason to believe that any (racial, disability, gender, sexuality, age and religious belief) groups may be affected any differently than others. However, an assessment is being completed in parallel to provide guidance.

#### 9. LEGAL IMPLICATIONS

9.1 The Council intends to enter into this agreement with Bracknell Forest Borough Council under s101 of the Local Government Act 1972 which enables a local authority to enter into arrangements for the discharge of its functions jointly with, or by, one or more other local authority.

This is a joint agreement exclusively between multiple authorities which implements both cooperation in achieving common objectives and is governed solely by considerations relating to the public interest. As such, this contract is exempt from the need to be procured under Public Contract Regulations 2015.

9.2 It will be necessary to enter into a formal agreement with Bracknell Forest, Forest Council for the provision of the Emergency Duty Service. The draft contract has been reviewed and amended following feedback from Legal Services. This agreement will take account of the need for the out of hours services for children and families to be accountable to Brighter Futures for Children.

#### 10. FINANCIAL IMPLICATIONS

#### 10.1 Value for Money (VFM)

The new agreement provides an improved monitoring framework with 19 KPI's reported monthly; a Project Board with key stakeholders meeting bi-monthly; daily reports and calls on previous use of service overnight/weekends and proposed monthly meetings internally with key stakeholders for close monitoring of this contract with commissioning. This is an opportunity to closely review the contract and ensure the service is managed effectively, analyse the data efficiently and ensure clients' needs are met out of hours for both Adult Social Care and Brighter Futures for Children respectively.

10.2 Bracknell Forest Council have been able to indicate the different levels of usage between the local authorities purchasing the service under the joint contract. In the main costs have increased year on year. The last 5-years are outlined below with 2020/21 being the new contract start.

| Spend   | Total Adult Social Care and BFfC |
|---------|----------------------------------|
|         | £'s                              |
| 2015/16 | 276,959                          |
| 2016/17 | 318,344                          |
| 2017/18 | 352,664                          |
| 2018/19 | 317,022                          |
| 2019/20 | 433,841                          |
| 2020/21 | 395,190                          |

#### 10.3 Benefits and savings from 2020/21

The proposed cost to the Council has reduced by £37,716 from 2019/20 rates as a result of effective negotiation and the following contract additions are offered:

- An enhanced level of performance data will be presented on a monthly basis
- Daily calls to RBC teams on previous day/weekends
- 19 KPI's which will be reported against monthly, incl. increased data monitoring
- Bi-monthly project boards will allow dedicated Commissioning & Operational reps from the Council to monitor spend against actions
- The split of fees across partners in Year 2 will be reviewed in December 2020 based on data accrued in the next 7 months
- The lifetime cost of the contract is £2,766,330. While the split of cost for Year 2 is to be provided in December 2020 to ensure that the figure is based on use and agreed prior to the new financial year. This will be done for each year of the contract.
- 10.5 The Year 1 costs to the Council (20/21) are £395,190 and broken down as follows:

£67,850 equal shared costs (i.e. the standard amount charged to each partner)

£327,340 variable cost (i.e. costs dependent on the time EDS spends delivering service per LA)

- 10.6 The new contract estimates a year 1 cost to Reading Borough Council of £395k, £38k less than the cost for 19/20. However, the contract value fluctuates depending on how much the service is used and therefore it is not proposed to build in savings at this stage, this will be reviewed as part of the Council's budget setting process for 20/21.
- 10.7 There is budget available within the Adult Social Care Directorate to fund their share of the service with the remainder paid by Brighter Futures for Children.
- 10.8 Reading has the highest variable cost of the purchasing partners because Reading generates the highest level of activity (based on 2019/20 data).

#### 11. BACKGROUND PAPERS

11.1 None



#### READING BOROUGH COUNCIL

#### REPORT BY EXECUTIVE DIRECTOR OF RESOURCES

TO: POLICY COMMITTEE

**DATE:** 9 JUNE 2020

TITLE: ICT Future Operating Model Business Case

LEAD CLLR EMBERSON PORTFOLIO: CORPORATE & CONSUMER

COUNCILLOR: SERVICES

SERVICE: ICT WARDS: ALL

LEAD OFFICER: MARTIN CHALMERS TEL: 07970 963741

JOB TITLE: CHIEF DIGITAL AND E-MAIL: martin.chalmers@reading.gov.uk

INFORMATION

OFFICER

#### 1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 The current Information and Communications Technologies (ICT) outsourcing contract with Northgate Public Services ends in March 2021 and has no option within it for further extension. The successor arrangements are known as the ICT Future Operating Model (FOM).
- 1.2 In February 2020, the Policy Committee approved the initiation of design work for the Future Operating Model, with the objective of producing an Outline Business Case. This report presents that Outline Business Case (provided in full at Appendices A and B) and seeks approval of the recommended option and authority to proceed with procurement and implementation.
- 1.3 This report has the following appendices:
  - a) Appendix A: Future ICT Operating Model Outline Business Case;
  - b) Appendix B: Future ICT Operating Model Outline Business Case Commercially Sensitive Sections.

#### 2. RECOMMENDED ACTION

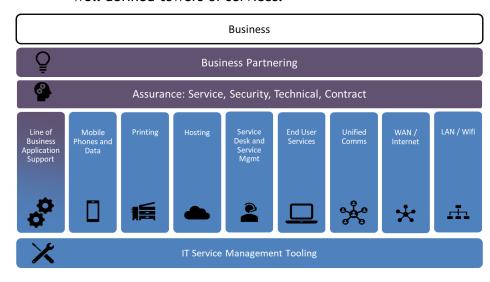
#### That Policy Committee:

- 2.1 endorse the preferred option recommended in the Outline Business Case (option 2A defined below);
- 2.2 grant delegated authority to the Executive Director of Resources, in consultation with the Chief Digital and Information Officer, the Assistant Director for Procurement and Lead Member for Corporate and Customer Services, to proceed with procurement and implementation of the preferred option, subject to delivery remaining within the financial envelope set out in the Outline Business Case, and a satisfactory report on progress being made to the Policy Committee in September 2020.

#### 3. ICT FUTURE OPERATING MODEL

#### 3.1 Strategic Case

3.1.1 The Future Operating Model for the Council's ICT service is founded on the model shown below, which sets out the current RBC ICT scope in terms of industry-standard, well defined towers of services.



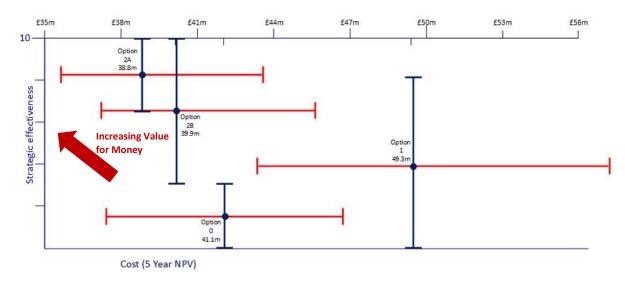
Blue elements of the diagram are candidates for different sourcing options (e.g. in-house, external, or shared service), whereas those in mauve are inhouse functions. Detailed descriptions of each of the Towers are provided in the Appendix A.

- 3.1.2 However, the Future Operating Model should not merely replicate current provision, but should meet the following strategic requirements, which were identified in consultation with senior business representatives across both the Council and Brighter Futures for Children:
  - robust, responsive delivery ICT is critical to operational service delivery and staff, customers and members need to be able to rely on it. As the range of ICT services has grown and reliance on ICT has increased, issues with the current model have emerged that impact delivery and which must be addressed for the future;
  - **future fitness** the flexibility to cope with changing business needs and new technologies, and to enable digital transformation such as that underpinning the Customer Experience Strategy, which is forecast to deliver both a transformation in customer experience and £580k in savings over four years.

#### 3.2 Economic Case

- 3.2.1 We have identified and assessed the following options:
  - a) Option 0 Replicate as-is outsource: The Council procures the services of a single replacement supplier to take on the existing solutions and services, which do not change although a basic level of refresh is undertaken. Current levels of investment and support are maintained. The existing in-house service remains as is. This is a 'Do Minimum' option.
  - b) Option 1 Optimised outsource: The Council procures the services of a single supplier to provide all ICT Services and ensure the integration and innovation of those services to meet our strategic needs. This option builds on the current operating model but is enhanced to address the requirements set out at 3.1.2. In particular, in-house capabilities are enhanced (notably service and contract management, technical design assurance and project management) and technology refresh in line with common industry practice is planned in.

- c) Option 2 Smart-sourced: The Council transitions the service towers to the most appropriate provider or end state, creating a "best-of-breed" model that integrates interdependent services from various in-house, external or shared service providers, into a fully managed service. The in-house service is redesigned to assure and provide integrated management across the model. On the basis of soft market engagement, this option was refined into two variants. In both, there would be procurements for the Hosting, Network and Unified Communications towers. However, the options differ in their approach to the provision of Service Desk and Service Management, End User Services and IT Service Management Tooling:
  - i) Option 2A Procure single managed service for this set of towers from a commercial provider or shared service provider (though no viable candidate for the latter has yet been identified);
  - ii) **Option 2B** Build in-house capability for this set of towers (potentially in collaboration with another Authority).
- 3.2.2 The relative Value for Money of these options has been evaluated by assessing their:
  - a) Strategic Effectiveness a consultative, qualitative assessment of quality of service (robust, responsive delivery), the ability to respond rapidly to new business requirements and technical opportunities (future fitness), and management of risk; and
  - b) **Cost** based on rough order of magnitude (ROM) costs identified through market engagement and costing of the internal team, together with weighted risk, expressed as a five-year NPV).
- 3.2.3 The diagram below plots each option against these dimensions. The intersection for each is between the most likely cost and the average opinion on strategic effectiveness, with the red and blue lines illustrating uncertainty in the former and range of opinion around the latter.



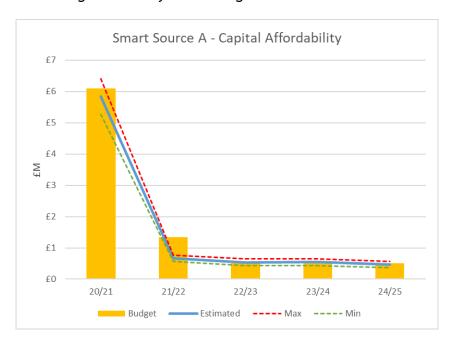
- 3.2.4 Further detail is provided in section 3 of the Outline Business Case attached at Appendix A. The conclusion, however, is that:
  - a) The baseline Option 0 is not seen as viable and would not represent Value for Money.
  - b) Option 1 is assessed to be higher cost than both variants of Option 2 and judged to be less effective than either, and therefore is not a preferred option. There is a

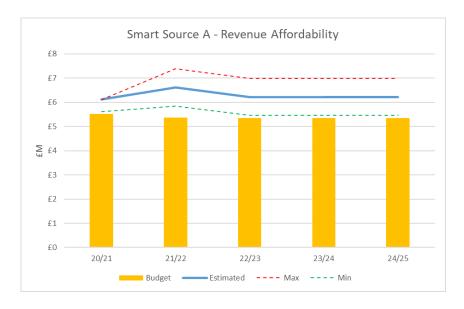
therefore a prima facie case that the project should proceed on a smart-sourcing basis rather than seek to procure a single strategic partner. However if a single supplier were to be successful on all lots under Option 2A, then the possibility of engaging that supplier as a strategic partner could be assessed. Hence the possibility for the market to demonstrate the value for money of Option 1 is not excluded.

- c) The choice between Options 2A and 2B is more finely balanced. Once established, their strategic effectiveness and running costs are likely to be broadly comparable. However, the setup costs and transition risks for Option 2B are assessed to be significantly greater than for Option 2A because of the significant work required to build an in-house capability from ground up.
- d) Because of this up-front need for investment, with associated cost and operational risk, we assess that Option 2B would offer poorer Value for Money than Option 2A. This would be the case at any time. However, current circumstances make the difference between the options even clearer.
- e) The impact of the additional costs of Option 2B would fall at a time when the organisation us under increased financial pressure owing to covid-19. Meanwhile, the short time available for transition would increase the potential consequences of transition risk, threatening both normal operations and the loss of momentum on transformation programmes such as Customer Experience.
- f) Given that Option 2B offers poorer Value for Money, and also poses additional short-term risks, Option 2A is recommended as the preferred option.

#### 3.3 Financial Case

3.3.1 The graphs below show the capital and revenue profiles of Option 2A, relative to budget, based on soft market testing. The blue line represents the estimated cost, and the red and green dotted lines represent the maximum and minimum costs respectively. The wide envelope between them reflects both risk and the high estimating uncertainty at this stage.





- 3.3.2 As is evident from the graphs, while the capital element of Option 2A is affordable (with a possible need for minor reprofiling), there is a revenue affordability challenge estimated to be of the order of £0.5m in 20/21, £1.2m in 21/22 and £0.8m per annum thereafter.
- 3.3.3 Nonetheless, given that Option 2A provides both the best value for money and the lowest cost in each year compared with other options, it remains the recommended option to take forward. All appropriate steps possible will be taken in the procurement and implementation process to minimise cost and reduce the affordability challenge.

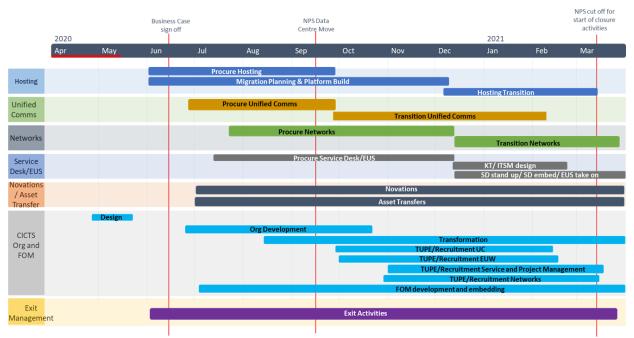
#### 3.4 Commercial Case

- 3.4.1 Through the soft market engagement exercise, we have confirmed that there are suitable suppliers in the market to meet our requirements and that there are suitable commercial vehicles to support the procurements required.
- 3.4.2 Key features of the commercial strategy set out at section 5 of the Outline Business Case attached at Appendix A are:
  - a) the use of government frameworks to maximise Value for Money and streamline procurement, noting that the services being procured are of a standardised and, in some cases, commodity nature;
  - b) enabling suppliers to bid for multiple services so that any additional value they can offer in doing so can be recognised;
  - c) enabling Shared Service providers to be considered alongside commercial providers;
  - d) the incorporation of social value into procurement evaluation criteria to ensure that Value for Money is assessed in its fullest sense;
  - e) the use of shorter contract terms (eg the 2+1+1 or 3+2 year terms typical of government digital frameworks) to enable flexibility for the future;
  - f) a phased approach to both procurement and transition to minimise cost and risk.

#### 3.5 Management Case

- 3.5.1 To provide assurance that the preferred option is deliverable, a project plan has been developed encompassing:
  - a) Preparation of specifications, procurement materials, information to support bidder due diligence, and plans for procurement and evaluation;
  - b) Market engagement and running of procurement processes;

- c) Transition, including knowledge transfer, asset transfer, data migration and controlled cutover:
- d) Organisational change, including consultation over new structures, recruitment and onboarding, learning and development, and TUPE activities.
- 3.5.2 The high-level project schedule is shown below (and is in larger format at Appendix A section 6).



3.5.3 As agreed at Policy Committee in February 2020, a Design and Transition Partner has been appointed, the competition for this having been won by Channel 3 Consulting Limited. This, coupled with the allocation of time from senior specialists within the Council, provides assurance that there is a team in place to deliver the plan.

#### 4. CONTRIBUTION TO STRATEGIC AIMS

- 4.1 The FOM is critical to the operation of the Council and therefore underpins all strategic objectives. In particular:
  - It directly aligns to the corporate priority "Ensuring the Council is fit for the future".
  - The Customer Experience Strategy approved at the January 2020 Policy Committee cited the FOM as a critical dependency.

#### 5. ENVIRONMENTAL AND CLIMATE IMPLICATIONS

5.1 The proposal and decision being recommended have no direct impact on the Council's ability to respond to the Climate Emergency and achieve a carbon neutral Reading by 2030. The proposals are however intended to provide a suitable technology platform for the Council and services to be better placed in responding to the Climate Emergency. Furthermore, energy efficiency will be taken into account wherever relevant in design and procurement, for example in the selection of the Hosting solution.

#### 6. COMMUNITY ENGAGEMENT AND INFORMATION

6.1 The Future Operating Model Business Case has been consulted on with key service stakeholders and through the Officer-led Digital Futures Board. In creating the Page 146

Business Case, the consultants supporting the Design phase (Channel 3 Consulting) have undertaken market engagement to confirm market interest and obtain estimates to underpin the analysis in the Outline Business Case.

#### 7. EQUALITY IMPACT ASSESSMENT

7.2 There are no direct Equality implications arising from this report. It will be necessary to ensure that equality aspects are considered in the specification of goods and services (eg considering the needs of users with disabilities) to be procured, and in the implementation of organisational change.

#### 8. LEGAL IMPLICATIONS

- 8.1 It is critical that this project is undertaken as the current contract with Northgate Public Services cannot legally be extended beyond the end of March 2021. (Provision does exist, as a contingency, for Northgate's involvement in transition activities to extend beyond that date, but it remains critical to have the new supply arrangements in place.)
- 8.2 All procurements will be subject to Public Contracts Regulations 2015 and the Council's Contract Procedure Rules.

#### 9. FINANCIAL IMPLICATIONS

9.1 The financial implications of the proposal are summarised at section 3.3 above and covered in more detail at section 4 (Financial Case) of Appendix A.

#### 10. BACKGROUND PAPERS

None





# Taking Control of our Digital Future

Document Version 1
12 June 2020

ICT FUTURE OPERATING MODEL
Outline Business Case – Appendix A
to report to Policy Committee





# **Client Organisation**

| Organisation Name       | Organisation Address                           |  |
|-------------------------|--|--|
| Reading Borough Council | Civic Offices, Bridge Street, Reading, RG1 2LU |  |

#### **Document Control**

| Change History |        |              |                 |  |
|----------------|--------|--------------|-----------------|--|
| Ver            | Status | Date         | Author / Editor | Details of Change                            |
| 1              | Issued | 12 June 2020 | RBC             | Issued to Policy Committee for consideration |

#### **Notices:**

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| Ann             | nex A – [Redacted owing to commercial sensitivity]  | 40 |



#### 1 Introduction

In 2011, Reading Borough Council (RBC) awarded a partnership contract for core ICT services to Northgate Public Services (NPS). This is a full outsourcing arrangement, under which overall responsibility for the delivery of ICT services was transferred to that organisation, with minimal core ICT capability retained in the Council.

The contract was for seven years, with the option of a two-year extension. In 2019, that two-year extension was invoked. The contract now expires in March 2021 and contains no further provision for extension. It is therefore essential that successor arrangements are put in place. These are known as the ICT Future Operating Model.

This document sets out the business case for the Future Operating Model, describing what it needs to achieve, assessing the options for it, describing their relative Value for Money and affordability, and describing how new arrangements will be procured and implemented.

# 1.1 Governance Arrangements

This Business Case will be taken through the following governance route for approval by Policy Committee.



#### 1.2 Structure of the Case

This business case follows the Office of Government Commerce and Public Sector guidelines for best practice business case development (the five-case model):

#### The Strategic Case:

- Service and Operational Drivers for Change
- · Overview of the current service
- · Required capabilities

#### The Economic Case:

- Definition of the options and evaluation approach
- Assessment of the options against evaluation criteria strategic effectiveness and financial impact
- Value for Money (VFM) assessment
- Selection of a preferred Future Operating Model, which best meets existing and future needs, is likely to optimise VFM, and will enable achievement of the organisation's strategic objectives

# Management Case Case Case Finance Case

#### The Commercial Case:

Commercial objectives



- Procurement strategy, routes to market, procurement approach and design
- Contract considerations/objectives
- Exit considerations
- Contract management considerations

#### The Financial Case:

- Impact on income / expenditure (cash flow, revenue and capital implications).
- Requirements for efficiency savings / opportunities
- Affordability, taking into consideration savings targets

#### The Management Case:

- Programme management arrangements, decision points and review processes
- Assessment of risk in achievement of expected benefits
- Approach to risk, delivery management, change and benefits realisation
- Outline timetables for delivery including the proposed transaction and implementation
- Transition project (costs, resources, schedule)
- External support implications



# 2 Strategic Case

# 2.1 Purpose of the Strategic Case

An ICT Future Operating Model is essential given the expiry of the current contract at the end of March 2021: there is no "do nothing" option. The strategic requirements for the Future Operating Model go beyond continuity of service. This section sets out those strategic requirements.

The Council, in common with all Local Authorities, faces pressures in terms of challenging financial targets and increasing service demands. It needs to transform the way it operates through new service models, new ways of working, integration with partner providers, automation and self-service. A flexible, responsive and innovative ICT service is an essential and critical enabler of that transformation. The Future Operating Model therefore needs to address how ICT can support and enable the Council's Corporate Plan priorities and Service development requirements.

The sections below set out:

- the strategic context for the Future Operating Model (i.e. how it fits into RBC's wider programme of corporate transformation);
- the scope of Future Operating Model;
- the fundamental requirements that the Future Operating Model must meet, which have been derived from consultation with service areas across RBC and Brighter Futures for Children.

#### 2.2 Strategic Context

An extensive Discovery exercise has been undertaken to understand the current ICT provision, including staffing and functions, contracts, third-party services, processes, hardware, software, licences, and costs. This exercise informed the requirements for a Future Operating Model and confirmed the scope of the ICT Services required to meet the Council's needs.

In order to achieve the Corporate Plan objectives, RBC has initiated a far-reaching portfolio of corporate transformation, covering adult social care; land, property and development; environment and climate, customer experience and the building of TEAM Reading. This portfolio is currently being reviewed to align with the organisation's needs for operational and transformational recovery from covid-19.

The importance of digital technologies in enabling transformation and new ways of working has already been demonstrated in a small way in the response to the covid-19 crisis, which has seen unprecedented levels of home and mobile working, widespread video conferencing and a sharp growth in online collaboration across the organisation.

Recognising that the digital dimension of transformation will continue to grow, the Digital Futures Programme Board's remit is to develop RBC's Digital Strategy, ensure that the technical enablers for that strategy are in place, and ensure that all ICT and digital projects undertaken by RBC align with it. The Digital Strategy is being developed with the following aims:

- Work better with our customers, our partners and ourselves using new service delivery channels; giving great customer experience; reducing costs; collaborating effectively; and changing working practices to drive efficiencies and streamline delivery.
- Work smarter with data sources and intelligence to inform policy, strategy, operations and casework.
- Drive inclusive digital growth through collaborating locally, identifying potential for change, connecting citizens and reinforcing Reading's digital brand.

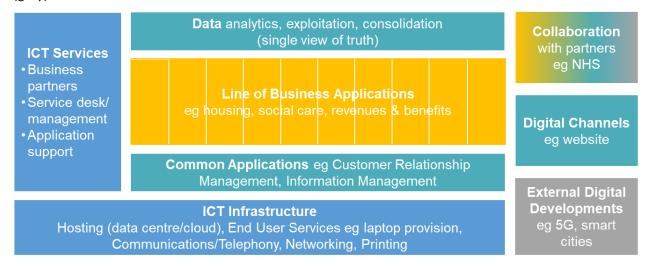


- Embrace lean innovation at pace, relentlessly focusing on rigorously prioritised benefits and experimentation.
- Consolidate and maintain ICT service control, including security, availability, performance and value.

The programme to implement the Customer Experience Strategy, which was approved at the January 2020 Policy Committee, exemplifies these aims and is dependent on the Future Operating Model. The Customer Experience Strategy identifies the shift to digital in its philosophy: harnessing digital technology (including self-service and robotic process automation) and realising the power of data. The programme offers savings of £581k over the next 5 years.

Analogous digital transformations are already identified and progressing in other areas such as an upgrade to the Social Care application to enable mobile working and a replacement Housing application, which will enable implementation of a new operating model in that area.

The diagram below illustrates the role of the ICT Future Operating Model (shown in blue) in supporting the Council's Digital Strategy, enabling and complementing the other elements: line of business applications (orange), cross-cutting digital tools and channels (teal), and external digital capabilities (grey).

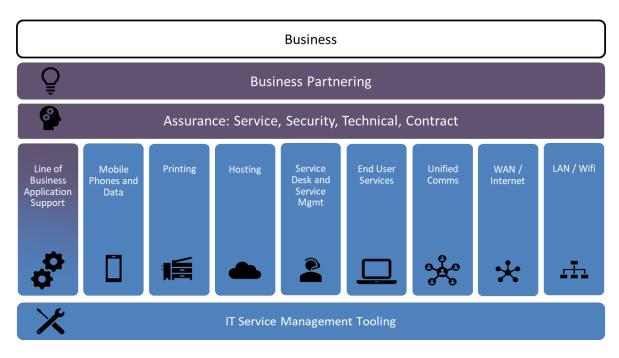


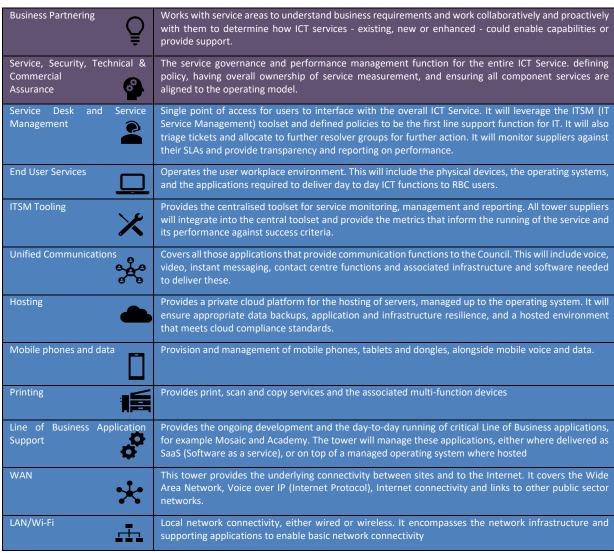
# 2.3 Scope of Future Operating Model

The scope of the Future Operating Model – and indeed the current service – is best expressed through the "towers" model illustrated below. The model is deliberately flexible, to allow both enhancements to existing towers and the addition of new towers as the need arises, driven either by evolving business need or technological advances.

Towers coloured blue are those currently delivered by or via Northgate and are all candidates for different sourcing options (in-house, external or shared service); those in mauve are, or should be, in-house functions; Line of Business Application Support is a combination of the two.









# 2.4 Fundamental Requirements for the Future Operating Model

The Council needs to replace and, as a minimum, maintain the current ICT Service provision arrangements currently delivered via the Northgate contract. In doing so, it also needs to achieve two fundamental requirements: 1) robust and responsive delivery and 2) future fitness. These requirements were identified in consultation with senior business representatives and are critical in achieving the Council's digital objectives.

#### 2.4.1 Robust and Responsive Delivery

Given the criticality of ICT to operational service delivery, staff must be able to rely on an ICT service which is robust and which can respond to their needs. Business representatives consulted to inform the project overwhelmingly requested:

- "ICT that works the technology is reliable and available; processes work; promises are kept in a timely manner;
- "Effective operational communication the Service Desk understands us and our business; they proactively keep us informed in terms that we can understand."

Notwithstanding the good work by members of the RBC and NPS teams, the requirement for robust and responsive delivery is not being fully met by the current model. As technology and business requirements have evolved over the life of the current contract, gaps and deficiencies have developed. Examples identified during Discovery include:

| Service operations             | The Council lacks sufficient visibility of the totality of the ICT Service; service information is not integrated and not fully up to date; services are fragmented and under-resourced                   |
|--------------------------------|---|
| Network connectivity           | Fragmented between multiple providers with no overall performance monitoring  |
| Security                       | A multiplicity of services exists, resulting in a complex security landscape in need of rationalisation (on which an immediate programme of work to resolve the most pressing issues is already in train) |
| End user workspace             | An application review has identified the need for rationalisation   |
| Hosting                        | Server and storage hardware and software infrastructure is aged   |
| Unified communications         | Currently limited in scope, with a telephony solution reliant on legacy hardware  |
| Service strategy and assurance | Processes are inhibited by lack of information and resource; objectives are not aligned; the Council is vulnerable to both service interruptions and cost variations.                                     |

These deficiencies must be rectified. Doing so will require not only action relating to service towers but also the reinforcement of capabilities within the Council ICT Service team including contract and service management, and technical design assurance.



#### 2.4.2 Future Fitness

The ICT Service needs to be capable of supporting the digital transformation of Council services described at 3.2. This was reflected in the views of the senior business representatives consulted, who called for:

- **agility** new products, services, and technologies can be incorporated efficiently, effectively and at pace;
- a partnership approach to innovation ICT proactively helps the organisation turn technological opportunity into business benefit; it supports and drives innovation and benefits realisation.

#### Future Fitness requires:

- enhanced **business partnering** from the ICT Service engaging with the business to understand needs and bring technical innovations to bear, in line with the Digital Strategy;
- currency of technology a service sufficiently up to date to be capable of adapting swiftly to new requirements and exploiting the opportunities offered by new technologies;
- **flexibility** a technically and commercially open structure which makes it possible to introduce new services easily, link services in different ways or replace existing services where necessary.

The current arrangements fall short of meeting these requirements, illustrated by the delayed project to upgrade the organisation to current versions of Microsoft applications (Office 365) and operating systems (Windows 10). The business partnership function has limited resource and has had to be focused on the resolution of operational issues as a result. Deficiencies such as a lack of a complete end-to-end architectural view of ICT, as it has evolved over the life of the current arrangements, have hampered flexibility.

# 2.5 Strategic Case Conclusion

Given the dependence of RBC on ICT for every aspect of its operation – illustrated by the criticality of its services in the covid-19 response – there is a fundamental requirement for the ICT service to provide robust and responsive delivery.

Future Fitness is a similarly fundamental requirement, to enable the digital transformation that underpins so much of the organisation's transformation programme.

The Discovery stage of this project confirmed that a step change is necessary to deliver the ICT service the Council needs for the future. The opportunity presented by the transition from the current ICT Service provision will enable this step change and the resultant benefits.



#### 3 Economic Case

# 3.1 Purpose of the Economic Case

The purpose of the Economic Case is to identify the best Value for Money option for meeting the requirements set out in the Strategic Case. It sets out:

- the options for the Future Operating Model, showing how an initial set of options (section 3.2) was further refined based on market engagement (section 3.3);
- an evaluation of the options (sections 3.4), carried out in line with the method approved at the April ICT Future Operating Model Project Board, and identification of a preferred option (section 3.5).

# 3.2 Future Operating Model Options Definition

### 3.2.1 Option 0 – Replicate as-is outsource

The Council procures the services of a single replacement supplier to take on the existing solutions and services, which do not change beyond a basic level of technology refresh. Current levels of investment and support are maintained. The in-house ICT Service and team structure are unchanged. This is a 'Do Minimum' option.

#### 3.2.2 Option 1 – Optimised outsource

The Council procures the services of a single supplier to provide all ICT Services and ensure the integration and innovation of those services to meet the Council's strategic needs. This option builds on the current operating model with Northgate but is enhanced both to address the Strategic Case for change and to remedy deficiencies in the current arrangements identified through Discovery. This would change the scope of both the supplier and the in-house service. This option differs from Option 0 as follows:

- The in-house team would be restructured and grown to address identified gaps in service assurance, technical design assurance and governance, service and performance management and contract management.
- This would involve a net increase in the size of the team from 12 to 23 staff, providing:
  - a service integration and operational delivery management function including portfolio management, contracts management, service management operations and demand/catalogue management;
  - additional business partnering capability;
  - an ICT Project Management Office function;
  - a Line of Business applications analytics and reporting function;
  - a Technical Design Authority and Assurance function including digital innovation, business and strategic assurance, and security, risk and quality assurance and compliance.
- It includes the technology refresh required to enable the Council to keep up to date with application releases and take advantage of market developments in technology, in line with the strategic case for change. Specifically, it adopts an "N minus 1" release policy, in line with common industry practice, whereby the organisation remains no more than one major release behind the current version of its technologies.



#### 3.2.3 Option 2 – Smart-sourced

The Council transitions each of its ICT Service components (towers) to the most appropriate provider or end state, creating a 'best of breed' model that integrates interdependent services from various inhouse, external or shared service providers into a fully managed service. Suppliers are contracted to refresh solutions and services to maintain currency as in Option 1. The in-house service is redesigned to assure and enhance the new model (as in Option 1), and/or to provide some of the services in scope. In particular, the in-house team's scope is expanded to cover service integration, as responsibility for managing multiple suppliers resides with the in-house team under Option 2.

# 3.3 Option 2 – Design and Options

This section describes how potential variant models for Option 2, combining ICT Services in optimal ways, have been developed based on feedback from the Market Engagement exercise described below.

#### 3.3.1 Commercial Provider Market Engagement Findings

The project team conducted a soft Market Engagement exercise to identify:

- If there is there a market interested in supplying the ICT Services that the Council is seeking to procure;
- How the market believes these services should be brought to market (bundled);
- Rough order of magnitude (ROM) costs for these services.

Market engagement commenced on 16 April 2020. The purpose of market engagement was to seek feedback on the proposed design options from proven commercial providers of the core service towers, who have experience delivering within 'smart-sourced' settings.

Suppliers were identified through frameworks, market analysis, and by investigating the suitability of the suppliers' solutions and experience. ROM pricing and input on factors likely to drive costs were sought from suppliers for incorporation into the Financial Case and to inform the Value for Money assessment in the Economic Case.

The design options were refined and adjusted through supplier dialogue as recommendations emerged that offer commercial or operational benefit.

Details of the soft market engagement exercise and findings are provided in Annex A. The key points arising were as follows:

- Overall, the market endorsed our analysis of service design options. Only one supplier believed
  the smart-source model did not offer Value for Money, clearly preferring to act as a single prime.
  All other suppliers recommended smart-sourcing based on individual towers or bundles of
  towers (Option 2).
- The market highly recommends that Service Desk and IT Service Management tooling should be bundled together, however delivered.
- Suppliers also advised that End User Services provision should be closely coupled to the Service
  Desk, as many tickets are driven by this service so that it is more efficient to keep the two towers
  aligned. This suggests that Service Desk, IT Service Management tooling and End User Services
  should be procured or developed together.
- Hosting is highly commoditised, with almost all the suppliers consulted offering a variant of this
  capability.



 Unified Communications (UC) was similarly of interest to a broad range of the suppliers consulted, with consistent advice that whatever platform is used, UC as a Service should be adopted.

# 3.3.2 Shared Service Market Findings

In parallel, engagement has been undertaken to explore the potential for elements of the model to be sourced or developed as shared services with other Local Authorities or shared service providers that have themselves developed from Local Authority ICT service provision. Details are provided in Annex A. The main conclusions are:

- We have not, to date, been able to identify a shared service model that fits the Council's requirements and is offered to the market.
- The most successful ICT shared services have been local strategic collaborations not open to wider use.
- Those shared services that are providing services more widely do not appear able to meet our requirements.
- There is some local (officer level) interest in collaboration but not of a full shared services nature.

# 3.3.3 Future Operating Model Tower bundling and options assessment

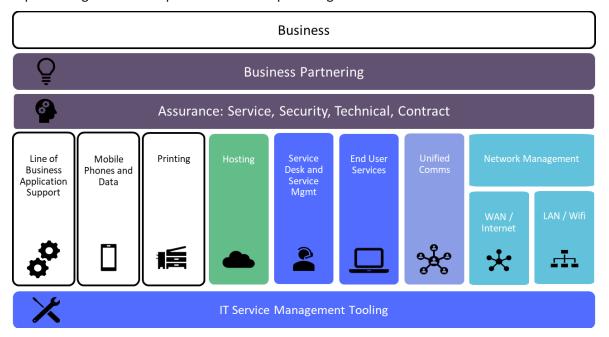
Using the findings of the market engagement, options for each individual tower were assessed for **feasibility** (affordability, market availability and achievability by exit date) and **desirability** (alignment with design principles, best practice, business drivers, relative cost). The top-level conclusions were:

- Service Desk, End User Services (End User Services) and IT Service Management tooling should be bundled. There is a strategic choice to be made in the Business Case as to how these are to be procured. This choice profoundly affects the procurement and delivery plan and hence the comparison of these options is the primary focus of this paper. The options are:
  - Option 2A Procure managed service: This is a standard market offering. Service
    providers have existing operational processes and knowledge capture and maintenance
    processes that would address deficiencies identified in Discovery, and the market
    includes suppliers with local government experience.
    - In Option 2A, the in-house function would be further developed to include greater service integration and contract management capability. Compared with Option 1, this would add 4 staff, taking the total team size to 27.
  - Option 2B Build in-house service: This would involve in-house provision of a Service
    Desk/Service Management and End User Services 'intelligent hands' deskside support
    service. Natural synergies with the overall Service Assurance and Business Partnering
    functions offer the opportunities for a more seamless ICT user experience both
    operationally and strategically than that of Option 2A.
    - This needs to be balanced against the costs of creating and maintaining this capability locally and at the required scale: compared with Option 2A, an additional 24 staff would be required, taking the team size to 51.
- There are shared service variants of both Option 2A (where an existing shared service is found to be better VFM than a commercial provider, though a suitable candidate has not yet been identified) and Option 2B (where we collaborate with another Authority to build a capability and/or offer it to others once built):



- An existing shared service proposition for Option 2A could be pursued via an appropriate procurement route.
- Building an Option 2B capability to then offer to the Local Authority market does not appear to be financially or operationally practical, based on existing shared service offerings, or a priority for the Council.
- While design options for **Printing and Applications Support** remain open, they are independent of the Option 2A/2B choice and (while there may be some savings) are unlikely to have a significant effect on the Financial Case. For the purposes of the business case, an extension of the status quo has been assumed. The options and their benefits will be pursued as part of the remaining Future Operating Model design work and in transition.
- Current arrangements for **Mobile and Data** should be maintained.
- Hosting, Unified Communications and Network Management (including WAN/Internet and LAN/Wi-Fi) are commodity services. The Market Engagement exercise has confirmed that an individual smart-sourcing approach to these services is preferable and they should be procured via a multi-lot procurement programme. Natural efficiencies between lots may be realised but that does not mean that tower lots should be combined as this would reduce market choice and Future Operating Model flexibility. The procurement programme need not be a single multi-lot procurement; it may comprise a set of procurements overlapping in time but each using the most appropriate procurement route for its content.

The bundling of Tower options described above can be represented as follows, the coloured towers representing the discrete procurements' scope during Transition:



# 3.4 Options Evaluation

# 3.4.1 Evaluation Approach

This Business Case focuses on assessing Value for Money for the proposed Future Operating Model in achieving optimal ICT Service delivery. Value for Money is mapped against two dimensions:



- Cost (NPV) of the Future Operating Model and the ICT Services it will deliver this is covered in the Finance Case
- Strategic Effectiveness of the Future Operating Model and the ICT Services it will deliver.

These are combined in an assessment of the Future Operating Model options defined above. The cost-vs-effectiveness approach is adopted in preference to a purely financial evaluation because, while the Future Operating Model is expected to be a significant enabler of financial benefit across the organisation, this cannot be fully quantified as the digital strategies that the model will enable have not yet been developed across every service within the Council.

The evaluation approach can be summarised as follows:

### Strategic Effectiveness (score)

- · Quality of service
- Support to corporate priorities: assessed by business representatives
- Future-fitness: ability to respond rapidly to new business requirements and technical opportunities
- Management of Risk (transition, security performance, availability, people)

# Strategic Effectiveness

# Financial impact (£)

- Cost (informed by market engagement)
- plus weighted financial risk
- (minus any weighted specific cashable benefit)
- · expressed as [5]-year NPV

The Future Operating Model options have therefore been assessed by evaluating:

- The financial analysis (from the Financial Case) based on ROM costs for the defined Future
  Operating Model options and sub-options, derived from the Market engagement and the
  Council internal staff costs. The Financial impact i.e. the total cost plus weighted financial
  risk/opportunity impact, expressed as 5-year NPV. This is addressed in the Value for Money and
  Affordability Assessment sections below.
- Effectiveness in fulfilling the strategic objectives of the project. Scoring against the Strategic Effectiveness evaluation criteria is detailed in the section below.

# 3.4.2 Options Evaluation – Strategic Effectiveness

## 3.4.2.1 Strategic Effectiveness Criteria

| Criterion          | Scoring Considerations  |
|--------------------|---|
| Quality of service | Informed by the earlier Discovery work, the extent to which the option can        |
|                    | provide the required service levels, and address the deficiencies in the          |
|                    | current services, meeting the strategic requirement for <b>robust, responsive</b> |



|                                 | <b>delivery</b> that was embodied in business representatives' calls for "ICT that works" and "effective operational communication"               |  |  |  |  |  |  |
|---------------------------------|---|--|--|--|--|--|--|
| Future Fitness                  | To what extent does the design option respond to business representative's calls for "responsiveness to change" and "partnership for innovation"? |  |  |  |  |  |  |
|                                 | Is it rapidly scalable?   |  |  |  |  |  |  |
|                                 | Does it have characteristics that makes it more/less likely to create barriers to the adoption of new technologies or integrations?               |  |  |  |  |  |  |
| Management of risk to strategic | During transition to the Future Operating Model and ongoing operational delivery:   |  |  |  |  |  |  |
| effectiveness                   | Transition risk   |  |  |  |  |  |  |
|                                 | Security, availability and operational performance risks  |  |  |  |  |  |  |
|                                 | People risk – recruitment and retention   |  |  |  |  |  |  |
|                                 | Risk transfer to other parties better placed to manage  |  |  |  |  |  |  |

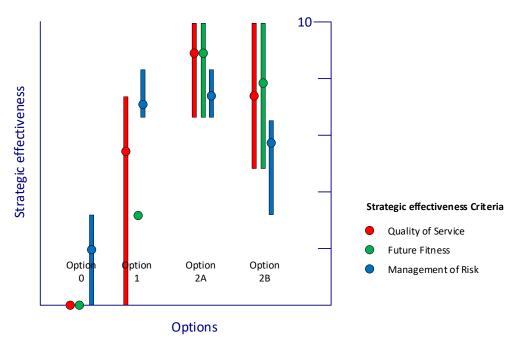
## 3.4.2.2 Assessment

These criteria were evaluated by the Chief Digital and Information Officer, Associate Director for Procurement and Contracts, and members of the Council ICT Service team, supported by the Transition team. Each Future Operating Model option was qualitatively assessed against each criterion using the following scale:

| Score | Description  |
|-------|--|
| 3     | An excellent fit with the criterion and most likely to result in success |
| 2     | A good fit and alignment with the criteria                               |
| 1     | Partial fit – some criteria met  |
| 0     | A low score; does not meet our criteria and will prove challenging       |

Scoring was relative, not quantitative, and supported by rationale. Individual scores were aggregated to produce a mean average and a range. The scoring approach is therefore indicative of perceived differences between the Future Operating Model options rather than being robustly scientific. No weighting has been applied across the criteria. The following graph depicts the resultant scores:





**Option 0 rationale** – The collective view was that this option did not satisfy the Quality of Service and Future Fitness criteria. Management of Risk scored slightly higher because it represents minimum change during Transition.

**Option 1 rationale** - The enhanced ICT outsource option scored uniformly low on Future Fitness given the inherent constraints that a single primary supplier is likely to impose on flexibility and adaptability, the opportunity to change services or service providers. Quality of Service provoked mixed views with a midpoint average, this depended on perspectives about the extent to which service improvements could be enabled given the ICT outsource model and across different service of Future Operating Model towers. Management of Risk scored relatively highly with a narrow range. The enhanced service from both the internal Council ICT Service team and a single ICT prime outsource provider is considered to reduce risks both through transition and in future operation.

Option 2A rationale - Quality of Service and Future Fitness scored uniformly high with similar ranges. The ranges reflect the extent to which the team felt that the overall Option 2 smart-sourced approach will deliver Strategic Effectiveness, given the degree of seamless working across the ICT service between the Council ICT Service internal team covering Business Partnering and Service Assurance/Management, with a manged service provider for Service Desk/Management and End User Services. With an optimal provider, the potential relationship was considered to be excellent. Management of Risk was scored uniformly high with a narrow range, similar to Option 1. This criterion was considered not to minimise risk entirely and is dependent on the in-house Council ICT Service team's ability to manage an integrated multi-source service.

Option 2B rationale - Quality of Service and Future Fitness scored similarly with a relatively wide range of scores compared with Option 2A and slightly lower averages. The lower scores reflected concerns over the Council's ability to stand up and operate an effective operational Service Desk/Management and End User Services deskside support 'intelligent hands' service compared with a managed service provider in Option 2A, primarily because of the scale, lack of experience and increased fragmentation in the service model. (IT Service Management tooling would be procured separately and it would not be possible to integrate End User Services and UC into a single service). However, the upper bounds of the scoring range reflected a view held by some that these drawbacks could be outweighed by the increased business intimacy and knowledge to be gained through an in-house team.



The Council officers' priority requirements identified in the Strategic Case, and aligning with the required ICT Service capabilities, also align with and reinforce the Strategic Effectiveness assessment.

The results of a structured and facilitated group discussion with senior business representatives were consistent with the assessment. Officers expressed a preference and belief that there is value in using an established, professional industry-standard technical support service for Service Desk, Service Management and Deskside support, providing it is well briefed and informed through local knowledge transfer. This outweighed the potential value gained through business intimacy from an in-house service, primarily because of the reduction in risk in setting up and maintaining the service. This reflects the requirements identified in the Strategic Case for both robust and responsive delivery and Future Fitness capabilities.

### 3.4.2.3 Conclusions

The Strategic Effectiveness assessment concluded that:

- Option 0 is, as anticipated, not a viable option.
- Option 1 is viable and relatively low-risk but will not fully meet the Quality of Service or Future Fitness objectives although it remains a relatively low-risk option.
- Both variants of Option 2, reflecting the outcomes from the Market engagement exercise, meet the Strategic Effectiveness objectives more fully than Option 1, particularly on Quality of Service and Future Fitness.
- The differentiation between Options 2A and 2B is finely balanced. Option 2B was judged to be no more effective than Option 2A but with higher risk, particularly around transition.

### 3.4.3 Cost Assessment

A summary of the total cost implications of each option is presented below.

Existing software, service, and staffing costs have been gathered from Council ICT Service budgets, spend analysis, invoicing, contract records and current supplier Northgate CCNs.

Future commercial service costs have been informed by the Market Engagement exercise. A number of suppliers provided Rough Order of Magnitude (ROM) costs for each of the towers of service, and outlined assumptions associated with their pricing. Adjustments were made to:

- Recognise where existing Council assets, software and licensing could be reused in the provision
  of the new service.
- Ensure a like-for-like comparison across supplier ROMs where possible (e.g. by adjusting the number of licences to ensure an equal comparison could be made).
- Identify appropriate mid points in pricing where a variety of tiers of service were offered (gold, silver, bronze).
- Discard outlier ROM pricing (high or low) that did not reflect the scale or type of service required.

The suppliers indicated that ROM pricing can vary  $\pm 20\%$  for annual charges but may vary by  $\pm 30\%$  for transition and implementation charges. This is particularly true with respect to migration to a new hosting solution, which is a complex process requiring focused engagement, analysis and planning in order that an appropriate approach and price can be built.

The costs of the intelligent client function for Options 1, 2A and 2B were derived through an organisational design process driven both by good industry practice models for the design of such functions and by an analysis of the additional capabilities needed to address the current deficiencies

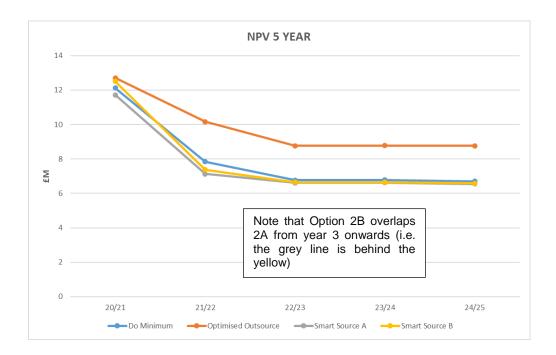


identified in the Discovery activity and referenced in the Strategic Case. The in-house function costs of Option 2B were informed by an analysis of historic service ticket volumes, industry practice, and comparison with other Local Authorities.

In the absence of any ROM for a prime service from a single prime contractor, the estimates for the provider element of Option 1 are a judgement based on consideration of both:

- what provider work would be required to remedy deficiencies in Option 0 (i.e. extrapolating from Option 0 to Option 1);
- the charges that a supplier integrating the various towers for which estimates have been obtained would be likely to make, covering both service integration and management, and margin on subcontracted services (i.e. extrapolating from Option 2 to Option 1).

Note that there is a restructuring cost risk associated equally with all Options. Given that such costs are understood to be centrally provided for (so not relevant to the Financial Case) and the cost is equal for all Options so does not affect the VFM assessment, they have been omitted at this stage.



**Option 2A – Smart-source** has the lowest cost, with Option 2B following very closely. There is little difference in revenue costs between the options, but higher capital costs are associated with Option 2B as set up of an in-house service requires significant investment.

**Option 2B – Smart-source** has an additional risk (not shown on the diagram) which must be considered with respect to the implementation or 'start up' of the in-house Service Desk, Service Management and End User Services Deskside Support service. This relates to the complexity of setting up an in-house service and considers how this factor might increase programme and transition costs as a result of a protracted design and set up phase, and through the need to retain contract staff for a period while recruitment is pursued and the service 'beds in'. An additional capital risk of £370k is considered prudent for this option (giving a Cash Impact total of £41.13m)

**Option 0 – Do Minimum** requires significant investment to perform a minimum and comply with minimum PSN/PCI standards. A refresh of the server infrastructure, critical firewall devices, and an upgrade the SQL estate is required. Up to date Anti-Virus software is required across the estate. A 'lift



and shift' to a new data centre would also be required under this option. As many devices are end of life, a refresh of 25% of the end user device estate per annum has been factored into the costs for all options from years 2 to 5.

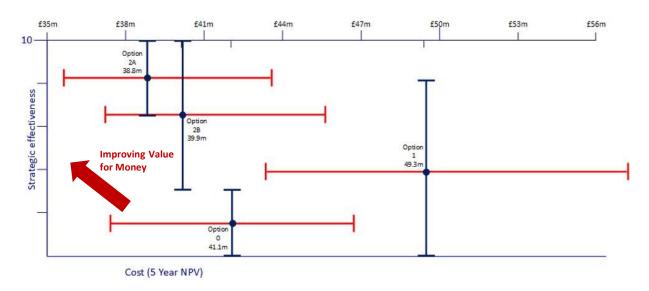
**Option 1 – Optimised Outsource** has the highest cost. Margin and overhead associated with an outsource provider have been factored into the annual charges and the refresh charges. Migration to a new cloud hosting service has also been assumed alongside the minimum refresh, and an uplift to charges to reflect an enhanced service that maintains the estate at 'N-1' across the 5 years. The in-house Council ICT Service team is also enhanced under this option - with several new roles required to address key gaps in current capabilities - albeit not to the same extent as under the Smart-source options.

The following table provides the relevant details:

| Op           | tion 0 - Do | Minim    | um      |            |         |         |       |             |               |
|--------------|-------------|----------|---------|------------|---------|---------|-------|-------------|---------------|
|              |             |          | Cost    | s per year | r £m    |         |       |             |               |
| Minimum      | YR          | 2020/21  | 2021/22 | 2022/23    | 2023/24 | 2024/25 | Total |             |               |
| Ë            | Revenue     | 6.12     | 6.37    | 6.37       | 6.38    | 6.38    | 31.61 |             |               |
| Ē            | Capital     | 6.24     | 1.63    | 0.54       | 0.54    | 0.47    | 9.42  |             |               |
| 00           | Cash Impact | 12.36    | 8.00    | 6.90       | 6.92    | 6.84    | 41.02 |             |               |
|              | NPV         | 12.11    | 7.84    | 6.77       | 6.78    | 6.71    | 40.20 |             |               |
| Op           | tion 1 - Op | timised  | Outsou  | rce        |         |         |       |             |               |
|              |             |          | Cost    | s per year | r £m    |         |       |             |               |
| es           | YR          | 2020/21  | 2021/22 | 2022/23    | 2023/24 | 2024/25 | Total |             |               |
| Outsource    | Revenue     | 6.29     | 8.74    | 8.39       | 8.40    | 8.40    | 40.23 | Uncertainty | - Cash Impact |
| uts          | Capital     | 6.67     | 1.63    | 0.55       | 0.55    | 0.54    | 9.94  | Total + 20% | Total - 20%   |
| Ō            | Cash Impact | 12.96    | 10.38   | 8.94       | 8.96    | 8.94    | 50.17 | 57.34       | 43.00         |
|              | NPV         | 12.70    | 10.17   | 8.76       | 8.78    | 8.76    | 49.17 |             |               |
| Op           | tion 2A - S | mart-So  | urce    |            |         |         |       |             |               |
| A            |             |          | Cost    | s per year | r £m    |         |       |             |               |
| Smart Source | YR          | 2020/21  | 2021/22 | 2022/23    | 2023/24 | 2024/25 | Total |             |               |
| no           | Revenue     | 6.11     | 6.60    | 6.21       | 6.21    | 6.21    | 31.36 |             |               |
| rs           | Capital     | 5.84     | 0.67    | 0.54       | 0.54    | 0.47    | 8.05  | Uncertainty | - Cash Impact |
| ma           | Cash Impact | 11.95    | 7.27    | 6.75       | 6.76    | 6.68    | 39.41 | Total + 20% | Total - 20%   |
| S            | NPV         | 11.71    | 7.12    | 6.62       | 6.62    | 6.55    | 38.62 | 43.49       | 35.33         |
| Op           | tion 2B Sm  | nart-Sou | rce     |            |         |         |       |             |               |
| 8            |             |          | Cost    | s per year | r £m    |         |       |             |               |
| rce          | YR          | 2020/21  | 2021/22 | 2022/23    | 2023/24 | 2024/25 | Total |             |               |
| Smart Source | Revenue     | 6.11     | 6.87    | 6.25       | 6.25    | 6.25    | 31.73 | Uncertainty | - Cash Impact |
| T            | Capital     | 6.65     | 0.67    | 0.54       | 0.54    | 0.47    | 8.86  | Total + 20% | Total - 20%   |
| ma           | Cash Impact | 12.76    | 7.53    | 6.79       | 6.79    | 6.72    | 40.59 | 44.85       | 36.34         |
| S            | NPV         | 12.51    | 7.38    | 6.65       | 6.66    | 6.58    | 39.78 | 45.22       | 36.71         |

The figure below plots overall Value for Money over the two assessment dimensions, with the centres representing most likely cost (five years NPV), the horizontal red lines illustrating cost uncertainty and the vertical blue lines illustrating the Strategic Effectiveness assessment.





# 3.5 Economic Case Conclusions and Recommendations

Based on the Value for Money assessment above, it is possible to conclude:

- The baseline Option 0 is not seen as viable and would not represent Value for Money.
- Option 1 is assessed to be higher cost than both variants of Option 2 and judged to be less
  effective than either, and therefore is not a preferred option. There is a therefore a prima facie
  case that the project should proceed on a smart-sourcing basis rather than seek to procure a
  single strategic partner. However if a single supplier were to be successful on all lots under
  Option 2A, then the possibility of engaging that supplier as a strategic partner could be assessed.
  Hence the possibility for the market to demonstrate the value for money of Option 1 is not
  excluded.
- The choice between Options 2A and 2B is more finely balanced. Once established, their strategic effectiveness and running costs are likely to be broadly comparable. However, the setup costs and transition risks for Option 2B are assessed to be significantly greater than for Option 2A because of the significant work required to build an in-house capability from ground up.
- Because of this up-front need for investment, with associated cost and operational risk, we assess that Option 2B would offer poorer Value for Money than Option 2A. This would be the case at any time. However, current circumstances make the difference between the options even clearer.
- The impact of the additional costs of Option 2B would fall at a time when the organisation us under increased financial pressure owing to covid-19. Meanwhile, the short time available for transition would increase the potential consequences of transition risk, threatening both normal operations and the loss of momentum on transformation programmes such as Customer Experience.
- Given that Option 2B offers poorer Value for Money, and also poses additional short-term risks,
   Option 2A is recommended as the preferred option.



# 4 Finance Case

# 4.1 Purpose of the Finance Case

The finance case assesses the affordability of the proposed plan (which, it should be noted, has lower costs than all other options in all years). All figures exclude VAT and indexation. Of the options under consideration, the key financial metrics and assessment of each are highlighted below.

- Revenue: The revenue impact of the option (excludes indexation, depreciated capital and VAT);
- Capital: Capital excluding VAT and cost of capital.

Restructuring risk is excluded as it is understood that such risks are managed centrally.

# 4.2 Revenue

The estimated revenue profiles for each option, before the application of +-20% uncertainty associated with ROM costs, are provided below:

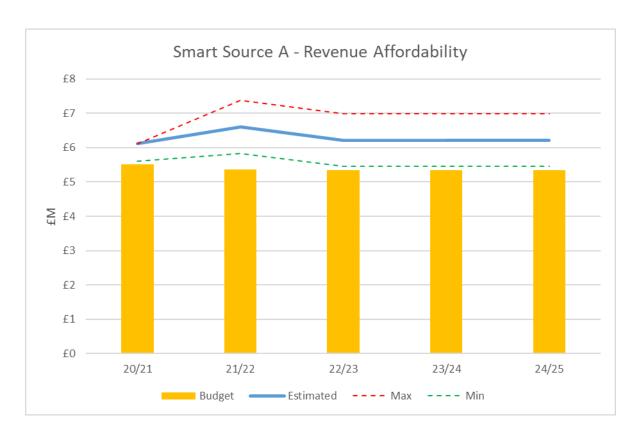
| Affordability Revenue |       |       |       |       |       |        |  |  |  |  |
|-----------------------|-------|-------|-------|-------|-------|--------|--|--|--|--|
| Year                  | 20/21 | 21/22 | 22/23 | 23/24 | 24/25 | Total  |  |  |  |  |
| Do Minimum            | £6.12 | £6.37 | £6.37 | £6.38 | £6.38 | £40.23 |  |  |  |  |
| Optimised Outsource   | £6.29 | £8.74 | £8.39 | £8.40 | £8.40 | £31.36 |  |  |  |  |
| Smart Source A        | £6.11 | £6.60 | £6.21 | £6.21 | £6.21 | £31.36 |  |  |  |  |
| Smart Source B        | £6.11 | £6.87 | £6.25 | £6.25 | £6.25 | £31.73 |  |  |  |  |
| Budget                | £5.51 | £5.36 | £5.35 | £5.35 | £5.35 |        |  |  |  |  |

The diagram overleaf plots the revenue profile of Option 2A against budget. The blue solid line is the estimated value while the green and red dotted lines reflect minimum and maximum respectively. These primarily reflect the market ROM estimating uncertainty of  $\pm 20\%$ , together with uncertainty over dual running costs in 20/21.

The revenue profile presents a budget challenge, with even the (highly unlikely) minimum bound being marginally over budget. There may be opportunity be opportunity to reduce cost through "value engineering" of the requirement but it is unlikely that this will wholly close the gap, though it may serve to mitigate the risks illustrated by the upper bound.

| 20% Uncertainty Revenue |       |       |       |       |       |
|-------------------------|-------|-------|-------|-------|-------|
| Year                    | 20/21 | 21/22 | 22/23 | 23/24 | 24/25 |
| Estimated               | £6.11 | £6.60 | £6.21 | £6.21 | £6.21 |
| Max                     | £6.11 | £7.38 | £6.98 | £6.98 | £6.98 |
| Min                     | £5.61 | £5.83 | £5.45 | £5.45 | £5.45 |





# 4.3 Capital

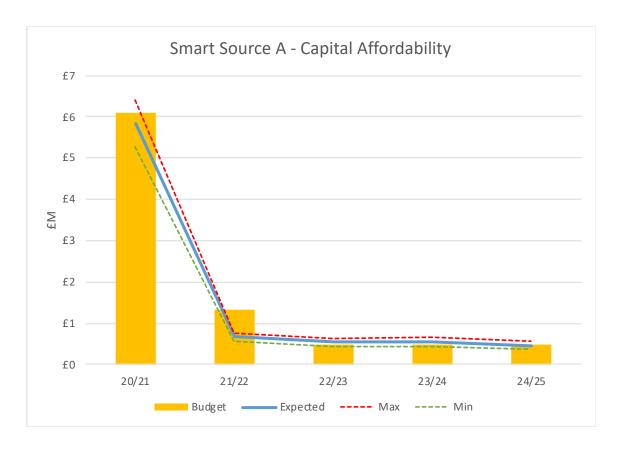
The estimated capital profiles for each option, before the application of +-20% uncertainty associated with ROM costs, are provided below:

| Affordability Capital |       |       |       |       |       |       |  |  |  |
|-----------------------|-------|-------|-------|-------|-------|-------|--|--|--|
| Year                  | 20/21 | 21/22 | 22/23 | 23/24 | 24/25 | Total |  |  |  |
| Do Minimum            | £6.24 | £1.63 | £0.54 | £0.54 | £0.47 | £9.42 |  |  |  |
| Optimised Outsource   | £6.67 | £1.63 | £0.55 | £0.55 | £0.54 | £9.94 |  |  |  |
| Smart Source A        | £5.84 | £0.67 | £0.54 | £0.54 | £0.47 | £8.05 |  |  |  |
| Smart Source B        | £6.65 | £0.67 | £0.54 | £0.54 | £0.47 | £8.86 |  |  |  |
| Budget                | £6.10 | £1.34 | £0.50 | £0.50 | £0.50 |       |  |  |  |

Provided some adjustments are made across the term, the overall capital envelope is affordable. Suppliers have indicated that ROM pricing can vary ±20% for annual charges. There is particular uncertainty around the costs of migration to a new hosting solution, as the process is complex and will require further analysis and development throughout the procurement process.

| 20% Uncertainty Capital |       |       |       |       |       |
|-------------------------|-------|-------|-------|-------|-------|
| Year                    | 20/21 | 21/22 | 22/23 | 23/24 | 24/25 |
| Estimated               | £5.84 | £0.67 | £0.54 | £0.54 | £0.47 |
| Max                     | £6.40 | £0.77 | £0.65 | £0.65 | £0.56 |
| Min                     | £5.27 | £0.56 | £0.43 | £0.43 | £0.37 |





Note on Asset Transfer: Obligations exist for the Council to purchase the ICT equipment from Northgate at the end of the agreement for a sum of £250k. This agreement will need to be drafted and executed by the parties at an appropriate point in time. An assessment of the financial accounting implications of such a transfer will need to be considered.



# 4.4 [Redacted owing to commercial sensitivity]

# 4.5 Finance Case Conclusion

**Option 2A** (like all options) presents a revenue affordability challenge, but it is the lowest cost and, as set out in section 4, provides best value for money. It therefore remains the preferred option. It is recommended that work starts immediately on identifying how this can be provided for in the budget while taking all appropriate steps possible in the procurement and implementation to minimise cost.

It should be noted that this Financial Case is based on market ROMs and assumptions about likely solutions. As each service is sourced/procured, the actual costs will be refined and documented in tower-specific full business cases. It is expected that variances will occur across activities and suppliers, but overall costs are expected to remain within the overarching financial envelope. While the project will aim to minimise cost, there is uncertainty around the "estimated cost" figures used here, and it would be prudent to ensure that the maximum envelope can be provided for.



# 5 Commercial Case

The move from an outsource to a smart-source operating model will involve changes in the commercial model for ICT services.

The commercial case provides assurance that the services required are available and that there is an appropriate route to market to buy them. It also describes a set of commercial objectives that are aligned to the key outcomes for the programme. The objectives guide the commercial strategy and ensure that risks and opportunities associated with the new model are clearly understood and managed through robust commercial planning and management.

# 5.1 Commercial Objectives

The following objectives have been agreed with RBC and will guide the development of procurement strategies, commercial requirements and contract terms, charging structures, performance management regimes, and future contract governance arrangements. The objectives also inform the approach to agreeing Exit Arrangements with NPS.

| Programme Driver   | Commercial Objectives   |  |  |  |  |  |
|--------------------|---|--|--|--|--|--|
| Quality of service | Enable effective performance management: SLAs, KPIs, remedies, commercial governance. Embed collaboration agreements and pancontract service processes. Embed "fix first, argue later" principles.  |  |  |  |  |  |
| Future Fitness     | Enable the Council to access the services that meet the requirement.  Enable flexibility: termination clauses, avoiding exclusivity, encouraging close relationships, flexible change processes, commercial terms that enable responsiveness to new opportunities and market developments.  |  |  |  |  |  |
| Management of risk | Enable a rapid and orderly transition.  Transparency and predictability: Clear charging models, known variables, quantifiable risk, catalogue pricing, fixed price where possible, fixed margin, known cost drivers, clear mechanisms for savings and opportunities and achieving Value for Money, contract management and governance, minimise dual running.   |  |  |  |  |  |
| Value for Money    | Achieve Value for Money.  Enable the Council to access the 'right' suppliers (i.e. those that are a good fit strategically).  Design a procurement process that permits consideration of shared services where available and allows the Council to consider offers from bidders that target all towers.  Enable the Council to achieve value for early transitions (e.g. initiate early procurement of the Unified Comms tower to enable Customer Experience Strategy).  Enable achievement of social value through employment opportunities. |  |  |  |  |  |

It is recognised that these objectives will sometimes pull the procurement strategy in opposing directions and therefore a balance will need to be achieved based on overriding benefit.



# 5.2 Procurement Strategy

The procurement strategy is designed to meet the commercial objectives of:

### Fitness for the future:

by enabling the Council to access the 'right' suppliers that are a good fit strategically.

### **Maximise VFM:**

- by making the most of government frameworks, noting that the services being procured are of a standardised and, in some cases, commodity nature;
- by enabling suppliers to bid for more than one service, thereby allowing the Council to recognise additional value if offered;
- by enabling the Council to consider Shared Services bids alongside those from commercial providers;
- by including social value within the evaluation of bids.

### Management of risk:

by enabling a rapid and orderly transition.

## 5.2.1 Routes to Market

The services being procured are well defined and, in some cases, commodity. RBC is not procuring bespoke systems but commercial capabilities configured with process or content to reflect its needs. These systems and services are available through Government frameworks and therefore the suppliers under consideration have already been through a process to establish evidence of value (though the level of assurance varies between frameworks and is only a starting point for what will be a robust process).

Procurement will be to rigorous specification of our needs, procured through existing frameworks such as the Government Digital Market Place, Digital Outcomes, or G-Cloud. Specialist local government frameworks will also be considered as they can offer flexible and focussed competition with suppliers who have specific experience working with Councils. An assessment of each route against our procurement objectives will be undertaken to ensure that a good fit is identified.

# 5.2.2 Optimal Procurement Approach

Two approaches are possible, with one emerging as the preferred route that meets our objectives of achieving Value for Money and a rapid and orderly transition.

## Option 1 (preferred) multiple staggered procurements

- Each bundle is procured through the most appropriate government framework, allowing the right specialist suppliers of those services to bid.
- The procurements are staggered, so that the same personnel can carry out the same tasks for each (e.g. one requirements team) and so that any issues in one procurement do not unduly jeopardise others.
- The most urgent procurements (e.g. Hosting, which has a long transition period) are run first.
- The whole procurement plan is communicated clearly to the market so that any bidder wishing to target a position as a prime contractor has the ability to bid for all.

# Option 2 (not recommended) single multi-lot procurement



- Bundles are multiple lots in a single procurement, making it more straightforward for a single supplier to bid. A framework accommodating all lots is likely to exclude some suppliers who would otherwise bid, restricting competition and risking VFM.
- The whole procurement is conducted in parallel:
  - o A larger team will be needed, with the necessary onboarding increasing cost/risk;
  - The more complex single procurement is likely to take longer, possibly putting critical path transition elements such as Hosting at risk.

# 5.2.3 Procurement Design

### 1. Bundle 1: Hosting

This specialist service is readily available for procurement through G-Cloud, although alternative frameworks are available, such as TS2, and will be assessed. This is the riskiest and most complex of the service migrations. The strategy seeks to procure this service as soon as possible in order to manage risk and complexity. Specialist suppliers of hosting services can offer their services directly, or via a third party 'fronting' the cloud service (though such arrangements would involve additional margin and impact Value for Money considerations).

### 2. Bundle 2, and 3: Service Desk, EUS and Network Management Services

It is likely that these procurements could be run closely alongside each other as two Lots under the same framework, or as two separate but concurrent procurements under two separate frameworks. Provided the bidders provide services through the selected framework(s), they can target both services.

# 3. Bundle 4: Unified Communications (potential to procure early and bundle later).

The Council is considering transition to a new UC service early if it is determined that such a move accelerates benefits for the Customer Experience Strategy. This procurement could be awarded early, subject to understanding the cost/benefit position. The winning bidder may also bid for Bundle 2 and 3 provided they offer this service through the chosen framework.

If there are economies of scale (that outweigh any integration costs or margin-on-margin effects) to be gained from one supplier providing multiple – perhaps all – bundles, then this is allowed for and tested in the procurement process. In extremis, if there is an Option 1 that is better VFM than Option 2A, it should be possible for this to emerge, provided the bidders also provide each of the bundles service through the chosen frameworks. These suppliers are likely to be generalist providers fronting subcontracts with specialists and therefore margin upon margin may dilute any anticipated gains from aggregating the bundles.

If one supplier were to win all lots, the commercial model would more closely resemble the single outsourcer arrangement that we currently have with Northgate but without the integrating function. The provider might offer some gains from having a single account manager or service delivery manager across towers. Separate contracts for each bundle would be secured with the same supplier, however, allowing the Council to award elements of the service to other providers upon expiry or termination of any one of the contracts.

If a Shared Service is identified that can meet the Council's needs, it can be evaluated at the same time and in the same manner as the commercial competition provided this is communicated to all bidders at the outset of the exercise.

# 5.2.4 Procurement Preparation

In order to meet our objectives of an orderly transition and to run an effective procurement that achieves accurate pricing and minimises subsequent change, robust preparation for each procurement



is critical. Detailed requirements or specifications must be defined, and materials prepared, that accurately size and describe the technical estate. This will require detailed conversations with the incumbent and detailed analysis of multiple sources of data.

As part of this phase, procurement plans will be developed that will incorporate evaluation of the best route to market and the development of information packs, requirements documentation, evaluation criteria, scoring methodology and panels. Any particular governance arrangements that are required for approvals and contract signature will also be considered in the preparation phase.

# 5.2.5 Evaluation Criteria

A framework for evaluation criteria will be established, allowing the Council to evaluate costs as well as qualitative considerations such as the bidder's capability to deliver, and the social value arising from an award.

Evaluation criteria and weighting will be established for each procurement. These will adhere to the structures and guidelines set out for the frameworks in question. Weightings will reflect the relative importance of the various qualitative evaluation points to the overall effectiveness and success of the service in question. For example, the quality of commodity hosting platforms may not vary greatly across suppliers, but confidence in migration plans may well vary considerably and therefore in that case, a greater weighting would be applied to implementation scores.

# 5.3 Contracts

In developing contract terms and structures, our key commercial objectives will be met as follows:

Quality of Service: As we are using government frameworks, contracts structures are set by the framework, however we can depart from aspects of the terms and incorporate schedule amendments to ensure our requirements are met. For example, all bidders will be advised at the outset of any procurement exercise that they will need to sign up to a collaboration agreement and that they will be working within a Smart-Source Model. Collaborative working (for example commitment to a "fix first; argue later" policy) will be required at each stage of the ITIL processes. Joint problem management and service reviews will be expected, and hand-offs of responsibilities will need to be designed across multiple suppliers. The contract schedules will need to reflect these ways of working.

**Fitness for the Future**: The objective of enabling flexibility leads us to shorter contract terms than we have currently. The frameworks we are considering typically allow for terms of 2+1+1 years, and 3+2 years. It would be possible to award the extensions immediately if a supplier offered profiling and cost benefits for doing so, but an assessment as to whether this benefit would outweigh flexibility considerations would be required.

Management of Risk: As guided by commercial objectives, charging structures will be fully documented providing transparency and clarity for contract managers. Variable cost drivers will be identified. Risks associated with any fixed price element will be called out, and a clear process for managing change will be documented. Ratecards, set margins and catalogue pricing will be established for standard services. Robust challenge procedures will be incorporated into both change management schedules and invoicing procedures, so that the Council has the right to examine supporting materials and evidence for any additional charges.

- 5.4 [Redacted owing to commercial sensitivity]
- 5.5 Contract and Commercial Management Capabilities



The FOM sets out the requirement for an in-house contract and commercial management capability in line with the hub-and-spoke model established for procurement and contract management across RBC. Contract management frameworks, processes and governance will be designed to support the new function.

The annual, monthly, and occasional activities associated with good contract management practice – invoicing procedures, approvals, reviews, credit tracking, milestone achievement procedures, provision for delays and performance remedies, change control management, forecasting, cost management - will be detailed. Governance and escalation procedures will be defined. Responsibilities and interactions with financial management and service performance management will be defined.

# 5.6 Commercial Case Conclusion

The Commercial Case supports the recommendation and confirms that there are suitable suppliers in the market to meet our requirements and that there are suitable commercial vehicles to support this transaction.

The case also provides assurance that commercial objectives set out in the case will be met through robust commercial planning and management throughout the programme. Quality of service will be achieved by incorporating the right commercial incentives and performance measure measures in contracts secured with the right suppliers.

Fitness for the future will be achieved by implementing a smart-source structure consisting of specialist suppliers on shorter term flexible contracts capable of more frequent review.

Management of risk will be achieved by implementing a carefully planned phased procurement strategy that enables rapid and safe transition and developing predictable transparent charging structures within our contracts.

Value for Money will be achieved through a flexible and robust procurement strategy that uses appropriate frameworks to identify the right services and suppliers and permits shared services and bids for more than one bundle to be considered, should they offer better Value for Money.



# 6 Management Case

# 6.1 Purpose of the Management Case

The purpose of the Management Case is to demonstrate that the implementation of the preferred option (Option 2A) is achievable and that the necessary delivery arrangements are in place.

It articulates the:

- Project management arrangements, decision points and review processes;
- Approach to delivery management and risks;
- Outline timetables for delivery including the proposed transaction and implementation; and
- Transition project (costs, resources, schedule).

# 6.2 Summary of the plan

An ICT project will be established to transform the current provision to a smart-sourced model. The ICT Service towers will be transitioned to the most appropriate provider, creating a 'Best of Breed' model. The new structure integrates interdependent services from various suppliers into a fully managed smart-sourced service. This will replace the current Northgate managed service.

The key elements of the plan include:

- Transition: The project will take a pragmatic approach to transition, adopting a phased (service-by-service, technology-by-technology) and least risk approach, rather than 'big-bang'. A Service Embedding and Optimisation Phase will take place after service transition has concluded.
- Exit: The project will undertake activities to exit from the NPS managed service. Agreeing the Exit Agreement with NPS is a critical activity. One of the key steps in developing a successful supplier transition plan is to develop a suitable Exit Plan with the incumbent, which will inform the planning of service transition and will be agreed between the Council, NPS and new suppliers. This will involve knowledge transfer activities and NPS participation and cooperation in transition activities. Agreement on the activities and timelines will be documented within the Exit Agreement, which will be produced collaboratively by both NPS and RBC.
- **Development**: The project will involve the development of a sustainable RBC 'intelligent client' function to provide service integration, management and assurance functions. Recruitment will commence to establish the necessary capacity and capability around September 2020 (intelligence, integration, management, and service) overall 16 new roles will be required.
- Expertise: Expert support will be engaged to run the transition project, mitigate risks and introduce the necessary capacity and capability to ensure success. The expertise will be transitioned to our internal teams to ensure we develop long term sustainable capabilities to operate the service. There is a need to focus on embedding the new operating model within RBC and across the new supply chain. This phase of transition needs to involve peer-to-peer support in order to embed the new processes and tools, supported by upskilling and knowledge transfer.

# 6.3 Approach

The transition approach is critical to ensuring a successful transition of services and implementation of the Future Operating Model in a manner that minimises risk and disruption to end users and services.



Throughout the Transition period up until the exit date of March 2021, the Council will take a phased approach, gradually taking ownership of service towers in-house or transferring them to partner service providers.

The phased approach reduces the risk associated with a 'big-bang' transition and provides greater scope for gradual transition and stabilisation. This approach will also ensure that control is maintained, leading to less disruption for the Council. However, the project has a fixed completion date relating to exit from the NPS service; therefore, an agile approach to decision making will be required.

The Transition phase will involve a number of concurrent activities and transition types, depending on the tower in question, including:

- novation of current third-party contracts from NPS to the Council or to a third party;
- transfer of exclusive assets held by NPS, and required to run the service, subject to financial impact assessment and auditor approval;
- TUPE of staff from NPS to the Council or to a third party, where necessary;
- selection of third-party providers through the agreed procurement plan approach/ the agreed route to market;
- design and build of intelligent client service integration layer, including people, process, tools, commercials; and
- design, build and migration to new 'core' solution.

The smart-source model involves a transition to multiple suppliers and in-house functions. The development of the intelligent client function, which will act as the integration layer, will require careful consideration and detailed co-design of processes across multiple parties will be required in order to ensure:

- an effective framework for managing supplier performance and improving consistency in service levels;
- a single point of accountability for end-to-end service delivery to the business;
- the capability to manage ICT risks and compliance across the service towers;
- a mechanism to enhance alignment of ICT priorities with business objectives; and
- the ability to reduce ICT costs.

Where there are opportunities to improve ICT Service provision as part of transition within the timescales and budget constraints, these activities will be undertaken.

# 6.4 Project Plan

The following section sets out the structure of the project plan and the high-level timescales for the next phases of the project: Preparation, Procurement, Transition and Exit. Timescales are indicative and will be impacted by capability and availability of resources, governance, and approvals.

The plan is being reported and managed following robust project management aligned to best practice methodologies (e.g. PRINCE2) and is being monitored by the ICT Future Operating Model Project Board, which meets monthly. Project working groups meet weekly to report progress against the plan and to raise issues and risks. Weekly highlight reports are developed and are consolidated into board reports and escalations where required.



# **Preparation includes:**

- production of procurement plans aligned to each 'bundle' of services;
- development of technical and operational specifications for each service tower;
- development of procurement materials, including instructions to bidders, evaluation criteria and commercials;
- development of supporting information for bidders (based on Discovery work already undertaken);
- identification of evaluation panel members and briefings.

### **Procurement includes:**

- competitive tender process for each service tower:
  - evaluation of bidder responses in line with evaluation criteria;
  - selection of preferred bidders;
  - conclusion of contractual/commercial arrangements.

### Transition includes:

- knowledge transfer from NPS and RBC to the new suppliers;
- co-design and transition planning between RBC, NPS and new suppliers;
- stand-up of new services;
- migration/cutover to new services;
- take-on of support by new suppliers;
- staff consultation process for those impacted by introduction of new operating model;
- recruitment and onboarding of new staff;
- TUPE activities;
- knowledge transfer and embedding of new operational capability.

# **Exit activities include:**

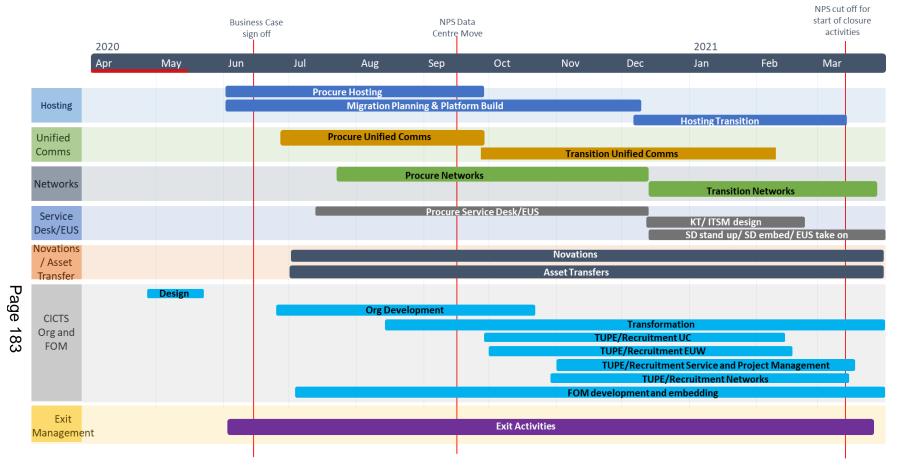
- production of the Exit Plan;
- delivery of the Exit Plan to include:
  - provision of controlled access to RBC systems;
  - knowledge transfer;
  - TUPE activities;
  - cessation of services in line with the Transition Plan;
  - contract novations;
  - asset transfers;
  - risk management;
  - support for transition activities, to include:
    - migration support (preparation and execution);



- safe removal of data from NPS systems, post migration;
- logging and passing of tickets to new providers prior to the new service desk being rolled out;
- acceptance of tickets for NPS run systems once the new service desk is stood up.

The high-level, indicative Transition Plan is depicted in the diagram overleaf.





# **Key decision points:**

- Select Hosting provider 21 September 2020
- Confirm Hosting procurement framework 26 June 2020
- Select Service Desk/EUS provider 23 November 2020
- Select Unified Comms provider 21 September 2020
- Select Networks provider 23 November 2020



# 6.5 Transition Support Requirements and Project Roles

This project comprises a high-value set of procurements and implementation activities. It will require expert support (capability and capacity) to prepare and execute this transaction across the following areas:

- project leadership;
- project management;
- commercial and procurement;
- technical solutions and operational service;
- finance;
- business change and communications;
- HR and organisational development;
- specification development / solution assurance;
- transition and transformation assurance;
- development of intelligent client capability;

The preparation and execution activities will ensure the Council can successfully exit its arrangements with Northgate, establish a new operating model with everything required to inform the service design, select and transition services at optimal price, risk and quality.

The indicative profile of support required from RBC staff and the Council's external transition partner is articulated below.

| Blended Team Profile                             | Jun-20 | Jul-20 | Aug-20 | Sep-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 | Mar-21 | Total |
|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------|
| Dictiaca Team Frome                              | Effort | rotai |
| RBC Resources                                    |        |        |        |        |        |        |        |        |        |        |       |
| CDIO (SRO)                                       | 8      | 12     | 8      | 11     | 11     | 8      | 8      | 8      | 10     | 10     | 94    |
| Infrastructure and Services Manager              | 8      | 10     | 10     | 10     | 10     | 8      | 6      | 8      | 8      | 8      | 86    |
| IT Business Partner                              | 2      | 4      | 6      | 6      | 6      | 4      | 2      | 4      | 4      | 4      | 42    |
| Assistant Director for Procurement and Contracts | 4      | 5      | 5      | 5      | 5      | 2      | 2      | 2      | 2      | 2      | 34    |
| Procurement portal and admin support             |        | 2      | 6      | 6      | 6      | 2      |        |        |        |        | 22    |
| HR Project Lead                                  | 3      | 3      | 3      | 3      | 6      | 6      | 2      | 4      | 4      | 4      | 38    |
| Legal Assurance / Guidance                       | 2      | 3      | 3      | 3      | 3      | 3      |        |        |        | 2      | 19    |
| Line of Business (LoB) Application Owners (each) | 2      |        |        | 3      | 3      |        | 4      | 4      | 4      | 4      | 24    |
| External Resources                               |        |        |        |        |        |        | •      |        |        |        |       |
| Director / Partner                               | 6      | 6      | 4      | 5      | 5      | 4      | 4      | 6      | 6      | 6      | 52    |
| Managing Consultant                              | 10     | 10     | 6      | 10     | 10     | 8      | 8      | 8      | 8      | 8      | 86    |
| People and Change Lead                           | 8      | 10     | 10     | 10     | 10     | 10     | 10     | 12     | 12     | 14     | 106   |
| Delivery Manager                                 | 22     | 23     | 15     | 22     | 22     | 21     | 14     | 20     | 20     | 23     | 202   |
| Project Manager                                  | 22     | 23     | 15     | 22     | 22     | 21     | 14     | 20     | 20     | 23     | 202   |
| Project Manager                                  | 22     | 23     | 15     | 22     | 22     | 21     | 14     | 20     | 20     | 23     | 202   |
| Lead Architect                                   | 22     | 23     | 15     | 22     | 22     | 21     | 14     | 20     | 20     | 23     | 202   |
| Solution Architect - Networks/UC                 | 22     | 23     | 15     | 22     | 22     | 21     | 14     | 20     | 20     | 23     | 202   |
| Solution Architect - Cloud/Wintel                | 22     | 23     | 15     | 22     | 22     | 21     | 14     | 20     | 20     | 23     | 202   |
| Service Architect                                | 22     | 23     | 15     | 22     | 22     | 21     | 14     | 20     | 20     | 23     | 202   |
| Commercial Lead                                  | 22     | 23     | 15     | 22     | 22     | 21     | 14     | 20     | 20     | 23     | 202   |
| Procurement Lead                                 | 22     | 23     | 15     | 22     | 22     | 10     |        |        |        |        | 114   |
| Testing and QA Lead                              |        |        | 10     | 22     | 22     | 21     | 14     | 20     | 20     | 23     | 152   |
| Testing Analyst                                  |        |        | 10     | 22     | 22     | 21     | 14     | 20     | 20     | 23     | 152   |
|  | 251    | 272    | 216    | 314    | 317    | 275    | 186    | 256    | 258    | 292    | 2637  |

The cost of specialist external expertise is reflected in the Economic and Financial Cases. The scale and scope of support will be robustly reviewed at each stage to ensure that value for money is being achieved.

The external provider will support the upskilling of the enhanced internal CICTS team to ensure the development of sustainable capabilities to operate for the future.



# 6.6 Project Governance

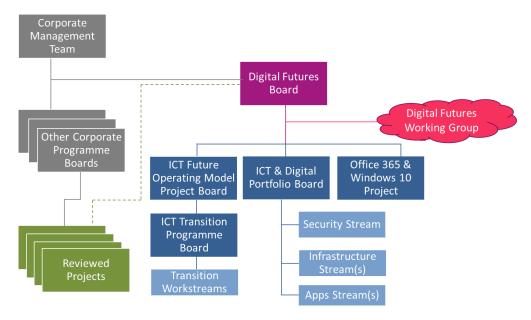
Effective oversight and control will be critical to the successful delivery of the preferred option. Robust performance management of the project against its objectives, quality metrics, schedule and financials will be achieved through the establishment of effective governance and monitoring as set out below.

The project will have two main Governance workstreams:

- Exit will be largely concerned with designing the means of exiting NPS service. Identifying the activities for which NPS support is required is critical and will largely be focused on controlled access to the existing infrastructure, for information gathering and data extraction purposes, and the handover of documentation, statistics, design, and configuration data related to the existing service. It will involve Knowledge Transfer activities, and NPS' participation and cooperation in migration activities.
- Transition will be largely concerned with designing the future state and transitioning to it (scoping, designing, procuring, building, and migrating to the new service). Information from the Exit workstream will be critical for transition activities (e.g. the Transition team cannot procure and build appropriate storage without understanding how much is currently used by the Council). It will require detailed information about storage from NPS in order to build the new storage capability and to design a way of migrating it safely.

The following diagram depicts the governance for the Project and how it aligns with wider RBC governance (e.g. Digital Futures Board).

# Board Structure



**Digital Futures Board**: This project is part of the Digital Futures programme. The Digital Futures Board, chaired by the Executive Director of Resources, has been established to ensure that TEAM Reading can and does work ambitiously and collaboratively to make the most of digital technologies to drive efficiency and make a difference to Reading by:

- owning development of the corporate digital strategy;
- overseeing a portfolio of enabling projects that support delivery of that digital strategy; and



 reviewing digital projects and projects across the organisation through a gateway review process to ensure strategic alignment.

The ICT Future Operating Model Project Board: The FOM project is overseen by the ICT Future Operating Model Project Board, which meets monthly and/or as required, chaired by the Executive Director of Resources.

The Board will report on both streams of activity – Exit and Transition – and make recommendations to the Digital Futures Board, which has overall responsibility for the project.

**ICT Transition Project Board**: Transition activities will be overseen by the ICT Transition Project Board, which meets every two weeks and is chaired by the CDIO.

RBC and NPS Project Teams report to the board, providing a summary of the transition activities, including risk and issues.

**Transition Workstreams**: A number of working groups will be established under the transition project, each tasked with performing the activities required for a successful transition. The working groups will cover all aspects of transition and will be resourced with appropriately skilled staff from internal and external sources. Key aspects will include project management, technical, business engagement, commercial and procurement, service design, and integration. Workstreams will be managed against a project plan featuring agreed deliverables for each phase.

**Project Meetings**: Progress will be monitored through weekly project meetings, at which updates on plans, issues and risks are presented by the project manager and reviewed.

Quality Management processes will be conducted to assure project direction, progress, and deliverables.

# 6.7 Risk Management

Robust arrangements for managing and mitigating risks, issues, assumptions and dependencies (RAID) during the transition project have been established.

Regular RAID reviews will take place with the aim of updating risks, issues and opportunities, identifying new risks and issues which affect both the transition and the current ICT service, identifying mitigations and planning the implementation of these.

A central RAID Log has been produced and will be managed by the project team throughout the transition. Detailed technical, operational and service-focused risks have been captured through the detailed Discovery work and are being logged, tracked and mitigated by the Transition team.

A summary of the key risks associated with the Transition is set out below.



# 6.7.1 Key Transition Risks

| Risk Description   | Mitigation  | Post Mitigation |        |  |
|--|---|-----------------|--------|--|
|  |   | Likelihood      | Impact |  |
| There is a risk the project does not meet the strict timescales for Exit and cannot control the financial and service consequences that NPS can choose to impose.  | Ensure an agile approach to commencement of procurement activities, decision making and a pragmatic approach to process and governance, whilst ensuring compliance with RBC policy and standing financial instructions.                       | 1               | 3      |  |
| There is a risk that NPS does not have the capability or capacity to support all transition activities.  | Ensure that RBC is clear on what is required from NPS during each stage of transition. Identify and communicate deliverables through the project plan as early as possible.   | 3               | 2      |  |
| There is a risk that the timeline associated with the hosting procurement and data migration will extend beyond the end of the current NPS contract due to timescales for new circuit orders and/or NPS not being able to complete its data centre move by the 14 <sup>th</sup> September. | Ensure the hosting requirement is understood and signed off to appoint new hosting supplier as soon as possible. Order new network connectivity immediately on hosting contract award. Investigate options to mitigate datacentre move risks. | 2               | 3      |  |
| There is a risk that NPS will not complete the agreed activities on the current project plan, which would affect assumptions made in procurement and impact future costs.  | Continue to engage with NPS to track task progress and agree commercial implications through the Exit Plan to mitigate cost associated with new suppliers taking on legacy services.  | 2               | 2      |  |
| There is a general risk relating to overall affordability of the services and their transition.  | Ensure the correct requirements are articulated to suppliers and that the through life costs are identified and procurements are planned effectively.   | 1               | 2      |  |
| There is a risk that the project does not meet its strategic objectives.   | Ensure that the project is tracked against the strategic objectives using robust project / project management, with continuous reporting into the governing boards. Ensure risks and blockers are communicated to the governance board.       | 1               | 1      |  |



| Risk Description   | Mitigation   | Post Mitigation |        |  |
|--|--|-----------------|--------|--|
|  |  | Likelihood      | Impact |  |
| There is a risk that Reading will be unable to recruit the required people to build the required internal ICT organisation   |  | 2               | 2      |  |
| There is a risk that the impact of COVID-19 could present limitations on new suppliers being able to provide the necessary resource and/or gain the physical access to locations required to complete transition activities. |  | 1               | 2      |  |
| There is risk that an unforeseen change in business requirements may delay the transition of service(s)  | Impact assess new changes against the plan and communicate the options.  | 1               | 1      |  |
| There is a risk that Reading will not have the capacity to resource the activities required to quality assure transition of services in live service.  | require Reading staff and gain approval from line  | 2               | 1      |  |
| There is a risk of impact to live service during the transition to the Future Operating Model.   | Ensure service mapping is complete prior to transition activities. Complete necessary change and risk planning within the project schedules. | 2               | 1      |  |



# 6.8 Management Case Conclusion

The Management Case sets out clear management arrangements on how this proposed transaction will be successfully delivered and the future operating model proposals for ICT initiated.

The case demonstrates that the smart-sourced model is viable as a future state and can be achieved.

Annex A – [Redacted owing to commercial sensitivity]



By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

Document is Restricted



# Agenda Item 15

# **READING BOROUGH COUNCIL**

## REPORT BY EXECUTIVE DIRECTOR OF RESOURCES

TO: POLICY COMMITTEE

DATE: 22 JUNE 2020

TITLE: ONLINE MEETING PROTOCOLS - AUDIT & GOVERNANCE COMMITTEE AND

TRAFFIC MANAGEMENT SUB-COMMITTEE

LEAD COUNCILLOR BROCK PORTFOLIO: LEADER OF THE COUNCIL

**COUNCILLOR:** 

SERVICE: LEGAL & WARDS: BOROUGHWIDE

DEMOCRATIC SERVICES

LEAD MICHAEL GRAHAM TEL: 0118 937 3470

OFFICER:

JOB TITLE: ASSISTANT E-MAIL: michael.graham@reading.gov.uk

DIRECTOR, LEGAL AND DEMOCRATIC

**SERVICES** 

## 1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 This report sets out further arrangements to be made in accordance with Section 78 of the Coronavirus Act 2020 [The Act] and 'The Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020' [The Regulations] to enable additional Council meetings to take place online during the current Covid-19 pandemic.
- 1.2 The Act and Regulations have made provision for local authorities to allow meetings to occur without the participants being in the same place. Local authority meetings can take place under the Regulations with members in more than one place, including at electronic, digital or virtual locations such as internet locations, web addresses or conference call telephone numbers.
- 1.3 The protocols to allow the Audit & Governance Committee and Traffic Management Sub-Committee to continue to meet under the new arrangements are attached at **Appendix A**.
- 1.4 Section 78(3) of the Act states that the Regulations may make provision only in relation to local authority meetings required to be held, or held, before 7 May 2021. The Assistant Director of Legal and Democratic Services or Policy Committee will also be able to end or make amendments to the arrangements prior to 7 May 2021. The Regulations can be viewed through the following link:

https://www.legislation.gov.uk/uksi/2020/392/regulation/5/made

## 2. RECOMMENDED ACTION

- 2.1 That the protocols for meetings of the Audit & Governance Committee and Traffic Management Sub-Committee, drafted in accordance with the provisions of The Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020', and attached at Appendix A to the report, be approved.
- 2.2 That the provisions agreed in 2.1 above be applied only to those Committee and Sub-Committee meetings required to be held, or held, before 7 May 2021 and the Assistant Director of Legal & Democratic Services, in consultation with the Leader of the Council, be authorised to end or make amendments to the arrangements prior to 7 May 2021.
- 2.3 That, during these arrangements, the attendance of members at the Audit & Governance Committee and Traffic Management Sub-Committee be as follows:
- (a) Audit & Governance Committee (8)

Councillors (Labour 5; Conservative 2; Greens 1)

(b) Traffic Management Sub-Committee (10)

Councillors (Labour 6; Conservative 2; Greens 1; and Lib Dems 1)

2.4 That the quorum for the Audit & Governance Committee and the Traffic Management Sub-Committee both be set at three members.

Appendix A - Protocols for meetings of the Audit & Governance Committee and Traffic Management Sub-Committee.

## 3. POLICY CONTEXT

3.1 The Government has passed legislation to enable local authorities to hold meetings online and the proposals set out in the report describe the Council's practical steps to enable this to happen and thereby continue to take decisions in an open and transparent manner during the period of the Covid-19 pandemic.

# 4. THE PROPOSAL

- 4.1 The report sets out arrangements to hold online meetings of the Audit & Governance Committee and the Traffic Management Sub-Committee as permitted by the Regulations that came into force on 6 April 2020. The protocols for these meetings are attached in Appendix A.
- 4.2 The Committee is also asked to: retain the membership of the Audit & Governance Committee; reduce the membership of the Traffic Management Sub-Committee; and agree the quorum thresholds for the new online meetings. It is also recommended that provision should be made to allow substitutes where a member of the Committee cannot attend the online meeting.

4.3 In order to provide consistency to the meeting arrangements all the online meetings will manage voting; declarations of interest and exempt and confidential business in the following way:

# (a) Voting

Votes at online meetings will be taken by the Chair asking each individual Councillor to declare whether they are for, against or abstaining orally in order to achieve clarity to the decision-making process.

# (b) Declaring Disclosable Pecuniary Interests

Members with a disclosable pecuniary interest must declare the existence of the interest and leave the meeting. This will be achieved by the member pausing or exiting the online meeting temporarily for the duration of the item of business in which they have an interest. Once the item of business has been dealt with, the Chair or Committee Administrator will invite the member to return to the meeting.

# (c) Exempt and Confidential Business

Where a Committee passes a resolution to exclude the press and public from an item or items of business to consider exempt or confidential information as defined in Schedule 12A of the Local Government Act 1972 (as amended), this (Part 2) business will be conducted in a separate private online meeting. Before any councillor can take part in discussing exempt and/or confidential business they must confirm to the Chair that they are in a location where no person not entitled to be party to that information can hear or participate in the discussion/ decision in respect of the restricted business.

4.4 In order to retain flexibility in the online meeting arrangements, it should be noted that the Assistant Director of Legal & Democratic Services has been given delegated authority to amend the arrangements to enable a prompt response to any changes in circumstances and implement improvements as a result of learning from holding online meetings.

# 5. CONTRIBUTION TO STRATEGIC AIMS

- 5.1 The Council's Corporate Plan Priorities are.
  - 1. Securing the economic success of Reading and provision of job opportunities
  - 2. Ensuring access to decent housing to meet local needs
  - 3. To protect and enhance the lives of vulnerable adults and children
  - 4. Keeping Reading's environment clean, green and safe
  - 5. Ensuring that there are good education, leisure and cultural opportunities for people in Reading
  - 6. Ensuring the Council is fit for the future
- The ability to hold online meetings of Committees will ensure continuity at this difficult time and support the Council's focus on its Corporate Plan and the reframed three broad priorities. The governance of the Council and the contribution it makes to the delivery of effective decisions and its business management is a key component for the delivery of the Council's strategic aims. Difficult decisions will need to be taken on an ongoing basis over the period of the Covid-19 emergency and holding meetings online supports the democratic oversight and scrutiny of the Council's work and decision-making processes.

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## 6. ENVIRONMENTAL AND CLIMATE IMPLICATIONS

6.1 The Council declared a Climate Emergency at its meeting on 26 February 2019 (Minute 48 refers). There are no specific environmental and climate implications to report in relation to the recommendations set out in this report.

# 7. COMMUNITY ENGAGEMENT AND INFORMATION

7.1 Section 138 of the Local Government and Public Involvement in Health Act 2007 places a duty on local authorities to involve local representatives when carrying out "any of its functions" by providing information, consulting or "involving in another way". This report encourages continuity of decision-making for the forthcoming year and enables councillors' to fulfil their Committee roles at this challenging time.

# 8. EQUALITY IMPACT ASSESSMENT

- 8.1 Under the Equality Act 2010, Section 149, a public authority must, in the exercise of its functions, have due regard to the need to—
  - eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
  - advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
  - foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 8.2 There is no need to undertake an EIA in relation to the recommendations set out in this report.

### 9. LEGAL IMPLICATIONS

- 9.1 The Coronavirus Act 2020 received Royal Assent on 25 March 2020 and contained provision for the Secretary of State to make Regulations in relation to the arrangements for holding local authority meetings (Section 78), during the current pandemic.
- 9.2 The subsequent Regulations came into effect on 6 April 2020 and enable local authorities to hold online meetings.
- 9.3 Regulation 5(1) states that a meeting of a local authority is not limited to a meeting of persons all of whom, or any of whom, are present in the same place and any reference to a "place" where a meeting is held, or to be held, includes reference to more than one place including electronic, digital or virtual locations such as internet locations, web addresses or conference call telephone numbers.
- 9.4 Regulation 5(5) states that the provision applies notwithstanding any prohibition or other restriction contained in the standing orders of the local authority and Regulation 5(6) allows a local authority to make other standing orders and other rules relating to the arrangements for and attendance at online meetings of the authority.
- 9.5 The online Committees will continue to be convened in accordance with the provisions of Schedule 12 of the Local Government Act 1972 (as amended) where those arrangements remain unaffected by the new Regulations.

- 9.6 Sections 15-17 of the Local Government & Housing Act 1989 deal with the duty to allocate seats to political groups in accordance with the proportionality of the groups' representation on the Council. Section 17 allows an exemption to the proportionality requirement where no member of the committee dissents to disapplying the rule.
- 9.7 One important role of councillors is to ensure that there is adequate scrutiny of the Council's decisions. Whilst the reduction of the number of Committees arguably reduces the opportunity for the scrutiny of Council functions, greater transparency has been introduced around the Decision Book process to allow councillors to request items be reviewed.

#### 10. FINANCIAL IMPLICATIONS

10.1 There are no financial implications as a result of adopting these arrangements for holding online meetings. However, if there are costs that are incurred from the practical application of the arrangements, these costs will be reported as necessary.

#### 11. BACKGROUND PAPERS

11.1 None



#### Protocol for Online meetings of Audit & Governance Committee

#### Introduction

During the period when meetings cannot be held in person, Audit & Governance Committee is to be reconvened as an online meeting to carry out its important scrutiny role. The Committee oversees the Council's regulatory framework: contracts; financial regulations; and risk management. It also monitors the treasury management strategy, the sign off the accounts and considers reports of both the Council's internal and external auditors. This meeting acts as the Council's Audit Committee and has been appointed in accordance with good practice advice from the Audit Commission and CIPFA. At a time of such financial uncertainty, the Audit & Governance Committee's overseeing scrutiny role has never been more important.

#### Membership

It is proposed to retain the Committee membership at 8 councillors based on 5 Labour; 2 Conservative; and 1 Green.

The nominated members of each Group are:

| Labour (5)       | Cllrs Davies, Edwards, Emberson, Gittings, McKenna |
|------------------|--|
| Conservative (2) | Cllrs Robinson and Stevens                         |
| Green (1)        | Cllr J Williams                                    |

#### Quorum

No change is proposed - the current quorum is 3

#### **Attendance**

• Substitution is allowed so that where a nominated member cannot attend then the Group Leader can nominate another member of their Group to attend in their place.

#### **Public Participation**

Members of the public will be able to follow the meeting 'live' in order to meet the legal requirement for meetings to be held 'in public'. Information will be published with the agenda on how to do this on the Council's website.

#### Councillor participation

The usual councillor questions and speaking on agenda items procedure is to be suspended. All councillors who wish to make representations on an item must work with their political group to ensure that those points can be addressed by the nominated member(s) of the Committee.

#### Voting

Formal votes at meetings of the Audit & Governance Committee are rare. However, in the event a vote is required at an online meeting, the Chairman will ask each individual Councillor to declare whether they are for, against or abstaining orally. This will be done

in order to achieve clarity to the decision-making process, as councillors will not all be visible during the voting process.

#### **Declaring Disclosable Pecuniary Interests**

Councillors with a disclosable pecuniary interest must declare the existence of the interest and leave the meeting. This will be achieved by the member pausing or exiting the online meeting temporarily for the duration of the item of business in which they have the interest. Once the item of business has been dealt with, the Chairman or Committee Administrator will invite the member to return to the meeting.

#### **Exempt and Confidential Business**

Where a Committee passes a resolution to exclude the press and public from an item or items of business to consider exempt or confidential information as defined in Schedule 12A of the Local Government Act 1972 (as amended), this (Part 2) business will be conducted in a separate private online meeting. Before any councillor can take part in discussing exempt and/or confidential business they must confirm to the Chairman that they are in a location where no person not entitled to be party to that information can hear or participate in the discussion/ decision in respect of the restricted business.

#### Management of meeting

The success of the online meetings will depend on the ability of the participants to interact with each other via the system and the ability of the Chairman to manage the meeting despite the unfamiliar setting.

The Chairman will decide a practical protocol for management of the debate and decision-making - e.g. calling of speakers, self-introduction before speaking, vote taken by asking members in turn rather than show of hands. Changes to this protocol can be implemented from time to time by the Assistant Director of Legal & Democratic Services, in consultation with the Chairman.

#### Protocol for Online Traffic Management Sub-Committee

#### Introduction

During the period when meetings cannot be held in person, Traffic Management Sub-Committee is to be reconvened as an online meeting to carry out its important role dealing with traffic management functions and discretionary parking permits. The Sub-Committee determines transport and traffic management schemes which affect the public highway and may require a regulatory process for which the Council as the Transport Authority for the area is responsible. The role of the Sub-Committee is currently more critical to enable the Council to react as promptly as possible to recent Government additional statutory guidance on the reallocation of road space in order to support local authorities to manage their road networks in response to the coronavirus outbreak.

This Protocol outlines some changes proposed to facilitate successful online meetings of the Traffic Management Sub-Committee, by reducing the number of participants and the complexity of the meetings.

#### Membership

In order to make the online meetings more manageable it is proposed to reduce the number of participants, by keeping officer attendance to a minimum and reducing the number of Committee members attending while retaining representation from all political groups.

The online meetings will therefore be attended by 10 members supported by the committee administrator and the relevant transport officers, based on the following proportionality: 6 Labour; 2 Conservative; 1 Green; and 1 Liberal Democrat.

All members attending the online meetings will be drawn from the membership of the Traffic Management Sub-Committee as agreed at the Policy Committee on 27 May 2020, subject to the rules of substitution set out below.

The nominated members of each Group to attend the online meetings are:

| Labour (6)            | From Cllrs David Absolom, Debs Absolom, Barnett-Ward, |
|-----------------------|---|
|                       | Ennis, Hacker, Page & Terry (to be confirmed)         |
| Conservative (3)      | Cllrs Carnell and Stanford-Beale                      |
| Green (1)             | Cllr Whitham  |
| Liberal Democrats (1) | Cllr Duveen   |

#### Quorum

No change is proposed to the current guorum of three.

#### **Attendance**

The Leader of each political group is responsible for ensuring that the most relevant members of Traffic Management Sub-Committee attend the meeting.

#### Substitute members

- (a) Where a nominated member cannot attend, the relevant Group Leader will be able to select another member of the full Traffic Management Sub-Committee to attend.
- (b) Where a Group has only one member of the Traffic Management Sub-Committee appointed in the current year (2020/21) and that member is unable to attend an online meeting, the relevant Group Leader will be entitled to nominate a substitute member from the Group.

#### Managing the meeting

The success of the online meetings will depend on the ability of the participants to interact with each other via the system and the ability of the Chair to manage the meeting despite the unfamiliar setting.

The Chair will decide a practical protocol for management of the debate and decision-making - e.g. calling of speakers, self-introduction before speaking, vote taken by asking members in turn rather than show of hands. Changes to this protocol can be implemented from time to time by the Assistant Director of Legal & Democratic Services, in consultation with the Chair.

Given the potential difficulty of tabling and circulating documents at an online meeting Standing Order 39 is amended to specify that, where councillors are pre-disposed to make any proposed amendments, these should be submitted to the Chair, all nominated members of the Committee and the Strategic Transportation Programme Manager by email at least 24 hours before the commencement of the meeting. This does not preclude any amendments to officer recommendations, which may still be tabled during the meeting as a result of the discussions during the debate.

#### Business to be considered

To make the online meetings focussed on the important business of the Pandemic Response and the Recovery, officers are also seeking to control the business to essential items only. This will mean that fewer reports will be presented and those that are will need to be agreed by the Chair, Lead Councillor for Strategic Environment, Planning & Transport and the Strategic Transportation Programme Manager.

#### Public participation and attendance

The facility for Ward Councillors to speak on items will continue.

Members of the public will be able to follow the meeting 'live' in order to meet the legal requirement for meetings to be held 'in public'. Information will be published with the agenda on how to do this.

#### Voting

Votes at online meetings will be taken by the Chair asking each individual Councillor to declare whether they are for, against or abstaining orally in order to achieve clarity to the decision-making process.

#### **Declaring Disclosable Pecuniary Interests**

Members with a disclosable pecuniary interest must declare the existence of the interest and leave the meeting. This will be achieved by the member pausing or exiting the online meeting temporarily for the duration of the item of business in which they have the interest. Once the item of business has been dealt with, the Chair or Committee Administrator will invite the member to return to the meeting.

#### **Exempt and Confidential Business**

Where the Sub-Committee passes a resolution to exclude the press and public from an item or items of business to consider exempt or confidential information as defined in Schedule 12A of the Local Government Act 1972 (as amended), this (Part 2) business will be conducted in a separate private online meeting. Before any councillor can take part in discussing exempt and/or confidential business they must confirm to the Chair that they are in a location where no person not entitled to be party to that information can hear or participate in the discussion/ decision in respect of the restricted business.

#### Management of meeting

The success of the online meetings will depend on the ability of the participants to interact with each other via the system and the ability of the Chair to manage the meeting despite the unfamiliar setting.

The Chair will decide a practical protocol for management of the debate and decision-making - e.g. calling of speakers, self-introduction before speaking, vote taken by asking members in turn rather than show of hands. Changes to this protocol can be implemented from time to time by the Assistant Director of Legal & Democratic Services, in consultation with the Chair.



#### READING BOROUGH COUNCIL

#### REPORT BY EXECUTIVE DIRECTOR OF ADULT CARE AND HEALTH SERVICES

TO: POLICY COMMITTEE

DATE: 22 JUNE 2020

TITLE: SAFEGUARDING ADULTS READING & SAFEGUARDING ADULTS BOARD

(SAB) ANNUAL REPORT 2018-19

LEAD CLLR TONY JONES PORTFOLIO: ADULT SOCIAL CARE

**COUNCILLOR:** 

SERVICE: ADULT SOCIAL CARE WARDS: BOROUGHWIDE

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#### 1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 The Care Act 2014 stipulates that each local authority must have a Safeguarding Adults Board (SAB) which takes the lead on adult safeguarding arrangements across its locality and has oversight and co-ordination with regard to the effectiveness of the safeguarding work of its member and partner agencies.
- 1.2 The overarching purpose of a SAB is to help and safeguard adults with care and support needs. It does this by:
- 1.3 Ensuring that local safeguarding arrangements are in place, as defined by the Care Act 2014, and that:
  - Safeguarding practice is person-centred and outcome-focused;
  - Work is collaborative in order to prevent abuse and neglect where possible;
  - Agencies and individuals give timely and proportionate responses when abuse or neglect have occurred;
  - Safeguarding practice is continuously improving;
  - Quality of life for adults in its area are enhanced
- 1.4 The West of Berkshire Safeguarding Report which incorporates Safeguarding in Reading is presented here which reflect performance and priorities with regard to Safeguarding. The report highlights the work that has been carried out across the multi-agency partnership (Reading, West Berks & Wokingham) and includes information on Safeguarding in Reading Borough Council DACHS. The report provide a current picture and overview of Safeguarding in Reading and the wider local boundaries, analysis of performance with a further look at what can be enhanced and improved.

#### 2. RECOMMENDED ACTION

- 2.1 That the West of Berkshire Safeguarding Adults Report be noted.
- 2.2 That the Strategic Plan be noted

#### 3. POLICY CONTEXT

- 3.1 The SAB has a duty to develop and publish a strategic plan setting out how it will meet its objectives and how the partnership will contribute. The West of Berkshire annual report (attached) details how effectively these have been met.
- 3.2 A 2018-2021 Strategy was published by the SAB and is now into its second year. The document outlines what the Board hopes to achieve during this time period through a number of strategic priorities. These are:
  - We will strengthen our communication and engagement across groups and communities in the West of Berkshire to ensure that our plans and actions are informed by the experience of the widest range of local people.
  - We will extend our links with other partnerships to work together to break down barriers across agencies and to promote approaches that safeguard people with those that care about them, in their family and community.
  - We will share learning and develop innovative ways to support both paid and unpaid organisations across the partnership to continually build confidence and the effectiveness of everyone's practice.
  - We will understand how effective adult safeguarding is across the West of Berkshire to ensure that we identify emerging risks and take action accordingly.

#### 4. THE PROPOSAL

#### 4.1 Current Position:

The West of Berkshire Annual report notes that overall findings show that:

- There has been a 20% reduction in the number of safeguarding concerns compared with last year.
- When comparing 2018/19 concern figures with 2016/17 the decrease is 41%.
- The reduction goes against the national trend which saw an 8% increase when comparing 2016/17 data with 17/18 data. There was a further 5% increase nationally in 2018/19.
- The Local Authorities in the partnership were required to provide an explanation to the Board on the reasons for these reductions responses were as follows:

#### Reading Borough Council:

- Has seen a 37% reduction in the number of concerns in 2018/19 when compared with 2017/18.
- In 2018/19 50% of concerns led to an enquiry in Reading Borough Council Adult Social Care. Nationally this figure was 39% with the South East being 42%.
- There has been a change in practice which began in 2017/18 where safeguarding concerns raised that did not meet the safeguarding threshold are no longer counted.
- The number of safeguarding enquires has remained stable, indicating that risks are not being missed by this change in practice, and that recording of concerns has become more accurate as a reflection of safeguarding work required in Reading.
- Audits are to be undertaken in 2019/20 to ensure that safeguarding thresholds are consistently applied.
- From 2019/20 all logging of concerns will be completed by the Safeguarding Team rather than passing this onto Adult Social Care Teams, in order to ensure consistency and centralised oversight.
- Nationally, 89% of safeguarding enquiries see the risk to the individual being 'reduced or removed'. In Safeguarding Adults in Reading Borough Council this percentage is 91%.

#### 4.2 Activity in Safeguarding Residents of Reading

Included in this report is the Reading Borough Council Safeguarding Review for 2018-19. This report covers all the performance activity within the area of Safeguarding Adults and sets out some case studies to showcase the work good practice carried out. It also looks to the future and reflects on how Safeguarding can be more effectively delivered over the coming year.

4.3 Some of the key findings in the data have influenced our delivery priorities for 2018/19

Most notable in the data there is the drop in number of concerns recorded, which continues a trajectory from the previous year. It was noted that robust information gathering and engagement prior to identifying a concern impacted positively on reducing concerns, and this practice has continued, supported by the proactive approach of the Conversation Counts model. The fact that the number of enquiries resulting from concerns has not fallen supports the interpretation of the figures as a positive trend towards more accurate recognition of safeguarding, rather than a lack of identification.

However, as part of the development of the Safeguarding Adults Team function in 2019/20, the recording of all concerns will be held centrally within the team. This will provide greater accountability and transparency in the data and ensure concerns are consistently captured. An audit of referrals coming into the service that are closed prior to enquiry will be conducted throughout the year to ensure quality and consistency, as well as identify any learning or practice needs that may emerge.

The recording of organisational abuse incidents has been raised as a point of difference in practice across the board, and the variation in incidents highlights a need to ensure that the process for identifying and responding to organisation abuse is transparent, robust and accountable, so that variances in recording are clearly understood in context.

In Reading we have begun the development of an effective partnership with commissioning teams to work proactively and jointly where concerns arise within provider organisations. This ensures that Providers can be supported to improve and maintain their support and delivery of services to vulnerable people.

4.3 Improving the Future of Safeguarding Adults in Reading

The aspiration for 19-20 in Reading Borough Council is to streamline access so that all Safeguarding activity comes through a 'Single Point of Access' to ensure consistency. This will see closer work and integration with the Advice and Wellbeing Hub, the departments 'front door' for all Social Care queries.

This bringing together of Safeguarding work will provide considerable customer and practice benefits such as

- The creation of a single point of contact and improved customer experience
- Achievement of proportionate responses and better outcomes using 'Making Safeguarding Personal' principles.
- Facilitation of improved partnership working with other professionals and the third sector.
- Ensuring a greater focus on prevention

#### 5. CONTRIBUTION TO STRATEGIC AIMS

5.1 The SAB is a statutory function and has set priorities for 2018/2021 as detailed in section 3 of this report. The organisation has a legal duty under the Care Act 2014 to Page 215

safeguard adults and promote wellbeing and this has been evidenced within our Cooperate Plan 2016-2019; Service Priority 1 - Safeguarding and protecting those that are most vulnerable.

#### 6. ENVIRONMENTAL IMPLICATIONS

6.1 No impact noted as a result of this report

#### 7. COMMUNITY ENGAGEMENT AND INFORMATION

7.1 A priority for the board for 2018-2021 is to strengthen communication and engagement across groups and communities in the West of Berkshire, and to ensure that plans and actions are informed by the experience of the widest range of local people.

#### 7. EQUALITY IMPACT ASSESSMENT

7.1 The local authority, as a public body, is under a legal duty to comply with the public sector equality duties set out in Section 149 of the Equality Act (2010). In order to comply with this duty, the Council must positively seek to prevent discrimination, and protect and promote the interests of vulnerable groups. There is currently no change in the service to the residents is proposed hence an Equality Impact Assessment will not be competed at this stage.

#### 8. LEGAL IMPLICATIONS

8.1 The Safeguarding Adults Board has a duty under the Care Act 2014 to publish an Annual Report detailing how effective its work has been.

#### 9. FINANCIAL IMPLICATIONS

9.1 The Care Act provides a power for members of the SAB to contribute towards the expenditure incurred for the purposes of its work. The work undertaken but social care and health staff for delivering a safeguarding service is provided through their core responsibilities and incorporated into the day to day responsibilities of all staff.

#### 10. BACKGROUND PAPERS

10.1 West of Berkshire Safeguarding Adult Report 2018-19 Care Act 2014 More info to be found at http://www.sabberkshirewest.co.uk/



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- 7. 7i. Appendix Ei Annual Safeguarding Report Reading
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### West of Berkshire Safeguarding Partnership Adults Board

**Annual Report 2018-19** 

If you would like this document in a different format or require any of the appendices as a word document, contact Lynne.Mason@Reading.gov.uk

The 2014 Care Act made it clear that safeguarding adults should be everyone's business. The multiagency partnership across three Council areas (Reading, West Berkshire and Wokingham) which brings together the West of Berkshire Safeguarding Adults Board, remains committed to improving awareness of adults in need of care and support who may be at risk, either from others' treatment of them or from their own lifestyle choices. During this last year, case reviews brought to the attention of the Safeguarding Adults Board have highlighted important areas of learning for all of our partner agencies and these are summarised in this report. The areas for action are embedded in our business plan which is monitored closely to ensure that improvements are made, to prevent similar tragic incidents occurring in the future. Communication across agencies about safeguarding concerns remains one of the partnerships greatest challenges and should be significantly improved with the agreement and implementation of the Multi Agency Risk Toolkit by practitioners and their managers in the coming year.

Good management information is vital in identifying risks, areas for improvement and evidence of what works. The Safeguarding Adults Board continues to refine its approach to quality and performance monitoring to ensure a focussed approach by all on areas highlighted quarterly reports and from case reviews. 2018/19 data has presented some potential inconsistencies in the way information is recorded across the partnership and we will be commissioning an independent audit to understand how we can bring a more consistent approach to ensure that our management information is as effective and robust as possible.

It is important that, in addition to data, the Safeguarding Adults Board can take into account the experience that local people have of the support they are offered. We benefit from the involvement of voluntary sector and HealthWatch representatives, who are valuable partners in bringing this vital perspective to the Board's work and who are often the 'front line' in identifying safeguarding issues.

I am aware of the ever increasing pressures on partners, as demand for services grow and resources are constrained. This is reflected in the capacity of Safeguarding Adults Board representatives to maintain adequate involvement in progressing all of our agreed actions, which impedes our ability to meet all priorities. This underlines the need for our activities in the coming year to be all the more sharply focussed, well informed by effective management information and to make the very best use of our collective resources across all sectors.

#### **Teresa Bell**

#### Independent Chair, West of Berkshire Safeguarding Adults Board

#### Concerned about an adult?

If you are concerned about yourself or another adult who may be being abused or neglected, in an emergency situation call the Police on 999.

If you think there has been a crime but it is not an emergency, call the Police on 101 or contact Adult Social Care in the area in which the person lives:

Reading 0118 937 3747, or online Reading
West Berkshire 01635 519056, or online West Berkshire
Wokingham 0118 974 6863, or online Wokingham

#### Out of normal working hours, contact the Emergency Duty Team 01344 786 543

For more information visit the Board's website: <a href="http://www.sabberkshirewest.co.uk/">http://www.sabberkshirewest.co.uk/</a>

#### Introduction

#### Our vision

People are able to live independently and are able to manage risks and protect themselves; they are treated with dignity and respect and are properly supported when they need protection.

#### What is safeguarding adults?

Safeguarding adults means protecting others in our community who at risk of harm and unable to protect themselves because they have care and support needs. There are many different forms of abuse, including but not exclusively: Physical, Domestic, Sexual, Psychological or Emotional, Financial or Material, Modern Slavery, Discriminatory, Organisational or Institutional, Neglect or Acts of Omission, Self-neglect.

#### What is the Safeguarding Adults Board?

The West of Berkshire Safeguarding Adults Board covers the Local Authority areas of Reading, West Berkshire and Wokingham. The Board is made up of local organisations which work together to protect adults with care and support needs at risk of abuse or neglect. From April 2015 mandatory partners on the Board are the Local Authority, Clinical Commissioning Groups and Police. Other organisations are represented on the Board such has health services, fire and rescue service, ambulance service, HealthWatch, probation and the voluntary sector. *A full list of partners is given in Appendix A*.

We work together to ensure there are systems in place to keep adults at risk in the West of Berkshire safe. We hold partner agencies to account to ensure they are safeguarding adults at risk and promoting their well-being. We work to ensure local organisations focus on outcomes, performance, learning and engagement.

#### Who do we support?

Under the Care Act, safeguarding duties apply to an adult who:

- Is experiencing, or is at risk of, abuse or neglect; and
- As a result of their care and support needs, is unable to protect themselves.

#### **Safeguarding Adults Policy and Procedures**

Berkshire Safeguarding Adults Policy and Procedures are used in the West of Berkshire and their purpose is to support staff to respond appropriately to all concerns of abuse or neglect they may encounter: <a href="https://www.berkshiresafeguardingadults.co.uk/">https://www.berkshiresafeguardingadults.co.uk/</a>

#### Number of safeguarding adult concerns 2018-19

- There has been a 20% reduction in the number of safeguarding concerns compared with last year.
- When comparing 2018/19 concern figures with 2016/17 the decrease is 41%.
- The reduction goes against the national trend which saw an 8% increase when comparing 2016/17 data with 17/18 data. Comparisons could not be made with 2017/18 and 2018/19 data as at the time of endorsement of this report 18/19 national data was not published.
- The Local Authorities in the partnership were required to provide an explanation to the Board on the reasons for these reductions responses were as follows:

#### **Reading Borough Council**

- Has seen a 37% reduction in the number of concerns from 2018/19 when comparted with 2017/18.
- There has been a change in practice which began in 2017/18 where safeguarding concerns raised that did not meet the safeguarding threshold are no longer counted.
- The number of safeguarding enquires has remained stable, indicating that risks are not being missed by this change in practice, and that recording of concerns has become more accurate as a reflection of safeguarding work required in Reading.
- Audits are to be undertaken in 2019/20 to ensure that safeguarding thresholds are consistently applied.
- From 2019/20 all logging of concerns will be completed by the Safeguarding Team rather than passing this onto Adult Social Care Teams, in order to ensure consistency and centralised oversight.

#### **West Berkshire District Council**

- Have seen a 20% increase in the number of safeguarding concerns from 2018/19 comparted with 2017/18.
- The 20% increase is attributed to increase in organisational safeguarding concerns in 2018/19, where all individuals in receipt of a service from a provider where there are organisational safeguarding concerns will have a safeguarding concern logged. This is not the practice Reading Borough Council or Wokingham Borough Council follow.
- There has been a change in practice, which began in 2017/18. The change in practice was that safeguarding concerns received, that did not meet the safeguarding threshold, were not counted as a safeguarding concern, when previously they were. This has led to an increase in the the percentage of safeguarding concerns that progress into a safeguarding enquiry.
- In 2019/20 West Berkshire District Council are to review their data collection methods which is likely to increase the number of safeguarding concerns.

#### **Wokingham Borough Council**

- Have seen a 17% decrease in the number of safeguarding concerns from 2018/19 comparted with 2017/18.
- It is Wokingham Borough Council policy that if anything is raised as a safeguarding concern it is counted as one; however this policy was not implemented for all of 2018/19 which would have resulted in the reduction seen. This policy is not consistent with Reading Borough Council and West Berkshire District Council.
- In 2019/20 Wokingham will be launching the Adult Safeguarding Hub, where all concerns will be recorded centrally ensure consistency in recording of safeguarding concerns.

In response to this data and the explanation from the Local Authorities, an independent audit into the safeguarding recording process across each Local Authority will be carried out in 2020/21. To identify the inconsistencies in recording across the partnership and for the West of Berkshire Safeguarding Adults Board to agree to an approach to address these inconsistencies.

#### Trends across the area in 2018/19

- 67% of enquiries relate to people over 65 years in age, a slight increase when compared with 2017/18 where it was 62%.
- As in previous years more enquiries were in relation to women than men, with 61% of enquiries involving women. There this is an increase of 7% when compared with 2017/18 data where the outturn was 57%.
- 81% of referrals were for individuals whose ethnicity is White. This is consistent with 2017/18 data.
- For 11% of referrals made, the individual's ethnicity was not known, the same outturn as 2017/18.
- As in previous years the most common type of abuse for concluded enquires were for Neglect and Acts of Omission. This was followed by Physical, Psychological or Emotional abuse and Financial abuse.
- For the majority of cases, the primary support reason was physical support. For 16% of cases no primary support reason was identified, in 2017/18 this was 7%. This increase currently being investigated by the West of Berkshire Safeguarding Adults Partnership Boards, Performance and Quality Subgroup.
- As in previous years, the most common locations where the alleged abuse took place were a person's own home and a care home.

Challenges or areas of risk that have arisen during the year are recorded on our risk register, along with actions to mitigate the risks. These are some of the potential risks that we have addressed:

- A three year business plan was launched by the Board for 2018/19 to address the priorities in the 2018/19, however it was identified this approach meant that the actions were difficult to prioritise and monitor and therefore the Strategy and Business Plan was reviewed to ensure that the our key priorities were the main focus and we have returned to an annual business plan in 2019/20.
- We gained assurance from partners regarding the Emergency Duty Team sustainability, due to the negotiation the current contract.
- 25% reduction in Safeguarding concerns logged in 2017/18 compared with 2018/19, the reasons for this reduction was investigated and we were assured that the reduction was due to a change in the practice of recording of safeguarding concerns that did not meet the safeguarding threshold, which would have previously been counted, but were now logged and managed, through the care management process. An independent audit of this practice will be commissioned in 2020/21 to ensure that there is consistency applying the safeguarding procedures across the partnership.
- Through the Safeguarding Adults Review Process (SAR) we have identified that mechanisms and
  pathways in place across the locality to support people who Self-Neglect are not widely or fully
  understood. In response to this a Board priority for 2019/20 is: We will provide the partnership
  with the tools and framework to work effectively with people who Self-Neglect.
- We want to make sure that local priorities and arrangements to support and minimise risks for people who experience Domestic Abuse are fully understood. In response to this, a Board priority for 2019/20 is: The Board will work collaboratively with Local Safeguarding Children Partnerships,

- Community Safety Partnerships and Health and Wellbeing Boards to provide the workforce with the frameworks and tools to work with Vulnerable Adults who are at risk of Domestic Abuse.
- To ensure that arrangements to support people who have Mental Health issues were fully understood, a report detailing governance arrangements is presented to the Board on a six monthly basis.
- We are aware of capacity issues within the supervisory bodies to obtain timely Deprivation of Liberty Safeguards (DoLs) assessments and provide appropriate authorisations. This situation and numbers of DoLs applications continue to be monitored by the Board, through our Dashboard. We await national data for 2018/19 to compare performance with 2017/18.
- We have gained further intelligence to support the view that responsibilities under the Mental Capacity Act 2005 are not fully understood or applied in practice as a safeguard for people who may lack capacity. The Board accept that this is a significant challenge in safeguarding practice and will ensure that any work undertaken by the Board will ensure consideration of the Act so it is fully embedded within practice.
- We want to make sure that there is consistent use of advocacy services to support adults through their safeguarding experience. A key performance indicator is in place to monitor performance across the local authorities. Performance in has continued to improve, there has been an increase of 4% compared with the previous year (89% 93%).
- We want to ensure that people who make safeguarding referrals receive feedback. Our training
  programme will be relaunched in 2019/20 where there will be emphasis on ensuring feedback is
  provided where appropriate, this is also checked in our safeguarding audit process where Local
  Authorities are required to audit 10% of completed Safeguarding Enquiries each month, using a
  standardised audit template.
- We want to make sure that people who experience the safeguarding adults process as adults with care and support needs, as well as their carers, have appropriate opportunities for involvement or engagement with the Board. A Task and Finish Group was held to identify a strategy, which was presented and approved in June 2019. The implementation of the strategy will take place in 2019-20.

Further safeguarding information is presented in the annual reports by partner agencies in **Appendix E.** 

#### Achievements through working together

Our <u>2018/21 Strategy</u> outlines what the Board aims to achieve in the next three years. The Board identifies strategic priorities that shape its work. These are reviewed each year and revised to reflect findings from performance information and case reviews.

Our priorities for **2018/19** and outcomes to those priorities were:

**Priority 1**: We will strengthen our communication and engagement across groups and communities in the West of Berkshire to ensure that our plans and actions are informed by the experience of a wide range of local people:

- The Board membership arrangements were reviewed and updated.
- There was a full review of all Board subgroups and new terms of references were set.

- A new subgroup was established to ensure that the voluntary and community sector are engaged and inform the work of the Board.
- Links with Local Safeguarding Children Partnerships, Safer Communities, Health and Wellbeing boards have been strengthened.
- A strategy has been approved to ensure that people who use services are able to influence the work of the Board.

**Priority 2:** We will extend our links with other partnerships to work together to break down barriers across agencies and to promote Think/Family/Think Community approaches.

- Work is in progress to establish a data set for the Board in regards to domestic abuse. A priority for 2019/20 has been agreed as: The Board will work collaboratively with Local Safeguarding Children Partnerships, Community Safety Partnerships and Health and Wellbeing Boards to provide the workforce with the frameworks and tools to work with Vulnerable Adults who are at risk of Domestic Abuse.
- The Board review on a six monthly basis to be assured that local safeguarding arrangements for people who have Mental Health issues are effective.
- Framework for the Management of Allegations against Persons in Position of Trust has been launched and is available on our website.
- An audit on Self-Neglect was completed and recommendations used to inform the Boards 2019/20 priorities and business plan.

**Priority 3:** We will share learning and develop innovative ways to support both paid and unpaid organisations across partnerships to continually build confidence and the effectiveness of everyone's safeguarding practice.

- Safeguarding Adult Reviews (SARs) have been completed and where appropriate published with practise learning notes for professionals.
- Learning from SAR/Audit Implementation plan has been devised in order for the Board to track progress on learning and to test that learning is effective.
- A successful Joint Children's and Adults Safeguarding Conference on the theme of Prevention and Early Intervention was delivered in January 2019.
- The Safeguarding Audit form has been and will continue to be updated to test learning has been embedded into practise.
- Partners completed the Boards Self- Assessment.

**Priority 4:** We will understand how effective adult safeguarding is across the West of Berkshire to ensure that we identify emerging risks and take action accordingly

- The Board has a Performance Dashboard and Key Performance Indicator Report which is managed by the Performance and Quality Subgroup and presented to the Board on a quarterly basis.
- Data in regards to Female Genital Mutilation (FGM) and Modern Slavery is being collected and the Performance and Quality Subgroup are reviewing this data to understand what this means for the West of Berkshire.

More information on how we have delivered these priorities:

- Additional achievements by partner agencies are presented in Appendix B.
- The completed Business Plan 2018-19 is provided in <u>Appendix C</u>.

#### **Safeguarding Adults Reviews**

The Board has a legal duty to carry out a Safeguarding Adults Review when there is reasonable cause for concern about how agencies worked together to safeguard an adult who has died, and abuse or neglect is suspected to be a factor in their death; or when an adult has not died but suffered serious abuse or neglect. The aim is for all agencies to learn lessons about the way they safeguard adults at risk and prevent such tragedies happening in the future. The West of Berkshire Safeguarding Adults Board has a Safeguarding Adults Review Panel that oversees this work.

During the reporting year, the SAR Panel have worked on 9 SARs of which 3 were endorsed by the Board and 1 was published along with a practice learning note. The Board plans to publish the other 2 safeguarding adult's reviews in 2019/20. Valuable learning has emerged from the all SARs and has fed into the Boards priorities and Business Plan for 2019/20. It is planned for the remaining 6 SARs to be endorsed by the Board in 2019/20. The Board recognised the increase in workload for the SAR Panel and in response increased the frequency of SAR Panel meetings from quarterly to monthly.

The case summaries and the learning from the 3 SARs that have been endorsed are as follows:

#### Gemma

Gemma had a pressure sore. Gemma was issued with a pressure care mattress to relieve pressure from her skin, as part of the management plan to support her.

Gemma's pressure sore deteriorated to a Category 4 and Gemma sadly passed away the same month. At the time of the deterioration it was identified that Gemma's pressure care mattress was not operating as prescribed. There were incidents reported where the mattress was indicating a fault.

A safeguarding concern should have been raised by the district nurse when the deterioration in Gemma's pressure sore was identified, but was not. A concern was raised by the hospital when Gemma was admitted.

The safeguarding enquiry that was completed by the Local Authority did not meet the required standard.

#### **Findings**

- Mattress Settings: it is the responsibility of the prescriber to follow up after installation of a pressure care mattress and to set the controls in line with the persons clinical need.
- Recording keeping: it is essential that clear records are kept, for the safe management of equipment provision and that all information relating to the device is co-ordinated and documented.
- Reporting Faults: information is always provided detailing how to contact the equipment provider, in the event of any issue with the equipment itself. The leaflet has been improved to encourage people not to throw it away.
- Review: of equipment by prescribers, is vital, to ensure that the equipment meets the persons needs.
- Safeguarding Concern: should be raised when there is a lapse in care which has led to a deterioration of a pressure sore.
- Safeguarding Enquiry: all actions taken in safeguarding enquiries must be clearly documented.

#### **Aubrey**

Aubrey was a 45-year-old man. He had significant and complex health needs. Aubrey still maintained a high degree of independence and was well known within his community. He had a supportive family network with which he maintained regular contact.

In late 2016 Aubrey was informed that his cancer had spread to his abdomen and lungs. Although offered chemotherapy, Aubrey declined this because he did not want to feel more unwell than he already did.

On June 23rd 2017, Aubrey was admitted to the Royal Berkshire Hospital with back pain, sepsis, and a sudden and marked deterioration in his speech and level of consciousness. A decision was made to provide Aubrey with palliative care to ensure comfort, and he was cared for at the Royal Berkshire Hospital until sadly he passed away on the 29th June 2017.

Aubrey's care provider was judged as an inadequate provider by the Care Quality Commission following their inspection of March 2017. All of the Packages of Care that this provider was supporting with were reviewed as a result.

#### **Lessons Learnt**

- Refusals by Aubrey to accept treatment / care and support / equipment were not fully considered.
- No formal capacity assessments recorded to determine whether Aubrey could consent to treatment / refuse equipment / care and support / be admitted to hospital etc.
- Initial assessment, risk assessment and review did not take into account need for multidisciplinary approach to working with Aubrey (given his poor health).
- Agencies did not recognise or fully assess risks resulting in Aubrey directing his own care without the full impact of these risks being mitigated by commissioners.
- Although agencies worked in a person centred way during direct intervention with Aubrey there was a lack of professional curiosity and multi-disciplinary discussion.
- Aubrey's family were heavily involved in his care and provided significant support to him. However their involvement is not reflected in work completed and consultation with Aubrey around this is also missing.
- Review of the care package carried out in late March 2017 (triggered by the CQC inspection) records that that there weren't any concerns regarding the quality of care being delivered. This appears to be solely based on Aubrey's expressed view that he was happy with his care.
- No effort was made to seek Aubrey's agreement to discuss his care with his family in order to

#### Paul

Paul lived with his cousin Bruce, prior to his death Paul's Uncle/Bruce's father lived with them also. Paul and Bruce had a volatile relationship but were close. When they were required to move from their family home after the death of Paul's Uncle/Bruce's father, their volatile relationship became more problematic.

Both Paul and Bruce were known to Adult Social Care and both had complex needs. Paul did not engage with services, but Bruce did. Paul's son was concerned that his father was self-neglecting.

There were numerous allegations made by Bruce that Paul had hit him, however the response from the local authority in regards to these allegations was not compliant with Section 42 of the Care Act and did not follow best practice in regards to Domestic Abuse.

Paul was discovered on the floor in his home by a visitor. He had been there for more than 24 hours; Bruce did not/could not raise the alarm. Paul passed away in hospital. There was an initial concern that Bruce had caused harm to Paul but a police investigation concluded there was no evidence of this. After his death Bruce struggled to cope and was eventually detained under the Mental Health Act.

#### **Findings**

- Paul and Bruce's needs were assessed by Adult Social Care individually but without consideration of them holistically.
- Paul did not engage with services but this was exacerbated by the staff turnover in adult social care which was not conducive to building a relationship with him.
- Commissioning of support could have been improved to provide feedback on the home life situation of Paul and Bruce.
- Pauls' refusal of services was accepted by Adult Social Care without consideration of the risks to Paul and Bruce, or the concerns raised by Paul's family about possible self-neglect.
- Safeguarding processes were not followed, and the risks to Paul and Bruce were not effectively addressed.
- Paul and Bruce were spoken to together regarding the concerns regarding Domestic Abuse, best practice is that perpetrator and victim should never be interviewed together as this can result in greater risk to the person.
- Paul's case was closed by Adult Social Care even though there were ongoing safeguarding concerns.
- Use of advocacy was identified for Bruce but not for Paul.
- Paul and Bruce were not identified as each other's carers. Paul was sometimes identified as Bruce's carer but not the other way round. Neither Paul nor Bruce were offered carers assessments.
- When a strategy meeting was held people who needed to be involved in the case were not at the meeting, meaning that not all the risks were identified or addressed.
- Support given to Bruce after Paul's death was lacking, there was a poor partnership response to Bruce.
- Making Safeguarding Personal principles were not applied.
- Learning from previous SARs, commissioned by the Board, has not been embedded into practice.
- The Board requires assurance regarding the quality of supervision across the partnership

#### How is learning from SARS embedded within in practice?

The Board accepts that improvements are required in ensure that lessons learnt from SARs are embedded within practice. We have created Learning from SARS/Audit Implementation Plan where all findings from SARS and other Board learning are added and tracked. From the three SARS endorsed by the SAB have identified the following themes:

- Family/Carer Engagement
- Organisational Safeguarding
- Safeguarding Processes
- Support and Supervision
- Training
- Tissue Viability

We are committed to ensuring that our priorities are current and have and will change priorities in order to support learning from its SARs.

There is a dedicated page on the Board's website for case reviews: <a href="http://www.sabberkshirewest.co.uk/board-members/safeguarding-adults-reviews/">http://www.sabberkshirewest.co.uk/board-members/safeguarding-adults-reviews/</a>

#### Key priorities for 2019/2020

We understand that priorities will change and as we learn from partner agencies both locally and nationally and that the priorities must be achievable. The priorities for 2019/20 have been reviewed and updated to:

**Priority 1:** We will provide the partnership with the tools and framework to work effectively with people who Self-Neglect.

- People who use services are able to influence the work of the Board.
- Comprehensive policies and procedures are in place in regards to Self-Neglect, which are accessed and followed by the partnership.
- Safeguarding Training to be reviewed to ensure that it addresses Board Priorities.
- We are assured that there is sufficient management oversight in regards to safeguarding. There is a decision by the Board on the 'SAM' function in Local Authorities and this is implemented.
- We are assured that there is adequate training in pressure care across the partnership.
- There is a standardised approach to risk management across the partnership.

**Priority 2**: The Board will work collaboratively with Local Children's Safeguarding Partnership, Community Safety Partnerships and Health and Wellbeing Boards to provide the workforce with the frameworks and tools to work with Vulnerable Adults who are at risk of Domestic Abuse.

- There is a clear Domestic Abuse Strategy in conjunction with LSCPs, CSPs and H&WBBs.
- There is a clear framework and toolkits to support the partnership with regard to Domestic Abuse.

**Priority 3:** We will understand the main risks to our local population in regards to Targeted Exploitation and agree how best to equip the partnership to Safeguard vulnerable people against these risks.

- There is a pathway in place to support the partnership in working together to respond to Modern Slavery and Human Trafficking Issues.
- We understand who is most at risk and can agree where focus is needed.

There is a clear plan on how to support those most at risk from targeted exploitation.

**Priority 4:** The Board will understand from key stakeholders, why there has been an increase in organisational safeguarding and seek assurance from commissioners, that there are adequate preventative measures in place that is consistent across the partnership where practical.

- Providers who deliver services are able to influence the work of the Board in regards to organisational safeguarding.
- We are clear on the issues facing the CQC and commissioners in regards to organisational safeguarding.
- We are fully aware of the level of organisational safeguarding across the partnership
- There is an effective framework in place for responding to organisational safeguarding concerns.
- There is a consistent approach to quality monitoring of Adult Social Care Providers across the partnerships. Frameworks are published on our Website.

The Business Plan for 2019-20 is attached as Appendix D.

#### **Appendices**

**Appendix A - Board Member Organisations** 

Appendix B - Achievements by partner agencies

Appendix C - Completed 2018-19 Business Plan

Appendix D - 2019-20 Business Plan

**Appendix E** - Partners' Safeguarding Performance Annual Reports:

- Reading Borough Council
- Berkshire Healthcare Foundation Trust
- Royal Berkshire NHS Foundation Trust



#### **Annual Report 2018/19**

#### Appendix A - Board member organisations

#### Under the Care Act, the Board has the following statutory Partners:

- Berkshire West Clinical Commissioning Group
- Reading Borough Council
- Thames Valley Police
- West Berkshire Council
- Wokingham Borough Council.

#### Other agencies are also represented on the Board:

- Berkshire Healthcare Foundation Trust
- Community Rehabilitation Service for Thames Valley
- Emergency Duty Service,
- National Probation Service
- Royal Berkshire Fire and Rescue Service
- Royal Berkshire NHS Foundation Trust
- South Central Ambulance Trust
- HealthWatch Reading
- The voluntary sector is represented by: Reading Voluntary Action, Involve Wokingham and Volunteer Centre West Berkshire.





## Appendix B Achievements by partner agencies 2018-19

#### **Berkshire Healthcare NHS Foundation Trust (BHFT)**

Berkshire Healthcare NHS Foundation Trust have continued to work closely with partners agencies across all Berkshire localities, participating in serious case reviews and meeting regularly to share information, influence policy change and discuss relevant cases to facilitate continued improvement and increased knowledge in safeguarding. The Trust is represented by named safeguarding professionals at all relevant Safeguarding Adult Board subgroups, with senior management representation provided at the Safeguarding Adult Board.

The safeguarding children and adult teams are fully integrated to facilitate a more joined-up 'think family' approach to safeguarding. During 2018/19 an in-house on-call safeguarding advice line continued to be provided by safeguarding named professionals to enable staff to discuss cases and seek advice on safeguarding matters.

Achieving a high level training compliance is a priority for BHFT and the Trust have achieved compliance above 94% for safeguarding adults training at level one and above 85% at level two with extra courses being facilitated. Training compliance for PREVENT training is 96%.

Improvement in staff understanding of and application of the Mental Capacity Act (MCA) 2005 has been priority for the Trust. Extra training has been facilitated and compliance to training has increased to over 90%. MCA champions have been appointed to further this work and are mentored by the MCA lead for the Trust. A safeguarding named professional joined the team in a secondment post to lead on supporting staff to embed application of the Mental Capacity Act 2005 in practice and has facilitated practical workshops on the wards and with community teams.

A service improvement group has been formed to improve patient experience at Prospect Park Hospital and work has included safety work to prevent absconsions and sexual safety work in response to a CQC report on sexual safety in mental health settings.

#### Reading Borough Council (RBC)

Have implemented and embedded in 2018-19 the "Conversation Counts" strategy for engaging with adults in Reading. The approach is focused on supporting adults to recognise and develop their own strengths, building resilience in individual's lives and in communities, and improving communication between organisations, so that early responses and solutions are available to resolve situations before they deteriorate. These reflect the principles of Making Safeguarding Personal which are a cornerstone of good Safeguarding practice.

The development of the Advice and Wellbeing Hub, who receive referrals for information, advice, support and assessment for adults currently not in receipt of Local Authority services, has been a key activity in safeguarding residents locally in Reading, by preventing the escalation of risk and harm at an early stage, making appropriate advice and guidance accessible and supporting people to connect effectively with their local networks and communities, increasing independence and resilience.

The social care teams are supported through training, informal learning lunches and support and guidance from the Safeguarding Adults Team to ensure that practice is consistent, led by the adult and reflects the priorities outlined in the Care Act and further outlined by West Berkshire Safeguarding Adults Board.

In 2019/20 RBC S42 recording will be held centrally within the Safeguarding Adults Team in order to ensure greater accountability, transparency and consistency in Safeguarding practice.

#### Royal Berkshire Fire and Rescue Service (RBFRS)

RBFRS' key achievements for 2018 to 2019 are measured through our Strategic Performance Board and our corporate measure 3, measures the percentage of safeguarding referrals made and signposted through to Local Authorities within 24 hours. 100% of all referrals were signposted within 24 hours during this financial year. All Safeguarding referrals were met within the 24-hour Corporate Measure. There were 46 Safeguarding referrals made during Q1, 49 in Q2, 60 in Q3 and 86 in Q4. These figures are for all 6 Berkshire Local Authorities. The total number of referrals for 2018/2019 was 241 within Berkshire and 11 Over the Border (OTB) resulting in a figure of 252. 50% of these referrals were self-neglect and neglect. Other categories within our Safeguarding remit have included referrals involving domestic violence, acts of omission, sexual abuse/exploitation, Modern Day Slavery, financial/material abuse, emotional/psychological abuse and physical abuse. Since the Safeguarding function began in RBFRS four years ago, we have seen an increase in submitted referrals by 504%. Out of the 252 referrals 20% were signposted to Children's Services and 80% were adult referrals.

RBFRS continue to promote their Adult at Risk Program (ARP) and provide awareness raising training to numerous partnership agencies in order to improve referral rates. This work has generated an increase in vulnerable adult referrals to RBFRS across Berkshire including safeguarding referrals as one of the impacts.

#### **Royal Berkshire Hospital NHS Foundation Trust (RBHFT)**

• Safeguarding (adults) clinical governance has continued throughout the year and the safeguarding team medical clinical lead role is a valued part of the safeguarding team. There are vacancies in both NCG and UCG to recruit during 2019.

- Safeguarding concerns continue to be raised via the Datix incident reporting system this
  assists in giving feedback to the individual who raised the concern where available, and
  means that only one reporting mechanism is used for reporting concerns.
- Learning from SAR's continues to be included in Safeguarding training.
- The Lead Nurse Adult Safeguarding continues to be part of the SAR panel.
- Safeguarding Champions conference was held in November, this was evaluated positively by participants. A very successful half day champions meeting was held in June 2019 to consolidate learning. Another conference is planned for later in 2019 focusing on Learning Disability.

#### South Central Ambulance Service NHS Foundation Trust (SCAS)

- The delivery of face to face level 2 safeguarding update training to all patient facing staff
- A completion of new adult and children's safeguarding policies
- The implementation of a new web based referral system for our Clinical Call Centres
- The implementation of new safeguarding referral servers
- A review and update to our Allegation policy, Domestic Abuse policy and Prevent policy
- Assisted the Welsh Ambulance service to develop an electronic safeguarding referral process
- Worked with NHS Digital to develop CP-IS for Ambulance services
- Developed a Trust Modern Slavery statement and training for staff to identify victims of Modern Slavery
- The implementation of a safeguarding governance process for private providers and taxi firms used on our patient transport service

#### Thames Valley Police (TVP)

Thames Valley Police (TVP) has continued to work in strong partnership with statutory and voluntary organisations focussed on safeguarding. Our Integrated Offender Management (IOM) officers now support MAPPA and have widened their remit to include more women who need support and domestic abuse offenders. We have continued to run effective MARAC meetings involving relevant agencies in the area and over 2018-2019 215 cases were discussed with a view to safeguarding. 118 of these were referrals from TVP so we remain the biggest identifier of domestic risk. 70 of the 215 cases were "repeats" who had already been discussed at MARAC previously and returned following a repeat incident being identified.

Our Domestic Abuse team have held joint training sessions with BWA to ensure officers are well equipped to safeguard individuals as well as investigate. Additional training was delivered by the CQC to DA officers across the Force area to increase understanding of how TVP and CQC can work together to investigate Care Home allegations effectively.

TVP co –chair People Solutions Meeting with RBC where cases are raised where there is concern for an individual who may be at risk, to find a partnership solution. We continue to support MEAM (Making Every Adult Matter), and work with PACT charity to support Women with complex needs. Our neighbourhood teams work closely with RBC to protect adult vulnerable to exploitation

Reading Police and CMHT are piloting a High Intensity User Group meeting to work with partners across health and social care to improve identification and intervention of adults with additional needs due to mental health concerns, and reduce their impact on statutory resources. The Street triage (BHFT / TVP) joint response to MH crisis also continues daily 1700hrs – 0100hrs.

#### Involve, Bracknell Forest and Wokingham Borough

Involve has continued to provide support to charities and groups across the Wokingham Borough, many of whom work with adults and vulnerable people in our communities.

Involve has attended and supported the Wokingham Adults Safeguarding Forum, as well as the Community Safety Partnership through the year and information and updates relating to safeguarding and awareness raising regarding vulnerability have been shared widely to the sector through our fortnightly newsletter which reaches nearly 600 contacts.

Training specifically in safeguarding has been provided directly to 5 Wokingham Borough charities and other courses have been delivered in the borough on subjects such as: lone working, introduction to mental health, drug & alcohol awareness, introduction to domestic abuse and suicide awareness. All these subject areas increase awareness and support opportunities for people in our communities.

Involve held 2 key Community Awareness events in Wokingham in 18/19. These were on Community Safety and Mental Health. Both were delivered in partnership and had a great reception by the community, partners and attendees.

#### Reading Voluntary Action (RVA)

Our focus continues to be on Safeguarding Adults training for trustees and volunteers, to ensure that they understand their responsibilities in safeguarding adults. Reading Voluntary Action delivered 3 half-day workshops for a total of 31 trustees and volunteers. Staff and trustees that require more in-depth training, for example as Designated Safeguarding Lead, are signposted to relevant training offered by Reading Borough Council.

RVA's Advice Worker is an accredited Safeguarding trainer, having attended the Train the Trainer course. She attends the BW SAB Learning and Development Sub-group and has shared useful resources such as a video clip on Hoarding to add to existing training programmes. RVA regularly updates advice on Safeguarding which is held on our website this is freely accessible. <a href="http://rva.org.uk/knowledge-base/safeguarding-knowledge/">http://rva.org.uk/knowledge-base/safeguarding-knowledge/</a>

We continue working with the Safeguarding Adults team at Reading Borough Council to ensure that we work effectively together to support vulnerable adults at risk.

#### **Volunteer Centre West Berkshire**

Our Director is a full Board Member of the West Berkshire council Health and Well Being Board and the Safeguarding Adults Partnership Board.

During the last year we ran the suicide prevention action group and trained 68 front line workers from the sector. We ran a volunteer recruitment event called V365 which attracted 275 members of the public visiting 60 charities.

We provided training courses, funding advice and guidance and operated transport services, befriending services, community navigations services and a mental health project. We attend numerous partnership boards and clerk the children and young people's board and the special educational needs board.

We ran four safeguarding courses for the sector between April 18 and March 31<sup>st</sup> at which 48 People attended. We also trained further 4 Befrienders in safeguarding delivered by West Berkshire District Council.

#### **West Berkshire District Council (WBC)**

2018/19 has been an exceptionally busy year for the Safeguarding Adult Service in West Berkshire council. Delivery of the safeguarding function is shared between the operational social care teams who complete the majority of investigations into allegations of abuse and a small safeguarding team that provide a triage and scrutiny function, signing off all investigations and leading on investigations into organisational abuse. They also coordinate the response in relation to Deprivation of Liberty Safeguards (DoLS).

The Service has had some significant personnel changes in the past twelve months. There is now a permanent Service Manager in post and investment in the service has led to the recruitment of a Safeguarding Social Worker and a part time admin role within the service. We have now been using our threshold decision making tools for over twelve months and as a result have been able to capture the large amount of work that we do as a service with concerns which so not meet the S42 Inquiry threshold, however do require sign-posting or liaison with other professionals to support the person or their Carer. We have seen an increase in safeguarding concerns of 46% in 2018/19 compared to the previous year. Completed S42 Enquiries has risen by 72% over the same period.

Organisational Safeguarding has been a particular pressure on the service over the past twelve months. We have had one local care home who were under an organisational safeguarding for over six months, two local domiciliary care providers who were also under organisational safeguarding and also one Berkshire wide provider who have been under a police investigation and serious provider concerns framework which West Berkshire Safeguarding Service has led on due to the head office for the provider being in our area.

This has put a great deal of pressure on both the safeguarding service, but also the ASC staff who have assisted in the process to ensure that service users under these providers are safe. We have worked closely with the CQC and our partner local authorities to undertake relevant S42 Inquiries and also undertake the provider concerns process.

The service continues to strike a balance between daily operations dealing with incoming safeguarding concerns and applications for Deprivation of Liberty Safeguards authorisations with raising awareness of safeguarding

#### **Service Improvements**

- We have recently redesigned the safeguarding forms to make them more user friendly and these are due to go live following training with all ASC staff in the autumn.
- The service manager; alongside the PSW, has run Risk Training to push the agenda of prevention of safeguarding and mental capacity, hoarding and scamming training is being delivered shortly.
- Section 42 audits now being completed on at least 10% of cases. This is now on Care Director and makes this much easier to complete.
- Safeguarding and Care Quality are joining forces to relaunch a joint Intelligence Forum for Providers and ASC, Health and partner staff
- SAR training is being completed locally with findings of local SARs. This is being completed by the PSW and Safeguarding Adults Service Manager
- All safeguarding forms are being reviewed on Care Director and will be much more user friendly and intuitive to assist staff in completing S42 Enquiries. This will include compulsory Risk Assessments being completed at the start and end of the Enquiries.
- DoLS/LPS paperwork will be completed on the Care Director system to share information with ASC staff.
- Development of Risk Management escalation process for both in house staff and those in our partner agencies. This will allow us to prevent safeguarding by working with the wider MDT to put measures in place to protect service users at an earlier stage.

#### **Wokingham Borough Council**

Safeguarding Adults is a strategic priority for Wokingham Borough Council (WBC) and a core activity of Adult Social Care.

Wokingham Borough Council achievements for 2018/19 are listed under the SAB priorities for this period:

<u>Priority 1</u> – to strengthen our communication and engagement across groups and communities in the West of Berkshire to ensure that our plans and actions are informed by the widest range of people

- Proactive work was undertaken to ensure accessible safeguarding information is available for all
- Adult Social Care continued to engage with the community and promote the prevention agenda via quarterly Wokingham Adults Safeguarding Partnership Forum (WASPF) meetings wherein matters relevant to the safeguarding agenda were discussed
- A focus was maintained in independent case file audits on the principle of 'empowerment' and promoting back to the workforce the importance of obtaining feedback from customers in line with principles of Making Safeguarding Personal (MSP) both to deliver effective outcomes for customers and to inform service and strategic development

<u>Priority 2</u> – to extend links with other partnerships to work together to break down barriers across agencies and to promote approaches that safeguard people with those that care about them, in their family and community

- Adult Social Care developed and delivered bespoke training in use of recognised risk assessment tools for Domestic Abuse. This was made mandatory for all adult social care practitioners to support more effective risk assessment and joint working with partner agencies in this context
- A consistent link worker was provided for the Multi Agency Risk Assessment Conference (MARAC) and Multi Agency Public Protection Arrangements (MAPPA) to support interagency networking and interfaces
- Mandatory Carers Assessment training was delivered to all staff
- Various events were held to disseminate learning from SARs dynamically
- Mandatory training was delivered for the workforce on working with self-neglect and hoarding, including the provision of toolkits to assist in this complex area of practice

<u>Priority 3</u> – to share learning and develop innovative ways to support both paid and unpaid organisations across the partnership to continually build confidence and the effectiveness of everyone's practice

- Wokingham Borough Council actively participated and engaged in SARs commissioned by the SAB, including contributing to designing innovative models of review to generate effective learning
- Organised and participated in bite-size learning events agreed via the Learning and Development subgroup
- Adult Social Care reviewed and developed training plans to ensure mandatory training encompassed priorities of the SAB and was responsive to emerging findings from SARs
- Supervision audits undertaken on regular basis to provide assurance around effectiveness of practice
- Use of Safeguarding Champions Group as means of providing 'subject matter experts' in each service area
- Increased focus on MSP in all training materials relates to safeguarding

<u>Priority 4</u> – to understand how effective adult safeguarding is across the West of Berkshire, to ensure we identify emerging risks and take action accordingly

- Continuation of 10% audits of completed safeguarding work to understand trends and risks and inform service deliver and development
- Ongoing review of performance data to understand what it tells us about safeguarding activity in the area
- Review of current safeguarding structure and pathways to consider more effective ways
  of delivering safeguarding in the Borough, thereby improving outcomes for adults at risk.
  This included submitting a proposal to Leadership on the development of an Adult
  Safeguarding Hub (ASH) in 2019/20



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### Business Plan 2018 -21

### **Update for 2018-2019**

# Priority 1

We will strengthen our communication and engagement across groups and communities in the West of Berkshire to ensure that our plans and actions are informed by the

experience of the widest range of local people

| Ref            | Outcome   | Action  | By Who                                     | By<br>When  | Success Criteria<br>2018-19  | Success Criteria<br>2019-20  | Success Criteria<br>2020-21  | Progress<br>Update                                  | Current<br>RAG<br>Status |
|----------------|---|---|--|-------------|--|--|--|---|--------------------------|
| Page 241<br>1: | Board membership and arrangements are fit for purpose and reflect a wide and varied group of stakeholders. The voluntary and community sector (VCS) are engaged and inform the work of the Board. | Review Board<br>membership to<br>ensure it is fit for<br>purpose                  | Independent<br>Chair & Business<br>Manager | Dec<br>2018 | Membership and arrangements will have been reviewed with rationale articulated for any changes made or for no changes made. Attendance rates acceptable. | Annual review of ToR<br>Attendance rates<br>acceptable                           | Annual review of<br>ToR<br>Attendance rates<br>acceptable            | Complete<br>d                                       | COMPLE<br>TED            |
| 1.2            |   | VCS and Healthwatch from each Local Authority is engaged in the work of the Board | Independent<br>Chair & Business<br>Manager | Dec<br>2018 | Included in membership and criteria for meeting attendance agreed Attendance rates acceptable.   | VCS and<br>Healthwatch<br>subgroup in progress<br>Attendance rates<br>acceptable | VCS and Healthwatch subgroup in progress Attendance rates acceptable | 6 monthly subgroup to be held. Remain board members | Complet<br>ed            |
| 1.3            |   | Review subgroups,<br>membership of<br>them and Terms of<br>Reference              | Business Manager                           | Dec<br>2018 | Clear structure of subgroups with coherent TORs exist, with clearly articulated interfaces   | Annual review of ToR<br>Attendance rates<br>acceptable                           | Annual review of<br>ToR<br>Attendance rates<br>acceptable            | All have<br>been<br>reviewed<br>, due to<br>changes | Complet<br>ed            |

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| Ref      | Outcome   | Action   | By Who                                     | By<br>When  | Success Criteria<br>2018-19  | Success Criteria<br>2019-20  | Success Criteria<br>2020-21 | Progress<br>Update  | Current<br>RAG<br>Status |
|----------|---|--|--|-------------|--|--|-----------------------------|---|--------------------------|
| Page 242 |   |  |  |             | for sharing of information and coproduction of outcomes Attendance rates acceptable. |  |                             | in<br>priorities<br>ToR they<br>are<br>subject<br>to<br>change. |                          |
| 3.4      | The SAB has strong links with LSCB, Safer Communities, Health and Wellbeing boards                                | Reference in ToR   | Business Manager<br>/ Independent<br>Chair | Mar<br>2019 | Revised ToR  | Annual review of ToR   | Annual review of<br>ToR     | Revised<br>SAB ToR<br>to be<br>endorsed                         | RED                      |
| 3.5      |   | Board are aware of<br>groups business<br>plans and links with<br>Boards priorities<br>are identified and<br>acted upon | Business Manager<br>/ Independent<br>Chair | Mar<br>2019 | relevant Subgroup to   | d links are highlighted to<br>consider joint working an<br>ve work with other boar | rrangements.                | Key documen tation is shared across the groups.                 | COMPLE<br>TED            |
| 1.6      | People who use services are able to influence the work of the SAB, including 'seldom heard' groups (including but | Task and finish group to consider models of service user involvement   | Business Manager<br>/ Independent<br>Chair | Mar<br>2019 | Task group will have identified a range of models to be tested by the steering       |  |                             | Task and<br>finish<br>group<br>held in                          | COMPLE<br>TED            |

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|----------|--|---|--|--------------|---|---|-----------------------------|--|--------------------------|
| Page 243 | not limited to; those for whom English is a second language, younger adults, faith groups, churches and the traveller community) | Steering group to test and implement models of service user involvement to co-produce the work of the SAB, including exploration of a forum and embedding representatives in the subgroups as a possible option | Business Manager<br>/ Independent<br>Chair/Steering<br>Group | June<br>2019 | group. Participants in the steering group will have been identified (will include VCS) and membership agreed. | The steering group will have tested a selection of models and identified the preferred model and what resources or infrastructure will be required to achieve this – this will be provided by delivery of a report and recommendations to the board |                             | March 2019.  Paper to go to Board in June 2019, recomme nding SU Module. | GREEN                    |
| 1.8      |  | Formal proposal to<br>Board on<br>recommending<br>model and how to  | Business Manager / Independent Chair/Steering Group          | Sep<br>2019  |   | A preferred model for involving service users in coproduction around  |                             | Detailed<br>in action<br>1.7   | GREEN                    |

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### Business Plan 2018 -21

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| Ref      | Outcome | Action   | By Who   | By<br>When    | Success Criteria<br>2018-19               | Success Criteria<br>2019-20  | Success Criteria<br>2020-21   | Progress<br>Update             | Current<br>RAG<br>Status |
|----------|---------|--|--|---------------|---|--|---|--------------------------------|--------------------------|
| Page 244 |         | effectively<br>implement this<br>during next year<br>2019/20 |  |               |   | strategic aims of the SAB will have been agreed and work will be underway to embed service user in co-production with the board around the strategic aims of the SAB |   |                                |                          |
| 1.9      |         | Implementation of service user involvement module            | Business Manager / Independent Chair/Steering Group          | March<br>2020 |   | Agreed module goes live  |   | Detailed<br>in 1.7             | GREEN                    |
| 1.10     |         | Review of service<br>user involvement<br>model               | Business Manager<br>/ Independent<br>Chair/Steering<br>Group | Dec<br>2020   |   |  | Review of model presented to the board setting out recommendation s |                                | GREEN                    |
| 4.13     |         | The SAB website is kept up to date                           | Business Manager   | Mar<br>2019   | Six Monthly check of vimprovement actions | vebsite information com<br>set   | pleted and  | Audit<br>date<br>schedule<br>d | GREEN                    |
| 2.14     |         | The Board is   | S/G Lead in each   | Dec           | Findings of a spot ched                   | ck of a random selection   | of 'points of   | Spot                           | Complet                  |

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### Business Plan 2018 -21

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| experi                            | ence of the widest range of loc  | аі реоріе   |   |             |   |   |   |                                       |                          |
|-----------------------------------|--|---|---|-------------|---|---|---|---------------------------------------|--------------------------|
| Ref                               | Outcome  | Action  | By Who  | By<br>When  | Success Criteria<br>2018-19                     | Success Criteria<br>2019-20   | Success Criteria<br>2020-21                     | Progress<br>Update                    | Current<br>RAG<br>Status |
|                                   |  | assured that accessible safeguarding                                      | stakeholder<br>agency                         | 2018        | access' confirms that a<br>Feedback to Business | accessible information w<br>Manager by 31/12  | as identified.                                  | check<br>complete<br>d                | ed                       |
| <b>2.19</b><br><b>2.19</b><br>2.2 |  | information is available for all  | Business Manager                              | Mar<br>2019 | Highlight report to Bo improve accessibility of | ard , with recommendat<br>of information  | ions on how to                                  | Report to<br>go to<br>Junes<br>Board. | RED                      |
| 1.17                              | Providers who deliver services are able to influence the work of the SAB | Task and finish<br>group to consider<br>models of provider<br>involvement | Business Manager<br>/ Independent<br>Chair    | Mar<br>2020 |   | Task group will have identified a range of models to be tested by the steering group. Participants in the steering group will have been identified, this will include representation from the voluntary care sector and membership agreed |   | Carried<br>over to<br>19/20 BP        | GREEN                    |
| 1.18                              |  | Steering Group to<br>test and implement<br>models of provider             | Business Manager / Independent Chair/Steering | Sep<br>2020 |   |   | The steering group will have tested a selection | Carried<br>over to<br>19/20 BP        | GREEN                    |

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### Business Plan 2018 -21

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| Ref      | Outcome | Action  | By Who   | By<br>When  | Success Criteria<br>2018-19 | Success Criteria<br>2019-20 | Success Criteria<br>2020-21  | Progress<br>Update             | Current<br>RAG<br>Status |
|----------|---------|---|--|-------------|-----------------------------|-----------------------------|--|--------------------------------|--------------------------|
| Page 246 |         | involvement to coproduce the work of the SAB, including exploration of a linking in with existing provider forums and working with the CQC. | Group  |             |                             |                             | of models and identified the preferred model and what resources or infrastructure will be required to achieve this – this will be provided by delivery of a report and recommendation s to the board |                                |                          |
| 1.19     |         | Formal proposal to<br>Board on<br>recommending<br>model and how to<br>effectively<br>implement this   | Business Manager<br>/ Independent<br>Chair/Steering<br>Group | Dec<br>2020 |                             |                             | A preferred model for involving providers in coproduction around strategic aims of the SAB will have been agreed and work will be underway   | Carried<br>over to<br>19/20 BP | GREEN                    |

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#### Business Plan 2018 -21

#### **Update for 2018-2019**

### **Priority 1**

We will strengthen our communication and engagement across groups and communities in the West of Berkshire to ensure that our plans and actions are informed by the

experience of the widest range of local people

| Ref          | Outcome | Action                                       | By Who   | By<br>When    | Success Criteria<br>2018-19 | Success Criteria<br>2019-20 | Success Criteria<br>2020-21   | Progress<br>Update             | Current<br>RAG<br>Status |
|--------------|---------|--|--|---------------|-----------------------------|-----------------------------|---|--------------------------------|--------------------------|
| Page         |         |  |  |               |                             |                             | to embed provider in coproduction with the board around the strategic aims of the SAB |                                |                          |
| 1.2 <b>0</b> |         | Implementation of provider involvement model | Business Manager / Independent Chair/Steering Group          | April<br>2021 |                             |                             | Agreed model goes live  | Carried<br>over to<br>19/20 BP | GREEN                    |
| 1.21         |         | Review of provider involvement model         | Business Manager<br>/ Independent<br>Chair/Steering<br>Group | June<br>2021  |                             |                             | Review of model presented to the board setting out recommendation s                   | Carried<br>over to<br>19/20 BP | GREEN                    |

### **Priority 2**

We will extend our links with other partnerships to work together to break down barriers across agencies and to promote approaches that safeguard people with those that care

about them, in their family and community

| Ref  | Outcome             | Action            | By Who    | By<br>When | Success Criteria 2018-19 | Success Criteria 2019-20 | Success Criteria<br>2020-21 | Progress<br>Update | Current<br>RAG Status |
|------|---------------------|-------------------|-----------|------------|--------------------------|--------------------------|-----------------------------|--------------------|-----------------------|
| 1.24 | We are assured that | Event on Domestic | SAB, with | June       | Event held, areas for    |                          |                             | Carried            | AMBER                 |

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### **Update for 2018-2019**

## **Priority 2**

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about them, in their family and community

| about | tnem, in their family and co  | initiality   |  |             | -  |                  |                  |  |         |
|-------|---|--|--|-------------|--|------------------|------------------|--|---------|
| Ref   | Outcome   | Action   | By Who   | By          | Success Criteria   | Success Criteria | Success Criteria | Progress   | Current |
| 1.22  | partners work together to<br>recognise and respond to<br>Domestic Abuse, including<br>in respect of coercive<br>control | Abuse for partners to explore issues, understand priorities of the Domestic Abuse Strategy, and identify areas for improvement All relevant training, guidance and awareness raising activities within partner agencies to include dynamics and impact of coercive control | partners from LSCB, CSP's.  Learning, Development & Dissemination subgroup | Dec 2019    | improvement identified and reflected in updated actions for the SAB or relevant subgroups  Partner agencies have moderated all materials and confirmed content is reflective of this | 2019-20          | 2020-21          | over to 2019-20 Business Plan  Carried over to 2019-20 Business Plan | GREEN   |
| 1.23  |   | Domestic Abuse considered and areas for monitoring or improving practise   | Performance and<br>Quality   | Dec<br>2018 | The subgroup puts mechanisms in place to 'test' the impact of actions 1.22 and 1.24  |                  |                  | Will be<br>added to<br>the<br>Dashboar<br>d Carried                  | RED     |

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### **Update for 2018-2019**

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| about            | t them, in their family and co | mmunity  |  |              |   |  |  |   |                    |
|------------------|--------------------------------|--|--|--------------|---|--|--|---|--------------------|
| Ref              | Outcome                        | Action   | By Who   | By<br>When   | Success Criteria<br>2018-19   | Success Criteria<br>2019-20                              | Success Criteria 2020-21                                     | Progress<br>Update  | Current RAG Status |
| Page 249<br>1.25 | identify risk of significant   | Use of Safe Lives DASH-RIC to be promoted as best practice for risk assessment in Domestic Abuse and relevant support and training provided to staff | Safeguarding<br>Leads & Principal<br>Social Worker for<br>3 Local<br>Authorities | June<br>2019 | The workforce will be demonstrating application of appropriate risk assessment tools in practice and referrals being received by MARAC and DARIM will be reflective of this — the board expect to see an increase in referrals to monitor success | Continued increase in referrals                          | Level of referrals stabilises                                | over to<br>2019-20<br>Business<br>Plan<br>Carried<br>over to<br>2019-20<br>Business<br>Plan | RED                |
| 1.26             |                                | Independent audit will be arranged to review model of risk assessment being promoted and content of  | Performance and Quality  | Dec<br>2019  | The audit will demonstrate inclusion of relevant knowledge and skills in training, effective use of risk  | Recommendations<br>from audit 'tested'<br>for compliance | Recommendation<br>s from audit<br>'tested' for<br>compliance | Carried<br>over to<br>2019-20<br>Business<br>Plan   | GREEN              |

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|----------|--|---|---|---------------|---|---|-----------------------------|---|-----------------------|
| Page 250 |  | training material as assurance. Sample of Safeguarding Concerns for Domestic Abuse to be audited to explore progress and identify |   |               | assessment tools, appropriate responses to identified risk and appropriate referral to MARAC and DARIM, recommendations |   |                             |   |                       |
| 50       |  | remaining<br>strengths and<br>tensions in practice  |   |               | from audit<br>considered by Board<br>and implemented  |   |                             |   |                       |
| 1.27     |  | Monitoring of level<br>of referrals to Multi<br>Agency Risk<br>Assessment<br>Conference<br>(MARAC)                                | Performance and Quality                       | March<br>2019 | There is an increase of   | fnon-police agencies ref  | erring to MARAC             | As per 1.23                                       | RED                   |
| 1.28     | We are assured that staff across all agencies recognise and respond appropriately where there are interdependencies in relationships that mean intervention with one | All agencies to identify and implement appropriate methods to ensure that staff apply Think Family/Think                          | Safeguarding<br>Leads in all<br>organisations | Dec<br>2018   |   | Leads will be able to feedback to the Business Manager and Independent Chair what actions their organisation has taken to achieve |                             | Carried<br>over to<br>2019-20<br>Business<br>Plan | RED                   |

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| Ref  | Outcome   | Action  | By Who                               | By<br>When  | Success Criteria<br>2018-19 | Success Criteria<br>2019-20   | Success Criteria<br>2020-21 | Progress<br>Update                     | Current<br>RAG Status |
|------|---|---|--------------------------------------|-------------|-----------------------------|---|-----------------------------|--|-----------------------|
| τ    | person has implications<br>for another, including<br>recognition and response<br>to carers and other<br>complex relationships | Community approaches in their practice  Learning from SARs  | Learning,                            |             |                             | this and what methods have been implemented and how success will be monitored.  A learning event (or  |                             | Carried                                |                       |
| 1.29 |   | specific to this context is disseminated to the workforce and a simple survey has been undertaken (e.g. Survey Monkey) to measure what proportion of the workforce this has reached | Development & Dissemination subgroup | Jun<br>2019 |                             | other mechanism) will have been delivered including these elements and a survey will evidence the message has reached an acceptable (to be agreed by the Independent Chair) proportion of the workforce across partner agencies. If success criteria are not achieved, this will inform review of how to more effectively |                             | over to<br>2019-20<br>Business<br>Plan | RED                   |

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| Ref                     | Outcome  | Action   | By Who                                   | By<br>When  | Success Criteria<br>2018-19   | Success Criteria<br>2019-20 | Success Criteria<br>2020-21 | Progress<br>Update  | Current<br>RAG Status |
|-------------------------|--|--|--|-------------|---|-----------------------------|-----------------------------|---|-----------------------|
|                         |  |  |  |             |   | disseminate information     |                             |   |                       |
| Page 252<br><b>3.31</b> | We are assured that local safeguarding arrangements for people who have Mental Health issues are effective | Review and monitor current governance structures and accountability for safeguarding in local mental health services | Local Authority<br>Safeguarding<br>Leads | Mar<br>2019 | A report on the governance structures within each area will have been provided to the Board, with analysis of the strengths and any tensions. This will be used for the Board to consider in conjunction with the outcomes of the independent audit (below) |                             |                             | A Six<br>Monthly<br>governan<br>ce report<br>is<br>provided<br>to the<br>Board. | Completed             |

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| Ref               | Outcome                   | Action                | By Who           | Ву   | Success Criteria | Success Criteria      | Success Criteria | Progress | Current    |
|-------------------|---------------------------|-----------------------|------------------|------|------------------|-----------------------|------------------|----------|------------|
| itei              | Outcome                   | Action                | By Willo         | When | 2018-19          | 2019-20               | 2020-21          | Update   | RAG Status |
|                   |                           | Independent audit     | Performance and  |      |                  | A report on the       |                  | Will be  |            |
|                   |                           | of a random           | Quality          |      |                  | outcomes of this      |                  | removed  |            |
|                   |                           | selection of          |                  |      |                  | audit will have been  |                  | from     |            |
|                   |                           | Safeguarding          |                  |      |                  | provided to the       |                  | Business |            |
|                   |                           | Concerns in the       |                  |      |                  | Board with analysis   |                  | Plan     |            |
| P                 |                           | three CMHT areas      |                  |      |                  | and                   |                  | 2019-20  |            |
| l ge              |                           | to be undertaken      |                  |      |                  | recommendations.      |                  | onwards  |            |
| Page 253<br>3.333 |                           | to measure            |                  | Jan  |                  | This will be used for |                  |          |            |
| 3.320             |                           | compliance with       |                  | 2020 |                  | the Board to          |                  |          | N/A        |
|                   |                           | policies and          |                  |      |                  | consider in           |                  |          |            |
|                   |                           | procedures and        |                  |      |                  | conjunction with the  |                  |          |            |
|                   |                           | effectiveness of      |                  |      |                  | outcomes of the       |                  |          |            |
|                   |                           | safeguarding          |                  |      |                  | review of             |                  |          |            |
|                   |                           | interventions in a    |                  |      |                  | governance            |                  |          |            |
|                   |                           | multiagency           |                  |      |                  | structure (above)     |                  |          |            |
|                   |                           | context               |                  |      |                  |                       |                  |          |            |
|                   | We are assured that       | Modern Slavery        | Business Manager |      |                  |                       | The strategic    | TVP to   |            |
|                   | partners work together to | and Human             |                  |      |                  |                       | pathway is in    | provide  |            |
|                   | respond to Modern         | Trafficking strategic |                  |      |                  |                       | place, has been  | copy to  |            |
| 3.33              | Slavery and Human         | pathway agreed        |                  | June |                  |                       | published and is | be       | GREEN      |
| 3.33              | Trafficking issues        | and published         |                  | 2020 |                  |                       | in an accessible | publishe | GKLLIN     |
|                   |                           |                       |                  |      |                  |                       | format to all    | d on our |            |
|                   |                           |                       |                  |      |                  |                       | stakeholders and | policies |            |
|                   |                           |                       |                  |      |                  |                       | the workforce    | and      |            |

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|----------------|---------|---------------------|------------------|------------|-----------------------------|-----------------------------|-----------------------------|--------------------|-----------------------|
|                |         |                     |                  |            |                             |                             |                             | procedur           |                       |
|                |         |                     |                  |            |                             |                             |                             | es                 |                       |
|                |         |                     |                  |            |                             |                             |                             | website.           |                       |
|                |         | Strategic pathway   | Learning,        |            |                             |                             | There is auditable          | Carried            |                       |
| _              |         | is referenced and   | Development &    |            |                             |                             | evidence of this            | over to            |                       |
| 3.3 <b>£</b> G |         | promoted via        | Dissemination    | Dec        |                             |                             | in place                    | 2019-20            | GREEN                 |
|                |         | training and other  | subgroup         | 2020       |                             |                             |                             | Business           | GILLIA                |
| 254            |         | learning            |                  |            |                             |                             |                             | Plan               |                       |
| 4              |         | materials/events    |                  |            |                             |                             |                             |                    |                       |
|                |         | Audit template to   | Safeguarding     |            |                             |                             | A consistent audit          | Carried            |                       |
|                |         | be developed and    | Leads, 3 Local   |            |                             |                             | template is in use          | over to            |                       |
|                |         | agreed for audit of | Authorities      |            |                             |                             | across the three            | 2019-20            |                       |
|                |         | relevant cases for  |                  | Dec        |                             |                             | local authority             | Business           |                       |
| 3.35           |         | local               |                  | 2020       |                             |                             | areas and a copy            | Plan               | GREEN                 |
|                |         | implementation      |                  |            |                             |                             | of the template             |                    |                       |
|                |         |                     |                  |            |                             |                             | has been                    |                    |                       |
|                |         |                     |                  |            |                             |                             | provided to the             |                    |                       |
|                |         | 5.1                 | C ( 1:           |            |                             |                             | Business Manager            | 0 . 1              |                       |
|                |         | Relevant cases to   | Safeguarding     |            |                             |                             | A sample of cases           | Carried            |                       |
|                |         | be audited to       | Leads in Local   |            |                             |                             | across the AOR              | over to            |                       |
| 3.36           |         | confirm whether     | Authorities, TVP | Dec        |                             |                             | has been audited            | 2019-20            | GREEN                 |
|                |         | strategic pathway   |                  | 2020       |                             |                             | and both good               | Business           |                       |
|                |         | is being followed   |                  |            |                             |                             | practice and                | Plan               |                       |
|                |         | and best practice   |                  |            |                             |                             | tensions                    |                    |                       |

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| Ref  | Outcome   | Action  | By Who                                       | By<br>When  | Success Criteria<br>2018-19                                       | Success Criteria<br>2019-20 | Success Criteria<br>2020-21  | Progress<br>Update                                     | Current<br>RAG Status |
|------|---|---|--|-------------|---|-----------------------------|--|--|-----------------------|
| Page |   | adhered to locally  |  |             |   |                             | identified and collated thematically. The outcome of this will inform further work in this area. |  |                       |
| 1.37 | Organisations have in place policies and processes to manage allegations against persons in position of trust   | Framework for the Management of Allegations against Persons in Position of Trust – is published | Policy and<br>Procedures –<br>Berkshire wide | Dec<br>2018 | Framework<br>endorsed by Board in<br>2017/18 is<br>published.     |                             |  | Publishe d on Boards Policies and Procedur es Website. | Completed             |
| 1.38 | We are assured that local arrangements to support and minimise risks for people who self-neglect are effective including; clear policies and procedures, recognition of risk, management of | Review to be undertaken to inform the SAB with an objective perspective on current status       | Commissioned<br>Independent<br>Auditor       | Dec<br>2018 | Review will be completed and submitted with clear recommendations |                             |  | Endorsed<br>by Board<br>in<br>Decembe<br>r 2018        | COMPLETE<br>D         |

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| Ref  | Outcome                                    | Action  | By Who                                       | By<br>When   | Success Criteria<br>2018-19   | Success Criteria<br>2019-20 | Success Criteria 2020-21 | Progress<br>Update  | Current<br>RAG Status |
|------|--|---|--|--------------|---|-----------------------------|--------------------------|---|-----------------------|
| 1.39 | complex cases and outcomes for individuals | All agencies to proactively engage with independent review to enable this work to be concluded in a timely manner | Safeguarding<br>Leads all agencies           | Sept<br>2018 | Reviewer will be provided with access to all information required in a timely manner to enable completion of the work |                             |                          | Informati<br>on<br>received   | COMPLETE<br>D         |
| 1.40 |  | Recommendations<br>from review to be<br>implemented and<br>compliance and<br>outcomes to be<br>audited            | All subgroups in context of each groups TORs | Mar<br>2019  | Audit tool devised<br>(or current audit<br>tools amended) to<br>measure success on<br>recommendations                 | Continue<br>measurement     | Continue<br>measurement  | Added to<br>Learning<br>from<br>SAR/Audi<br>t<br>Impleme<br>ntation<br>Plan | COMPLETE<br>D         |

| Priority |                     | •                 | vative ways to supp | ort both p | aid and unpaid organis      | ations across the partne    | ership to continually    | build confid       | ence and the          |
|----------|---------------------|-------------------|---------------------|------------|-----------------------------|-----------------------------|--------------------------|--------------------|-----------------------|
|          | effectiveness of ev | eryone's practice |                     |            |                             |                             |                          |                    |                       |
| Ref      | Outcome             | Action            | By Who              | By<br>When | Success Criteria<br>2018-19 | Success Criteria<br>2019-20 | Success Criteria 2020-21 | Progress<br>Update | Current<br>RAG Status |

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| Priority |   | rning and develop innoveryone's practice   | vative ways to sup                     | port both p                   | paid and unpaid organis   | ations across the partne   | ership to continually       | build confid                                       | ence and the          |
|----------|---|--|--|-------------------------------|---|--|-----------------------------|--|-----------------------|
| Ref      | Outcome   | Action   | By Who                                 | By<br>When                    | Success Criteria<br>2018-19   | Success Criteria<br>2019-20  | Success Criteria 2020-21    | Progress<br>Update                                 | Current<br>RAG Status |
| Page 257 | We have considered a range of options for undertaking SARs                      | A range of (new) models of undertaking SARs will have been considered, including how and when they could be used. Recommendations provided back to the SAB | Safeguarding<br>Adults Review<br>Panel |                               | A range of options will have been considered with evidence as to the rationale for including them or not including them in an agreed list of options. Going forwards, panel minutes will evidence consideration of the most proportionate and effective model in the context of each SAR commissioned, with clear rationale applied | Annual review of SAR models  | Annual review of SAR models | Removed<br>from<br>19/20 BP                        | N/A                   |
| 4.43     | Learning from SARs is<br>shared and agencies<br>embed this in their<br>practice | SARs will be published in a timely manner with learning, recommendations   | Safeguarding<br>Adults Review<br>Panel | Upon<br>sign<br>off of<br>SAR | prevent delay in sharir   | of timely sign off a pub<br>ng and embedding of lea<br>s to be set by Adults Saf | arning.                     | Endorse<br>ment of<br>Learning<br>from<br>SAR/Audi | Completed             |

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| Priority 3       |         | arning and develop inno everyone's practice  | vative ways to suppo                           | ort both p                      | paid and unpaid organisa    | ations across the partne   | ership to continually       | build confid   | ence and the       |
|------------------|---------|--|--|---------------------------------|-----------------------------|--|-----------------------------|--|--------------------|
| Ref              | Outcome | Action   | By Who   | By<br>When                      | Success Criteria<br>2018-19 | Success Criteria<br>2019-20  | Success Criteria<br>2020-21 | Progress<br>Update   | Current RAG Status |
| Page <b>4.49</b> |         | and Action Plans shared with partner agencies and sub groups effectively and efficiently to support effective dissemination Learning from SARS | Business Manager                               |                                 | All learning will be trac   | cked and success measu   | res monitored.              | t<br>Impleme<br>ntation<br>Plan  |                    |
| <b>4.43</b>      |         | will be logged and<br>monitored on the<br>Boards Learning<br>from SAR/Audit<br>Implementation<br>plan  |  | On<br>Endors<br>ement<br>of SAR |                             |  |                             | ment of<br>Learning<br>from<br>SAR/Audi<br>t<br>Impleme<br>ntation<br>Plan | COMPLETE<br>D      |
| 1.45             |         | Evaluation template for training to include questions to   | Learning, Development & Dissemination subgroup | March<br>2019                   | template for training in    | rovided evidence that the<br>ncludes a mechanism fo<br>use and embed their less<br>ss will be measured | r identifying how           | Removed<br>from<br>19/20<br>Business                                       | N/A                |

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| Priority           |  | rning and develop inno everyone's practice  | vative ways to suppo                              | ort both p    | paid and unpaid organis     | ations across the partn  | ership to continually    | build confid   | ence and the       |
|--------------------|--|---|---|---------------|-----------------------------|--|--------------------------|--|--------------------|
| Ref                | Outcome  | Action  | By Who  | By<br>When    | Success Criteria<br>2018-19 | Success Criteria<br>2019-20  | Success Criteria 2020-21 | Progress<br>Update   | Current RAG Status |
|                    |  | evaluate how practitioners have taken on and embedded learning  |   |               |                             |  |                          | Plan   |                    |
| <b>1.47</b><br>age |  | Learning from SARs completed by other boards  | Business<br>Manager/<br>Subgroup Chair<br>Meeting | Ongoi<br>ng   |                             | of published SARS and co<br>de are appropriate for t<br>ent  |                          | Access to<br>RIPHA<br>National<br>Library                      | Completed          |
| 259<br><b>4.48</b> |  | The Learning from SAR and Audits Implementation Plan is used to monitor response to findings by partner agencies upon publication of SARs | Performance and<br>Quality                        | Quart<br>erly |                             | ovided to the board prov<br>are being responded to   | _                        | Highlight<br>report to<br>be taken<br>to each<br>board.        | Completed          |
| 2.49               | Training plans reflect<br>the priorities in the<br>Business Plan | Review training plans to ensure they address agreed priorities  | Learning, Development & Dissemination subgroup    | Dec<br>2018   | their training plans ha     | provided feedback to the vertice of the provided feedback to the vertices of the priorities. Chair | vhat assurances          | A revised action to be presente d in the 2019-20 Business Plan | RED                |

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| Ref              | Outcome   | Action   | By Who                                    | By<br>When   | Success Criteria<br>2018-19  | Success Criteria<br>2019-20  | Success Criteria 2020-21   | Progress<br>Update  | Current RAG Status |
|------------------|---|--|---|--------------|--|--|--|---|--------------------|
| <b>2.50</b> Page |   | Deliver core<br>training at all levels<br>of organisations to<br>support the sector  | Safeguarding<br>Lead each<br>organisation | Dec<br>2018  | delivered at all levels of   | to the subgroup that co<br>of the organisation<br>ne core training and acc                                 |  | A revised action to be presente d in the 2019-20 Business Plan  | RED                |
| 20<br>00<br>1.51 | We are assured that effective supervision is taking place within agencies | Audit template to be designed, which includes a range of measurable outcomes on the delivery and effectiveness of supervision, leadership and case oversight in Adult Safeguarding | Performance and<br>Quality Subgroup       | Dec<br>2018  | An audit template has been agreed, which has been signed off by board and is ready to be used in agencies    | Annual review of audit tool  | Annual review of audit tool  | Audit<br>template<br>finalised<br>March<br>2019.                | COMPLETE<br>D      |
| 1.52             |   | Audit to be undertaken within each organisation using agreed tool to look at effectiveness and   | Safeguarding<br>Leads all agencies        | June<br>2019 | Audit has been undertaken in each organisation and a report received for each, including strengths, tensions | Ongoing monitoring of the effectiveness of supervision, with specific priority identified and improvements | Ongoing<br>monitoring of the<br>effectiveness of<br>supervision, with<br>specific priority<br>identified and | Audit<br>Stopped<br>revised<br>action in<br>2019-20<br>Business | N/A                |

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### Business Plan 2018 -21

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| Priority 3 |         | earning and develop inno  | vative ways to supp      | oort both p | paid and unpaid organis                  | ations across the partne                              | ership to continually     | build confid  | lence and the         |
|------------|---------|---|--------------------------|-------------|--|---|---------------------------|---|-----------------------|
| Ref        | Outcome | Action  | By Who                   | By<br>When  | Success Criteria<br>2018-19              | Success Criteria<br>2019-20                           | Success Criteria 2020-21  | Progress<br>Update                                  | Current<br>RAG Status |
| Page 261   |         | type of supervision being delivered (e.g. reflective, informal, ad-hoc, peer, clinical, group, observational), frequency and effectiveness (including that safeguarding is being considered), and strengths and tensions. Findings to be reported back to Performance and Quality Subgroup. |                          |             | and recommendations fed back to subgroup | recommended.  | improvements recommended. | Plan  |                       |
| 1.53 a     |         | Results of audits discussed and key themes for learning identified.   | Performance &<br>Quality | Dec<br>2019 |  | Key learning identified and shared with LD&D Subgroup |                           | Audit<br>Stopped<br>revised<br>action in<br>2019-20 | N/A                   |

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| Ref    | Outcome   | Action  | By Who   | By<br>When   | Success Criteria<br>2018-19                                  | Success Criteria<br>2019-20   | Success Criteria<br>2020-21        | Progress<br>Update   | Current RAG Status |
|--------|---|---|--|--------------|--|---|------------------------------------|--|--------------------|
|        |   |   |  |              |  |   |                                    | Business   |                    |
|        |   | Learning from this  | Learning,                                      |              |  | The sub group has   | The subgroup                       | Plan<br>Audit  |                    |
|        |   | exercise to be shared with  | Development & Dissemination                    |              |  | reported to the board on what   | seek feedback to<br>how useful the | Stopped revised  |                    |
| 1.535b |   | agencies to encourage use of a  | subgroup                                       | June<br>2020 |  | methods of dissemination have   | information shared with            | action in<br>2019-20   | N/A                |
| je 262 |   | diverse range of effective models   |  |              |  | been used to share<br>the findings of this<br>audit with<br>stakeholders          | stakeholders has<br>been.          | Business<br>Plan   |                    |
| 1.54   | Staff and volunteers are supported to improve their skills and confidence | Develop<br>opportunities for<br>peer support both<br>within and across<br>agencies                  | Learning, Development & Dissemination subgroup | June<br>2019 | Implementation plan<br>to board including<br>success targets | Update report to<br>board on outcomes<br>of peer support                          |                                    | A revised action to be presente d in the 2019-20 Business Plan | N/A                |
| 1.55   |   | Develop opportunities for practitioners to discuss and reflect on cases, including use of quarterly | Learning, Development & Dissemination subgroup | June<br>2019 | focuses on reflective le                                     | uarding Forums establishearning.  learning are identified.  led programme of even | ū                                  | A revised action to be presente d in the 2019-20               | N/A                |

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| Priority 3       |         | We will share learning and develop innovative ways to support both paid and unpaid organisations across the partnership to continually build confidence and the effectiveness of everyone's practice |   |              |  |   |   |  |                       |  |  |  |
|------------------|---------|--|---|--------------|--|---|---|--|-----------------------|--|--|--|
| Ref              | Outcome | Action   | By Who  | By<br>When   | Success Criteria<br>2018-19  | Success Criteria<br>2019-20   | Success Criteria<br>2020-21   | Progress<br>Update   | Current<br>RAG Status |  |  |  |
|                  |         | Adult Safeguarding forums for managers and practitioners   |   |              |  | ethods used completed t<br>ng methods are effective   |   | Business<br>Plan   |                       |  |  |  |
| Pag <b>s</b> 263 |         | Develop<br>standardised<br>eLearning and bite<br>sized sessions for<br>VCS   | Learning, Development & Dissemination subgroup  | Sept<br>2019 | Standardised e-learning to VCS. Bite sized session been made accessible Regular 'testing' of measubgroups that learning subgroups that learning standard in the subgroups that subgroups the subgroups the subgroups that subgroups the subgroups thad subgroups the subgroups that subgroups the subgroups that subg | nt issues will have o assure the  | A revised action to be presente d in the 2019-20 Business Plan          | N/A  |                       |  |  |  |
| 1.57             |         | Develop and promote learning opportunities for volunteers  | Reading Voluntary Action, Involve Wokingham, Volunteer Centre West Berkshire and the Learning, Development & Dissemination subgroup | Mar<br>2020  | Inclusion of volunteers will be considered and implemented where appropriate for all learning opportunities created by the subgroup  | Mechanisms for peer sacross agencies will be opportunities will be paccessed  Regular 'testing' of mecompleted to assure the learning methods are expected. | in place and<br>ublicised and being<br>othods used<br>ne subgroups that | A revised action to be presente d in the 2019-20 Business Plan | N/A                   |  |  |  |
| 1.58             |         | Joint Children's and<br>Adults<br>Safeguarding   | Learning, Development & Dissemination   | Jan<br>2019  | •  | s for volunteers will be in<br>d will have been publicis  | •   | Successful<br>conferenc<br>e held                              | COMPLETE<br>D         |  |  |  |

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| Priority                          | Priority 3 We will share learning and develop innovative ways to support both paid and unpaid organisations across the partnership to continually build effectiveness of everyone's practice |  |  |               |   |  |   |  |                       |
|-----------------------------------|--|--|--|---------------|---|--|---|--|-----------------------|
| Ref                               | Outcome  | Action   | By Who   | By<br>When    | Success Criteria<br>2018-19   | Success Criteria<br>2019-20  | Success Criteria<br>2020-21                         | Progress<br>Update   | Current<br>RAG Status |
| 1.59                              |  | Conference on<br>theme of<br>Prevention and<br>Early Intervention      | subgroup Joint safeguarding conference group   | June<br>2019  | •   | ew the conference and i<br>ccesses and recommen  | •   | Schedule<br>d for<br>SEPTEMB<br>ER 2019                        | AMBER                 |
| Pag <b>&amp;</b> 264<br><b>4.</b> |  | Deliver<br>Safeguarding<br>Adults Train the<br>Trainer programme       | Learning, Development & Dissemination subgroup | March<br>2019 |   | ch includes key prioritie<br>d level of attendance ex  | •   | A revised action to be presente d in the 2019-20 Business Plan | N/A                   |
| 4.61                              |  | Report on training<br>activity for 2017-18<br>for SAB annual<br>report | Learning, Development & Dissemination subgroup | Dec<br>2018   | Report delivered recor<br>planning  | nmendations will steer   | future business                                     | Data<br>received   | COMPLETE<br>D         |
| 1.62                              | Adult safeguarding services are person led and outcomes focused because people are encouraged and supported to make their own decisions  |  | ,  |               | Safeguarding Personal<br>Interest Duty and Infor<br>Making Safeguarding F | rave been moderated to<br>is embedded but that D<br>mation Sharing are ade<br>Personal is embedded in<br>om the point of recognis<br>e this is appropriate | Outy of Care, Public quately covered the culture of |  |                       |

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| Priority : | We will share learn<br>effectiveness of ev                          | •  | vative ways to supp                            | ort both p    | paid and unpaid organis   | ations across the partne  | ership to continually       | build confid   | lence and the      |
|------------|---|--|--|---------------|---|---|-----------------------------|--|--------------------|
| Ref        | Outcome   | Action   | By Who   | By<br>When    | Success Criteria<br>2018-19   | Success Criteria<br>2019-20   | Success Criteria<br>2020-21 | Progress<br>Update   | Current RAG Status |
| Page 265   |   | Ensure that adult safeguarding training is based on Making Safeguarding Personal principles balanced with understanding of Duty of Care and Public Interest Duty | Learning, Development & Dissemination subgroup | March<br>2019 | earliest opportunity ('I  | safeguarding interventi<br>Nothing about me, with<br>(where appropriate) ar<br>n-making | out me') and they,          | A revised action to be presente d in the 2019-20 Business Plan | N/A                |
| 1.65       | We provide feedback to<br>those who raise a<br>safeguarding concern | Training emphasises the importance of providing feedback to the referrer   | Learning, Development & Dissemination subgroup | Mar<br>2019   | All agencies understand when feedback should be provided and are active participants in seeking out |   |                             | A revised action to be presente d in the 2019-20               | N/A                |

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| Ref               | Outcome   | Action   | By Who                       | By<br>When  | Success Criteria<br>2018-19   | Success Criteria<br>2019-20   | Success Criteria 2020-21   | Progress<br>Update                              | Current RAG Status |
|-------------------|---|--|------------------------------|-------------|---|---|--|---|--------------------|
| Pa                |   |  |                              |             | feedback, subgroup will create and implement monitoring process to ensure occurring and highlight issues to the board.              |   |  | Business<br>Plan                                |                    |
| <b>1. 6 6 6 6</b> |   | Compliance with providing feedback at the point of decision (whether to proceed to Sec 42 enquiry) and at conclusion, to be measured via all (existing) internal and independent audit processes | Performance and<br>Quality   | Mar<br>2019 | Audit evidences that feedback is being provided to referrers as appropriate, and in a timely manner, subgroup to set timely manner. |   |  | On the section 42 audit form                    | COMPLETE<br>D      |
| 1.67              | Independent providers deliver safe, high quality services and the Board is assured that safeguarding processes are adhered to in line with Care Act | Assurances will be provided to the Board that safeguarding processes are robust and fit for purpose in   | DASS and other commissioners | Mar<br>2019 | The annual self-<br>assessment audit will<br>be submitted in a<br>timely manner and<br>will provide an<br>evidence base             | The annual self-<br>assessment audit will<br>be submitted in a<br>timely manner and<br>will provide an<br>evidence base | The annual self-<br>assessment audit<br>will be submitted<br>in a timely<br>manner and will<br>provide an<br>evidence base | Annual Self Assessme nts complete d by partners | COMPLETE<br>D      |

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| Ref               | Outcome  | Action  | By Who   | By<br>When    | Success Criteria<br>2018-19   | Success Criteria<br>2019-20 | Success Criteria 2020-21 | Progress<br>Update   | Current RAG Status |
|-------------------|--|---|--|---------------|---|-----------------------------|--------------------------|--|--------------------|
|                   | requirements   | independent provision, including Home Care.   |  |               |   |                             |                          |  |                    |
| P <b>%</b> ge 267 | We are assured that all stakeholders are following the Berkshire Pressure Ulcer Pathway to ensure effective delivery of care and robust consideration of safeguarding concerns | Recommendations<br>from audit<br>conducted in<br>2017/18 will be<br>published                                     | CCG Safeguarding<br>Lead / Business<br>Manager                           | Dec<br>2018   | Findings will have<br>been shared with all<br>relevant agencies                         |                             |                          | A revised action to be presente d in the 2019-20 Business Plan | N/A                |
| 1.69              | in this context  | Recommendations<br>from that review<br>will be<br>implemented   | Pressure Care Task and Finish Group – managed by Performance and Quality | March<br>2019 | Task and Finish Group to present progress to the Board in March 2019                    |                             |                          | A revised action to be presente d in the 2019-20 Business Plan | N/A                |
| 1.70              |  | Review audit will<br>be undertaken to<br>measure progress<br>in respect of<br>compliance and<br>effectiveness and | Performance and<br>Quality   | June<br>2019  | There will be improved compliance with application of the pathway and the strengths and |                             |                          | A revised action to be presente d in the 2019-20               | N/A                |

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| Priority 3 | effectiveness of everyone's practice |  |        |            |   |                             |                             |                    |                    |  |
|------------|--------------------------------------|--|--------|------------|---|-----------------------------|-----------------------------|--------------------|--------------------|--|
| Ref        | Outcome                              | Action   | By Who | By<br>When | Success Criteria<br>2018-19   | Success Criteria<br>2019-20 | Success Criteria<br>2020-21 | Progress<br>Update | Current RAG Status |  |
| Page 268   |                                      | extended to also include consideration of Grade 2 pressure wounds as well. |        |            | tensions around its impact on effective delivery of care and consideration of safeguarding concerns will be understood to inform any further strategic work |                             |                             | Business<br>Plan   |                    |  |

| Priori | ty 4 We will understan  | d how effective adult  | safeguarding is acros | s the We     | st of Berkshire to ensur  | e that we identify emer  | ging risks and take a       | ction accord   | dingly                |
|--------|---|--|-----------------------|--------------|---|--------------------------|-----------------------------|--|-----------------------|
| Ref    | Outcome   | Action   | By Who                | By<br>When   | Success Criteria<br>2018-19   | Success Criteria 2019-20 | Success Criteria<br>2020-21 | Progress<br>Update   | Current<br>RAG Status |
| 3.71   | We have verified that the workforce is accessing and using the Pan Berkshire policies and procedures following their launch | Survey Monkey will be used to obtain subjective feedback from the workforce as to whether they are accessing the policies & procedures and to capture their perspective on the strengths and | Business Manager      | Sept<br>2019 | An acceptable (to be agreed by Independent Chair) proportion of the workforce will be accessing the policies and procedures |                          |                             | Work is being undertak en by the Pan Berkshire Policies and Procedur es Group regarding usage of | N/A                   |

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| Priori                     | ty 4 We will understan | d how effective adult | safeguarding is acros | s the We | st of Berkshire to ensure | e that we identify emer | ging risks and take a | ction accord | lingly     |
|----------------------------|------------------------|-----------------------|-----------------------|----------|---------------------------|-------------------------|-----------------------|--------------|------------|
| Ref                        | Outcome                | Action                | By Who                | Ву       | Success Criteria          | Success Criteria        | Success Criteria      | Progress     | Current    |
|                            | - Gattonic             | 71000011              | by Willo              | When     | 2018-19                   | 2019-20                 | 2020-21               | Update       | RAG Status |
|                            |                        | tensions              |                       |          |                           |                         |                       | the          |            |
|                            |                        |                       |                       |          |                           |                         |                       | policies     |            |
|                            |                        |                       |                       |          |                           |                         |                       | and          |            |
|                            |                        |                       |                       |          |                           |                         |                       | procedur     |            |
|                            |                        |                       |                       |          |                           |                         |                       | es.          |            |
|                            |                        | Website hits will     | Business Manager      |          | Analysis will             |                         |                       | Being        |            |
|                            |                        | have been analysed    |                       |          | evidence the website      |                         |                       | undertak     |            |
| Page.269<br><b>3.72</b> 69 |                        | to provide an         |                       |          | is being accessed         |                         |                       | en by the    |            |
| ıge                        |                        | objective             |                       | Sept     | proportionately           |                         |                       | Pan          |            |
| 3.72                       |                        | perspective on how    |                       | 2019     | across the AOR and        |                         |                       | Berkshire    | N/A        |
| 59                         |                        | often and from        |                       |          | that website hits are     |                         |                       | Policies     |            |
|                            |                        | where the             |                       |          | at an                     |                         |                       | and          |            |
|                            |                        | documents are         |                       |          | expected/acceptable       |                         |                       | Procedur     |            |
|                            |                        | being accessed        |                       |          | level                     |                         |                       | es Group     |            |
|                            |                        | Internal and          | Performance and       |          | Audit will evidence       |                         |                       | Is a         |            |
|                            |                        | Independent audits    | Quality               |          | Pan Berkshire             |                         |                       | Business     |            |
|                            |                        | of Adult              |                       |          | policies and              |                         |                       | As Usual     |            |
|                            |                        | Safeguarding work     |                       | TBC      | procedures being          |                         |                       | Task         |            |
|                            |                        | will include          |                       | based    | appropriately             |                         |                       |              |            |
| 1.73                       |                        | consideration of      |                       | on       | applied in practice       |                         |                       |              | N/A        |
|                            |                        | whether Pan           |                       | audits   |                           |                         |                       |              |            |
|                            |                        | Berkshire policies    |                       |          |                           |                         |                       |              |            |
|                            |                        | and procedures are    |                       |          |                           |                         |                       |              |            |
|                            |                        | being correctly       |                       |          |                           |                         |                       |              |            |
|                            |                        | implemented           |                       |          |                           |                         |                       |              |            |
| 1.74                       | We understand what the | Audit outcomes are    | Performance and       | Quart    | Audit outcomes are kn     | own, are informing rele | vant action plans     | All audit    | COMPLETE   |

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| Priori | ty 4 We will understan    | d how effective adult | safeguarding is acros | ss the We | st of Berkshire to ensur | e that we identify emer    | ging risks and take a | action accord | lingly     |
|--------|---------------------------|-----------------------|-----------------------|-----------|--------------------------|----------------------------|-----------------------|---------------|------------|
| Ref    | Outcome                   | Action                | By Who                | Ву        | Success Criteria         | Success Criteria           | Success Criteria      | Progress      | Current    |
| itei   | Outcome                   | Action                | by Wilo               | When      | 2018-19                  | 2019-20                    | 2020-21               | Update        | RAG Status |
|        | data tells us about where | analysed and the      | Quality               | erly      | and strategic focus and  | d are being fed into trair | ning to ensure        | outcome       | D          |
|        | the risks are and who are | Board takes           | and Safeguarding      |           | required actions are er  | mbedded in culture         |                       | are           |            |
|        | the most vulnerable       | required actions to   | Leads                 |           |                          |                            |                       | added to      |            |
|        | groups                    | address identified    |                       |           |                          |                            |                       | learning      |            |
|        |                           | areas of concern      |                       |           |                          |                            |                       | from          |            |
|        |                           | across partner        |                       |           |                          |                            |                       | sar/audit     |            |
|        |                           | agencies.             |                       |           |                          |                            |                       | plan.         |            |
| 1.75   |                           | Dashboard is          | Performance and       |           |                          | itored dynamically and     | the Board is          | Dashboar      |            |
| ge     |                           | monitored and         | Quality               |           | provided with accurate   | e and timely data          |                       | d in place    |            |
| 270    |                           | developed to          |                       | Quart     |                          |                            |                       |               | COMPLETE   |
|        |                           | ensure Board is       |                       | erly      |                          |                            |                       |               | D          |
|        |                           | informed of the KPI   |                       |           |                          |                            |                       |               |            |
|        |                           | data<br>Develop       | Performance and       |           | The local level of risk  |                            |                       | Data          |            |
|        |                           | understanding of      | Quality               |           | is known, in order to    |                            |                       | collected     |            |
|        |                           | the local level of    | Quality               |           | inform future            |                            |                       | as part of    |            |
|        |                           | risk for victims of   |                       |           | strategic work and       |                            |                       | dashboar      |            |
| 1.76   |                           | FGM by reviewing      |                       | Mar       | any key messages         |                            |                       | d.            | Completed  |
|        |                           | local and national    |                       | 2019      | are disseminated in a    |                            |                       | <b></b>       |            |
|        |                           | FGM data              |                       |           | timely manner,           |                            |                       |               |            |
|        |                           |                       |                       |           | including in training    |                            |                       |               |            |
|        |                           |                       |                       |           | where required           |                            |                       |               |            |
|        |                           | Develop               | Performance and       |           | The local level of risk  |                            |                       | Data          |            |
| 1.77   |                           | understanding of      | Quality               | Mar       | is known, in order to    |                            |                       | collected     | COMPLETE   |
| 1.//   |                           | local level of risk   |                       | 2019      | inform future            |                            |                       | as part of    | D          |
|        |                           | for victims of        |                       |           | strategic work and       |                            |                       | dashboar      |            |

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| Priori  | ty 4 We will understan   | d how effective adult  | safeguarding is acro                                | ss the We     | est of Berkshire to ensure  | e that we identify emer     | ging risks and take a       | action accord  | dingly                |
|---------|--|--|---|---------------|---|-----------------------------|-----------------------------|--|-----------------------|
| Ref     | Outcome  | Action   | By Who  | By<br>When    | Success Criteria<br>2018-19   | Success Criteria<br>2019-20 | Success Criteria<br>2020-21 | Progress<br>Update   | Current<br>RAG Status |
| Tage 2. | Feedback from people having experienced intervention via a Sec 42 Enquiry is used to inform practice development and the strategic aims of the SAB | Modern Slavery by reviewing local and national Modern Slavery data  Ensure feedback is routinely obtained from all people subject to a Sec 42 enquiry via mandatory review of desired outcomes expressed at outset | Safeguarding<br>Leads in the 3<br>Local Authorities | Mar<br>2019   | any key messages are disseminated in a timely manner, including in training where required  There is evidence that desired outcomes expressed at the start of the intervention are being reviewed with the individual or their representative at the end of an intervention |                             |                             | d.  Will form part of the service user feedback action. 1.6-1.10 | N/A                   |
| 1.79    |  | Provide mechanism for collating and analysing this feedback to inform practice development and strategic focus   | Performance and<br>Quality                          | March<br>2019 | There is a mechanism in place to collate this feedback and to extract themes for feedback to the board  |                             |                             | Will form part of the service user feedback action. 1.6-1.10     | N/A                   |
| 1.80    |  | Ensure feedback obtained is being  | Learning, Development &                             | June<br>2019  | There is evidence that themes have  |                             |                             | Will form part of  | N/A                   |

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| Priori | riority 4 We will understand how effective adult safeguarding is across the West of Berkshire to ensure that we identify emerging risks and take action accordingly |                                     |                 |            |                             |                             |                          |                    |                       |  |  |
|--------|---|-------------------------------------|-----------------|------------|-----------------------------|-----------------------------|--------------------------|--------------------|-----------------------|--|--|
| Ref    | Outcome   | Action                              | By Who          | By<br>When | Success Criteria<br>2018-19 | Success Criteria<br>2019-20 | Success Criteria 2020-21 | Progress<br>Update | Current<br>RAG Status |  |  |
|        |   | shared across                       | Dissemination   |            | been shared with            |                             |                          | the                |                       |  |  |
|        |   | partners and is                     | subgroup        |            | stakeholders and            |                             |                          | service            |                       |  |  |
|        |   | informing learning                  |                 |            | relevant knowledge          |                             |                          | user               |                       |  |  |
|        |   | events and training                 |                 |            | and information is          |                             |                          | feedback           |                       |  |  |
|        |   |                                     |                 |            | embedded in                 |                             |                          | action.            |                       |  |  |
|        |   |                                     |                 |            | training and culture        |                             |                          | 1.6-1.10           |                       |  |  |
| Pa     | The Board is assured that   | A thematic audit                    | Performance and |            | A consistent method         |                             |                          | Audit              |                       |  |  |
| ge     | local arrangements to   | programme will be                   | Quality         |            | for auditing                |                             |                          | schedule           |                       |  |  |
| 27     | support and minimise risks  | agreed, based on                    |                 |            | multiagency work            |                             |                          | will be            |                       |  |  |
| 1.81   | are effective   | areas of risk and                   |                 |            | across the three            |                             |                          | planned            |                       |  |  |
|        |   | learning from SARs.                 |                 |            | Local Authority areas       |                             |                          | as part of         |                       |  |  |
|        |   | Audits will use an                  |                 |            | will be in place.           |                             |                          | the                |                       |  |  |
|        |   | agreed template                     |                 |            | Findings are being          |                             |                          | Learning           |                       |  |  |
|        |   | and review                          |                 |            | fed into the board          |                             |                          | from               |                       |  |  |
|        |   | interventions in a                  |                 | Mar        | and there is evidence       |                             |                          | SAR/Audi           | COMPLETE              |  |  |
|        |   | multiagency                         |                 | 2019       | of learning being           |                             |                          | t                  | D                     |  |  |
|        |   | context and be                      |                 |            | disseminated across         |                             |                          | Impleme            |                       |  |  |
|        |   | undertaken                          |                 |            | organisations and           |                             |                          | ntation            |                       |  |  |
|        |   | consistently across                 |                 |            | into the work of the        |                             |                          | Plan.              |                       |  |  |
|        |   | the AOR. Note. For efficiency, this |                 |            | subgroups                   |                             |                          |                    |                       |  |  |
|        |   | action may                          |                 |            |                             |                             |                          |                    |                       |  |  |
|        |   | incorporate other                   |                 |            | Audits carried over         |                             |                          |                    |                       |  |  |
|        |   | references to audit                 |                 |            | 17/18:                      |                             |                          |                    |                       |  |  |
|        |   | in this business                    |                 |            | Tissue Viability            |                             |                          |                    |                       |  |  |

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### Business Plan 2018 -21

# Update for 2018-2019

| Priori   | ty 4 We will understan | d how effective adult  | safeguarding is acros                        | s the We    | st of Berkshire to ensure   | e that we identify emer     | ging risks and take a       | action accord                                       | dingly                |
|----------|------------------------|--|--|-------------|---|-----------------------------|-----------------------------|---|-----------------------|
| Ref      | Outcome                | Action   | By Who                                       | By<br>When  | Success Criteria<br>2018-19   | Success Criteria<br>2019-20 | Success Criteria<br>2020-21 | Progress<br>Update                                  | Current<br>RAG Status |
|          |                        | plan i.e. audits are<br>designed to cover<br>multiple actions  |  |             | Dementia<br>Abuse in own home   |                             |                             |   |                       |
| Paga 273 | adhered to, including; | Local guidance documents and tools to be reviewed to ensure they promote compliance with formal assessment of capacity to consent to a safeguarding intervention, where required       | Safeguarding<br>Leads 3 Local<br>Authorities | Dec<br>2018 | Relevant documents will support compliant formal assessment of mental capacity and direct the workforce to evidence rationale for decisions reached   |                             |                             | Revised<br>action on<br>2019-20<br>business<br>plan | N/A                   |
| 1.83     |                        | Audit of completed Safeguarding cases to include analysis whether decisions that service users lack capacity to consent, demonstrate compliance with application of the diagnostic and | Performance and<br>Quality                   | Mar<br>2019 | Audit will evidence that the workforce is correctly applying the MCA and decisions that a person lacks capacity to consent to a safeguarding intervention (or associated decisions) have an auditable |                             |                             | Revised<br>action on<br>2019-20<br>business<br>plan | N/A                   |

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### Business Plan 2018 -21

# Update for 2018-2019

| Priori              | ty 4 We will understa   | and how effective adult :  | safeguarding is acro   | ss the We     | st of Berkshire to ensur  | e that we identify eme   | rging risks and take a  | ction accord   | lingly                |
|---------------------|---|--|--|---------------|---|--|---|--|-----------------------|
| Ref                 | Outcome   | Action   | By Who   | By<br>When    | Success Criteria<br>2018-19   | Success Criteria<br>2019-20  | Success Criteria<br>2020-21   | Progress<br>Update   | Current<br>RAG Status |
|                     |   | functional tests   |  |               | and lawful rationale recorded   |  |   |  |                       |
| <b>1.84</b> age 274 |   |  | Compliance to be raised amongst the workforce about how and when to involve advocacy and how to ensure this is effective | Jun<br>2019   | There will be a clear understanding of when access to advocacy must be facilitated and what its role is. Audit will demonstrate application of this in practice |  |   | Complian ce is increasing reported on Dashboar d and as part of section 42 audits. | COMPLETE<br>D         |
| 1.85                | The Board has a comprehensive and effective Quality Assurance Framework | Review, update<br>and implement<br>current SAB Quality<br>Assurance<br>Framework | Business Manager, Performance and Quality  | March<br>2020 |   | There will be a revised Quality Assurance Framework in place that partners have completed and summarised to the Board. | Annual review of SAB Quality Assurance Framework, completion of assessment for all partners, key themes and actions presented to the Board. | Removed<br>from BP<br>as is a<br>business<br>as usual<br>task.                     | n/a                   |

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#### Business Plan 2018 -21

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| RAG Criteria                         | RAG Status      | Scenario  | Boards Responsibility  |  |
|--------------------------------------|-----------------|---|--|--|
|                                      | Red             | The implementation plan is not in place or there are delays which means the action will not be achieved in timescale. | To understand issues impacts on action and agree how to mitigate the risk, by using risk mitigation log. |  |
| Progress<br>against<br>Business Plan | Amber           | The implementation plan is in place there is a risk that the deadline will not be met.                                | To Note  |  |
|                                      | Green/Completed | The action has been completed or there is an implementation plan in place and the timescale is expected to be met.    | To Note  |  |

### **Amendments to the Business Plan**

In order to ensure that the plan is reflective of current priorities and incorporates ongoing learning, amendments will be made to the business plan. Any amendments will be approved by the Board.

It was agreed by the Board in June2019, to revert back to an annual business plan, a task and finish group was held in May 2019 where key priorities of the Board was agreed and a revised business plan was presented and agreed by the Board in June 2019.

### **Subgroups**

All subgroup are required to set an action plan to deliver the outcomes within the business plan, providing clear measures for success. Subgroup chairs and West Berkshire lead for the Policies and Procedures group, will meet on a quarterly basis, with the Independent Chair and Business Manager; to discuss business plan progress and to ensure that the Subgroups are working together effectively.

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#### Business Plan 2018 -21

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### **Performance and Quality**

- To set an action plan to deliver the outcomes within the business plan
- Provide an interface with the Pan Berkshire 'Policy and Procedure' group
- Develop a range of mechanisms for measuring outcomes in respect of assuring the SAB about the effectiveness of safeguarding activity in practice, including implementation of Action Plans from SARs and trends being identified through data reporting
- Oversee performance and data quality of all safeguarding activity across the area
- Develop and maintain a framework, which ensures there are effective and accountable quality performance indicators and monitoring systems in place
- Produce regular reports to the SAB, which ensures a consistent approach and good quality of safeguarding provision is maintained across all partner agencies
- Consider trends in safeguarding activity and share these with the SAB and the other subgroups for them to support relevant work, as required

#### **Learning, Development & Dissemination**

- Ensure there is a skilled workforce to help protect adults at risk and ensure there is awareness across all organisations, including independent and voluntary sectors
- Develop the training competency framework, ensuring this remains up to date and is informed by practice
- Ensure learning from SARs is embedded in training and that a range of methods are used to disseminate the learning to organisations and the workforce
- Ensure organisations and the workforce are kept informed on the work of the SAB, awareness around relevant information and issues is maintained and that promotional learning messages are delivered ('soft touch learning')

### **Safeguarding Adults Review Panel**

- Develop a range of options/models for undertaking SARs
- Consider all requests for SARs
- Where it is agreed a SAR is required to agree the most effective and proportionate type of SAR to commission
- Commission, manager and monitor any reviews
- Keep the SAB informed of any reviews
- Share Action Plans from reviews with SAB and with relevant

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#### Business Plan 2018 -21

#### Update for 2018-2019

#### Policy and Procedures - Berkshire wide

The Policy and Procedures Sub Group has the responsibility for undertaking the development and review of Policy and Procedures by:

- Considering suggested changes to the "Berkshire Multi Agency Adult Safeguarding Policy & Procedures";
- Approving draft/update Board Safeguarding policies/guidance and procedures which will be sent to the four Boards for final ratification and adoption;
- Addressing gaps in the "Berkshire Multi Agency Adult Safeguarding Policy & Procedures";
- Considering the implications of changes to national policy guidance and legislation;
- Considering recommendations arising from local and national serious case reviews, domestic homicide reviews and Safeguarding Adults Reviews;
- Ensuring Making Safeguarding Personal is embedded in the "Berkshire Multi Agency Adult Safeguarding Policy & Procedures";
- Ensuring the "Berkshire Multi Agency Adult Safeguarding Policy & Procedures" is subject to appropriate equality impact assessment;
- Presenting policy and procedures to the four SABs in Berkshire for agreement and adoption;
- Making recommendations to the four Safeguarding Adults Boards in Berkshire for hosting, ongoing maintenance and updating of the "Berkshire Multi Agency Adult Safeguarding Policy & Procedures";
- Sharing information and good practice and promoting, where appropriate, joint development of common procedures.

The lead for the Berkshire SAB will be responsible for:

- Co-ordination of local policies and procedures updates when the Policy and Procedures Subgroup introduce/update a policy or procedure
- Ensure local standards, policies and procedures are in place and are updated at least annually, both in line with Pan Berkshire developments and wider legislative or guidance changes
- Ensure the importance of safeguarding adults is included in other policy documents, e.g. Domestic Abuse, Safeguarding Children etc.

#### **Task and Finish Groups**

In order to achieve the actions within the plan the following Task and Finish Groups will be established these will be led by the appropriate subgroup as listed.

| Ref | Action   | Lead Subgroup           |
|-----|--|-------------------------|
| 1.6 | Task and finish group to consider models of service user involvement | Performance and Quality |
| 1.7 | Task and finish group to consider models of provider involvement     | Performance and Quality |

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#### Business Plan 2019-20

| Priority 1 - We will provide the partnership with the tools and framework to work effectively with people who Self-Neglect |  |  |                  |                       |                 |            |                            |                |   |   |  |
|--|--|--|------------------|-----------------------|-----------------|------------|----------------------------|----------------|---|---|--|
| Action   | Outcome  | Who  | Target<br>Date   | Referenced with other |                 |            | Safe <sub>i</sub><br>I Obj |                |   |   | RAG and Progress Update  |
|  |  | priorities   | Empowerment      | Prevention            | Proportionality | Protection | Partnership                | Accountability |   |   |  |
| 1.1 - To present and implement a Service User Involvement Strategy for the SAB.  | People who use services are able to influence the work of the SAB  | Task and Finish<br>/Communicati<br>ons Subgroup                          | Sept 2019        | 2,3 &4                | X               |            |                            |                |   |   | Recommendation report approved by SAB in June 2019, recommendations to be implemented by the Communication Subgroup.                             |
| 1.2 To review and relaunch the Pan Berkshire Policies and Procedures in regards to Self-Neglect.                           | Comprehensive policies and procedures are in place in regards to self-neglect, which are accessed and followed by the partnership. | Task and Finish<br>Group/ Pan<br>Berkshire<br>Policies and<br>Procedures | Dec 2019         |                       | X               | Х          | Х                          | X              | X | X | Agreed Task and Finish Group will<br>be arranged by the Pan Berkshire<br>Policies and Procedures Group.  |
| 1.3 – Review and update<br>Safeguarding Training across the<br>partnership.  | Safeguarding Training to be reviewed to ensure that it addresses SAB Priorities.   | Learning,<br>Development<br>&Disseminatio<br>n                           | December<br>2019 | 2,3,&4                | X               |            |                            |                |   | X | Focused meeting to be arranged training must also consider: Feedback to referrer/ MSP/Pressure Care/Recording/MCA/ family and carer involvement/ |

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#### Business Plan 2019-20

| 1.4 – Review safeguarding          | The SAB are assured that        | LA              | March    | 2,3,&4 |   |   |   |   |   | Χ | Implementation plan to be           |
|------------------------------------|---------------------------------|-----------------|----------|--------|---|---|---|---|---|---|-------------------------------------|
| management oversight and           | there is sufficient             | Leads/Business  | 2020     |        |   |   |   |   |   |   | agreed.                             |
| consider updating the function of  | management oversight in         | Manager         |          |        |   |   |   |   |   |   |                                     |
| 'Safeguarding Adults Management'   | regards to safeguarding. There  |                 |          |        |   |   |   |   |   |   |                                     |
| across the Partnership.            | is a decision by the SAB on the |                 |          |        |   |   |   |   |   |   |                                     |
|                                    | 'SAM' function in Local         |                 |          |        |   |   |   |   |   |   |                                     |
|                                    | Authorities and this is         |                 |          |        |   |   |   |   |   |   |                                     |
|                                    | implemented.                    |                 |          |        |   |   |   |   |   |   |                                     |
| 1.5 –The SAB review the quality of | The SAB are assured that        | Learning,       | December | 2,4    | х | х | х | х | Х | Х | Taken from Learning from            |
| Tissue Viability Management        | there is adequate training in   | Development     | 2019     |        |   |   |   |   |   |   | SAR/Audit Action plan.              |
| training across the partnership to | pressure care across the        | and             |          |        |   |   |   |   |   |   |                                     |
| ensuke that it is adequately       | partnership.                    | Dissemination   |          |        |   |   |   |   |   |   | Implementation plan to be agreed    |
| add ssed.                          |                                 |                 |          |        |   |   |   |   |   |   |                                     |
| 1.6 To agree and implement a       | There is a standardised         | Task and Finish | March    | 2,3,4  | х | х | х | х | Х | Χ | SAB approved use of framework       |
| partership wide Risk Assessment    | approach to risk management     | Group           | 2020     |        |   |   |   |   |   |   | in principle in June 2019. Task and |
| Tool.                              | across the partnership.         |                 |          |        |   |   |   |   |   |   | Finish Group to be arranged to      |
|                                    |                                 |                 |          |        |   |   |   |   |   |   | agree implementation plan.          |

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#### Business Plan 2019-20

Priority 2 – The SAB will work collaboratively with Local Safeguarding Children Boards, Community Safety Partnerships and Health and Wellbeing Boards to provide the workforce with the frameworks and tools to work with Vulnerable Adults who are at risk of Domestic Abuse.

| Action  | Outcome   | Who                                  | Target<br>Date   | Referenced<br>with other<br>priorities |             | king<br>sona |                 |            | _           |                | RAG and Progress Update   |
|---|---|--------------------------------------|------------------|--|-------------|--------------|-----------------|------------|-------------|----------------|---|
|   |   |                                      |                  |  | Empowerment | Prevention   | Proportionality | Protection | Partnership | Accountability |   |
| 2.1 – Event on Domestic Abuse for partiers to explore issues, for a joint Dorfestic Abuse Strategy.             | There is a clear Domestic Abuse Strategy in conjunction with LSCBs, CSPs and H&WBBs.              | SAB, with partners from LSCB, CSP's. | December<br>2019 |  | х           | х            | x               | х          | х           | X              | To cover: Coercive Control/ Risk Framework/ Interdependencies in relationships.  Representatives from CSP and LSCB to be invited to Sub Groups Chairs meeting where action to be discussed. |
| 2.2 – To review/update and relaunch policies, procedures and tool kits in light of the Domestic Abuse Strategy. | There is a clear framework and toolkits to support the partnership with regard to Domestic Abuse. | Task and Finish<br>Group             | March<br>2020    |  |             | Х            | Х               | Х          |             | х              | Implementation plan to be agreed.   |

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#### Business Plan 2019-20

Priority 3 – We will understand the main risks to our local population in regards to Targeted Exploitation and agree how best to equip the partnership to Safeguard vulnerable people against these risks.

| Action   | Outcome   | Who  | Target<br>Date   | Referenced with other |             | laking Safeguarding ersonal Objective |                 |            | RAG and Progress Update |                |  |
|--|---|--|------------------|-----------------------|-------------|---------------------------------------|-----------------|------------|-------------------------|----------------|--|
|  |   |  |                  | priorities            | Empowerment | Prevention                            | Proportionality | Protection | Partnership             | Accountability |  |
| 3.1 - Modern Slavery Pathway is published and promoted.                      | There is a pathway in place to support the partnership in working together to respond to Modern Slavery and Human Trafficking Issues. | Pan Berkshire<br>Policies and<br>Procedures. | June 2019        |                       |             | x                                     |                 | х          | X                       |                | TVP presented to Pan Berkshire Policies and Procedures Subgroup, awaiting final version from TVP for sign off. |
| 3.2 - To identify who is most at risk from Targeted Exploitation.            | The SAB understand who is most at risk and can agree where focus is needed.   | Performance and Quality                      | December<br>2019 |                       |             | х                                     | Х               |            |                         |                | Implementation plan to be agreed.  |
| 3.3 - To agree how the SAB will address the issues identified in action 3.2. | There is a clear plan on how to support those most at risk from targeted exploitation.  | SAB  | March<br>2020    |                       | х           | х                                     | х               | х          | Х                       | х              | Implementation plan to be agreed.  |

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Priority 4 – The SAB will understand from key stakeholders, why there has been an increase in organisational safeguarding and seek assurance from commissioners, that there are adequate preventative measures in place that is consistent across the partnership where practical.

| Action   | Outcome   | Who  | Target<br>Date   | Referenced with other | Making Safeguarding Personal Objective |            |                 | _          |             | RAG and Progress Update |   |
|--|---|--|------------------|-----------------------|--|------------|-----------------|------------|-------------|-------------------------|---|
|  |   |  |                  | priorities            | Empowerment                            | Prevention | Proportionality | Protection | Partnership | Accountability          |   |
| 4.1 – An event (s) is held with care providers to understand the issues they are are ficing in regards to service delivery. №  | Providers who deliver services are able to influence the work of the SAB in regards to organisational safeguarding. | Business<br>Manager/<br>Independent<br>Chair | December<br>2019 | 2,3,4                 |  | Х          |                 | х          | х           | х                       | Implementation plan to be agreed.   |
| 4.2 A meeting is held with CQC, LA's, CCG and SAB Chair to discuss organisational safeguarding across the partnership.   | The SAB are clear on the issues facing the CQC and commissioners in regards to organisational safeguarding.         | Independent<br>Chair/ LA and<br>CCG DASS's   | July 2019        |                       |  |            |                 |            |             |                         | Meeting scheduled for 31 <sup>st</sup> July 2019.   |
| 4.3 – The SAB Chair is alerted to all Organisational Safeguarding issues via a briefing note, detailing the concerns, how many people the concerns impact on and the plans in place to safeguard people. | The SAB is fully aware of the level of organisational safeguarding across the partnership                           | LA DASS's                                    | June 2019        |                       |  | х          | x               | x          | x           | x                       | Email sent to LA DASS's and CCG SAB Lead on the, 2/7/19.  |
| 4.4 – Review of the Organisational Safeguarding Policies and Procedures  | There is an effective framework in place for responding to organisational safeguarding concerns.                    | Local<br>Authorities                         | December<br>2019 |                       | X                                      | X          | X               | X          | X           | X                       | Will take place in conjunction with a lessons learnt review in regards to an organisational safeguarding concern that impacted on |

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#### Business Plan 2019-20

|  |                                |          |          |   |   |   |   | the whole partnership.    |
|--|--------------------------------|----------|----------|---|---|---|---|---------------------------|
| 4.5 – Partners review together the     | There is a consistent approach | LA's/CCG | December | Х | Х | Х | Х | Taken from Learning from  |
| quality assurance processes (including | to quality monitoring of Adult |          | 2019     |   |   |   |   | SAR/Audit Action plan.    |
| information sharing) for commissioning | Social Care Providers across   |          |          |   |   |   |   |                           |
| of external providers delivering adult | the partnerships. Frameworks   |          |          |   |   |   |   | Request to DASS's and CCG |
| social care to ensure that they are    | are published on the SAB       |          |          |   |   |   |   | Lead for named person on  |
| consistency with the Pan Berkshire     | Website.                       |          |          |   |   |   |   | 2/7/19.                   |
| Safeguarding Adults Policies and       |                                |          |          |   |   |   |   |                           |
| Procedures.                            |                                |          |          |   |   |   |   |                           |

| Pag <b>G</b> Criteria | RAG Status      | Scenario   | Boards Responsibility  |
|-----------------------|-----------------|--|--|
| Drogress              | Red             | The implementation plan is not in place or there are delays which mean the action will not be achieved in timescale. | To understand issues impacts on action and agree how to mitigate the risk, by using risk mitigation log. |
| Progress against      | Amber           | The implementation plan is in place there is a risk that the deadline will not be met.                               | To Note  |
| Business Plan         | Green/Completed | The action has been completed or there is an implementation plan in place and the timescale is expected to be met.   | To Note  |

#### **Amendments to the Business Plan**

Alongside this Business plan the Board also hold a risk and mitigation log and learning from SAR/Audit Implementation plan. In order to ensure that the plan is reflective of current priorities and incorporates ongoing learning, amendments will be made to the business plan. Any amendments will be approved by the Board.

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# Safeguarding Adults Annual Report 2018-19 Reading Borough Council



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# **Reading Borough Council**

#### **Directorate of Social Care and Health**

# **Annual Safeguarding Report Reading DACHS 2018/19**

# 1.0 Introduction

Safeguarding is the responsibility of all professionals and partners engaged in working with adults who may be in need of care and support. However, the responsibility for coordinating safeguarding enquiries rests with the Local Authority; in the Directorate of Adult Care and Health Services for Reading Borough Council, although all social care teams are involved in safeguarding enquiries. These are led by the Safeguarding Adults Team who receives the majority of incoming concerns and referrals.

The safeguarding adults team receive incoming safeguarding concerns and referrals and are responsible for screening and prioritising these to identify safeguarding concerns and manage many of the concerns for adults not resident in Reading and organisational abuse enquiries. Through focused information gathering and identification of risks the team are able to direct concerns to the appropriate team for action and enquiry, or resolve and manage without the need for further progression.

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#### 34 care homes and 5.62% of Section 42 22 home care 1,540 safeguarding providers and 24 supported living concerns received and 610 enquiries providers Areas to the Population of 163,203 in 2018 North and far Emmer Green West are more affluent with 487 section 42 rising to 175,501 by 2031. enquiries per 100,000 adults, compared to 343 per 100,000 adults older populations Caversham 65+ population of Rate of 20,020 in 2018 rising to 31,624 in 2041 Tilehurst England Reading Berkshire Hospital and Prospect Park Mental Health Hospital 100 average (22.7 per 1,000 Rate of all crimes per opulation slightly higher High employment and than England average, a higher in town centre a central areas high earnings, but big opportunity between different neighbourhoods Reading are amongst the 10% most deprived in England, including three in South Reading

# 2.0 How we are Safeguarding Adults in Reading

Key principles of Safeguarding practice include **Prevention** and **Empowerment**, principles that are also central to the strengths based "**Conversation Counts**" strategy for engaging with adults in Reading. The "Conversation Counts" approach that has been implemented and embedded over this year is focused on supporting adults to recognise and develop their own strengths, building resilience in individual's lives and in communities, and improving communication between organisations, so that early responses and solutions are available to resolve situations before they deteriorate. These reflect the principles of Making Safeguarding Personal which are a cornerstone of good Safeguarding practice.

In this respect the development of the Advice and Wellbeing Hub, who receive referrals for information, advice, support and assessment for adults currently not in receipt of Local Authority services, has been a key activity in safeguarding residents locally in Reading, by preventing the escalation of risk and harm at an early stage, making appropriate advice and guidance accessible and supporting people to connect effectively with their local networks and communities, increasing independence and resilience.

One of our key activities for 2019/20 will be to align our Safeguarding Adults Team as the access point for all safeguarding adults concerns, with the Advice and Wellbeing Hub. This will support us to work more preventatively and more closely with our community and partner organisations to identify risk and prevent harm before it occurs.

The social care teams are supported through training, informal learning lunches and support and guidance from the Safeguarding Adults Team to ensure that practice is consistent, led by the adult and reflects the priorities outlined in the Care Act and further outlined by West Berkshire Safeguarding Adults Board.

# 3.0 Positive outcomes from Safeguarding

Where we have identified that abuse or harm is occurring to an adult, working with that person to support them to achieve their outcomes and manage the risks they are experiencing involves working in partnership with them, and their support networks, and with others to provide safer and more sustainable support arrangements.

While our safeguarding performance can be in some respects reflected in the collation of numerical data, practice and quality of safeguarding work is best evidenced through examples of the work that is being undertaken in the teams.

Some of the examples below illustrate not only how interventions by social care practitioners supported adults to manage risks and reduce harm, but also improve quality of life and achieve a positive impact in terms of social and emotional wellbeing outcomes. They indicate that even in situations where an adult is facing multiple risks and challenges to their safety and wellbeing, a person centred and partnership approach to working can support them to maintain the aspects of their life that matter to them, whilst reducing harm.

All names and identifiable details have been changed to maintain confidentiality

# 3.1 Archie: Working in Partnership

Archie is a young man with Learning Disabilities. It became apparent that there was a long history of verbal and psychological abuse from his mother with whom he lived. Archie's mother had advanced dementia and was struggling to continue to care for him but lacked insight into this. He was very unhappy at home and drank heavily, putting himself at risk by walking in the streets at night after arguments with his mother. He was targeted by people in his area and was financially and sexually abused as a consequence. We worked closely with him, his family, voluntary and commissioned providers, to help him address these issues. We helped him to move from his mothers' home to emergency respite, to manage the immediate risks, and from there to supported living, finding a setting that suited him and his needs for longer term support. He is now settled, has stopped drinking, is much healthier and happier and has recently returned from a joint holiday with other residents living in his accommodation. Archie's mother has accepted that she can no longer care for him and he is in regular contact with her — their relationship is much improved and she approves of the placement now.

#### 3.2 Bernard: Protection and Empowerment

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Bernard is an older man with a brain injury, memory issues and alcohol dependence. He was physically and financially abused and ended up being evicted from his flat after being cuckooed by drug dealers. He ended up street homeless. Following notification through safeguarding, he was offered a place of safety in a care home as an emergency, and from there was assisted to identify longer term accommodation in supported living. After a difficult transition, he has now settled really well, and is in regular contact with his family who live abroad. He is attending Ridgeway Gardening club twice a week and is going to the local church and library, having built up connections with his local community that support his interests and social needs, much improving his quality of life.

# 3.3 Chris: Partnership and Proportionality

Chris was referred to the local authority with concerns regarding his health, selfneglect and an unsafe living environment. His health was poor, with ulcers on his legs that were untreated, continence issues and a persistent cough. His home was cluttered, with dirty clothing and food waste, damp with a lack of heating, and a rat infestation was apparent. It was reported that he was low in mood and feeling that life was not worth living. However, Chris' main fear was that someone would take him away from his home, so he had been reluctant to allow any professionals to be involved. Chris was reassured and supported by the social worker to address the issues that concerned him the most. He allowed the worker to introduce him to Environmental Health colleagues, who were able to deal with the rat infestation, and then to clean his home. Chris agreed to visit the GP but had demonstrated capacity with regards to his health and social care needs, so did not accept some interventions despite concerns raised. However, the improvement in his home, and his sense of autonomy regarding the help he had received, enabled him to accept assistance to maintain relationships with involved professionals. He has since received treatment for his ulcers and has additional equipment in his home to support his personal care. Chris is able to access the community and visit his GP when needed.

#### 4.0 Overview of Performance Data

Included in this report is a summary and analysis of the performance data for the period 2018/19, which supports an understanding of an overview of safeguarding activity in Reading, and how this might be more effectively delivered in coming years.

Some of the key themes from this data influence our delivery priorities for 2018/19

Most notable in the data there is the drop in number of concerns recorded, which continues a trajectory from the previous year. It was noted that robust information gathering and engagement prior to identifying a concern impacted positively on reducing concerns, and this practice has continued, supported by the proactive approach of the Conversation Counts model. The fact that the number of enquiries resulting from concerns has not fallen supports the interpretation of the figures as a

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positive trend towards more accurate recognition of safeguarding, rather than a lack of identification. As an authority we have continued to undertake a number of enquiries in line with previous performance levels which would indicate that where risks of abuse and neglect is identified safeguarding intervention is taking place.

However, as part of the development of the Safeguarding Adults Team function in 2019/20, the recording of all concerns will be held centrally within the team, to be actioned as Section 42 enquiries when appropriate by the community teams, rather than be passed for screening or information gathering. This will provide greater accountability and transparency in the data and ensure concerns are consistently captured. An audit of referrals coming into the service that are closed prior to enquiry will be conducted throughout the year to ensure quality and consistency, as well as identify any learning or practice needs.

The recording of organisational abuse incidents has been raised as a point of difference in practice across the board, and the variation in incidents highlights a need to ensure that the process for identifying and responding to organisation abuse is transparent, robust and accountable, so that variances in recording are clearly understood in context.

In Reading we have begun the development of an effective partnership with commissioning teams to work proactively and jointly where concerns arise within provider organisations. This has enabled the Safeguarding Team to establish a process to complete and record enquiries effectively, and share information in a timely way with practitioners and commissioners. This ensures that Providers can be supported to improve and maintain their support and delivery of services to vulnerable people.

The outcomes of safeguarding show some decrease in people achieving any of their outcomes, in terms of adults being asked what their preferred outcomes were and whether they were achieved. It is expected that this will be addressed by the implementation of oversight from the Safeguarding team of enquiry closures, which will be transferred to an audit process once those improvements are evidenced and reflected in data.

#### 5.0 Quality and Safeguarding

- 5.1 Safeguarding Adults Reviews There have been no Safeguarding Adults Reviews (SAR's) published in 2018/19.
- 5.2 Other Reports The Local Government & Social Care Ombudsman investigated a complaint regarding the quality of care provision to a vulnerable woman living in Reading. They found that care workers did not follow the correct emergency procedure to secure medical attention in a timely manner. The ombudsman wished to ensure that as a result of their findings, councils that outsource domiciliary care,

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are responsible for the care delivered. Therefore Reading Borough Council were found to be at fault for the actions of the provider.

The Council devised an action plan and met with the family in order ensure that appropriate steps were taking in relation to the finding of fault.

# 6.0 The Future – Evolving and Improving our delivery of Safeguarding

Through 2020 the aspiration for Reading Borough Council is to streamline access for all Safeguarding activity and work towards a single point of access for all concerns. This will see closer work and integration with the Advice and Wellbeing Hub, the department's 'front door' for all Social Care queries. We believe that this will bring about some considerable customer and practice benefits such as:

- The creation of a single point of contact & improved service for the customer
- Achieving proportionate responses focused on better outcomes and underpinning of Making Safeguarding Personal (MSP) principles
- Facilitation of improved partnership working with both professionals and the third sector
- Ensuring greater links with preventative approaches

In addition to the commitments already outlined in this report and in order to deliver a consistent, person centred and enabling safeguarding experience to support adults and partners in Reading, a series of practice forums for Managers and Practitioners are being established which will assist with improvement in the following areas:

- Communication with partner, statutory and voluntary organisations with regards to safeguarding referrals and joint working partnerships
- Enablement and Management of Risk, particularly where the capacity of the adult to understand the risks to them is unclear or not present.
- Recording of enquiries and outcomes to ensure our work is reflected in the records and data that we hold.
- Learning and development needs are identified and responded to at the earliest opportunity

These forums allow practitioners to explore themes around Safeguarding, ask questions and assess case studies. This can only lead to greater awareness of the wide range of Safeguarding issues and also lead to more effective practice.

In November 2018 for National Safeguarding Adults Week there were a series of talks, events and learning opportunities across key areas of Safeguarding practice. These reflected the priorities of the West Berkshire Safeguarding Adults Board and

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supported our practitioners and partners to ensure a comprehensive and joined up response to safeguarding across the Borough. The intention is to continue to grow and expand 'Safeguarding Week', showcase the work that we do in Safeguarding adults and bring this to a wider audience both internally and outside of the Council.

# 7.0 Reading Annual Performance Report 2018/19

The 2018-19 Safeguarding Adults Collection (SAC) records details about safeguarding activity for adults aged 18 and over in England. It includes demographic information about the adults at risk and the details of the incidents that have been alleged.

The Safeguarding Adults Collection (SAC) has been collected since 2015/16 and is an updated version of the Safeguarding Adults Return (SAR) which collected safeguarding data for the 2013/14 and 2014/15 reporting periods.

# **Section 1 - Safeguarding Activity**

#### **Concerns and Enquiries**

As a result of the Care Act 2014, changes over recent years the terminology of some of the key data recorded in the Safeguarding Return in its various formats has changed. The data relating to 2016-17 onwards contained within this report therefore relates specifically to Concerns and s42 Enquiries.

Table 1 shows the Safeguarding activity within Reading over the previous 3 years in terms of Concerns raised, s42 Enquiries opened and the conversion rates over the same period.

There were 1109 safeguarding concerns received in 2018/19. The number of Concerns has decreased considerably over the past 2 years with a decrease of 433 over the previous year (from 1542 in 2017-18).

549 s42 Enquiries were opened during 2018/19, with a conversion rate from Concern to s42 Enquiry of 50% which is higher than the national average was for 2017/18 which had been around 38%. This also continues the upward trajectory of this indicator for Reading as compared to previous years although it does bring us more into line with other West Berkshire authorities.

There were 458 individuals who had an s42 Enquiry opened during 2018/19 which is only an increase of 1 over the year and shows that whilst Concerns received was falling the number of s42 Enquiries has remained quite stable over the previous year.

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Table 1 - Safeguarding Activity for the past 3 Years since 2016/17

| Year    | Safeguarding<br>Concerns<br>received | Safeguarding<br>s42<br>Enquiries<br>Started | Individuals who had<br>Safeguarding s42<br>Enquiry Started | Conversion<br>rate of<br>Concern to<br>s42 Enquiry |
|---------|--------------------------------------|---|--|--|
| 2016/17 | 2049                                 | 481   | 416  | 23%  |
| 2017/18 | 1542                                 | 542   | 457  | 35%  |
| 2018/19 | 1109                                 | 549   | 458  | 50%  |

# Section 2 - Source of Safeguarding Enquiries

As Figure 1 shows the largest percentage of safeguarding enquiries for 2018/19 were referred from both Social Care staff (32.8%) and also by Health staff (32.1%) with Family members also providing a larger than average proportion (12.8%). The Police have also been responsible for referring 7.3% of all s42 enquiries over the past year.

The Social Care category encompasses both local authority staff such as Social Workers and Care Managers as well as independent sector workers such as Residential / Nursing Care and Day Care staff. The Health category relates to both Primary and Secondary Health staff as well as Mental Health workers.

Figure 1 - Safeguarding Enquiries by Referral Source - 2018/19

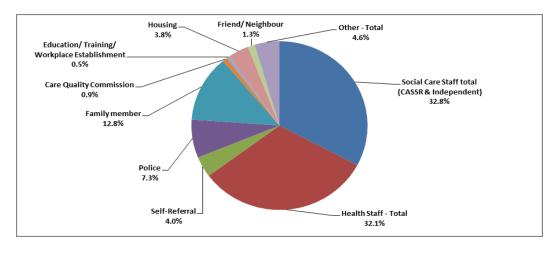


Table 2 shows the breakdown of the number of safeguarding enquiries by Referral Source over the past 3 years since 2016/17. It breaks the overarching categories of Social Care and Health staff down especially into more detailed groups where

available, so a clearer picture can be provided of the numbers coming in from various areas.

For Social Care actual numbers coming in have decreased over the year by 34 which proportionately makes this group 32.8% of the total (down from 39.5% in 2017/18). The biggest decrease in numbers can be found for both Domiciliary and Residential / Nursing staff which have seen a 33% and 43% decrease in numbers over the year respectively. Referrals coming in from Day Care Staff are the only group in this area where referrals have increased (up from 6 to 15 referrals).

The numbers of referrals coming in from Health Staff have increased from 137 to 176 since 2017/18. Proportionately it now makes up 32.1% of the total (up from 25.3% in 2017/18). This is mainly due to a 62.1% increase in numbers coming from Secondary Health staff (up 41 referrals over the year) and a 77.8% increase in those coming from Mental Health staff (up 14 referrals over the year). Primary / Community Health referrals however have fallen over the year (down 16 referrals over the year).

Other Sources of Referral over the year have remained fairly stable in terms of numbers and make up 35.1% of the total. There has been an increase in those coming in from the Police (up 2.1%) and for Self-Referrals (up 0.9%). We have also seen a slight decrease for those coming via Family (down 1.6%), Friends (down 0.9%) and Housing (down 1.4%).

Table 2 - Safeguarding s42 Enquiries by Referral Source over past 3 Years since 2016/17

|                  | Referrals                                     | 2016/17<br>(s42 only) | 2017/18<br>(s42 only) | 2018/19<br>(s42<br>only) |
|------------------|---|-----------------------|-----------------------|--------------------------|
|                  | Social Care Staff total (CASSR & Independent) | 147                   | 214                   | 180                      |
|                  | Domiciliary Staff                             | 36                    | 60                    | 40                       |
| Social Care      | Residential/ Nursing Care Staff               | 31                    | 51                    | 29                       |
| Staff            | Day Care Staff                                | 3                     | 6                     | 15                       |
|                  | Social Worker/ Care Manager                   | 44                    | 60                    | 52                       |
|                  | Self-Directed Care Staff                      | 3                     | 7                     | 5                        |
|                  | Other   | 30                    | 30                    | 39                       |
|                  | Health Staff - Total                          | 123                   | 137                   | 176                      |
| Health Staff     | Primary/ Community Health<br>Staff            | 59                    | 53                    | 37                       |
|                  | Secondary Health Staff                        | 43                    | 66                    | 107                      |
|                  | Mental Health Staff                           | 21                    | 18                    | 32                       |
| Other sources of | Other Sources of Referral -<br>Total          | 211                   | 191                   | 193                      |

| referral | Self-Referral                                   | 22  | 17  | 22  |
|----------|---|-----|-----|-----|
|          | Family member                                   | 83  | 78  | 70  |
|          | Friend/ Neighbour                               | 8   | 12  | 7   |
|          | Other service user                              | 0   | 3   | 0   |
|          | Care Quality Commission                         | 4   | 1   | 5   |
|          | Housing   | 13  | 28  | 21  |
|          | Education/ Training/ Workplace<br>Establishment | 4   | 1   | 3   |
|          | Police  | 46  | 28  | 40  |
|          | Other   | 31  | 23  | 25  |
|          | Total   | 481 | 542 | 549 |

# <u>Section 3 - Individuals with Safeguarding Enquiries</u>

# Age Group and Gender

Table 3 displays the breakdown by age group for individuals who had a safeguarding enquiry started in the last 3 years. The majority of enquiries continue to relate to the 65 and over age group which accounted for 58% of enquiries in 2017/18 which is exactly the same as last year. Between the ages of 65 and 84 the older the individual becomes the more enquiries are raised. Overall most age groups have stayed fairly consistent over the past year.

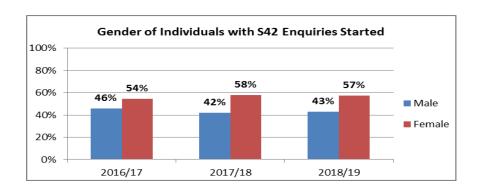
Table 3 – Age Group of Individuals with Safeguarding s42 Enquiries over past 3 Years since 2016/17

| Age band    | 2016-17 | % of total | 2017-18 | % of total | 2018-19 | % of total |
|-------------|---------|------------|---------|------------|---------|------------|
| 18-64       | 160     | 38%        | 192     | 42%        | 191     | 42%        |
| 65-74       | 60      | 14%        | 65      | 14%        | 66      | 14%        |
| 75-84       | 83      | 20%        | 95      | 21%        | 91      | 20%        |
| 85-94       | 96      | 23%        | 90      | 20%        | 93      | 20%        |
| 95+         | 17      | 4%         | 15      | 3%         | 17      | 4%         |
| Age unknown | 0       | 0%         | 0       | 0%         | 0       | 0%         |
| Grand total | 416     |            | 457     |            | 458     |            |

In terms of the gender breakdown there are still more Females with enquiries than Males (57% compared to 43% for 2018/19). The gap however between the two has stayed fairly stable over the past 2 years having doubled initially between 2016/17 and 2017/18. This is shown in Figure 2 below (See Table A in Appendix A for actual data).

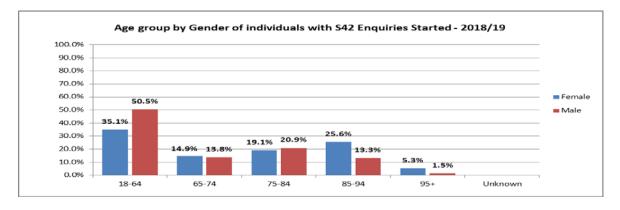
Figure 2 – Gender of Individuals with Safeguarding s42 Enquiries over past 3 Years since 2016/17

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When looking at Age and Gender together for 2018/19 the number of Females with enquiries is larger and increases in comparison to Males in every age group over the age of 65. It is especially high comparatively in the 85-94 (Females – 25.6% and Males – 13.3%) and the 95+ age groups (Females – 5.3% and Males – 1.5%). For Males there is a larger proportion in the 18-64 group which makes up 50.5% of that total whereas the proportion is only 35.1% for the Females in that group. This is shown below in Figure 3 (See Table B in Appendix A for actual data).

Figure 3 – Age Group and Gender of Individuals with Safeguarding s42 Enquiries – 2018/19



# **Ethnicity**

82.7% of individuals involved in s42 enquiries for 2018/19 were of a White ethnicity with the next biggest groups being Black or Black British (6.8%) and Asian or Asian British (6.8%). The White Group has fallen this year by 4.4% (87.1% in 2017/18) whereas the Mixed / Multiple and Asian or Asian British Groups have risen by 2% and 1.7% respectively. The Black British and Other Ethnic Groups have remained at a similar proportion over the past year. This is shown in Figure 4 below.

Figure 4 – Ethnicity of Individuals involved in Started Safeguarding s42 Enquiries - 2018/19

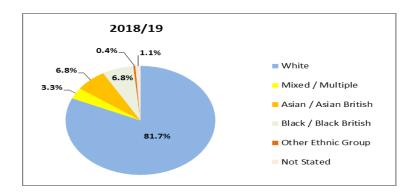


Table 4 shows the ethnicity split for the whole population of Reading compared to England based on the ONS Census 2011 data along with the % of s42 Enquiries for 2018/19 compared to 2017/18. Any Enquiries where the ethnicity was not stated have been excluded from this data in order to be able to compare all the breakdowns accurately.

Table 4 – Ethnicity of Reading Population / Safeguarding s42 Enquiries over 2 Years since 2017/18

| Ethnic group       | % of whole<br>Reading<br>population<br>(ONS<br>Census<br>2011 data) | % of whole England population (ONS Census 2011 data) | % of<br>Safeguarding<br>s42<br>Enquiries<br>2017/18 | % of<br>Safeguarding<br>s42<br>Enquiries<br>2018/19 |
|--------------------|---|--|---|---|
| White              | 74.5%   | 85.6%  | 87.1%   | 82.7%   |
| Mixed              | 3.7%  | 2.3%   | 1.3%  | 3.3%  |
| Asian or Asian     | 12.6%   | 7.7%   | 5.1%  | 6.8%  |
| Black or Black     | 7.3%  | 3.4%   | 6.3%  | 6.8%  |
| Other Ethnic group | 1.9%  | 1.0%   | 0.2%  | 0.4%  |

The numbers above suggest individuals with a White ethnicity are more likely to be referred to safeguarding. Their proportions are much higher than for the whole Reading population although are now slightly lower in comparison to the England Population from the 2011 Census data.

It also especially shows that those individuals of an Asian or Asian British ethnicity are less likely to be engaged in the process especially at a local level although this has improved over the past year (12.6% in whole Reading population whereas those involved in a safeguarding enquiry is still only 6.8%). Once again the Black or Black British Ethnic Group is more comparable to the local picture but is higher than that at a national level.

#### **Primary Support Reason**

Figure 5 shows the breakdown of individuals who had a safeguarding enquiry started by Primary Support Reason (PSR). The largest number of individuals in 2018/19 had a PSR of Physical Support (52.6%) which has seen a big increase in its proportion of 9.7% over the year. Most Primary Support Reasons have seen a small proportionate drop or increase of approximately 1-2% over the last year, whereas the Support with Memory and Cognition one has halved this year (from 16.2% in 2017/18 to 8.1% in 2018/19) which brings it more in line with the 2016/17 proportions. (See Table C in Appendix A for actual data).

Primary Support Reason of Individuals with S42 Enquiries Started 100.0% 80.0% 52.6% 50.7% 60.0% 40.0% 15.1%17.3%17.5% 16.2% 20.0% 8.1% 5.5% 4.6% 2.8% 0.2% 0.9% 0.9% 0.0% Physical Support Sensory Support Support with Learning Disability Mental Health Social Support No Support Not Known Memory and Support Reason Support Cognition ■ 2016/17 ■ 2017/18 ■ 2018/19

Figure 5 – Primary Support Reason for Individuals with Safeguarding s42 Enquiry over past 3 years

#### Section 4 – Case details for Concluded s42 Enquiries

# Type of Alleged Abuse

Table 5 and Figure 6 show concluded enquiries by type of alleged abuse over the last three years. An additional 4 abuse types (\*) were added to the 2015/16 return so there are only comparator figures since then.

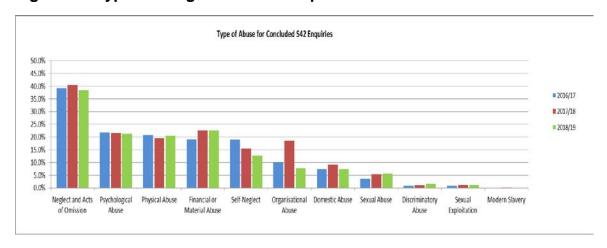
The most common types of abuse for 2018/19 were still for Neglect and Acts of Omission (38.3%), Financial or Material Abuse (22.6%) and Psychological Abuse (21.3%) with the former decreasing since last year by 2.2%.

The main type of abuse that saw a decrease since last year is for Organisational Abuse (down 10.8%). Self-Neglect was one of the newer abuse types added in 2015/16 and has seen a proportionate decrease for the second year running (down 2.8% to 12.7% of all concluded enquiries).

Table 5 – Concluded Safeguarding s42 Enquiries by Type of Abuse over past 3 Years since 2016/17

| Concluded enquiries             | 2016/17 | %     | 2017/18 | %     | 2018/19 | %     |
|---------------------------------|---------|-------|---------|-------|---------|-------|
| Neglect and Acts of<br>Omission | 187     | 39.3% | 233     | 40.5% | 236     | 38.3% |
| Psychological Abuse             | 104     | 21.8% | 125     | 21.7% | 131     | 21.3% |
| Physical Abuse                  | 99      | 20.8% | 113     | 19.6% | 126     | 20.5% |
| Financial or Material<br>Abuse  | 91      | 19.1% | 130     | 22.6% | 139     | 22.6% |
| Self-Neglect *                  | 90      | 18.9% | 89      | 15.5% | 78      | 12.7% |
| Organisational Abuse            | 48      | 10.1% | 107     | 18.6% | 48      | 7.8%  |
| Domestic Abuse *                | 35      | 7.4%  | 52      | 9.0%  | 46      | 7.5%  |
| Sexual Abuse                    | 17      | 3.6%  | 31      | 5.4%  | 34      | 5.5%  |
| Discriminatory Abuse            | 4       | 0.8%  | 6       | 1.0%  | 9       | 1.5%  |
| Sexual Exploitation *           | 4       | 0.8%  | 7       | 1.2%  | 7       | 1.1%  |
| Modern Slavery *                | 0       | 0.0%  | 1       | 0.2%  | 0       | 0%    |

Figure 6 – Type of Alleged Abuse over past 3 Years since 2016/17



# **Location of Alleged Abuse**

Table 6 shows concluded enquiries by location of alleged abuse over the last two years only.

As shown below; as with previous years, still by far the most common location where the alleged abuse took place for Reading clients has been the individuals own home (64.9% in 2018/19) although this has seen a 1.1% decrease proportionately as

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compared to last year. The only other abuse locations which have seen larger proportionate changes are for Mental Health Hospitals and Residential Care Homes which have both decreased proportionately (1.7% and 2.5% respectively).

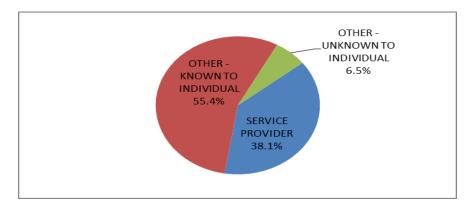
Table 6 – Concluded S42 Enquiries by Abuse Location Type over past 2 Years since 2017/18

| Location of abuse           | 2017-18 | % of total | 2018-19 | % of total |
|-----------------------------|---------|------------|---------|------------|
| Care Home - Nursing         | 42      | 7.3%       | 42      | 6.8%       |
| Care Home - Residential     | 63      | 10.9%      | 52      | 8.4%       |
| Own Home                    | 380     | 66.0%      | 400     | 64.9%      |
| Hospital - Acute            | 31      | 5.4%       | 36      | 5.8%       |
| Hospital – Mental Health    | 25      | 4.3%       | 16      | 2.6%       |
| Hospital - Community        | 3       | 0.5%       | 4       | 0.6%       |
| In a Community Service      | 5       | 0.9%       | 4       | 0.6%       |
| In Community (exc Comm Svs) | 40      | 6.9%       | 43      | 7.0%       |
| Other                       | 21      | 3.6%       | 19      | 3.1%       |

#### **Source of Risk**

The majority of concluded enquiries involved a source of risk 'Known to the Individual' which is 2.4% up on last year (currently 55.4%) whereas those that were 'Unknown to the Individual' only make up 6.5% (was 4% in 2017/18). The 'Service Provider' category which was formerly known as 'Social Care Support' refers to any individual or organisation paid, contracted or commissioned to provide social care. This makes up 38.1% of the total (down 4.9% on 2017/18). This is shown below in Figure 7.

Figure 7 – Concluded Enquiries by Source of Risk 2018/19



#### **Action Taken and Result**

Table 7 below shows concluded enquiries by action taken and the results for the last three years whereas Figure 8 compares the last 2 years directly in terms of the concluded enquiry outcomes.

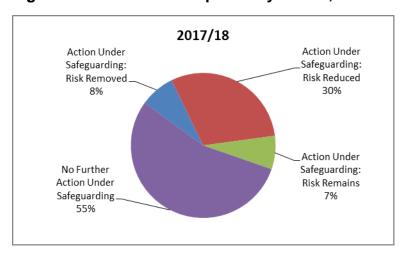
As predicted in 2017/18 the data has changed significantly due to the outcomes of concluded enquiries being looked at closely for the current year. As a result those with 'No Further Action' have reduced considerably to 20% of all concluded enquiries as compared to being 55% of the total in 2017/18.

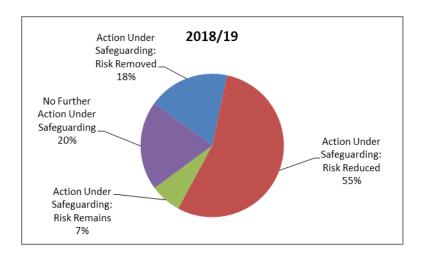
The risk was only reduced or removed in 38% of concluded enquiries in 2017/18 whereas this has increased to 73% of the total in 2018/19.

Table 7 – Concluded Enquiries by Action Taken and Result over past 3 Years since 2016/17

| Result                                     | 2016<br>-17 | % of total | 2017-<br>18 | % of total | 2018-<br>19 | % of total |
|--|-------------|------------|-------------|------------|-------------|------------|
| Action Under Safeguarding: Risk Removed    | 41          | 9%         | 45          | 8%         | 113         | 18%        |
| Action Under Safeguarding:<br>Risk Reduced | 139         | 29%        | 173         | 30%        | 336         | 55%        |
| Action Under Safeguarding:<br>Risk Remains | 31          | 7%         | 43          | 7%         | 43          | 7%         |
| No Further Action Under Safeguarding       | 265         | 56%        | 315         | 55%        | 124         | 20%        |
| Total Concluded Enquiries                  | 476         | 100%       | 576         | 100%       | 616         | 100%       |

Figure 8 – Concluded Enquiries by Result, 2017/18 and 2018/19





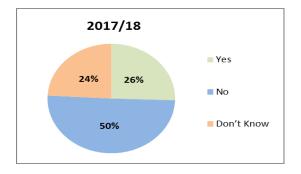
# **Section 5 - Mental Capacity**

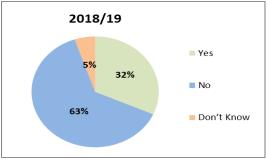
Figure 9 shows the breakdown of mental capacity for concluded enquiries over the past 2 years since 2017/18 and shows if they lacked capacity at the time of the enquiry.

The data shows that over time those that lacked capacity has increased slowly year on year with a 6% increase since 2017/18. Those who do not lack capacity however have also increased but at a higher rate. For 2018/19 only 63% now did not lack capacity whereas in 2017/18 it was at 50%.

These figures are in some part due to the large reduction in those concluded enquiries where the Mental Capacity was still not fully identified. In 2017/18 approximately 24% of cases still had an unknown level of Mental Capacity whereas by 2018/19 this figure had reduced to 5% of the total.

Figure 9 – Concluded S42 Enquiries by Mental Capacity over past 2 Years since 2017/18



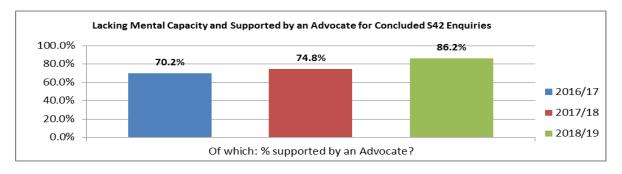


Of those 195 concluded enquiries where the person involved was identified as lacking capacity during 2018/19 a larger proportion (86.2%) are being supported by an advocate, family or friend than in the previous years (up 11.4% for the current year and up 16% in total since 2016/17). Table 8 and Figure 10 show how the numbers and proportion have continued to rise over the previous 3 years due to a focus on this area locally.

Table 8 – Concluded S42 Enquiries by Mental Capacity over past 3 Years since 2016/17

| Lacking Capacity to make Decisions?          | 2016-17 | 2017-18 | 2018-19 |
|--|---------|---------|---------|
| Yes  | 114     | 147     | 195     |
| Of which: how many supported by an Advocate? | 80      | 110     | 168     |
| Of which: % supported by an Advocate?        | 70.2%   | 74.8%   | 86.2%   |

Figure 10 – Concluded S42 Enquiries by Mental Capacity over past 3 Years since 2016/17



# **Section 6 - Making Safeguarding Personal**

Making Safeguarding Personal (MSP) was a national led initiative to improve the experiences and outcomes for adults involved in a safeguarding enquiry. This initiative was adopted by the Government and can be found within the Care Act 2014.

As at year end, 84% of all clients for whom there was a concluded case were asked about the outcomes they desired (either directly or through a representative) although 9% of those did not express an opinion on what they wanted their outcome to be (in 2017/18 this figure was 79% of which 10% did not express what they wanted their outcomes to be). This is shown below in Figure 11.

Figure 11 – Concluded Enquiries by Expression of Outcome over past 3 Years since 2016/17

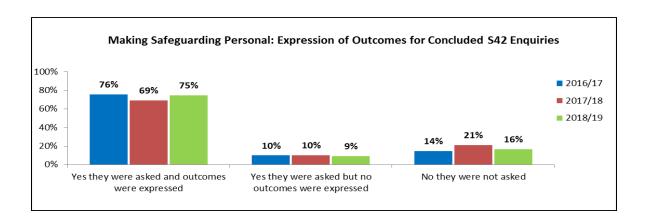
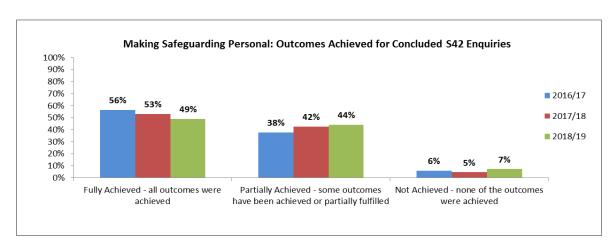


Figure 12 – Concluded Enquiries by Expressed Outcomes Achieved over past 3 Years since 2016/17



Of those who were asked and expressed a desired outcome, there has been a drop of 4% (from 53% in 2017/18 to 49% in 2018/19) for those who were able to achieve those outcomes fully, as a result of intervention by safeguarding workers.

However a further 44% in 2018/19 (up 2% since 2017/18) managed to partially achieve their stated outcomes meaning 7% did not achieve their outcomes during the previous year which is a 2% increase. This is shown above in Figure 12.

# Appendix A

Table A – Gender of Individuals with Safeguarding s42 Enquiries over past 3 Years since 2016/17

| Gender | 2016-17 | % of total | 2017-18 | % of total | 2018-19 | % of total |
|--------|---------|------------|---------|------------|---------|------------|
| Male   | 190     | 46%        | 192     | 42%        | 196     | 43%        |
| Female | 226     | 54%        | 265     | 58%        | 262     | 57%        |
| Total  | 416     | 100%       | 457     | 100%       | 458     | 100%       |

Table B – Age Group and Gender of Individuals with Safeguarding s42 Enquiries - 2018/19

| Age group | Female | Female % | Male | Male % |
|-----------|--------|----------|------|--------|
| 18-64     | 92     | 35.1%    | 99   | 50.5%  |
| 65-74     | 39     | 14.9%    | 27   | 13.8%  |
| 75-84     | 50     | 19.1%    | 41   | 20.9%  |
| 85-94     | 67     | 25.6%    | 26   | 13.3%  |
| 95+       | 14     | 5.3%     | 3    | 1.5%   |
| Unknown   | 0      | 0.0%     | 0    | 0.0%   |
| Total     | 262    | 100.0%   | 196  | 100.0% |
|           | 57%    |          | 43%  |        |

Table C – Primary Support Reason for Individuals with a Safeguarding s42 Enquiry over past 3 years

| Primary support reason            | 2016/1<br>7 | % of<br>total | 2017/1<br>8 | % of<br>total | 2018/1<br>9 | % of<br>total |
|-----------------------------------|-------------|---------------|-------------|---------------|-------------|---------------|
| Physical Support                  | 211         | 50.7<br>%     | 196         | 42.9<br>%     | 241         | 52.6<br>%     |
| Sensory Support                   | 1           | 0.2%          | 4           | 0.9%          | 4           | 0.9%          |
| Support with Memory and Cognition | 35          | 8.4%          | 74          | 16.2<br>%     | 37          | 8.1%          |
| Learning Disability Support       | 63          | 15.1<br>%     | 79          | 17.3<br>%     | 80          | 17.5<br>%     |
| Mental Health Support             | 83          | 20.0<br>%     | 83          | 18.2<br>%     | 83          | 18.1<br>%     |
| Social Support                    | 23          | 5.5%          | 21          | 4.6%          | 13          | 2.8%          |
| Total                             | 416         | 100%          | 457         | 100%          | 458         | 100<br>%      |

Classification: OFFICIAL Page 306



# **Safeguarding Annual Report**

April 2018 - March 2019

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#### 1. Introduction

The purpose of this report is to provide assurance to the Trust that it is fulfilling its statutory responsibilities in relation to safeguarding children and adults at risk and to provide a review of recent service developments highlighting areas of ongoing work and any risks to be noted.

Since September 2016, Berkshire Healthcare has amalgamated safeguarding children and adult work under one team to promote a 'Think Family' approach to safeguarding.

# 2. The Statutory Context

All organisations who work with children and young people share a responsibility to safeguard and promote their welfare. This responsibility is underpinned by a statutory duty under Section 11 of the Children's Act 2004, which requires all NHS bodies to demonstrate substantive and effective arrangements for safeguarding children and young people.

Adult safeguarding practice has come into sharp focus for all NHS organisations in the wake of large scale enquiries such as the Mid Staffordshire Foundation Enquiry and the *Francis Report (2013)* and safeguarding work operates within the legal framework of the Care Act 2014.

Since April 2010, all health organisations have to register and comply with Section 20 regulations of the Health and Social Care Act 2008, meeting essential standards for quality and safety. The Care Quality Commission periodically assesses the performance of all health care providers.

#### 3. Governance Arrangements

The Chief Executive Officer holds responsibility for safeguarding for the Trust which is delegated to the Director of Nursing and Governance. This responsibility is clearly defined in the job description. The structure for the Safeguarding Team and current lines of accountability are attached as Appendix one.

The Safeguarding and Looked After Children Group and the Safeguarding Adults Group are chaired by the Deputy Director of Nursing. These are formal sub-groups of the Safety, Experience and Clinical Effectiveness Group (SECEG) which reports to the Quality Executive Group and ultimately to the Trust board. These groups are established to lead and monitor safeguarding work within Berkshire Healthcare and meet quarterly. The board also receives a monthly update on safeguarding cases of concern.

The Head of Safeguarding works as a full time manager for the safeguarding team and chairs monthly safeguarding team meetings where shared visions, standardised practice and future plans are agreed and monitored. An annual plan on a page written by the team clearly identifies work priorities and continuous improvements to be achieved (attached as Appendix Two). The Head of Safeguarding is supported by the Assistant Head of Safeguarding who holds enhanced responsibilities as part of her named professional role. There are currently 2.8 whole-time equivalent (WTE) adult safeguarding named professional posts divided between three staff members, and 5.6 WTE posts for child safeguarding. A one year secondment was

agreed to support Mental Capacity Act work within the Trust from April 2018. It has been agreed that this post will become a permanent safeguarding adult named professional post following the end of the secondment. The team is supported by three part-time administrative posts and is based at two locations, St Marks Hospital in Maidenhead and Wokingham Hospital in Wokingham. The Specialist Practitioner for Domestic Abuse works within the safeguarding team. Three specialist practitioners and two nursery nurses also work within the team providing information from across the health economy to the six Multi-agency Safeguarding Hubs (MASH) across Berkshire. The Trust also has a named doctor for child protection who is a consultant working within CAMHS and who works closely with the safeguarding leads. There are named leads for the following areas:

- PREVENT (including Children and Adults)
- Missing, Exploited and Trafficked
- Looked After Children
- Female Genital Mutilation
- Safeguarding Manager for Managing Allegations
- Mental Capacity Act and Deprivation of Liberty Safeguards

The Deputy Director of Nursing and the Head of Safeguarding attend the quarterly East and West Berkshire Health Economy Safeguarding Committees chaired by the Directors of Nursing for the East and West Berkshire Clinical Commissioning Groups (CCG's). The Head of Safeguarding and the named professionals attend the East and West Berkshire Named and Designated Safeguarding Groups, which report to the health economy safeguarding committees. The purpose of these groups is to communicate local and national safeguarding issues. These meetings encourage shared learning from safeguarding practice and include case discussion and monitoring of action plans from inspections, serious case reviews and partnership reviews to provide assurance.

Safeguarding representation is also provided as required at patient safety and quality groups (PSQ) and other working groups providing advice and oversight on safeguarding matters. The Head of Safeguarding is a member of the Child Death Overview Panel for Berkshire.

# 4. Assurance Processes, including Audit

#### Section 11 Audit.

This is a working document measuring statutory compliance required under Section 11 of the Children's Act 2004. It is monitored and updated by the safeguarding team on a biannual basis. The Section 11 audit for Berkshire Healthcare is submitted as required to the designated LSCB Section 11 monitoring group. This group has responsibility for monitoring all statutory and non-statutory organisations that are required to complete Section 11 audits across Berkshire. This document is available for submission during Local Authority Ofsted/CQC inspections; The Berkshire Healthcare Section 11 was presented to the Pan-Berkshire Section 11 Panel in March 2019. All categories were considered effective. Berkshire Healthcare received the following feedback: 'The s11 Panel agreed that the Berkshire Healthcare self-assessment was of a high standard and that the Trust are compliant with the s11 responsibilities. All categories of the self-assessment are RAG rated green and the organisation understands their duty to continuously improve and shape

services to safeguard children. The Panel were assured by the level of safeguarding governance and practice within the organisation and assured the s11 action plan is monitored regularly.'

The Section 11 is also monitored by the safeguarding children team and the Safeguarding Children and Looked After Children Group.

#### **Self-assessment Safeguarding Audit**

In addition Clinical Commissioning Groups (CCGs) are expected to ensure that safeguarding is integral to clinical and audit arrangements. This requires CCGs to ensure that all providers from whom they commission services have comprehensive and effective single and multi-agency policies and procedures to safeguard children and vulnerable adults, and that service specifications drawn up by CCGs include clear service standards for safeguarding which are consistent with Local Safeguarding Board policies and procedures. The Trust completes a contracted annual self-assessment audit for adult and child safeguarding arrangements to the CCGs in September each year to provide assurance to commissioners that safeguarding standards are met. Following submission, the Head of Safeguarding meets with commissioners to discuss the audit and answer sample questions.

#### **Quality Schedule**

The Trust submits a quality schedule report for safeguarding to the CCG's on a quarterly basis which measures Trust safeguarding performance against nine standards.

#### Safeguarding Audits.

Audit is an effective means of monitoring compliance with policy and procedure as well as analysing the effectiveness of current practice. Four internal safeguarding audits were undertaken during 2018/19 and named professionals participated in multi-agency audits across the localities.

| Audit  | Completion  |
|--|-------------|
| Audit of Child Protection Record Keeping   | April 2018  |
| Repeat Audit of Patients who go Absent Without Leave (AWOL) at Prospect Park<br>Hospital | August 2018 |
| Audit of Child Protection Supervision  | In progress |
| Audit of Compliance to Mental Capacity Act 2005  | March 2019  |

#### **Audit of Child Protection Record Keeping**

The aim of this audit was to establish if the key actions from the previous audit (August 2015) have been adhered to in Berkshire Healthcare NHS Foundation Trust (BHFT), for children subject to a child protection

plan. That the standards set out are demonstrated in practice for health visitors, school nurses and CAMHS practitioners.

A total of fifty children subject to a child protection plan were included in the data. Forty children were known to school nursing or health visiting. CAMHS data had not been included in the previous audit. For this audit data from ten children was taken from CAMHS records.

The audit showed that there has been a notable overall improvement in the recording of demographic data. The audit demonstrates that the introduction of the safeguarding form allows for the current detail of the child's status and their social worker details to be easily accessible. This form is well maintained; the audit found that high standards have been achieved of 95% and 100% for health visitors/school nurses and CAMHS practitioners respectively.

There has also been an improvement in the recording of case conference safety plans and that actions for health practitioners in the child protection plans are progressed.

Sharing of the case conference report with the child's parents/carer by health visitors and school nurses prior to conference has improved from 66% to 77.5%; however, this remains short of the standard of 100%. It is possible that some practitioners have not evidenced this in the records, or not recorded any unsuccessful attempts made.

The recommendations and action plan have been shared with the health visiting and school nursing improvement groups and with the CAMHS leadership team.

#### **Repeat Audit of AWOL at Prospect Park Hospital**

Patients on the four acute wards, detained under the Mental Health Act, who left the hospital site, were included in the audit. There were thirteen AWOL incidents recorded for August that fitted the inclusion criteria. Of these, four related to the same patient on Bluebell and three related to the same patient on Daisy ward.

#### Findings:

Overall the audit found that there has been improvement in staff correctly following the trust policy and procedure on missing/absent patients from mental health inpatient settings(CCR144) since the previous audit in August 2017. However, there have been some inconsistency and gaps in the way the policy has been followed by staff. The policy aims to ensure that Berkshire Healthcare staff effectively report AWOL incidents, learn from incidents and minimise risk. Paying particular attention to the gaps identified in the 2017 audit, there has been some improvement particularly with number of return to the ward interviews conducted. Findings included:

- In every case where the police were informed that a patient was missing they were also informed when the patient returned to the ward.
- 70% of patients were offered a one to one on return to the ward to establish why they had gone AWOL and to try to prevent further AWOL. This was an improvement but needs to improve further.

• CRHTT were informed in each case that the patient was missing as per policy. However, there appeared to be confusion in regard to the expected action by CRHTT and there was no evidence of a visit being made to the patients last known residence.

 Although it is likely that the ward doctor is aware of the AWOL through discussion with the nursing team, there is no specific documentation that they were informed.

#### **Recommendations**

Process for visiting the patient's home to be clarified in discussion with police colleagues and in consideration of safe staffing levels

Ward staff to complete a printed checklist for every AWOL which is uploaded to the Document list on Rio when complete. This will need to be attached to the daily allocations board and completed by the nurse in charge.

Acute wards to have mobile telephones issued that staff are to carry with them on escorted walks. This will enable the staff to contact both the police and the ward quickly if a patient's absconds on escorted leave, enabling quicker location of patient and reduction of harm. Mobile phones have now been provided to all ward settings for use on escorted leave.

All actions to be discussed with Prospect Park Hospital senior leadership team for implementation. The action plan is monitored at Patient Safety and Quality meetings. This action has been completed.

## **Mental Capacity Act 2005 Audit**

This audit is summarised later in the Mental Capacity Act 2005 section of the report.

## 5. National and Local Reports

The safeguarding team review significant reports, recommendations and guidance in relation to safeguarding and these are considered as part of the safeguarding teams annual planning. Any new guidance is disseminated to managers and frontline staff through team meetings, safeguarding forums, the safeguarding newsletter and screen savers. New guidance is also brought to Patient Safety and Quality meetings, the Safeguarding and Looked after Children Group and the Safeguarding Adult Group.

## **Setting out Shifting Policy Direction**

## **Working Together to Safeguard Children 2018**

Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children' is the government's statutory guidance for all organisations and agencies who work with, or carry out work related to, children in the United Kingdom. The guidance aims to set the goalposts for inter-agency working and for promoting the welfare of children from all backgrounds, in all settings. All staff who work with or around children have a responsibility to be aware of Working Together to Safeguard Children and to follow the expectations outlined in the guidance. The 2018 update to Working Together followed a consultation that began in October 2017 to establish what would need to change in support of the new Children and Social Work Act 2017 multi-agency safeguarding arrangements. The

document was published in June 2018 and a summary was presented to the Safeguarding and Looked after Children Group in November 2018. The document has been reviewed by the Safeguarding team and the following noted:

- There is more emphasis on threats to children from outside the family such as online abuse and exploitation, sexual exploitation, radicalisation and involvement in organised crime, especially 'county lines' drug-dealing. The 2018 guidance includes a new section headed 'Contextual Safeguarding' about children who may be vulnerable to abuse or exploitation from outside their families.
- Greater recognition of the safeguarding risks flowing from substance misuse, including alcohol misuse, by children.
- There is more detailed guidance about safeguarding children in the criminal justice system.
- Modern slavery and human trafficking are now included as risks to be aware of, with a reminder to
  practitioners that a referral should be made to the National Referral Mechanism as soon as
  possible, if they have concerns about possible modern slavery or human trafficking.
- Working Together 2018 adds to the section about professionals with concerns about a child's
  welfare making a referral to children's social care with a statement that they should "always follow
  up their concerns if they are not satisfied with the result".
- The emphasis remains that when safe, the aim should be to obtain consent but "information may be shared without consent if a practitioner has reason to believe that there is good reason to do so, and that the sharing of information will enhance the safeguarding of a child in a timely manner."
- There is a new section describing the role of health professionals in strategy discussions.

Berkshire Healthcare safeguarding children training has been reviewed and updated in response to the publication. Five safeguarding forums were arranged for Berkshire Healthcare staff during 2018/19 in response to this with external expert speakers on child exploitation, child sexual abuse and vulnerability of looked after children.

One of the most significant changes in *Working Together 2018* is the replacement of Local Safeguarding Children Boards (LSCBs) with Safeguarding Partners who will consist of three agencies: local authorities, clinical commissioning groups, and chief officers of police. These Safeguarding Partners will work with relevant appropriate agencies within their locality to safeguard and protect children. All three Safeguarding Partners have equal responsibility for fulfilling the role and are responsible for selecting the relevant agencies in the area to work with to safeguard and protect children in the locality. To fulfil this role, the three safeguarding partners must set out how they will work together and with any relevant agencies by September 2019.

The guidance also sets out the new process for national and local reviews. The responsibility for how the system learns the lessons from serious child safeguarding incidents lies at a national level with the Child Safeguarding Practice Review Panel and at local level with the safeguarding partners. The Panel is responsible for identifying and overseeing the review of serious child safeguarding cases which, in its view, raise issues that are complex or of national importance. The Panel must decide whether it is appropriate to commission a national review of a case or cases

Local safeguarding partners must make arrangements to identify and review serious child safeguarding cases which, in their view, raise issues of importance in relation to their area.

A copy of the rapid review should be sent to the Panel who decide on whether it is appropriate to commission a national review of a case or cases. The safeguarding partners are responsible for commissioning and supervising reviewers for local reviews.

Working Together 2018 sets out changes in arrangements for Child Death Reviews as set out in the Child Death Review Statutory and Operational Guidance. The guidance replaces the requirement for LSCBs to ensure that child death reviews are undertaken by a Child Death Overview Panel (CDOP) with the requirement for "child death review partners" (consisting of local authorities and any clinical commissioning groups for the local area) to make arrangements to review child deaths.

#### The Child Death Review Statutory and Operational Guidance

This guidance was published October 2018. This guidance sets out changes to the child death review process and governance arrangements; the CCG and Local Authorities had to publish their arrangements by 29th June 2019 for implementation by 29th September 2019.

This guidance specifies there should be reviews of all deaths children normally resident in the local area and, if they consider it appropriate, for any non-resident child who has died in their area.

#### Mental Capacity Act Amendment Bill 2018.

The Mental Capacity Act 2005 was amended in 2018 and passed into statute in May 2019. It replaces the Deprivation of Liberty Safeguards (DoLS) with a scheme known as the Liberty Protection Safeguards (LPS). The main changes will be as follows:

- DoLS only applied to people over the age of 18. LPS will be for people aged 16+ (18+ if in a care home).
- DoLS applied to hospital and care homes only. LPS will apply to people deprived of their liberty anywhere.
- LPS may also include the arrangements for the means and manner of transportation for the cared for patient to from or between particular places (not included under DoLS).
- DoLS has both urgent and standard applications. Under LPS urgent applications will only be for life sustaining treatment or any vital act. All other applications will be standard.
- Currently all DoLS applications are assessed/approved by the Local Authority (Supervisory Body).
   Under LPS the process will be the responsibility of the NHS Trust, CCG, Health Board or Local Authority whoever is providing or mainly commissioning care will become the Responsible Body.
   Berkshire Healthcare will be responsible for arranging assessments, authorising the detention, monitoring it and will hold responsibility for reviews and appeals to the Court of Protection for patients in inpatient units (and any community placement funded by Berkshire Healthcare)
- Local authorities will remain responsible LPS for self-funding individuals and in private hospitals.
- DoLS applications are for a maximum of one year only and then require a full reassessment.
   LPS is renewable after one year and then again for one year and then for three years before a full assessment is required where the Responsible Body has a reasonable belief the person lacks capacity + mental disorder + arrangements are necessary and proportionate.
- All conditions have been removed.

All DoLS applications are assessed by specially trained best interest assessors and mental health
assessors. LPS assessments will be carried out by regulated professionals such as doctors, nurses
and occupational therapists. The pre-authorisation review will be carried out by an AMCP who will
only meet the client and family where an appeal is lodged.

• The specialist mental health assessor role is removed but there remains a requirement for medical evidence of a mental disorder but does not require a specialist assessor for this, e.g. GP reference that a person has dementia or other condition.

The LPS process will be as follows:

- 1. **Assessment**: The Responsible Body (such as Berkshire Healthcare) can use any staff with the necessary skills and knowledge to undertake the assessments and use previous mental capacity assessments and mental disorder assessments by appropriate professionals.
- 2. **Pre-authorisation Review:** The Responsible Body assigns a member of staff, who has had training and is not involved in the day to day care or treatment of the patient. They read the assessment but do not meet the patient. An AMCP is required to complete the review where the person is objecting or where the responsible body asks them to. The AMCP must meet the patient and consult others (if considered appropriate and practicable to do so
- 3. **Authorisation:** This is a two tier process, the assessment and the authorisation by the Responsible Body. No detail on profession or qualification so could be anyone considered appropriate by the Responsible Body. It could be anyone considered appropriate by the responsible body.

The Deprivation of Liberty Supreme Court ruling of Cheshire West will continue to be the criteria for LPS following amendment of the Mental Capacity Act 2019. As with DoLS, LPS is for detention only and excludes care/treatment or Article 8 decisions. Much of the existing DoLS case law will continue to apply. Appeals will continue to be heard by the Court of Protection.

Any patients who are receiving care from a private provider at home who are identified as being deprived of their liberty will be the responsibility of the local authority. NHS staff providing care in people's homes will be responsible for identifying and reporting to the local authority.

#### **Responsibilities of NHS Trusts:**

Currently DoLS applications are completed by Berkshire Healthcare staff and the authorisation process is undertaken by the local authority with administration of the applications and notification to CQC overseen by the safeguarding team.

When LPS is introduced the trust will be responsible for the following:

- 1. Identifying patients/clients that the trust are funding care packages for (supported living, domestic care packages, and care homes) who lack capacity and could be deprived of their liberty.
- 2. LPS Assessments: have enough staff trained and able to undertake the necessary LPS assessments at a defensible standard. Allocate time for the assessments.
- 3. Pre-authorisation: Have enough staff to undertake pre-authorisation reviews. These staff will need time to critically read the assessments and judge whether they meet the standards to withhold future appeal. They will also need to be willing to take on the role of authorising detention. Staff will need to be trained to be AMCPs.

4. Administer and advise: this will include sending back inadequate assessments, record the appropriate person, appoint IMCA's, monitor LPS expiry dates, produce statistics, and inform CQC, produce authorisation record.

- 5. Review: undertake and monitor planned and responsive reviews.
- 6. Appeals: a small number of cases will go to appeal at the court of protection requiring written reports and attendance at hearings plus formal legal advice.

Any backlog of DoLS applications not yet assessed will become the responsibility of the provider/commissioner once LPS comes into operation. The Code of Practice will further clarify roles and responsibilities and knowledge and training requirements for these. LPS is expected to be implemented by October 2020.

Consideration is currently being undertaken as to whether the LPS remains as part of the Safeguarding team, with the need for an additional band 7 member of the team to fulfil this change. The alternative which is being considered by the Divisional Director for mental health in patients, Director and Deputy Director of Nursing is whether a mental health law team could be developed to include the Mental Health Act, Mental Capacity Act professionals and ultimately the liberty protection standard leads. This team would become the hub for excellence in mental health laws for the Trust. New posts are being reviewed with the possibility of supporting this innovation and are currently at the developmental stage.

Intercollegiate Document Safeguarding Adults: Roles and Responsibilities for Healthcare Staff 2018 and Intercollegiate Document Safeguarding Children: Roles and Responsibilities for Healthcare Staff 2019

Revised NHS safeguarding training roles and competencies for Healthcare staff were published in late 2018 and early 2019. The new guidance has increased the levels of training and hours required for many staff groups. These documents were reviewed by the Safeguarding Team and the team have reviewed competencies to ensure all aspects are covered in Berkshire Healthcare training. The Head of Safeguarding and the learning and development team are working together to put together a strategy for ensuring the training of all staff will be updated to meet the intercollegiate guidance. The training strategy has been updated to reflect which staff groups will move to a higher level of training. Information about new training requirements has been cascaded to managers and staff via Patient Safety and Quality groups and through Teamnet.

#### Homeless Reduction Act 2017 and Duty to Refer.

The Homelessness Reduction Act 2017 came into force on 3rd April 2018, with the final section (s.10: duty to refer), published on 1 October 2018. The act places renewed emphasis on the prevention of homelessness with the introduction of the new "prevention" duty. Section 10 of the Act mandates public authorities in England to notify a local housing authority of service users they think may be homeless or at risk of becoming homeless. The statutory "Duty to Refer" applies to organisations that provide inpatient care, emergency departments and urgent treatment centres but emphasises that it would still be beneficial for all NHS organisations to promote the referral system. Information has been added to safeguarding training and a screen saver is planned to raise this issue with staff.

**Domestic Abuse Bill January 2019** 

The Home Office published a landmark bill on Domestic Abuse in January 2019 aimed at supporting victims and their families in pursuing offenders. The bill initiates the government's commitment to: dedicate new funding to support services working with domestic abuse case; identify economic and non-physical abuse within legislation; provide additional training to frontline services; and support victims through the family court. The Bill is aimed at improving the support for victims of domestic abuse and their families and pursuing offenders.

It is estimated that around two million adults experience domestic abuse each year, affecting almost 6% of all adults. Women are twice as likely to be victims as men. The cost of domestic abuse to health services is estimated at 2.4 billion pounds per year.

#### **Independent Inquiry into Child Sexual Abuse**

This inquiry which opened in June 2015 continues to progress in England and Wales. The inquiry was established to examine how the country's institutions handled their duty of care to protect children from sexual abuse. The enquiry is unlikely to be completed for several years but an interim enquiry was published in April 2018. Recommendations for the health economy include ddeveloping a national policy on the training and use of chaperones in the treatment of children in healthcare services.

## The 2018 Care Quality Commission (CQC) report on Sexual Safety in Mental Health Wards

This report identified multiple concerns and areas for improvement relating to in-patient safety in mental health wards, these included allegations of rape, patient on patient and staff on patient assaults. A working group was set up to look at current practice on Berkshire Healthcare mental health and learning disability inpatient units and develop policy and training for staff to help prevent incidents and ensure any reported incidents are dealt with appropriately. The report categorised eight overarching examples of the type of concerns which were raised, and these should form the basis of any training developed.

- Sexual activity between patients that is likely to be consensual What is the policy in PPH regarding this? Are patients advised on admission (if well enough) that this type of relationship is not permissible?
- Sexual contact made by a person to another person which is unwanted by the individual who is affected. What is the current guidance around this in PPH.? Are patients encouraged to inform staff? How are staff advised to respond to this type of incident?
- Sexual activity where one party did not have capacity to consent What is the current guidance for staff regarding this type of incident?
- Sexual assault by patients on staff How are these incidents currently managed?
- Allegations of sexual incidents which are likely unfounded E.g. Staff member accused not on shift, patient known to be psychotic at the time of making the allegation – Is there an existing SOP for this type of concern? Is this managed under the allegations against staff guidance?
- Sexualised behaviour triggered by a patient's mental state How are these managed currently? Is this part of the patients care plan and risk assessment?
- Allegations by patients that they have been sexually assaulted by a staff member- Is there an
  existing SOP for this type of concern? Is this managed under the allegations against staff guidance?
- Sexual language used as insults- How is this currently managed?

The report identified that individuals who have been in-patients in mental health services and their families feel that staff do not always keep them safe. Response times to disclosure can be slow and patients are not always kept updated with the progress of their concern/complaint. Patients should be involved if possible,

in completing the Datix/ Incident form and in agreeing actions to be taken. Sexual safety Incidents need to be taken seriously and investigated appropriately. If it is established that the incident did not take place, staff must try to understand why it was made and the distress caused to the patient. Staff must be supportive of patients and provide opportunities for 1-1 conversations where a patient would feel safe in making a disclosure. (Access to staff members of the same gender if this is requested/indicated). Patients must have access to advocates, helplines Rape Crisis, Victim Support, Survivors Trust (non-current sexual abuse), Survivors UK (for male victims of sexual assault), Galop (LGBT victims of sexual abuse/assault). Also, patients should have access to ISVAs', Sexual Assault Referral Centres (SARC) as appropriate.

To encourage a safe environment within the acute setting and to ensure boundaries are maintained staff must communicate clearly to patients which behaviours are not acceptable and how the ward will respond to sexual safety incidents.

The working party put together an action plan in line with the guidance for staff including training for all clinical staff and a flow chart for staff to follow when reporting incidents and supporting patients following an incident. The action plan is being progressed.

#### Improving knowledge from national reports, research and guidance:

The safeguarding team review national Serious Case Reviews (SCR) through SCR sub-groups and relevant actions are considered for health.

#### **Exploitation**

Information and research about exploitation of children and adults at risk continues to increase at a fast pace. Trust representation is provided across the six LSCB localities at all operational and strategic exploitation sub-groups including Modern Slavery. The Head of safeguarding attends the pan-Berkshire Child Exploitation group.

#### Learning from local serious case reviews and partnership reviews:

During 2018/19, there were five child serious case reviews and two partnership reviews conducted across Berkshire and seven safeguarding adult reviews, one adult partnership review and three domestic homicide reviews. It is of note that there has been a rise in the number of adult reviews in the last two years which have been diverse and have covered a wide range of groups. Berkshire Healthcare are committed to learning from reviews and fully engage in the SCR SAR and DHR process. Named professionals have provided reports and chronologies for all the reviews and supported practitioners throughout the process. Changes in the way both adult and child serious case reviews are conducted have meant more practitioner involvement through learning events and feedback around this process has been positive. The Head of Safeguarding or the deputy attend all serious case review and safeguarding adult review sub-groups across Berkshire and serious case review panels and are responsible for ensuring lessons are disseminated to Berkshire Healthcare staff and action plans are developed, completed and reported on. Many of these reviews are currently on-going and action plans have been formulated from identified learning for Berkshire Healthcare and are in progress.

Clear pathways are in place to disseminate learning, monitor action plans and ensure oversight at board level. The Head of Safeguarding reports to the quarterly Safeguarding Groups and sits on the Children, Young People and Families (CYPF) and Adult and Community Patient Safety and Quality Groups. The Assistant Head of Safeguarding attends the Children and Adolescent Mental Health (CAMHS) leadership groups and the Safeguarding Adult Named Professional (mental health) attends the Prospect Park Hospital Patient Safety and Quality Group. Learning has also been cascaded through Learning Curve. Audit processes have been strengthened and operational managers are leading audits monitoring the quality of documentation within children's services. Action plans are also monitored externally through safeguarding committees, LSCB sub-groups and CQC.

# 6. Safeguarding Policies/Protocols

The following policies and procedures have been reviewed and implemented during 2018/19: in accordance with the policy scrutiny group and the safety and clinical effectiveness group

- Mental Capacity Act and Deprivation of Liberty safeguards Policy CCR096 new policy which
  including update and incorporation of DoLS published on 6<sup>th</sup> April 2018;
- CCR029 The Management of Sexual Relationships involving In-patients in the Mental Health Setting amendments following recommendations from sexual safety working group;
- CCR123 Child Protection Supervision for identified key practitioners who work alongside children within Berkshire Healthcare minor updates and changes;
- CCR089 Safeguarding Adults from Abuse extensive changes.

There are also safeguarding children protocols and guidance designed by the safeguarding team and disseminated to relevant teams as appropriate and where a need arises. All Berkshire Healthcare policies incorporate the themes of safeguarding.

#### **Safeguarding Procedures Online**

Berkshire Healthcare, alongside multi-agency partners, are governed by the Berkshire child protection and adult safeguarding procedures online. The Head of Safeguarding and Assistant Head of Safeguarding are members of the Pan-Berkshire sub-committees who oversee and update the procedures.

# 7. Local Safeguarding Children's Boards (LSCBs) and Safeguarding Adult Boards (SABs)

Berkshire Healthcare regularly reviews its membership of the six Berkshire LSCBs and three SAB's to ensure it fully participates in the statutory mechanism for agreeing how organisations in each area co-operate to safeguard children and adults at risk. The Trust is represented by a Divisional or Clinical Director or the Deputy Director of Nursing at each board and members of the safeguarding team are actively engaged and valued sub-committee members.

The Head of Safeguarding or Assistant Head of Safeguarding are members of the serious case review sub-committees across Berkshire. Named professionals are active members of the quality and performance sub-groups for their locality and the exploitation strategic and operational groups. The Head of Safeguarding is a member of the Pan-Berkshire Child Exploitation strategic group. Named professionals also attend all training and development sub-groups and any safeguarding task and finish groups such as the FGM groups.

Berkshire Healthcare provides a quarterly report to each LSCB.

# 8. Inspections

## Care Quality Commission (CQC) Inspection July 2018

Berkshire Healthcare underwent a focussed CQC inspection and maintained a 'Good' rating overall, and received 'Outstanding' for the Well Led element of the review.

The outcome of the services that were inspected is shown in the table below:

|   | Safe | Effective   | Caring | Responsive | Well led    | Overall     |
|---|------|-------------|--------|------------|-------------|-------------|
| Trust Overall CQC rating                                    | Good | Good        | Good   | Good       | Outstanding | Good        |
| Core service  | Safe | Effective   | Caring | Responsive | Well led    | Overall     |
| Older People's Mental Health Services (inpatients)          | Good | Good        | Good   | Good       | Good        | Good        |
| Acute Mental Health and Psychiatric Intensive Care Unit     | Good | Good        | Good   | Good       | Good        | Good        |
| Crisis Response and Home Treatment team and Place of Safety | Good | Good        | Good   | Good       | Good        | Good        |
| Adult Service Community                                     | Good | Good        | Good   | Good       | Good        | Good        |
| Children and Young People (community)                       | Good | Good        | Good   | Good       | Good        | Good        |
| Urgent Care (Minor Injuries Unit)                           | Good | Good        | Good   | Good       | Good        | Good        |
| Learning Disability Inpatients                              | Good | Outstanding | Good   | Good       | Outstanding | Outstanding |

## JTAI Child Sexual Abuse in the Family environment.

In January 2019, Berkshire Healthcare participated in a Joint Targeted Inspection of child sexual abuse in the family environment in Bracknell. The report has been published and was a positive report. Learning was identified in relation to monitoring of the quality of referrals into MASH and multi-agency inclusion in MASH work. An action plan has been formulated and is in progress.

## 9. Domestic Abuse

Domestic abuse remains a key feature in many child protection cases and serious case reviews. The negative health impact of domestic abuse is huge both for the victim and the children so health input in protection and support plans are crucial. The amalgamation of the adult and children's safeguarding teams has led to improvements in joined up working between adult and child services. Knowledge and expertise can be shared between the teams which can enhance the safeguarding support for both Berkshire Healthcare staff and users of the services.

The specialist practitioner for domestic abuse is responsible for:

- Providing consultation and support to staff members working with service users when domestic abuse is an issue;
- Providing support for Berkshire Healthcare staff who may be themselves affected by domestic abuse;
- Developing policy and procedures in relation to domestic abuse;
- Awareness raising and training/continuous development of training courses;
- Representing Berkshire Healthcare community health services at Multi-Agency Risk Assessment Conferences (MARAC) and Domestic Abuse Repeat Incidents Meeting (DARIM)
- Representing Berkshire Healthcare at strategic meetings and forums where appropriate;
- Maintaining and further developing links with CCG's, health and wellbeing boards and other key
  partners with a view to improving safety and reducing harm to service users.

With the introduction of Multi Agency Safeguarding Hubs (MASH) health representation is provided by Berkshire Healthcare. Domestic Abuse reports are received into the MASH and triaged with the advantage of being able to have prompt access to health information.

Domestic Abuse training can be accessed by all Berkshire Healthcare staff. There are regular training dates for *domestic abuse basic awareness* and *domestic abuse and mental health* available on SLATE but also 'bespoke' training can be delivered for different practitioner groups. All training includes DASH and MARAC training. Berkshire Healthcare nursery managers have been trained and a competency has been attached for health visiting staff to attend Basic Awareness Training. Staff can also be signposted to domestic abuse training via the LSCB training programme and also local authorities who regularly provide DASH/MARAC training.

In December 2015, coercive control in an intimate or family relationship became a crime and as a response the domestic abuse training now includes: identifying controlling behaviours; consequences of this for both those being controlled and the wider family; and also how those being affected may behave in response to the control, particularly around safeguarding. Training has also focused on increasing the use of the DASH (Domestic Abuse Stalking and Harassment) risk assessment tool by staff.

The majority of referrals into Multi Agency Risk Assessment Conference (MARAC) are made by the police and domestic abuse agencies however we are slowly seeing an increase in referrals made from health.

Health Visitor teams routinely ask mothers if they have concerns about domestic abuse in their relationships. Where abuse is reported, health visitors are encouraged to complete a DASH and support families, signposting or referring to other agencies such as children's social care and domestic abuse support agencies or if high risk to MARAC via their Designated MARAC Officer (DMO).

#### **Notifications of Domestic Abuse Incident Reports**

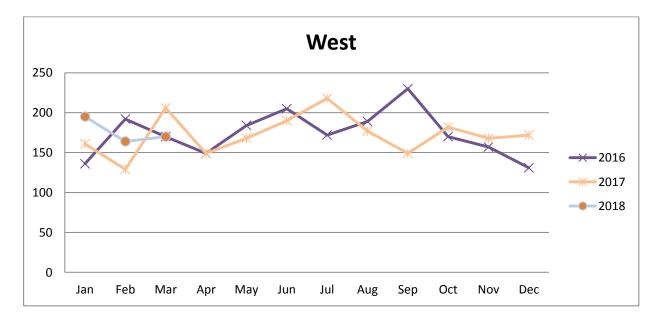
Domestic abuse notifications are generated by police for all incidents reported to them and the safeguarding office receives these where there is a child under 5 or the victim is pregnant. The teams are also informed of serious incidents where older children are present. The named professionals and specialist practitioner for domestic abuse review all domestic abuse notifications and discuss any serious incidents with the health visitor and, if applicable, school nurse/community children's nurse/CAMHS worker for the child. The safeguarding team can also offer support to practitioners on how best to respond to domestic abuse incidents. Police incident forms continue to be sent to the health visiting and school nurse teams no longer provided by Berkshire Healthcare.

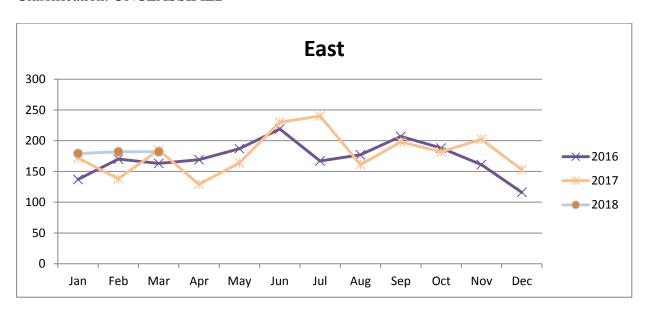
#### Looking to the future

The Domestic Abuse Bill published in January 2019 offers tougher sentences for perpetrators where there are children involved and also more support for victims who testify in court. It is also redefining economic abuse and proposed Domestic Abuse Protection Orders (DAPOs) will allow police and courts to intervene earlier, including electronic tagging of perpetrators. There will also be an independent Domestic Abuse Commissioner appointed.

#### **Figures**

For 2018 – 2019, the total number of reports received for the West area (Newbury, Reading and Wokingham), were 2102. Total number for the East area (Bracknell, Slough & WAM), were 2205; a total of 4307 for Berkshire. This is a small increase on the previous year. Slough continues to receive the highest number of domestic incidents and also has the highest number of MARAC referrals.





## 10. Safeguarding Training

All internal safeguarding training in Berkshire Healthcare is facilitated by the named professionals for safeguarding. The safeguarding training strategy has been reviewed in line with publication of the new intercollegiate documents for Safeguarding Adults and Children. The new requirements mean all clinical staff are required to undertake safeguarding adult training at minimum level 2 which means enhanced training for over 2000 staff. Bespoke training sessions have been organised for some staff groups and extra training sessions are in place to ensure all staff are compliant at level two by the end of 2020 as required by the document. All clinical mental health staff who work with adults plus some other staff groups are now required to complete safeguarding children training at level three. Again bespoke training is being organised plus extra sessions for staff plus two extra safeguarding forums to ensure staff are compliant as soon as possible.

Safeguarding training is firmly embedded in the induction programme and the team offer monthly induction courses to all new staff. Combined safeguarding children and adult training with a 'Think Family' focus is provided at level one. All clinical staff also receive level two safeguarding children training at induction, PREVENT, MCA and DoLS training. All volunteers starting with the trust receive safeguarding adults and children training at level one as part of their induction. The provision of training is an area of strength within the team and requires flexibility and commitment. The team acknowledges the need for a positive attitude towards training and operates within the Trust inclusion policy, offering training in accordance with respecting and providing for the diverse need of a large workforce. Bespoke training is facilitated for hard to reach staff groups.

The specialist practitioner for domestic abuse attends induction for all staff to present information about domestic abuse. Domestic abuse awareness training sessions including asking the question about abuse is available for all staff and essential training for clinical staff working directly with children. Bespoke domestic abuse training is also provided by the specialist practitioner for staff working in mental health services. Child sexual and criminal exploitation, forced marriage, honour based violence and FGM including mandatory reporting responsibility are included in all safeguarding training. Regular screen savers in

relation to these topics are used to remind staff of their responsibilities. The named professionals also cofacilitate shared responsibility targeted training on a monthly basis with the LSCB trainers in Slough.

The safeguarding team facilitate a safeguarding children forum as a level three update for all staff who work directly with children across the Trust. Three forums focussing on domestic abuse and the impact on children were held in April, September and October 2018 attended by approximately 230 staff. Presentations were facilitated by both internal and external staff including a presentation by the looked after children team on the specific vulnerabilities and needs of looked after children, effects of domestic abuse on the emotional development of children by the Named Doctor for Safeguarding Children, coercion and control by the Specialist Practitioner Domestic Abuse and learning from local serious case reviews by the safeguarding team. Domestic abuse was featured in all the serious case reviews which Berkshire Healthcare participated in during the year.

A safeguarding adult's forum at level two will be developed to replicate the safeguarding children model.

## Safeguarding training compliancy in 2018/19 was as follows:

| Training              | Level       | Compliar | nce level | Target |        |     |
|-----------------------|-------------|----------|-----------|--------|--------|-----|
|                       |             | Q1       | Q2        | Q3     | Q4     |     |
| Safeguarding Children | One         | 90.6%    | 92.8%     | 91.75% | 91.79% | 90% |
| Safeguarding Children | Two         | 92.8%    | 92.6%     | 88.59% | 88.94% | 90% |
| Safeguarding Children | Three       | 87.5%    | 91.2%     | 90.55% | 88.20% | 90% |
| Prevent               | Awareness   | 94.5%    | 94.2%     | 93.90% | 95.60% | 85% |
| Prevent               | Health Wrap | 94.3%    | 94.7%     | 94.70% | 96.10% | 85% |
| Safeguarding Adults   | One         | 94.8%    | 94.6%     | 92.54% | 91.28% | 90% |
| Safeguarding Adults   | Two         | 85.9%    | 87.8%     | 86.37% | 81.67% | 90% |
| DoLS                  |             | 79%      | 82.9%     | 81.77% | 86.27% | 85% |
| MCA                   |             | 87%      | 89.3%     | 85.92% | 90.69% | 85% |

Safeguarding training compliance levels are monitored on a monthly basis by the safeguarding team. An action plan is in place to increase the number of safeguarding adult level two training courses available for staff following the recent publication of the Intercollegiate Document Safeguarding Adults: Roles and Competencies for Healthcare Staff. Extra courses are also being facilitated to increase compliance to safeguarding children training at level two and there will be a targeted safeguarding forum in May for level three training. All staff who are non-compliant have been written to and asked to book onto the forum. There has been a delay in receiving training dates from the Berkshire LSCB's which has had on impact on compliance for level three safeguarding children training. The safeguarding forum for 2019/20 is based on the newly published Working Together 2018 and will focus on contextual safeguarding.

A new safeguarding named professional was appointed in April 2018 on secondment to increase understanding of the Mental Capacity Act 2005 and to increase compliance to MCA and DoLS training. Compliance to MCA and DoLS training rose in quarter two. MCA/DoLS training at induction has been reviewed and has been split into two smaller groups following feedback through evaluation and from the facilitators of the training. The training presentation has been modified to make it more case-study based. Staff who are non-compliant to DoLS training have been sent reminders to book on to courses. Training compliance in quarter four was compliant at over 85% for both MCA and DoLS

Compliance to PREVENT training remains high at over 96%. All new staff receive PREVENT training at

induction

**Multi-agency work** 

Named professionals for safeguarding children and adults attend quality and performance LSCB sub-groups and SAB effectiveness groups in each locality and participate in multi-agency audits as requested. Examples are as follows:

are as ronows.

Named nurses participated in child sexual exploitation audits in Bracknell, RBWM and Slough.

The Head of Safeguarding participated in a case audit following the death of a 6 week old baby from sudden infant death syndrome in Bracknell. An action plan has been developed from the audit which is being monitored by the learning and Improvement sub-group.

The named nurse for safeguarding children (Slough) participated in a domestic abuse audit. The audit is not yet complete. Actions from the audit will be shared with the Children and Young People's Patient Safety and Quality Group.

A named professional for safeguarding adults is participating in an audit with the RBWM safeguarding team to look at quality of safeguarding referrals from Berkshire Healthcare.

A named nurse for safeguarding children is participating in a multi-agency LSCB audit in Reading looking at outcomes for children who have been subject to a protection plan for more than 18 months and children de-registered from a plan after three months.

A named nurse for safeguarding children participated in a multi-agency audit of MASH in RBWM.

A named nurse for safeguarding children participated in a multi-agency workshop looking at levels of need in Wokingham.

The named nurse for safeguarding children for RBWM participated in a multi-agency audit of RBWM MASH.

The Head of Safeguarding represented Berkshire Healthcare at two working groups following learning from local serious case reviews. One group looked at how to promote safe sleeping to fathers following sudden infant death of a baby whilst co-sleeping with father on a sofa. The group have produced a video in conjunction with London Irish Rugby club entitled 'Lift the Baby' and this has been shared widely through health professionals, via social media and through the Lullaby Trust. The second group looked at promoting services for unpaid carers following a safeguarding adult review in Slough and resulted in a cross Berkshire bus campaign advertising a new help line for carers. The Head of Safeguarding chairs the training sub-group in Slough.

The Head of Safeguarding chairs the Slough LSCB Learning and Development group.

# 11. Developments in Mental Capacity Act Practice

The Mental Capacity Act establishes a framework of protection of the rights for people who may, through disability, injury or illness, have impaired mental capacity, or who are at risk of being wrongly thought to

lack mental capacity because of a diagnostic label or some aspect of their appearance or behaviour. The Act, implemented in 2007, applies to everyone involved in the care, treatment and support of people aged 16 and over living in England and Wales who may be unable to make all or some decisions for themselves – around 2 million people. It sets out how professionals in sectors such as health and social care, finance, policing, trading standards and legal services, should support and care for people who may lack capacity. It also describes how people can prepare in advance for a time when they may lack capacity. The role of the MCA lead in the adult safeguarding team is to act as a point of reference for colleagues, to develop and train trust staff and team colleagues, review and develop the training programme and support the trust leadership with regard to the MCA Framework.

A new policy for MCA and DoLS was endorsed by the Berkshire Healthcare Policy Scrutiny Group and introduced in April 2018. The policy includes a flowchart which is displayed in all inpatient wards to support staff in managing the DoLS process.

During 2018/19 a secondment post was secured for a named safeguarding professional to work fulltime with the team to enhance MCA training to trust staff and introduce practical ward based teaching sessions. MCA training was redesigned and made more practical and scenario based and received excellent feedback from staff. Bespoke MCA training sessions were facilitated to district nursing teams across the trust. During 2018/19, oversight of the DoLS application process moved from the Mental Health Office to the Safeguarding Team and work to improve understanding of the DoLS process continued with practical ward-based support. A new clerical system was introduced to monitor DoLS applications with administrative support. MCA champions are allocated to each ward area and supported by the MCA lead. The safeguarding adult advice line was also developed and this supports staff in practice with advice from named professionals for safeguarding adults.

### **Audit of Mental Capacity Act 2005**

#### **Background**

Previous audits of the application of the Mental Capacity Act (2005) in clinical practice demonstrate that there is in general a good level of knowledge of the Act amongst staff on inpatient wards. There is particular attention given to ensuring that patients have representation and support. Formal mental capacity is completed mostly when significant decision making is required and these include the patient's ability to return home and care for themselves and accept support if required, decisions to find alternative care arrangements e.g. care home or nursing home and consent to admission and treatment.

Verbal consent is sought for day to day interventions and in general this is documented well within the physical rehabilitation wards and the learning disability inpatient mental health ward. Documentation of day to day consent for interventions is not observed on other mental health inpatient wards. Some consent forms were signed by patient's relatives without a valid reason or any indication of the relative's authority to do so,

Knowledge of the authority of Lasting Power of Attorney (LPA) is not understood by all nurses. Nurses are not undertaking formal mental capacity assessments and the role of assessment is being allocated and owned by the occupational therapists on the wards. This means that nurses are not gaining the skills and competencies in completing assessments with regard to the MCA legal framework.

The responsible clinician undertakes almost all formal mental capacity assessments on inpatient mental health wards. Nurses and other supporting personnel on the inpatient mental health wards are primarily working within the framework of the Mental Health Act (MHA) 1983 and the principles of the MCA (2005) are not prioritised. Following learning from previous audits local leadership for MCA (2005) has been developed and locality directors are advised of incidents and developments in MCA (2005) practice measures.

Development of MCA champions in inpatient units continues with emphasis on sharing good practice and making clinical areas safer with support for staff to become more legally competent.

MCA training is reviewed yearly and a named safeguarding professional with specific responsibility for MCA practice support has been employed by the Trust on secondment to further this work. The role concentrates on supporting and empowering practitioners in clinical practice to consider the MCA (2005) and broaden its application beyond significant decision making practice.

A new Mental Capacity Act (2005) and DoLS policy has been adopted by the trust since 2018 providing clearer direction and guidance for practitioners and a telephone helpline service has been implemented to support staff who require advice regarding specific clinical circumstances.

As part of the audit, structured interviews with staff members from various mental health and community wards were carried out in February and March 2019in regard to understanding of the role of the Independent Mental Capacity Advocate (IMCA) in mental health and community health wards in Berkshire Healthcare.

The questions included what IMCA stands for, what their role is, where staff would find information about advocacy and whether they could think of any patients on their ward who could benefit from a referral.

Key findings from the audit:

- 1. Practice in the mental health inpatient units are focused on MHA legal framework and use of the MCA framework with reference to consent for daily interventions, medication that is not for mental health treatment, activities is not evidenced in the patient's daily progress notes
- 2. Campion Unit staff (Learning Disability Inpatient unit) demonstrated the use of MCA more clearly than other areas. The use of the Care Programme Approach (CPA) to make Best Interest Decisions regarding treatment and care, progress of treatment and discharge planning has facilitated a more successful implementation of MCA (2005) in practice. The CPA ensures patient representation, patient involvement, family involvement and clinician involvement. Over the past year communication with patients and use of Makaton has made a positive change to interaction with patients with learning disabilities in the unit and this has improved the ability of the patient to express views and wishes regarding their care and treatment.
- **3.** Of the physical health rehabilitation units, 70% of patients with an identified impairment of the mind or brain did not have an MCA assessment regarding decision making about admission, treatment or discharge planning. There was evidence that verbal consent was requested for day to day interventions and agreed in the patients daily records. Documentation on some physical rehabilitation wards indicates that staff continue to ask next of kin to sign consent forms and make decisions about care, treatment and place of discharge without any evidence that they hold an LPA to make these decisions. There is a lack of

documented evidence of patient involvement in decision making where they have an identified impairment of the mind or brain. A named professional has made regular visits to the wards to improve this standard since the audit.

- **4.** Accurate terminology is not used to indicate that family meetings are Best Interest Decision making meetings and documentation is poor in clarifying the decision to be made, who is responsible for making the decision, and in what capacity the patient representative is making a decision.
- 5. Mental health inpatient staff in Prospect Park Hospital have a reasonable understanding of the role of an IMCA, but there was evidence that people confused the role of the IMCA and the Independent Mental Health Advocate (IMHA). They were able to explain the role and were aware the IMCA visited the wards. Community inpatient staff were familiar with the expression of IMCA, only three knew what IMCA stands for, however, only two of them were able to explain their role and when they would refer a patient to an advocate. Staff members were confident to find information on TeamNet or speak to their manager. Wards in Prospect Park Hospital are regularly visited by IMCAs from the various advocacy services and posters and leaflets can be found around the wards. Staff members are aware of the visits and some pointed out the photo of the advocate who visits the ward regularly on a poster in the ward office. Campion ward has its own noticeboard with IMHA and IMCA related information on the corridor. Community ward staff were not aware if they were visited by the advocacy service and there was no clearly visible information found on the corridors (Jubilee, Henry Tudor or Oakwood wards).

## **Key Recommendations.**

- 1. Encourage champions to take a more active role in developing MCA practice on the wards.
- 2. Work on up-skilling and supporting mental health practitioners on the mental health wards to use the MCA framework. This work is being facilitated by the named professional on secondment to work with staff on embedding understanding of MCA (2005).
- 3. Review training and make it more practice based including assessment tools, a focus on Human Rights and requirements of documentation, encouraging the correct use of the legal terminology of the MCA framework. This has been completed and a more simplified, case-study based training is in place.

The named professional on secondment continues to work with targeted groups in practice including the community wards in addition to formal MCA training and has developed a stronger system for managing DoLS applications. All DoLS applications are now overseen by the safeguarding team.

<u>Deprivation of Liberty Safeguards - referrals for authorisations 2018-2019</u>

| <u>Ward</u>               | <u>Q1</u> | <u>Q2</u> | <u>Q3</u> | <u>Q4</u> | Total<br>applied<br>for | Total DOLS<br>not<br>granted | Total DOLS granted |
|---------------------------|-----------|-----------|-----------|-----------|-------------------------|------------------------------|--------------------|
| Campion unit              |           |           |           |           |                         |                              |                    |
| Application made to Local | 2         | 1         | 1         | 0         |                         |                              |                    |
| <u>Authority</u>          |           |           |           |           |                         |                              |                    |
| Authorisation granted     | 2         | 1         | 1         | 0         |                         |                              |                    |
| Authorisation not granted | 0         | 1         | 0         | 0         |                         |                              |                    |
|                           |           |           |           |           | 4                       | 0                            | 4                  |
| Orchid Ward               |           |           |           |           |                         |                              |                    |

| Application made to Local           | 3 | 0 | 1 | 1  | 5  | 1           | 4  |
|-------------------------------------|---|---|---|----|----|-------------|----|
| Application made to Local Authority | 3 | U | 1 | 1  | 5  | 1           | 4  |
| Authorisations granted              | 2 | 0 | 1 | 1  | 4  |             |    |
| authorisations not granted          | 1 | 0 | 0 | 0  | 1  |             |    |
| <u>authorisations not granted</u>   | - | + | + | +  | 5  | 1           | 4  |
| Rowan Ward                          |   |   |   |    |    | <del></del> | 7  |
| applications to the local Authority | 3 | 5 | 6 | 11 |    |             |    |
| authorisations granted              | 1 | 2 | 4 | 9  |    |             |    |
| authorisations not granted          | 1 | 3 | 3 | 2  |    |             |    |
|                                     |   |   |   |    | 25 | 9           | 16 |
| Ascot Ward                          |   |   |   |    |    |             |    |
| applications made to Local          | 0 | 1 | 6 | 0  |    |             |    |
| Authority                           |   |   |   |    |    |             |    |
| authorisations granted              | 0 | 0 |   |    |    |             |    |
| authorisations not granted          | 0 | 1 |   |    |    |             |    |
|                                     |   |   |   |    | 1  | 1           | 0  |
| Windsor Ward                        |   |   |   |    |    |             |    |
| applications made to local          | 0 | 1 | 3 | 0  |    |             |    |
| <u>authority</u>                    |   |   |   |    |    |             |    |
| <u>Authorisations granted</u>       |   |   |   |    |    |             |    |
| <u>Authorisations not granted</u>   |   | 1 |   |    |    |             |    |
|                                     |   |   |   |    | 1  | 1           | 0  |
| <u>Donnington Ward</u>              |   |   |   |    |    |             |    |
| Applications made to local          | 7 | 4 | 2 | 2  |    |             |    |
| <u>authority</u>                    |   |   |   |    |    |             |    |
| Authorisations granted              | 4 | 1 |   |    |    |             |    |
| Authorisations not granted          | 2 | 3 | 1 |    |    |             |    |
|                                     |   |   |   |    | 15 | 6           | 5  |
| Highclere Ward                      |   |   |   |    | 13 |             |    |
| Applications made to Local          | 5 | 0 | 2 | 1  |    |             |    |
| authority                           |   |   |   |    |    |             |    |
| Authorisations granted              | 3 | 0 |   | 1  |    |             |    |
| Authorisations not granted          |   | 0 | 1 | 0  |    |             |    |
|                                     |   |   |   |    | 3  | 0           | 3  |
| Henry Tudor Ward                    |   |   |   |    |    |             |    |
| Applications made to Local          | 1 | 0 | 0 | 4  |    |             |    |
| authority                           |   |   |   |    |    |             |    |
| Authorisations granted              | 1 | 0 | 0 |    |    |             |    |
| Authorisations not granted          | 0 | 0 | 0 |    |    |             |    |
|                                     |   |   |   |    | 5  | 0           | 1  |
| Jubilee Ward                        |   |   |   |    |    |             |    |
| Applications made to Local          | 1 | 0 | 0 | 1  |    |             |    |
| <u>authority</u>                    |   |   |   |    |    |             |    |
| <u>Authorisations granted</u>       | 0 | 0 | 0 | 0  |    |             |    |
| authorisations not granted          | 1 | 0 | 0 | 1  | 2  | 2           | 0  |
| Oakwood Ward                        |   |   |   |    |    |             |    |
| Applications made to local          | 1 | 2 | 1 | 4  |    |             |    |
| Authority                           |   |   |   |    |    |             |    |
| <u>Authorisations granted</u>       | 0 | 0 | 0 |    |    |             |    |

| Authorisations not granted | 1 | 2 | 1 | 2 |    |    |    |
|----------------------------|---|---|---|---|----|----|----|
|                            |   |   |   |   | 8  | 6  | 0  |
| <u>Totals</u>              |   |   |   |   | 69 | 26 | 33 |

Work is being undertaken by the safeguarding named professional to increase the level of knowledge regarding criteria for referral for DOLs assessment and support staff to identify when a deprivation of liberty is likely to be occurring. There are applications awaiting assessment by the Local Authority. Some applications were not completed before the patient was discharged.

#### **Move to Liberty Protection Safeguards from DoLS**

As described earlier following the Mental Capacity Act Amendment Bill 2019 the Trust are working with colleagues across the health economy in Berkshire and with Local Authority colleagues to plan the implementation of the new guidance in close liaison with the Trust board.

# 12. Child Protection Supervision

A formal process for child protection supervision enables front line staff to review cases, reflecting and analysing current progress, assessing risk, planning and evaluating care and interventions in complex clinical situations. All named professionals working for the trust have received specialist child protection supervision training from the NSPCC.

The Berkshire Healthcare child protection supervision policy CCR123 provides guidance for staff and has standardised child protection supervision across the trust. All health visitors and school nurses receive individual supervision from a named professional at least four monthly, with newly qualified staff receiving supervision two monthly for the first six months. Staff can request extra supervision sessions if required. All health visitors and school nurses received a minimum of three sessions of child protection supervision during 2018/19, a positive achievement for the safeguarding team. Group supervision was provided to all CAMHS teams, community children's nurses and to community children's respite nursing teams. Group child protection supervision was also facilitated to the teams of specialist looked after children nurses and to all allied professionals who work directly with children. Child protection supervision is provided to the young person health advisors at the Garden Clinic and a named nurse attends the bi-monthly safeguarding meeting at the sexual health clinic. Group supervision is also facilitated for staff at the Minor Injuries Unit (MIU) at West Berkshire Community Hospital and to the perinatal mental health team. An on-call advice line manned by named professionals provides safeguarding advice as required.

Named professionals attend health visitor and school nursing locality meetings quarterly to disseminate current safeguarding information to teams and to provide an opportunity for face to face contact with all bands of staff. Child protection supervision is also now provided to the Berkshire Healthcare nursery managers as required, following learning from the Slough partnership review relating to Child MB.

Compliance to child protection supervision by CAMHS staff has continued to rise with all staff receiving at least two sessions in 2018/19 and a much greater engagement in sessions. The Named Professional (mental health) has worked extremely hard to continue to increase compliance offering a flexible service across the Trust to make attendance at child protection supervision easier for staff to access. All supervision sessions

are now dedicated sessions and are no longer an add-on to team meetings. Monthly supervision is now offered to staff at the Tier four Berkshire Adolescent Unit and 100% compliance to three sessions was achieved in the unit.

The safeguarding team receive regular safeguarding supervision from the designated nurses and the Head of Safeguarding, Named Doctor and Named Nurse (Mental Health) have monthly peer supervision. The named doctor has supervision from the designated doctor for child protection.

The provision of telephone advice and support is an integral part of the service delivered by the safeguarding team. The 'On-Call' urgent advice line where a named professional is immediately available for advice across Berkshire Healthcare during the hours of 9-5 pm Monday to Friday, is well used by staff with over 600 enquiries from staff during 2018/19 from a wide variety of services across the trust. The Domestic Abuse Specialist Practitioner is also available for individual advice around issues relating to domestic abuse and support to staff across Berkshire Healthcare. An on-call advice line for safeguarding adult enquiries has been developed to replicate the safeguarding children advice line and has been very well received by staff.

#### 13. Prevent

Prevent is part of the UK's counter-terrorism strategy, CONTEST. The Prevent agenda is outlined in the Department of Health document 'Building Partnerships, staying safe – the Healthcare Sector's contribution to HM Government's Prevent Strategy: for Healthcare Organisations'. The Trust has a duty to adhere to the Prevent duty. Its aim is to stop people being drawn into terrorism or supporting terrorism.

The Prevent Lead for the Trust is assisted by two named professionals for safeguarding children. Links with the Local Authority and the police remain strong. The Trust is represented on all six Channel panels and Prevent management meetings across the six Localities in Berkshire. Prevent training is part of induction and compliance to training this year has increased to over 96% of staff for both Wrap and basic awareness training. This is a significant achievement and the team have continued to offer training to groups in their bases as well as part of the general training programme in order to make it easier for staff to access training and increase compliance. Knowledge of PREVENT is refreshed through all the safeguarding refresher courses offered by the Trust.

Staff have demonstrated an awareness of Prevent and its purpose, with several concerns being discussed with the Prevent Leads and some of those referrals meeting the threshold to be considered by the Channel panel and in turn being adopted by the panel. The safeguarding team are available for telephone advice and have seen an increase in calls for advice on Prevent matters.

In November 2017, the Government released guidance for mental health services in exercising duties to safeguard people from the risk of radicalisation. Mental Health services are now required to review a referral within 2-3 days. This fits into our current structure where initial referrals are screened by Common Point of Entry (CPE) and then referred to the correct service. There are clear pathways for emergency and routine secondary mental health care. For secondary assessment, a contact must be made within one week however, an assessment is then in line with local and national access standards.

## 14. Modern Slavery

There is now a duty to notify the Home Office of potential victims of Modern Slavery and this came into force in November 2015. This duty is set out in Section 52 of the Modern Slavery Act 2015 and applies to public authorities. Although health organisations are not yet compelled to notify, under safeguarding arrangements, consideration should be given to making a referral to the policy or local authority should a health practitioner have reason to believe a vulnerable adult or child is being exploited or trafficked.

A Modern Slavery Sub-group has been set up in Slough and Bracknell led by the police and the Community Safety Partnership and a named professional for safeguarding adults is a working member of that group. Modern Slavery training has been offered locally and nationally and has been attended by the named professionals. Modern Slavery is included in all trust safeguarding adult and children training.

## 15. Multi-Agency Safeguarding Hubs (MASH)

During 2016/17 six multi-agency safeguarding hubs were established in each locality across Berkshire and staff were recruited into the safeguarding team to provide health information in the hubs. Named professionals continue to be members of both the strategic and operational MASH sub-groups to develop the way the Hubs function. Two different models have been adopted in Berkshire. In East Berkshire, two health co-ordinators collect health information for the hub from across the health economy supported in the role by Health Visitors who take part in MASH assessments. In the west of Berkshire, three specialist community health practitioners undertake the health role. Management support and supervision is provided by named professionals in the team.

#### 16. Summary

2018/19 has been another busy year of continuous development of safeguarding practice and joint team working on adult and child safeguarding matters. The Care Act (2014) and Care and Support Statutory Guidance has clarified organisations responsibilities relevant to safeguarding adults vulnerable to abuse or neglect. This legislation along with safeguarding children legislation underpins the standards and principles of safeguarding practice at the heart of patient care in the Trust and provides a legal requirement to work closely with local authorities and other partnership members of the Berkshire multi-agency safeguarding response. Team Achievements 2018 – 2019 have included the following:

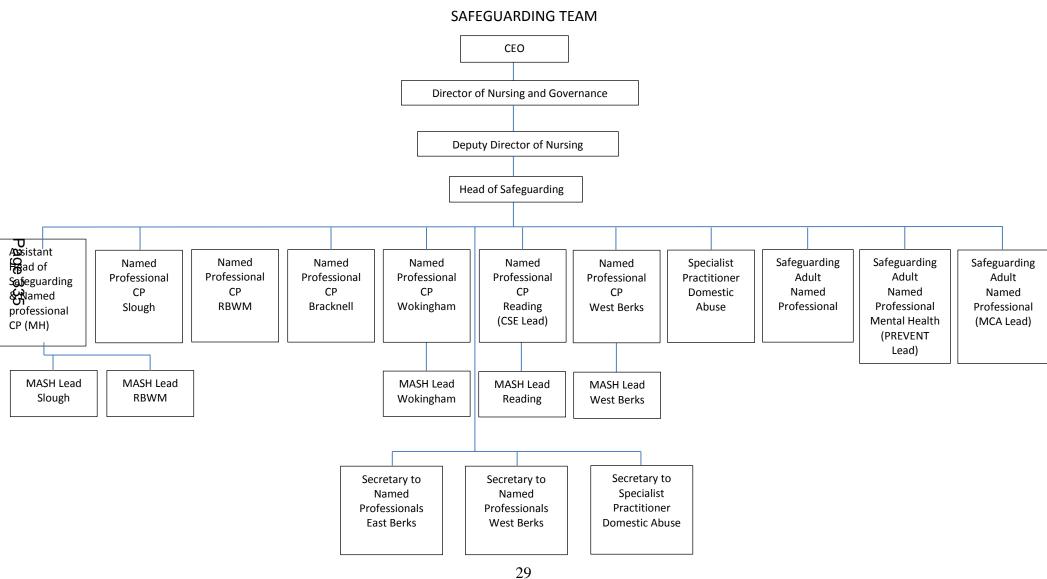
- Continued development of the safeguarding adult named professional role at Prospect Park
  Hospital to provide daily safeguarding oversight and advice and support to staff;
- Development of an on-call adult advice line to mirror the child protection advice line which is already well established;
- Higher level of compliance to safeguarding training and MCA/DoLS training;
- Drive to increase compliance to PREVENT training resulted in compliance at over 96%;
- New secondment fulltime post to continue the work of improving compliance to the Mental Capacity Act recruited to;
- Increase in compliance to group child protection supervision for CAMHS staff, Willow House staff and allied professionals who work with children;

- Specialist practitioner domestic abuse extended role to support adult safeguarding matters as well as domestic abuse affecting children;
- Active participation in multi-agency adult and child serious case reviews and work to influence change in systems and embed learning;
- Three safeguarding children forums with theme of Domestic Abuse following learning from local serious case reviews;
- Regular screen saver messages to remind staff of key safeguarding issues and production of two safeguarding newsletters;
- Participation in multi-agency safeguarding training and high level of compliance across LSCB's and SAB's and their corresponding sub-groups;
- Four safeguarding audits including monitoring and implementation of action plans;
- Evidence of increased referrals from health into MARAC.
- Sexual safety work at Prospect Park Hospital
- Reduction of number of patient absconsions from Prospect Park Hospital and improved reporting/follow-up
- Improved system for monitoring section 42 investigations and staff skills in producing reports;

#### **Future Plans**

- Continue to embed good practice in safeguarding;
- Provide responsive safeguarding advice to all Trust staff via the on-call advice line;
- Secondment post to become permanent named professional for adult safeguarding post to continue to support staff in application of the Mental Capacity Act;
- All safeguarding training to be minimum 90% compliant across the Trust;
- Align all training to intercollegiate document requirements:;
- CAMHS child protection supervision compliance to three sessions annually to be minimum 85%;
- Share learning across the Trust in multi-media formats and through patient safety and quality groups and the leadership sub-groups;
- Continue to provide strong representation on the Multi-Agency Safeguarding Arrangements and Local Safeguarding Adult Boards;
- Continue to develop services in regard to prevention, disruption and reporting of exploitation;
- Embed making safeguarding personal into practice;
- Train Adult safeguarding named professionals in reflective safeguarding supervision;
- Offer joint group adult and children supervision at PPH to encourage think family approach

#### **APPENDIX ONE**



Classification: UNCLASSIFIED

# **Adults and Children Safeguarding**

# Our vision: To be recognised as the leading community and mental health service provider by our staff, patients and partners.

## True North: goal 1 - Harm-free care

✓ To provide safe services, prevent self-harm and harm to others We will do this by:

- Monitoring and updating compliance to Section 11 of Children Act 1989 and Safeguarding self-assessment audit, reporting to Board and providing assurance to LSCB monitoring groups.
- Continuing to utilise screensavers to highlight key messages
- Ensuring the safeguarding team maintain skills and knowledge through attendance at local and national training opportunities.
- Continuing to align training to intercollegiate documents
- Continuing to participate in multi agency audits, serious case reviews and partnership reviews and to share learning with staff through forums etc.

## True North: goal 3 - Good patient experience

√ To provide good outcomes from treatment and care
We will do this by:

•Continuing to provide responsive children safeguarding advice to all Trust staff via the oncall advice line.

·Continuing to implement the Pan Berkshire escalation policy for Safeguarding.

·Accessing specialist training and supervision via Trust and external providers for safeguarding team

.Providing specialist child protection supervision to all staff who work directly with children

·Strengthening team knowledge of Prevent and ways to support staff

## True North: goal 2 - Supporting our staff

✓ To strengthen our highly skilled and engaged workforce and provide a safe working environment

#### We will do this by:

- Building on the "think family" approach to all training.
- Working alongside staff to embed knowledge of MCA and DOLS into everyday practice.
- Offering joint group adult and children reflective supervision at PPH to encourage a think family approach.
- Maintaining the presence of the adult safeguarding lead during the working week at Prospect Park Hospital providing support and advice.
- Maintaining and reviewing the children and adult safeguarding advice line to inform future training needs.
- Continuing to monitor safeguarding practice through audit and safeguarding clinical supervision.
- Maintaining and improving the safeguarding page on Team net

# True North: **goal 4** - Money matters

✓ To deliver services that are efficient and financially sustainable We will do this by:

- Improving the use of Skype and SMART working to reduce travel and maximise team efficiency.
- Evaluating the efficiency of our training through objective auditing.
- Considering eLearning as an option e.g. WRAP, MCA and Level 1 adult.
- Requesting a slot at the leadership forum to promote safeguarding to managers as a fundamental part of all care provided by teams across the Trust

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#### **Annual Safeguarding Report 2018-19**

#### Contribution to the West of Berkshire Safeguarding Adults Board.

#### **Key achievements**

- Safeguarding (adults) clinical governance has continued throughout the year and the safeguarding team medical clinical lead role is a valued part of the safeguarding team. There are vacancies in both NCG and UCG to recruit during 2019.
- Safeguarding concerns continue to be raised via the Datix incident reporting system this
  assists in giving feedback to the individual who raised the concern where available, and
  means that only one reporting mechanism is used for reporting concerns.
- Learning from SAR's continues to be included in Safeguarding training.
- The Lead Nurse Adult Safeguarding continues to be part of the SAR panel.
- Safeguarding Champions conference was held in November, this was evaluated positively by participants. A very successful half day champions meeting was held in June 2019 to consolidate learning. Another conference is planned for later in 2019 focusing on Learning Disability.

#### Mental Capacity and Deprivation of Liberty Safeguards (DoLS)

- Staff knowledge of the Mental Capacity Act has improved. While this is a good assessment of
  the status of the Trust, work is still required to embed the knowledge and skills of staff in
  application of the MCA.
- Training continues with MCA /DoLS sessions on staff induction and as part of the core mandatory training day alongside ad hoc sessions for specific groups of staff.
- Enhanced mental capacity training has been offered on alternate months through 2017-18, and has continued through 2018-19. Mental Capacity training also forms part of the managing 1:1 day.
- Spot check audits undertaken following the introduction of EPR have highlighted a reduction in the documentation of mental capacity assessments, by either the use of paper assessment forms or the electronic assessment.
- The number of DoLS applications was a key performance indicator report to the CCG as part of the Quality Schedule and in the integrated Board report monthly. The number of applications made last year was similar to 2017/18.
- 15 DoLS were granted this year out of the 56 referrals made; reasons for this is :the patient was discharged/ transferred to another hospital or they regained mental capacity before the DoLs assessments had been undertaken or completed by the local authority.

#### Adult safeguarding concerns

- All concerns raised by our staff about potential harm or abuse outside of the Trust are reviewed by the local authority and if necessary investigated through the safeguarding process.
- For externally raised safeguarding concerns a fact finding exercise is carried out by the Lead Nurse Adult Safeguarding. This information is given to the local authority for them to decide on the type of investigation and outcome of the concern. The most cases the safeguarding concerns raised against the Trust continue to be around pressure damage. In the majority of cases there continues to be a lack of information provided re pressure damage as part of the discharge process.
- Safeguarding concerns reported within or raised to the Trust related to staff members are investigated under our Managing Safeguarding Concerns and Allegations Policy.

#### Prevent (anti-terrorism)

 No Prevent concerns were discussed with outside agencies this year. Members of the Safeguarding team have attended the South East Prevent workshop and regularly attend West Berkshire Prevent steering group.

#### **Domestic Abuse**

• The Domestic Abuse Working Group continues with representatives from each care group. This group formed part of the consultation in reviewing the Domestic Abuse Policy. Work is on-going to embed principals of good practice throughout the Trust including raising the awareness, routine enquiry and encouraging the use Domestic Abuse Stalking and Harassment (DASH) forms. The Named Midwife for Child Protection regularly attends the three Local Authority Multi- Agency Risk Assessment Conferences (MARAC's). Victims identified as being High Risk by MARAC representatives, continue to be flagged on EPR for 12 months following discussion.

#### Key areas of work for 2019/20

- Promote the safeguarding toolkit.
- Support the multi-disciplinary safeguarding champions and care group safeguarding adult leads to embed safeguarding across the Trust.
- Extend the timeframe of the Domestic Abuse Task and Finish Group to support a review of training.
- Supporting the Safeguarding Adult Board work on safeguarding and pressure ulcer prevention and financial abuse
- Promote the importance of clear documentation of mental capacity; this can be by either use of paper or electronic documentation of Mental Capacity assessments.

- Participating in implementation of the Mental Capacity (Amendment) Act May 2019, new Liberty Protection Safeguards
- Participate in a training needs analysis against the Intercollegiate Document, Adult Safeguarding: Roles and Competencies for Health and Social Care Staff 2018

## On-going challenges / risks:

- Year on year increase in activity for vulnerable groups with multiple co-morbidities and complex psychosocial problems. This inevitably impacts on the capacity of the Safeguarding and clinical teams to respond.
- The number of patients admitted with disordered eating/eating disorders.
- Elderly patients living with dementia delayed in hospital.
- Increasing and maintaining workforce knowledge of the Mental Capacity Act and DoLS and application in practice.
- Increasing and maintaining workforce knowledge of domestic abuse and application in practice.
- Supporting patients and the staff caring for them where there is homelessness or other external service/resource issues beyond our control
- Service users who don't reach thresholds for statutory or voluntary services and the differences between local authorities
- Implementation of new legislation and statutory guidance specifically the Mental Capacity (Amendment)
  Act May 2019, new Liberty Protection Safeguards and the Intercollegiate Document, Adult Safeguarding:
  Roles and Competencies for Health and Social Care Staff 2018

