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To: Councillor Wheeler, Convener; Councillor Bell and Graham, Vice Convener; and Councillors Cormie, Delaney, Lesley Dunbar, Jackie Dunbar, Henrickson, Lumsden, Macdonald, McLellan, Stewart and Townson.

Town House,
ABERDEEN 04 November 2019

OPERATIONAL DELIVERY COMMITTEE

The Members of the **OPERATIONAL DELIVERY COMMITTEE** are requested to meet in **Committee Room 2 - Town House** on **TUESDAY, 12 NOVEMBER 2019 at 2.00 pm.**

FRASER BELL
CHIEF OFFICER - GOVERNANCE

BUSINESS

DETERMINATION OF URGENT BUSINESS

- 1 There are no urgent items at this time

DETERMINATION OF EXEMPT BUSINESS

- 2 There are none at this time.

DECLARATIONS OF INTEREST

- 3 Members are requested to intimate any declarations of interest

REQUESTS FOR DEPUTATION

- 4 There are no requests for deputation at this time

PETITION

- 5 Weight restriction to stop HGV's using School Road/ Golf Road/ Park Road and Park Street

A petition was submitted and had the necessary signatures to be considered at committee. "We the undersigned petition the council to introduce a weight restriction to stop HGV's from using School Road / Golf Road Park Road and Park Street and to ask the council to write to Police Scotland to consider the installation of speed cameras along School Road and Golf Road in Seaton."

MINUTE OF THE PREVIOUS MEETING

- 6 Minute of the Previous Meeting of 17 September 2019 - for approval (Pages 5 - 12)

COMMITTEE PLANNER

- 7 Committee Business Planner (Pages 13 - 20)

NOTICES OF MOTION

- 8 There are no reports under this heading

REFERRALS FROM COUNCIL, COMMITTEES AND SUB COMMITTEES

- 9 Referral from Licensing Committee of 29 October 2019 (Pages 21 - 22)

FINANCE, PERFORMANCE, RISK AND SERVICE WIDE ISSUES

- 10.1 Performance Report - COM/19/396 (Pages 23 - 64)

GENERAL BUSINESS

- 10.2 Joint Inspection of Children's Services - OPE/19/408 (Pages 65 - 114)

- 10.3 Risk Register - OPE/19/409 (Pages 115 - 168)

EHRIA's related to reports on this agenda can be viewed at
[Equality and Human Rights Impact Assessments](#)

To access the Service Updates for this Committee please use the following link:
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OPERATIONAL DELIVERY COMMITTEE

ABERDEEN, 17 September 2019. Minute of Meeting of the OPERATIONAL DELIVERY COMMITTEE. Present:- Councillor Wheeler, Convener; Councillors Bell and Graham, Vice-Conveners; and Councillors Cormie, Delaney, Donnelly (as substitute for Councillor Stewart), Flynn (as substitute for Councillor Jackie Dunbar), Grant (as substitute for Councillor Lesley Dunbar), Henrickson, Laing (as substitute for Councillor Lumsden from item 9 onwards), Lumsden (for items 1 to 8), Macdonald, McLellan and Townson.

The agenda and reports associated with this minute can be found [here](#).

Please note that if any changes are made to this minute at the point of approval, these will be outlined in the subsequent minute and this document will not be retrospectively altered.

CONFIDENTIAL BUSINESS

1. The Committee was advised that the report listed at item 12.1 on the agenda was to be heard in private and treated as confidential information in terms of Section 50(A)(3)(b) of the Local Government (Scotland) Act 1973

The Committee resolved:

to note that item 12.1 be heard in private and treated as confidential information in terms of Section 50(A)(3)(b) of the Local Government (Scotland) Act 1973.

WEIGHT RESTRICTION TO STOP HGVS USING SCHOOL ROAD/ GOLF ROAD/ PARK ROAD AND PARK STREET

2. The Clerk advised that at the request of the petitioner, the petition would be heard and considered at the following Committee meeting on 12 November 2019.

The Committee resolved:-

to note the information provided.

MINUTE OF THE PREVIOUS MEETING OF 16 MAY 2019

3. The Committee had before it the minute of the previous meeting of 16 May 2019, for approval.

The Committee resolved:-

to approve the minute as a correct record.

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17 September 2019

COMMITTEE BUSINESS PLANNER

4. The Committee had before it the committee business planner as prepared by the Chief Officer – Governance.

The Committee resolved:-

- (i) to request that officers investigate the position in relation to item 4 (South College Street/Queen Elizabeth Bridge junction) and to send an update to members in this regard;
- (ii) to agree to remove items 5 (Child Poverty), 6 (Bring your own device), 8 (Various small scale traffic management stage 3), 10 (Road Safety Plan), 11 (Performance Report) and 12 (Housing Case);
- (iii) to agree to remove item 15 (Hydrogen Buses and Facilities in Aberdeen) as this had now transferred to City Growth and Resources Committee; and
- (iv) to otherwise note the information on the business planner.

PERFORMANCE REPORT - COM/19/098

5. The Committee had before it a report by the Chief Operating Officer and the Director of Customer Services, which presented Committee with the status of key performance measures relating to the Operations function.

The report recommended:-

that the Committee provide comments and observations on the performance measures in relation to the Operations function.

The Committee resolved:-

- (i) to note that a report was due to be submitted to the Audit, Risk and Scrutiny Committee on VOIDS; and
- (ii) to otherwise note the information provided in the Performance Report.

BRING YOUR OWN DEVICE POLICY - CUS/19/304

6. The Committee had before it a report by the Director of Customer Services, which sought approval of the Bring Your Own Device (BYOD) Policy.

The report recommended:-

that the Committee approve the BYOD Policy.

The Committee resolved:-

- (i) to request that a Service Update be issued to Members after 12 months of the policy being implemented, with details on how successful the policy had been

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- with take up rates, and providing details on any possible cost saving to the Council; and
- (ii) to otherwise approve the BYOD Policy.

VARIOUS SMALL SCALE PROPOSALS - STAGE 3 - OPE/19/335

7. The Committee had before it a report by the Chief Operating Officer, which considered objections that had been lodged with respect to proposed Traffic Regulation Orders (TROs) at the public advertisement stage.

The report recommended:-

that the Committee –

- (a) acknowledge the objections received as a result of the statutory consultation; and
- (b) overrule the objections received and approve the order “The Aberdeen City Council (Malcolm Road, Bucksburn, Aberdeen) (Prohibition of Waiting) Order 210X” as originally envisaged.

The Committee resolved:-

to approve the recommendations contained within the report.

ROAD SAFETY PLAN - OPE/19/334

8. The Committee had before it a report by the Chief Operating Officer, which introduced the latest Road Safety plan for Aberdeen City 2019-2022 which included an update on local road casualty performance and outlined actions to assist in casualty reduction.

The report recommended:-

that the Committee approve the Road Safety Plan for Aberdeen City 2019-22.

The Committee resolved:-

- (i) to thank officers for their continued efforts and hard work with the Road Safety Plan; and
- (ii) to approve the recommendation contained within the report.

ROADS WINTER SERVICE PLAN 2019-20 - OPE/19/337

9. The Committee had before it a report by the Chief Operating Officer, which presented the proposed Roads Winter Service Plan for 2019 and highlighted changes from previous years. The report also sought to address the issues raised during the budget setting process for 2019-20.

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The report recommended:-

that the Committee –

- (a) approve the “Roads Winter Service Plan 2019-2020” including the changes made to the priority hierarchy for roads treatments; and
- (b) delegate authority to the Chief Officer – Operations and Protective Services to, following consultation with the Chief Officer – Finance, continue to deliver the Winter Maintenance Service.

The Committee resolved:-

- (i) to note that a briefing would be organised in due course for Elected Members in regard to the winter maintenance for roads; and
- (ii) to otherwise approve the recommendations.

SCOTTISH HOUSING REGULATOR - ANNUAL ASSURANCE STATEMENT - CUS/19/376

10. The Committee had before it a report by the Chief Officer – Early Intervention and Community Empowerment, which sought approval for the Council’s Annual Assurance Statement which must be submitted to the Scottish Housing Regulator by 31 October 2019.

The report recommended:-

that the Committee approve the Annual Assurance Statement for submission to the Scottish Housing Regulator.

The Convener, seconded by the Vice Convener Councillor Bell, moved:-

That the Committee approve the recommendation contained within the report.

Councillor Delaney, seconded by Councillor Henrickson, moved as an amendment:-

That the Committee –

- (1) Declines to approve the Annual Assurance Statement appended to this report for submission to the Scottish Housing Regulator and instructs the Director of Customer Services to report back to the next meeting of this Committee with additional evidence of compliance in order that the Committee may (if satisfied with such evidence) so approve the Statement at that time; and
- (2) Instructs the Director of Customer Services to write to the Scottish Housing Regulator to inform them that the 31 October deadline will not be met and to seek an extension in this regard.

On a division there voted:- for the motion (12) – the Convener, and Councillors Bell, Cormie, Donnelly, Flynn, Grant, Graham, Henrickson, Laing, Macdonald, McLellan and Townson; for the amendment (1) – Councillor Delaney.

The Committee resolved:-

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to adopt the motion and therefore approve the recommendation contained within the report.

In terms of Standing Order 31.7, Councillor Delaney intimated his dissent against the decision of the Committee.

CHILD POVERTY - CUS/19/375

11. The Committee had before it a report by the Chief Operating Officer, which outlined the requirements on Local Authorities and Health Boards under the Child Poverty (Scotland) Act 2017, to identify actions taken in 2018/19 to tackle child poverty, and to propose the Local Outcome Improvement Plan 2016-26 be adopted as the local Child Poverty Action Plan for the years 2019-22.

The report recommended:-

that the Committee –

- (a) note the content of the report; and
- (b) approve the adoption of the Local Outcome Improvement Plan as the Child Poverty Action Plan for the years 2019-22.

The Committee resolved:-

- (i) to thank officers for their efforts around producing the Child Poverty Action Plan; and
- (ii) to otherwise approve the recommendations contained in the report.

In accordance with the decision recorded under article 1 of this minute, the following item was considered with the press and public excluded.

HOUSING CASE - CUS/19/370

12. The Committee had before it a report by the Chief Officer – Early Intervention and Community Empowerment, which sought approval for a housing transfer for a tenant which currently sat outwith officers' delegated authority under the scheme of allocations.

The report recommended:-

that the Committee approve a transfer for the tenant to a 3 bedroom property in the city.

The Committee resolved:-

- (i) to note that officers would confirm the situation in regard to what Councillors would be excluded from in terms of future housing cases; and
- (ii) to otherwise approve the recommendation contained within the report.

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- Councillor John Wheeler, Convener

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	A	B	C	D	E	F	G	H	I	
1	OPERATIONAL DELIVERY COMMITTEE BUSINESS PLANNER The Business Planner details the reports which have been instructed by the Committee as well as reports which the Functions expect to be submitting for the calendar year.									
2	Report Title	Minute Reference/Committee Decision or Purpose of Report	Update		Chief Officer	Directorate	Terms of Reference	Delayed or Recommended for removal or transfer, enter either D, R, or T	Explanation if delayed, removed or transferred	
3	12 November 2019									
4	South College Street/Queen Elizabeth Bridge Junction	CH&I - 8/11/17 - To instruct the interim Director of Communities, Housing and Infrastructure to report back to this Committee on a preferred option for South College Street/Queen Elizabeth Bridge junction.			Joanna Murray / David Dunne	Strategic Place Planning	Place	5	D	This project is awaiting completion of Phase 1 of the South College Street Project and updated traffic counts as a result of the opening of the AWPR. Estimated Committee date 2021.
5	Council Housing Rent Management and Universal Credit Review of Implementation of Full Service	ODC 14/03/19 - To note that a report would be brought back to the November meeting on the progress being made, which would also provide details on what was being done to support tenants. To review Universal Credit after the first year of implementation and identify any learnings or recommendations that the council has adopted to support the transition to full UC service.			Neil Carnegie	Early Intervention and Community Empowerment	Customer	TBC	D	Delayed to enable cognisance to be taken of the recently approved Child Poverty Action Plan and whether any changes to Universal Credit are required. This will enable the report to provide the awaited information to Education Operational Delivery Committee regarding school meals, closer to the end of the school year as per the initial EODC instruction.

	A	B	C	D	E	F	G	H	I
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2									
6	Petition - School Road	A petition was submitted and had the necessary signatures to be considered at committee. "We the undersigned petition the council to introduce a weight restriction to stop HGV's from using School Road / Golf Road Park Road and Park Street and to ask the council to write to Police Scotland to consider the installation of speed cameras along School Road and Golf Road in Seaton."	The petitioner asked that it be moved to November in order to gain information from Police Scotland. On agenda	Doug Ritchie/Vycki Ritson	Operations and Protective Services	Operations	GD 5		
7	Performance Report	The purpose of this report is to present Committee with the status of key performance measures relating to the Operations Directorate (non-Education).	On agenda	Louise Fox	Business Intelligence and Performance Management	Commissioning	1 and 3		
8	Risk Register	To present the Customer Function Risk Register by Cluster in accordance with the Risk Management Framework and Committee Terms of Reference	On agenda	Graeme Simpson, Jacqui McKenzie, Mark Reilly, Paul Smith, Andrew Howe, Derek McGowan	Customer Experience/ External Communications / Digital and Technology/ Early Intervention and Community Empowerment/ Operations and Protective Services/ Integrated Children's and Family Services	Various	9		
9	Joint Inspection of Children's Services	To report on inspection findings.	On agenda	Alison McAlpine/ Kymme Fraser	Integrated Children's and Family Services	Operations	1		

	A	B	C	D	E	F	G	H	I
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2									
10	Out of Authority Residential Placements	EOD Committee 17/01/19 - To request that officers submit separate committee reports to a future meeting of the Education Operational Delivery Committee in respect of Out of Authority Placements. This report may also need to be submitted to Operational Delivery Committee		Graeme Simpson	Integrated Children's and Family Services	Operations	1, 2	R	This is being reported to EODC and a service update will be provided to this committee after the decision of EODC.
11	Windmill Brae	ODC 19/04/18 - To request that a report be brought back to Committee on an update in regards to Windmill Brae.		Ross Stevenson	Operations and Protective Services - Mark Reilly	Operations	3 and 4	D	The Statutory Consultation is taking considerably longer than anticipated due to the complexity of the proposals and the number of responses from residents and businesses. Additional surveys had to be carried out and further meetings to be arranged with all concerned. Move to March 2020.

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2									
12	Policy that Specifies the Existing Granite Sett and Lock Block Streets - NOM Former Cllr Corall	Council 15/03/17 referred the terms of the motion to Communities, Housing and Infrastructure Committee. "agrees to instruct the Interim Director of Communities, Housing and Infrastructure to develop a policy that specifies: a. the location of existing granite sett and lock block streets; b. which ones should be maintained; and c. what maintenance procedure should be used; and gives a commitment that any future repair work will be carried out sympathetically and appropriately."		Angus MacIver/ Paul Davies	Operations and Protective Services - Mark Reilly	Operations	GD 7.1	D	Policy to go before CMT for approval and due to deadlines this will now go to January committee.
13	Community Learning Centre and leased Community Centre provision	Council Budget 05/04/19 - To instruct the Chief Officer - Early Intervention and Community Empowerment to undertake a review of Community Learning Centre and leased Community Centre provision to ensure best value, appropriate direction and scrutiny of service provision, and report to the relevant Committee on the implementation of that review		Derek McGowan	Early Intervention and Community Empowerment	Customer	TBC	D	Meeting is scheduled early Nov 2019 with wider stakeholders to consider the initial findings from the review. To allow for any feedback to be incorporated into the final report it is recommended to present the report at the next available committee.
14	09 January 2020								
15	Autism Strategy and Action Plan	ODC 17/01/19 - To instruct that annual reports would be submitted on the progress of implementation of the Action Plan.		Jenny Rae	Health and Social Care Partnership	Health and Social Care Partnership	GD 7.1		

	A	B	C	D	E	F	G	H	I
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2									
16	Scottish Road Works Commissioner Annual Performance	Annual report on performance from the Scottish Road Works Commissioner.	Delayed by two cycles as the Road Commissioner advised that the issue of the annual figures had been delayed and will not be issued until some time during the next quarter.	Angus MacIver/ Kevin Abercrombie	Operations and Protective Services	Operations	Purpose 1		
17	Performance Report	The purpose of this report is to present Committee with the status of key performance measures relating to the Operations Directorate (non-Education).		Louise Fox	Business Intelligence and Performance Management	Commissioning	1		
18	Various Small Scale Traffic Management Stage 2	To present the results of the initial statutory consultation process undertaken. (Will only be presented if representations are received during the statutory consultation process)			Operations and Protective Services - Mark Reily	Operations	3		
19	05 March 2020								
20	Performance Report	The purpose of this report is to present Committee with the status of key performance measures relating to the Operations Directorate (non-Education).		Louise Fox	Business Intelligence and Performance Management	Commissioning	1		
21	Various Small Scale Traffic Management Stage 2	To present the results of the initial statutory consultation process undertaken. (Will only be presented if representations are received during the statutory consultation process)			Operations and Protective Services - Mark Reily	Operations	3		
22	21 May 2020								
23	Committee Annual Effectiveness Report	To present the annual effectiveness report for the Committee	To be reported May 2020	Fraser Bell	Governance	Governance	GD7.5		
24	Performance Report	The purpose of this report is to present Committee with the status of key performance measures relating to the Operations Directorate (non-Education).		Louise Fox	Business Intelligence and Performance Management	Commissioning	1		

	A	B	C	D	E	F	G	H	I
	Report Title	Minute Reference/Committee Decision or Purpose of Report	Update		Chief Officer	Directorate	Terms of Reference	Delayed or Recommended for removal or transfer, enter either D, R, or T	Explanation if delayed, removed or transferred
2									
25	Various Small Scale Traffic Management Stage 2	To present the results of the initial statutory consultation process undertaken. (Will only be presented if representations are received during the statutory consultation process)			Operations and Protective Services - Mark Reily	Operations	3		
26	10 September 2020								
27	Performance Report	The purpose of this report is to present Committee with the status of key performance measures relating to the Operations Directorate (non-Education).		Louise Fox	Business Intelligence and Performance Management	Commissioning	1		
28	Various Small Scale Traffic Management Stage 2	To present the results of the initial statutory consultation process undertaken. (Will only be presented if representations are received during the statutory consultation process)			Operations and Protective Services - Mark Reily	Operations	3		
29	19 November 2020								
30	Performance Report	The purpose of this report is to present Committee with the status of key performance measures relating to the Operations Directorate (non-Education).		Louise Fox	Business Intelligence and Performance Management	Commissioning	1		
31	Various Small Scale Traffic Management Stage 2	To present the results of the initial statutory consultation process undertaken. (Will only be presented if representations are received during the statutory consultation process)			Operations and Protective Services - Mark Reily	Operations	3		
32	Date to be confirmed **Can you please review the below and advise on when these items will be reported***								

	A	B	C	D	E	F	G	H	I
	Report Title	Minute Reference/Committee Decision or Purpose of Report	Update		Chief Officer	Directorate	Terms of Reference	Delayed or Recommended for removal or transfer, enter either D, R, or T	Explanation if delayed, removed or transferred
2									
33	Cycle Path for Ferryhill School Children	At its meeting on 14 June 2017, the Petitions committee referred the matter to the CH&I Committee which at its meeting on 29 August 2017 instructed officers to undertake a feasibility study to look at options on improving cycling within the area. At its meeting on 8 November 2017, the Committee instructed the Director of Communities, Housing and Infrastructure to report back to the appropriate committee with the anticipated levels of active travel associated with the school, how any future actions should be progressed, what resources will be needed and how these can be sourced following the production of the school's travel plan.	To be reported in 2019 following the production of the Ferryhill School Travel Plan	Alan Simpson	Strategic Place Planning	Place	5	D	This report has been delayed and will be included in the review of Active Travel Action Plan.
34	Smart Bins and Digitalisation of Waste Containers	To seek approval to conduct a trial on bin fill sensors on communal bins, i.e. to trial fitting sensors in communal bins that tell us when they need emptying and record accurately how often these bins require to be serviced.	Delayed from May 2018. The initiative is linked to funding through Smarter Cities which is being explored. Funding currently being explored in order to carry out a trial To be reported to CRD Joint Committee in June to seek funding - move to 'future reports' section of planner meantime	Pam Walker	Operations and Protective Services	Operations			
35	Use of Plastic Based Materials in Roads Construction	ODC 17/01/19 -To instruct the Chief Operating Officer to bring back a report to this committee when there is sufficient evidence on the benefits of conducting a trial of this product in Aberdeen.		Paul Davies	Operations and Protective Services	Operations	3 and 5		

	A	B	C	D	E	F	G	H	I
	Report Title	Minute Reference/Committee Decision or Purpose of Report	Update		Chief Officer	Directorate	Terms of Reference	Delayed or Recommended for removal or transfer, enter either D, R, or T	Explanation if delayed, removed or transferred
2									
36	Motion by Councillors Boulton and Delaney - Suitable Bus Laybys on the Hazlehead to Westhill Road	CH&I Committee 27/08/15 resolved (i) to agree that any future development within this area should be conditioned to incorporate public transport facilities where feasible; (ii) to agree that due to the ongoing works at the Five Mile Garage in connection with the AWPR, along with the proposed expansion to the Prime Four development, no work should be carried out on introducing bus stops/laybys or pedestrian crossings on the A944 until such a time as the proposed expansion to the Prime Four development is agreed and after the AWPR becomes operational; (iii) to instruct officers to continue discussions with the developers in order to ensure that contributions are secured	Due to continued lack of new development in the area of the Prime 4 site there have been no developer's contributions to take this proposal forward at this time.	Vycki Ritson	Operations and Protective Services	Operations	Purpose 1		No date specified for reporting back as this will depend on any new development in the area of the Prime Four site.

LICENSING COMMITTEE

MINUTE OF MEETING OF 29 OCTOBER 2019

MINUTE OF MEETING OF THE TAXI AND PRIVATE HIRE CAR CONSULTATION GROUP OF 2 OCTOBER 2019

1. The Committee had had before it the minute of meeting of the Taxi and Private Hire Car Consultation Group of 2 October 2019, for approval.

With reference to article 9(A) of the minute (Bus Gates), the Convener advised that the Consultation Group agreed to request that the Committee consider referring the matter of allowing access for private hire car drivers through bus gates to the Operational Delivery Committee for their consideration, noting that taxi drivers were currently able to do so.

The Committee resolved:-

- (i) to refer the matter of allowing access for private hire car drivers through bus gates to the Operational Delivery Committee for their consideration; and
- (ii) to otherwise note the minute.

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ABERDEEN CITY COUNCIL

COMMITTEE	Operational Delivery Committee
DATE	12 th November 2019
EXEMPT	No
CONFIDENTIAL	No
REPORT TITLE	Operational Delivery Performance Report
REPORT NUMBER	COM/019/396
DIRECTOR	Rob Polkinghorne and Andy MacDonald
CHIEF OFFICER	Martin Murchie
REPORT AUTHOR	Louise Fox
TERMS OF REFERENCE	1 and 3

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to present Committee with the status of key performance measures relating to the Operations function (non-Education).

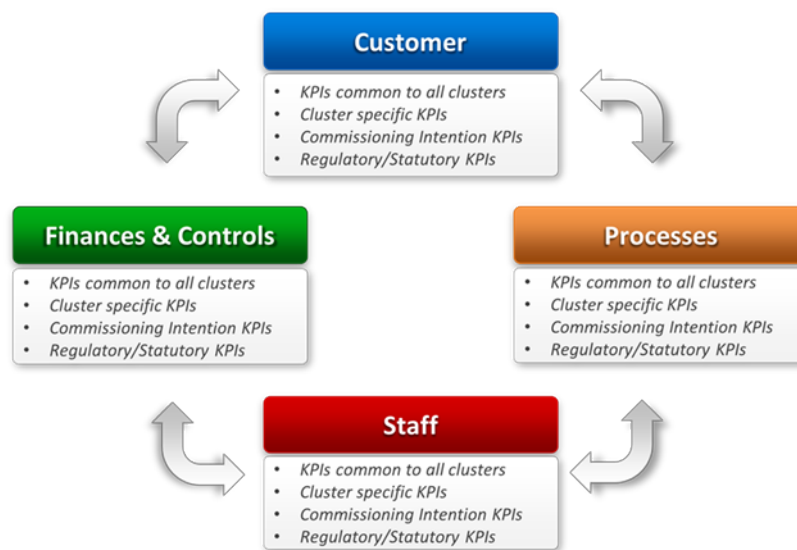
2. RECOMMENDATION(S)

- 2.1 That the Committee provide comments and observations on the performance information contained in the report Appendices.

3. BACKGROUND

- 3.1 This report is to provide members with key performance measures in relation the Operations function (non-Education).
- 3.2 On 28th March 2019, the Council's Strategic Commissioning Committee agreed a revised Performance Management Framework which set out arrangements for establishing and reporting performance measures to the Council's Committees. The Framework recognises that the City's refreshed Local Outcome Improvement Plan (LOIP) has put in place updated measures, through stretch outcomes and key improvement measures, and that these have been aligned to the Council Delivery Plan, agreed by Council on 5th March 2019. These significant changes require to be integrated within the Council's performance management arrangements.

3.3 In addition, the Framework provides an amended approach within which performance will be reported to committees. This presents performance data and analysis within four perspectives as shown below.



3.4 This report, as far as possible, reports performance up to the end of July or Quarter 1 2019/20, as appropriate. It also includes on this occasion Strategic Performance Indicator (SPI) data for 2018/19.

3.5 Appendix A provides an overview of current performance across the Operations (non-Education) function, with reference to recent trends and performance against target. It also includes, at appropriate points in the Appendix, further analysis of several performance measures which have been identified as exceptional. These are listed below:

- Fleet Compliance Incidents – Waste
- Percentage of all streetlight repairs completed within 7 days
- % Waste diverted from Landfill
- YTD % of cases reassessed as being homeless or potentially homeless within 12 months of a previous case being closed
- Gross rent Arrears as a percentage of rent due
- Average time taken to Re-let all properties (shown), Void Rent Loss and Satisfaction with the Standard of Home when moving in (**Merged**)


3.6 Within the summary dashboard the following symbols are used:

Performance Measures

Traffic Light Icon

🟢 On target or within 5% of target

🟡 Within 5% and 20% of target and being monitored

 Below 20% of target and being actively pursued

 Data only – target not appropriate

4. FINANCIAL IMPLICATIONS

There are no direct implications arising out of this report.

5. LEGAL IMPLICATIONS

There are no direct implications arising out of this report regarding legal issues.

6. MANAGEMENT OF RISK

	Risk	Low (L), Medium (M), High (H)	Mitigation
Financial	No significant related financial risks.	L	N/A
Legal	No significant related legal risks.	L	Publication of service performance information in the public domain ensures that the Council is meeting its legal obligations in the context of Best value reporting.
Employee	No significant related employee risks.	L	Oversight by Elected Members of core employee health and safety data supports the Council's obligations as an employer
Customer	Lack of sufficient access to information for citizens	L	Placing of information in the public domain contributed to by this report
Environment	No significant related environmental risks.	L	N/A
Technology	No significant related technological risks.	L	N/A
Reputational	There are no material reputational risks attached to this report	L	Reporting of service performance serves to enhance the Council's reputation for transparency and accountability.

7. OUTCOMES

Local Outcome Improvement Plan Themes	
	Impact of Report
Prosperous Economy	The Council aims to support improvement in the local economy to ensure a high quality of life for all people in Aberdeen. This report monitors indicators which reflect current economic activity within the City and actions taken by the Council to support such activity.
Prosperous People	The Council is committed to improving the key life outcomes of all people in Aberdeen. This report monitors key indicators impacting on the lives of all citizens of Aberdeen. Thus, Committee will be enabled to assess the effectiveness of measures already implemented, as well as allowing an evaluation of future actions which may be required to ensure an improvement in such outcomes.
Prosperous Place	The Council is committed to ensuring that Aberdeen is a welcoming place to invest, live and visit, operating to the highest environmental standards. This report provides essential information in relation to environmental issues allowing the Committee to measure the impact of any current action.
Enabling Technology	The Council recognises that enabling technology is central to innovative, integrated and transformed public services.

Design Principles of Target Operating Model	
	Impact of Report
Customer Service Design	The report supports a focus on the delivery of customer centric services through the scrutiny of service delivery to customers. The review and realignment of performance measures will be done in the context of a customer centric service design and delivery.
Organisational Design	The report reflects recognition of the process of organisational design and provides assurance through scrutiny of operational effectiveness. The review and realignment of performance measures will support the redesign of the organisation.
Governance	Oversight and scrutiny of operational performance, including that provided by external inspection, supports the robustness of governance arrangements between and across internal and external providers

Workforce	The performance report does and will continue to support understanding of the role and development of the workforce.
Process Design	As the interim structure embeds, development and integration of process design will be influenced by continual evaluation of the performance and outcome measures applied to service provision.
Technology	Technology is being used both in the capture and analysis of data and in the improvement planning of services.
Partnerships and Alliances	Continuous review of the outcomes, and effectiveness, of in-house services provides assurance to critical partners where there are shared objectives. Where available data sharing between partners will be used to monitor performance and support improvement.

8. IMPACT ASSESSMENTS

Assessment	Outcome
Equality & Human Rights Impact Assessment	The recommendations arising from this report do not require that full Equality and Human Rights Impact Assessment is completed
Data Protection Impact Assessment	Not required
Duty of Due Regard / Fairer Scotland Duty	Not applicable

9. BACKGROUND PAPERS

[Local Outcome Improvement Plan](#)
[Aberdeen City Council Delivery Plan](#)

10. APPENDICES (if applicable)

Appendix A – Performance Summary Dashboard and Analysis of Exceptions

11. REPORT AUTHOR CONTACT DETAILS

Louise Fox
 Strategic Performance and Improvement Officer
lfox@aberdeencity.gov.uk
 01224 522666







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Operational Delivery Committee Performance Report Appendix A

Operations and Protective Services

Building Services

1. Customer

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Percentage of repairs appointments kept	99.32%		99.29%		99.29%		96.3%
Percentage of tenants who have had repairs or maintenance carried out in the last 12 months satisfied with the repairs and maintenance service (year to date).	92.98%		92.34%		92.34%		80%

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received (stage 1 and 2) - Building Services	66		52		62		
% of complaints resolved within timescale stage 1 and 2) - Building Services	43.9%		50%		66.1%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Building Services	53%		44.2%		61.3%		
*Total No. of lessons learnt identified (stage 1 and 2) - Building Services	0		1		5		

*Lessons learnt referred to throughout this Appendix are lasting actions taken/changes made to resolve an issue and to prevent future re-occurrence for example amending an existing procedure or revising training processes. When a complaint has been upheld, action would be taken in the form of an apology or staff discussion/advice, but these actions are not classified as lessons learnt.

** Further Customer Demand PI's under development

2. Processes

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
The year to date average length of time taken to complete emergency repairs (hrs)	3.34		3.66		4.03		4.1
The year to date average length of time taken to complete non emergency repairs (days)	5.13		5.03		5.17		8.3
The year to date percentage of reactive repairs carried out in the last year completed right first time	92.07%		92.41%		92.62%		93.6
YTD How many times in the year did you not meet your statutory obligation to complete a gas safety check within 12 months of a gas appliance being fitted or last checked.	0		0		0		
The percentage of Repairs Inspections completed within 20 working day target (year to date)					100%		100%

3. Staff

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
*Sickness Absence - Average Number of Days Lost - Building Services	12.9						10
Accidents - Reportable - Employees (No In Month - Building Services)	0		1		0		
Accidents - Non-Reportable - Employees (No In Month - Building Services)	1		3		3		
Establishment actual FTE	399.46		417.04		402.39		
Staff Costs - % Spend to Date (FYB)	28.9%		36.5%		44.4%		100%

*Sickness Absence – the 10-day target for Average Number of Days Lost referred to throughout this Appendix is used to allow benchmarking against the public sector absence average of 9.7 days.

In addition, while transitioning from PSe to using CoreHR, People and Organisation have continued to use the YourHR/PSe database to produce sickness absence information in the interim. As PSe has not been updated to include new starts or remove leavers since the start of June (in line with the transition to CoreHR), it is expected that some new start

and leavers absence will not be accounted for using the current reporting process. A revised reporting process is currently under development, which will mitigate any short-term errors. There is currently a mid-November deadline for completion.

4. Finance & Controls

**** Work ongoing to develop individual service-based measures**

Environmental Services

1. Customer

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received (stage 1 and 2) - Environment	3		11		49		
% of complaints resolved within timescale (stage 1 and 2) - Environment	100%		36.4%		34.7%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Environment	100%		36.4%		32.7%		
Total No. of lessons learnt identified (stage 1 and 2) - Environment	0		0		0		

**** Further Customer Demand PI's under development**

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
Number of Partners / Community Groups with links to national campaigns - Green Thread	141		185		134		

2. Processes

Performance Indicator	July 2019	August 2019	September 2019	2019/20
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	Value	Status	Value	Status	Value	Status	Target
*Street Cleansing - LEAMS (Local Authority Environmental Audit Management System) (Conducted 3 times annually)	77%		77%		77%		90.1%
Grounds - LAMS (Land Audit Management System)	100%		83%				93%
Number of Complaints upheld by Inspector of Crematoria	0		0		0		0
Scheduled and Actual Cremations - Number of Discrepancies	0		0		0		0
Number of Scheduled and Actual Cremations	150		167		163		
% of Crematorium records found to be in order	100%		100%		100%		100%

3. Staff

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Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Environment	17.7						10
Accidents - Reportable - Employees (No In Month - Environment)	1		1		1		
Accidents - Non-Reportable - Employees (No In Month - Environment)	1		0		0		
Establishment actual FTE	321.78		326.13		317.63		
Staff Costs - % Spend to Date (FYB)	32.7%		40.8%		49.4%		100%

4. Finance & Controls

** Work ongoing to develop individual service-based measures




Facilities Management

1. Customer

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received (stage 1 and 2) - Facilities	1		4		2		
% of complaints resolved within timescale (stage 1 and 2) - Facilities	100%		75%		100%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Facilities	0%		50%		100%		
Total No. of lessons learnt identified (stage 1 and 2) - Facilities	0		0		1		

** Further Customer Demand PI's under development

2. Processes

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		Target 2019/20
	Value	Status	Value	Status	Value	Status	
Number of school lunches served in the year - Primary (YTD)	1,524,619		368,536		631,372		662,430

3. Staff

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Facilities	18.5						10
Accidents - Reportable - Employees (No In Month - Facilities)	0		0		0		
Accidents - Non-Reportable - Employees (No In Month - Facilities)	2		3		3		
*Staff Costs - % Spend to Date (FYB)	34.9%		43.5%		51.4%		100%










4. Finance & Controls

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Inspection - Number of overdue corrective actions requests as at month end	0		0		0		0

** Work ongoing to develop individual service-based measures




Fleet and Transport

1. Customer

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received (stage 1 and 2) - Fleet	1		1		0		
% of complaints resolved within timescale (stage 1 and 2) - Fleet	100%		100%		No complaints received Q2		75%
% of complaints with at least one point upheld (stage 1 and 2) - Fleet	0%		100%				
Total No. of lessons learnt identified (stage 1 and 2) - Fleet	1		1				

** Further Customer Demand PI's under development

2. Processes

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
% of Council fleet lower emission vehicles (YTD)	99.6%		99.6%		99.3%		100%

3. Staff

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Fleet	13.8						10
Accidents - Reportable - Employees (No In Month - Fleet)	0		0		0		
Accidents - Non-Reportable - Employees (No In Month - Fleet)	0		4		1		
Establishment actual FTE	33.81		33.79		30.81		
Staff Costs - % Spend to Date (FYB)	33.6%		43.5%		50.3%		100%

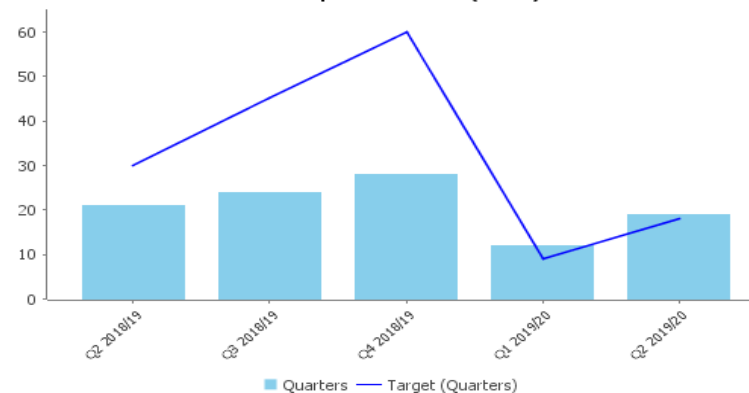
4. Finance & Controls

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
Fleet Compliance Incidents (Environmental) – Year to date	27		8		15		24
Fleet Compliance Incidents (Fleet) – Year to date	2		2		2		4
Fleet Compliance Incidents (Roads) – Year to date	10		0		2		2
Fleet Compliance Incidents (Waste) – Year to date	28		12		19		18
Vehicle, Plant and Equipment Accidents (Environmental) - Year to date	1		4		7		22
Vehicle, Plant and Equipment Accidents (Roads) - Year to date	3		1		1		2
Vehicle, Plant and Equipment Accidents (Waste) - Year to date	4		1		6		22

Fleet Compliance Incidents - Waste



OPS4172WST Fleet Compliance Incidents (Waste) - Year to date



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Why is this important?

This measure highlights unreported defects which should have been identified by service (Waste) staff during Vehicle First Use Checks.

Benchmark Information:

National benchmarks are not currently available.

Target:

The target for 2019/20 for this PI has been set at an annual total of 35.

This is what the data is saying:

The data is showing unreported defects identified by fleet staff when a vehicle is presented for other identified faults or routine maintenance. Quarter two, although reduced from quarter one, shows an accumulated figure of 19 for the year to date which is in line with the cumulative quarterly target set.

This is the trend:

The data shows a slight increase in incidents found from 2018/19, believed to be due to the continuous and increased monitoring of the Vehicle First Use Check procedures in place.

This is the impact:

The need to more defect repairs results in prolonged vehicle down time.

These are the next steps we are taking for improvement:

Fleet continue to monitor the standard of Vehicle First Use Checks, along with a third party. This PI clearly highlights the importance of thorough and ongoing First Use Vehicle Checks. The data found is shared directly with the service concerned, allowing them to then act accordingly, implementing suitable training and further monitoring.

Responsible officer:













William Whyte

Last Updated:

Q2 2019/20






















Integrated Children's Service (excluding Education)

1. Customer

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received (stage 1 and 2) - CSW	18		18		10		
% complaints resolved within timescale (stage 1 and 2) - CSW	16.7%		61.1%		30%		75%
% of complaints with at least one point upheld (stage 1 and 2) - CSW	5.6%		27.8%		10%		
Total No. of lessons learnt identified (stage 1 and 2) - CSW	0		0		0		

** Further Customer Demand PI's under development

2. Processes

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Number of children on Child Protection Register	119		124		120		
New CPR registrations	20		10		15		
*LAC looked after in a residential placement in Aberdeen City (%)	3.4%		3.4%		3.6%		
*LAC looked after in a residential placement out with Aberdeen City (%)	6.1%		6.2%		5.7%		
*Looked After Children looked after at home (%)	17.4%		16.8%		17.9%		
*Looked After Children looked after in Kinship (%)	17.8%		17.8%		17.9%		
*Looked After Children looked after in Foster Care (%)	51.3%		51.6%		51.3%		

* The indicators are reporting on proportions of children who are looked after at home, with friends and family or are in foster care. The service is working to keep as many looked after children at home when it is safe to do so, so although there is no target, an increase in this proportion is seen as positive and is compared to the National and comparator authorities data in the CLAS returns. Similarly, the proportions of looked after with kin and foster are compared with CLAS returns.

3. Staff

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Average number of days lost through sickness absence - Integrated Children's & Family Services	9.3						10
Accidents - Reportable - Employees (No In Month - CSW)	0		0		0		
Accidents - Non-Reportable - Employees (No In Month - CSW)	0		0		0		
Establishment actual FTE	347.79		345.41		341.31		
Staff Costs - % Spend to Date (FYB)	33.3%		40.4%		50.2%		100%

4. Finance & Controls

** Work ongoing to develop individual service-based measures

Protective Services

1. Customer

Performance Indicator	Q4 2018/19	Q1 2018/19	Q2 2019/20	2019/20 Target
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	Value	Status	Value	Value	Status	Value	
Total No. complaints received - Protective Services	13		10		7		
% of complaints resolved within timescale - Protective Services	84.6%		50%		85.7%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Protective Services	15.4%		20%		14.3%		
Total No. of lessons learnt identified (stage 1 and 2) - Protective Services	0		0		0		

** Further Customer Demand PI's under development

2. Processes

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Non Domestic Noise % responded to within 2 days	92.6%		100%		95.1%		100%
High Priority Pest Control % responded to within 2 days	98.8%		100%		96%		100%
High Priority Public Health % responded to within 2 days	88.2%		97.8%		97.2%		100%
Dog Fouling - % responded to within 2 days	100%		100%		100%		100%

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
% of registered tobacco retailers visited to give Business Advice on compliance with tobacco legislation - Year to Date	35%		7.6%		14.5%		20%
% of registered tobacco retailers subjected to Test Purchasing for retailer compliance with age restrictions - Year to Date	16%		6.4%		13.2%		10%
% of registered Nicotine Vapour Products retailers visited to give Business Advice on compliance with legislation - Year to Date	75%		19.2%		27.7%		20%
% of registered Nicotine Vapour Products retailers subjected to Test Purchasing for retailer compliance with age restrictions - Year to Date	31%		6.9%		12.3%		10%

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
% of Samples reported within specified turnaround times (Aberdeen Scientific Services Laboratory)	89.5%		78.3%				80%
% of External Quality Assurance reported results that were satisfactory (Aberdeen Scientific Services Laboratory)	81%		100%		96.6%		95%

*As of 01/07/2019, the risk rating scheme for food premises has changed which will require the PIs for Food Safety Hygiene Inspections to be overhauled. Premises are now rated across 3 types of business based on the type of operations undertaken and 5 compliance categories, giving 15 separate ratings. The Service is currently identifying an appropriate manner to correlate and report this information. During the transition period from the old to new risk ratings, neither will provide an accurate reflection of activity.

As these new PI's are established, the Service Manager will provide a descriptive update to the next cycle of this Committee on Jan 9th, 2020 in order to illustrate current and on-going food enforcement activity. New PI's will be included in the Scorecard as soon as they become available.

3. Staff

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Protective Services	5.2						10
Accidents - Reportable - Employees (No In Month - Protective Services)	0		0		0		
Accidents - Non-Reportable - Employees (No In Month - Protective Services)	0		0		0		
Establishment actual FTE	73.54		66.07		64.39		
Staff Costs - % Spend to Date (FYB)	33.9%		41.8%		49.6%		100%

4. Finance & Controls

** Work ongoing to develop individual service-based measures

Road and Infrastructure Services

1. Customer

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received - Roads	20		19		23		
% of complaints resolved within timescale - Roads	40%		36.8%		30.4%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Roads	30%		52.6%		30.4%		
Total No. of lessons learnt identified (stage 1 and 2) - Roads	0		0		1		

** Further Customer Demand PI's under development

1. Processes

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Percentage of all street light repairs completed within 7 days	60.71%		64.6%		77.33%		90%
Number of Street Light Repairs completed within 7 days	68		135		174		
Number of Street Light Repairs completed within the month taking over 28days	12		14		1		
Potholes Category 1 and 2 - % defects repaired within timescale	93.2%		100%		98.7%		95%
Potholes Category 1 and 2 - No of defects repaired within timescale	452		366		313		

1. Staff

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	

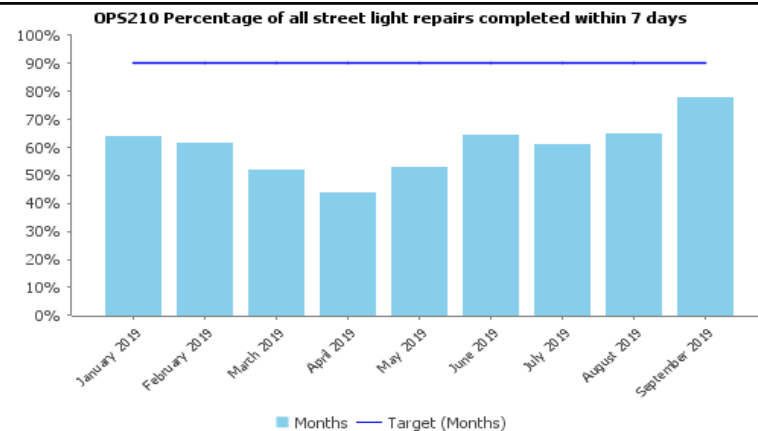
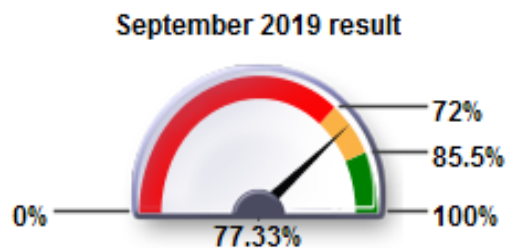
Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Roads	9						10
Accidents - Reportable - Employees (No In Month - Roads)	0		0		0		
Accidents - Non-Reportable - Employees (No In Month - Roads)	2		2		1		
Establishment actual FTE	131.87		133.65		128.02		
Staff Costs - % Spend to Date (FYB)	30.2%		36.5%		45.6%		100%

1. Finance & Controls

** Work ongoing to develop individual service-based measures

Performance Indicator	2016/17		2017/18		2018/19		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Total annual energy consumption in kilowatt hours per annum (street lanterns only)	14,252,163		13,939,396		11,802,137		

RL3: Percentage of all street light repairs completed within 7 days



Why is this important?

This indicator, along with others, monitors whether we are achieving our desired outcome of 'Improving Customer Experience', as outlined in the Shaping Aberdeen programme.

Benchmark Information:

In 2017/18 the annual figure for this PI was 55.75%, showing a decline from the 2016/17 outcome of 59.07%. Benchmarking data for 2017/18 produces an outcome of 54.6% against the APSE family group average of 84.54% and Scotland wide average of 87.39%. Benchmarking information for 18/19 is not yet available.

Target:

The target for this indicator for 2019/20 will be maintained at 90%.

This is what the data is saying:

Of 546 faults due to be completed within 7 days during the 3 months July-September 2019, 377 (69%) were completed within the 7-day target timescale, with the figure gradually improving month on month over that period.

This is the trend:

Since the start of the financial year, the outcome for this measure has shown a marked improvement from a low of 43.61% in April to the current high of 77.33%. The return for September is the highest level of performance for this PI that has been achieved since August of 2018. As we approach the darker months it is to be expected that due to a larger number of reported faults, performance may fluctuate but this will be monitored closely.

This is the impact:

During 2019/20 we have seen a drop in the number of reported faults and it is expected that this will continue in the coming year as we begin to see the impact of the LED conversion programme. The number of faults will continue to fall in line with the reduction in older lanterns on the network.

These are the next steps we are taking for improvement:

During 2019/20, there is a current project for 6,000 LED lanterns to be replaced. A further project of 3,000 LED lanterns is due to be installed. By April 2021 it is expected that over 50% of the streetlights in Aberdeen will have been converted to LED, leading to a longer period between lantern failures and continued defect reduction. This will reduce demand on the service and if the existing resource level is maintained, we would expect an ongoing improvement in this measure as available resources can be targeted

Responsible officer:

Neale Burrows

Last Updated:

September 2019

1. Customer

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received - Waste	28		24		123		
% of complaints resolved within timescale - Waste	96.4%		79.2%		91.9%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Waste	64.3%		50%		56.1%		
Total No. of lessons learnt identified (stage 1 and 2) - Waste	0		3		8		
Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Number of missed bin collection reports in month - residential	198		202		250		

2. Processes

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
% Waste diverted from Landfill	81.5%		78.9%		80.6%		85%
Percentage of Household Waste Recycled/Composted	46.3%		45.4%		48.9%		46%

3. Staff

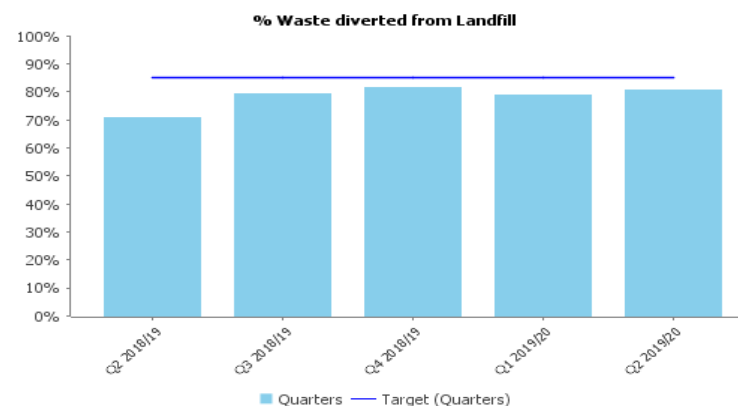
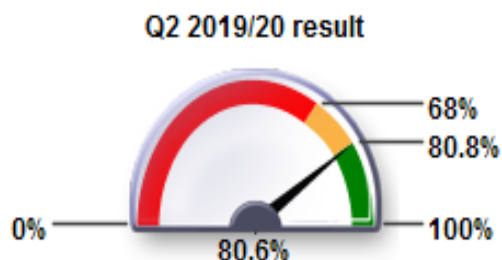
Performance Indicator	July 2019	August 2019	September 2019	2019/20
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	Value	Status	Value	Status	Value	Status	Target
Sickness Absence - Average Number of Days Lost - Waste	19.6						10
Accidents - Reportable - Employees (No In Month - Waste)	0		0		0		
Accidents - Non-Reportable - Employees (No In Month - Waste)	3		1		1		
Establishment actual FTE	173.06		180.04		179.41		
Staff Costs - % Spend to Date (FYB)	33%		41.3%		49.5%		100%

4. Finance & Controls

** Work ongoing to develop individual service-based measures

% Waste diverted from Landfill	
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Why is this important?

Meets local and national policy ambitions as well as statutory requirements.

Benchmark Information:

To be decided in the context of evaluation of the latest SEPA data release.

Target:

The target for 2018/19 was set at 85%. As this was not achieved during the year and that fact that we continue to be impacted by external pressures such as European offtake markets and export via port, the target has remained at 85% for Q1 and 2 of 2019/20, to be reviewed at that stage.

This is what the data is saying:

The data indicates that the most recent outcome of 80.6% for Q2 is showing an increase on that of 78.9% for Q1 but is still marginally below target.

This is the trend:

Despite falling during the year for the reasons outlined below, the rate has now recovered to almost Q4 2018/19 levels of 81.5%, with this improvement expected to continue.

This is the impact:

The main mechanism for delivering this outcome is the Refuse Derived Fuel (RDF) facility at Altens East, through the Waste Management Services Contract. This fuel is then exported and used to generate energy from waste. Currently the material is sent to energy from waste facilities in northern Europe.

Overall, our waste is recycled, composted or sent to be converted to energy from waste. There remains a small amount (approx. 10%) that is sent to landfill locally and is made up of materials that are not suitable for recycling or for the RDF process, however, work continues to find ways to further reduce this.

During Quarter 1 (summer season 2019), there were some challenges encountered with the export of RDF material to European markets which accounts for the fall in diversion rate, since these figures are based on a rolling 12-month period. This decrease was largely due to a reduction in demand for RDF due to the summer season which resulted in some of the residual waste being sent to landfill. However, the requirement to landfill in 2019 was much less than 2018 and this was mitigated through discussions with our contractor who were able to find alternative EFW outlets within the UK. The recycling and composting rates continue to rise.

These figures are being reported on a 12-month rolling basis to give a better view of overall trends, therefore the diversion rate on average remains below target, although showing improvement with the quarterly diversion rate for Q2 increasing to 80.6%, from 78.9% at the close of Q1.

Any reduction is not attributed to a fall in recycling or composting rates, with ongoing improvement being shown in these areas, illustrated by the fact that the Council's verified reported annual household recycling and composting rate has risen again from 43.9% in 2017 to 47.3% at the end of 2018.

These are the next steps we are taking for improvement:

Discussions continue with the Council's contractor to mitigate the potential for this reduction in RDF demand to recur during summer 2020. However, this does highlight the benefits of the planned energy from waste facility which is due to come online in Aberdeen in 2022. This will then become the end destination for the authority's residual waste instead of RDF which will enable the authority to have a consistent and secure outlet, meaning it will not be subject to market forces in this way.

The energy from waste procurement has reached a conclusion with a contract now in place and work commenced on site in September 2019 with completion approximately 3 years later.

Responsible officer:

Pam Walker

Last Updated:

Q2 2019/10

Customer

Early Intervention and Community Empowerment

Libraries

1. Customer

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Number of visits to libraries - person	78,029		78,742		73,476		
Number of visits to libraries - virtual	75,611		72,340				

Community Safety and Justice

1. Customer

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received (stage 1 and 2) - Community Safety and Justice	7		17		15		
% of complaints resolved within timescale (stage 1 and 2) - Community Safety and Justice	71.4%		41.2%		80%		75%
% of complaints upheld against closed complaints (stage 1 and 2) - Community Safety and Justice	42.9%		29.4%		13.3%		
Total No. of lessons learnt identified (stage 1 and 2) - Community Safety and Justice	0		1		0		

** Further Customer Demand PI's under development

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
YTD % of calls attended to by the ASBIT Team within 1 hour	97.6%		97.6%		98.1%		95%

2. Processes

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
YTD Percentage of anti-social behaviour cases reported which were resolved	96.6%		97.7%		97.7%		100%
Number of cases of anti-social behaviour reported - YTD	1,431		1,771		2,127		

3. Staff

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (Community Safety and Justice)	0		0		0		
Accidents - Non-Reportable - Employees (Community Safety and Justice)	2		0		0		

4. Finance & Controls

** Work ongoing to develop individual service-based measures

Community Learning

2. Processes

Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
Number of meals provided during holiday projects (YTD)	10,699		1,144		6764		

Housing




























1. Customer

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
YTD % of cases reassessed as being homeless or potentially homeless within 12 months of a previous case being closed. (Data Provided By Scottish Government on a Quarterly Basis)	6.8%		6.8%		6.8%		4.5%
Percentage of tenants satisfied with the standard of their home when moving in YTD	66.7%		60.8%		60.8%		75%
Financial Inclusion - no of cases per month	186		99		123		







Performance Indicator	Q4 2018/19		Q1 2018/19		Q2 2019/20		2019/20 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received (stage 1 and 2) - Housing Services	47		46		62		
% complaints resolved within timescale (stage 1 and 2) - Housing Services	48.9%		58.7%		75.8%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Housing Services	42.5%		37%		38.7%		
Total No. of lessons learnt identified (stage 1 and 2) - Housing	0		2		7		

**Further Customer Demand PI's under development

3. Processes










Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
YTD % of statutory homeless decisions reached within 28 Days (Unintentional & Intentional)	99.8%		99.8%		99.7%		100%
Number of Households Residing in Temporary Accommodation at Month End	420		397		391		
YTD Average length of journey in weeks for statutory homeless cases (Unintentional & Intentional) closed in the year	23.8		22.5		22		
The YTD number of Legal repossessions following decree (Arrears) - Citywide	16		18		23		
The YTD Average time taken to relet all properties (Citywide - days)	62.9		64.3		64.5		53.8
New Tenants Visits YTD – Outcomes completed within locally agreed timescales (Citywide)	93%		92.7%		92.2%		90%
Welfare Rights - % of Successful Appeals	88%		67%		87.5%		
HMO License Applications Pending	190		200		194		
HMO Licenses in force	1,222		1,207		1,212		

4. Staff

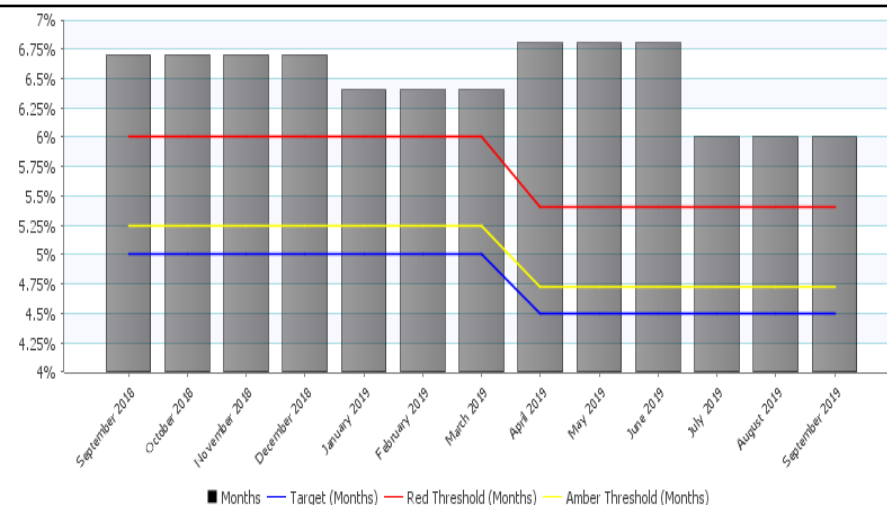
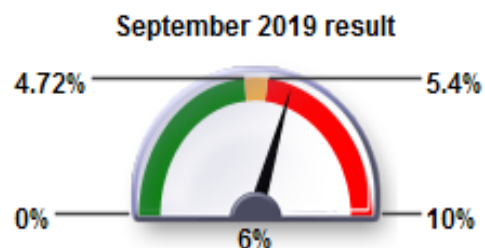
Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No In Month - Housing)	0		0		0		
Accidents - Non-Reportable - Employees (No In Month - Housing)	0		0		0		

5. Finance & Controls

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	

Performance Indicator	July 2019		August 2019		September 2019		2019/20 Target
	Value	Status	Value	Status	Value	Status	
Gross rent Arrears as a percentage of Rent due	6.98%		7.85%		7.41%		7%
Rent loss due to voids - Citywide - YTD average	1.5%		1.55%		1.61%		1.47%
Financial Inclusion - Total Financial Gains Achieved per month	£396,069		£205,098		£277,336		

YTD % of cases reassessed as being homeless or potentially homeless within 12 months of a previous case being closed. (Data Provided By Scottish Government on a Quarterly Basis)



Why is this important?

The Scottish Social Housing Charter was introduced by the Housing (Scotland) Act 2010, which requires Ministers to set standards and outcomes that social landlords should be achieving for tenants and customers through their housing activities.

Charter outcome **12** – Homeless People - stipulates that Local councils perform their duties to homelessness people so that; *Homeless people get prompt and easy access to help and advice; are provided with suitable, good-quality temporary or emergency accommodation when this is needed; and are offered continuing support to help them get and keep the home they are entitled to.*

This indicator, along with others, monitors whether we are achieving our desired outcomes and are committed to ‘Sustain/improve performance in respect of the SSHC outcomes’ and that people at risk of losing their homes get advice on preventing homelessness.

Benchmark Information:

2018-19

The YTD % of cases reassessed as being homeless or potentially homeless within 12 months of a previous case being closed is **6.8%**. The Scottish Local Authority average for 2018-19 was **5.8%**.

Target:**Targets 2019-20**

% of cases reassessed as being homeless or potentially homeless within 12 months of a previous case being closed is set at **4.5%**

This is what the data is saying:

Between 1st April 2019 – 30th Sept 2019 there were **613** applicants assessed as homeless or potentially homeless, **37** of whom had a previous homeless case closed in the last year (365 days) recording a **6%** level of repeat homelessness.

Of the **37** applicants that reapplied in the year **9%** (**33**) were previously assessed as unintentionally homeless with only **12** securing settled accommodation. Due to the continuing decline in intentionality rates there were only **4** repeat applicants previously assessed as intentionally homeless. There were no repeat applications from people previously assessed with no statutory duty. Outcomes from the previous applications show that;

- **32% (12)** lost contact prior to discharge of duty who might not have resolved their homelessness
- **32% (12)** of applicants secured housing in either the private or social sector – **6** Council, **2** RSL, **4** Private Sector
- **14% (7)** of applicants made their own arrangements or returned to previous address
- **11% (4)** of applicants were imprisoned.
- **5% (2)** secured other known outcomes

A combined total of **127** homeless applications have been received among this group, ranging between **2 – 9** applications per person and averaging out at 3 per person. Furthermore, there have been a total of **170** council properties tenanted among the group - **133** temporary placements and **37** secure mainstream placements.

The data highlights two areas of risk that need to be addressed if the rapid rehousing plan is to achieve its aim.

1. Reduce the high level of applicants assessed as unintentionally homeless where the Council has a duty to provide permanent accommodation and this duty is not discharged in full. Where a tenancy is provided the correct type of assistance and interventions need to be in place to support tenancy sustainment in the long term and not just the first year whereupon tenancy sustainment rates and repeat homelessness are measured.
2. Ensure suitable transition mechanisms are in place to better support and assist applicants who make their own arrangements or return home to enhance the prospect of long-term success.

This is the trend:

Between 2014/15 and 2017/18 Levels of repeat homelessness increased sharply, rising from **2.9%** to **6.4%** respectively. Between these periods the number of applicants re-assessed rose from **36** in 2014/15 to **87** in 2017/18. The increase in levels of repeat homelessness during this period were driven largely by changes in recording practices rather than any changes to the underlying drivers of homelessness.

During 2018/19 performance levels began to stabilise with rates remaining unchanged from the previous year at **6.4%**. At a national level however, 16 of the 32 local authorities managed to improve performance during the year causing the national average to fall from **6.4%** in 2017/18 to **5.8%** in 2018/19. When examined against the national context a **0.6%** downturn in performance was recorded last year.

During the first half of 2019/20 trend analysis indicates that repeat homelessness could fall slightly this year with performance levels currently **0.4%** lower than the **6.4%** recorded last year. When we compare first half 2019/20 performance with the equivalent period in 2018/19 the actual number of applicants experiencing repeat homelessness this year has fallen sharply from **47**

– 37, however due to a decline in the number of applicants assessed as statutory homeless this year the level of repeat homelessness is not quite as acute, only decreasing by 0.4% where level of performance is still 1.5% over target.

During the past 3 years a pattern has emerged that demonstrates a correlation between the rise in repeat homelessness and fall in tenancy sustainment rates - sustainment rates falling from 92.1% in 2016/17 to 86.8% in 2018/19. YTD this trend has traversed yet the correlation is still evident. Alongside the 0.4% downturn in levels of repeat homelessness we have seen a 2.4% increase in homeless tenancy sustainment rates.

This is the impact:

- Undue financial costs/pressures in delivering recurring services to these individuals.
- Human costs in that prevailing needs are not met first time round, particularly for those individuals assessed as unintentionally homeless and the council have not provided permanent accommodation. Consequently, this can have further cost/resource implications on not only the council but other services also.
- Risk of failing to deliver on the key strategic outcomes set within the Local Outcome Improvement Plan and Rapid Rehousing Transition Plan.

These are the next steps we are taking for improvement:

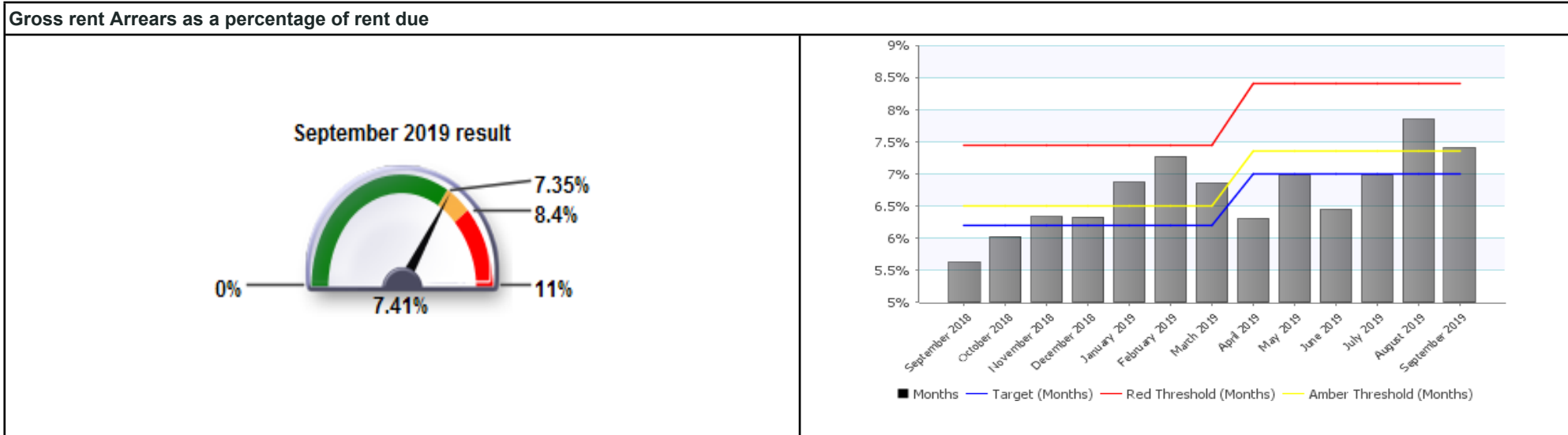
- We are moving towards implementation of our Rapid Rehousing Transition Plan where a homeless journey target of 50 days has been set for unintentional households, this will significantly speed the journey up and should reduce the numbers of applicants whom we are not fulfilling our statutory duty towards.
- We are currently working on our operational structure to improve customer experience via redesigning officer roles to ensure one officer will accompany the client through their entire homeless journey.
- We are now in the operational phase of Housing First, as consortium partners. The Housing First Approach will form the default future allocations blueprint for rehousing complex homeless clients, many of whom are entrenched and trapped in the revolving door of homelessness.
- We are in the development phase of investigating Choice Based Lettings options. Research shows that providing customers with choice leads to improved housing outcomes.

Responsible officer:

Kay Diack

Last Updated:

September 2019



Why is this important?

The Scottish Social Housing Charter (SSHC) was introduced by the Housing (Scotland) Act 2010, which requires Ministers to set standards and outcomes that social landlords should be achieving for tenants and customers through their housing activities.

Charter outcome **13** – Value for Money - stipulates that Social Landlords manager their business so that;
Tenants, owners and other customers receive services that provide continually improving value for the rent and other charges they pay.

Rental income pays for our housing services and capital investments.

Benchmark Information:

2018/19

- Gross Rent Arrears as a percentage of rent due was **6.86%**. The LA average for 2018-19 was **7.3%**.

Target:

Targets 2019/20

- The year-end target for Gross Rent Arrears as a percentage of rent due has been set at **7%**.

This is what the data is saying:

The Gross Rent Arrears figure has increased to **7.41%** in 2019/20 and has exceeded the current **7%** target. In monetary terms the value of Gross Rent Arrears is **£6,455,156**, this is calculated by adding the Current Rent arrears figure of **£5,197,645** to the Former Tenant arrears figure of **£1,302,587**, minus the value of write off's and write on's of **£45,077**.

This is the trend:

There has been an upwards shift in Gross rent arrears in 2019/20 with the **6.31%** recorded in April 19 increasing to **7.41%** as at September 19. This is an increase on the 2018/19 year-end figure of **6.86%**. In monetary terms this equates to an increase in the value of **£711,265** from the year end figure where Gross Rent Arrears stood at **£5,743,891**.

The Local Authority Average for Gross Rent arrears has increased to **7.3%** in 2018/19 from the **6.7%** recorded in 2017/18. The majority of Local Authorities are experiencing an increase in Gross Rent Arrears and this has been mirrored in our performance.

This is the impact:

With the continued focus on Tenancy Sustainment this has resulted in the number Notice of Proceedings issued decreasing by **21%** with **172** issued YTD in 2019/20 compared to **217** in the same period in 2018/19. The number of Repossessions for Rent Arrears carried out has also decreased by **49%** with **23** Repossessions completed YTD in 2019/20 compared to **45** in the same period in 2018/19 - continuing the trend seen in 2018/19.

Tenancy Sustainment has improved when compared to the same period last year with currently **92.13%** of new tenancies having been sustained for more than a year compared to **89.76%** recorded in the same period in 2018/19. This compares well with the Local Authority Average of **88.8%** in 2018/19.

Universal Credit Full Service went live in October 2018 in Aberdeen and figures include the impact of a full year of UC Full Service. Universal Credit is a DWP scheme for which the Local Authority as the landlord are a third party.

These are the next steps we are taking for improvement:

With the increase in housing officers we are in the processing of reducing the number of tenancies managed per officer, this enables housing officers to provide enhanced levels of support and assistance to tenants therefore helping prevent and reduce rent arrears. Neighbourhoods with highest levels of arrears will be prioritised for resource allocation.

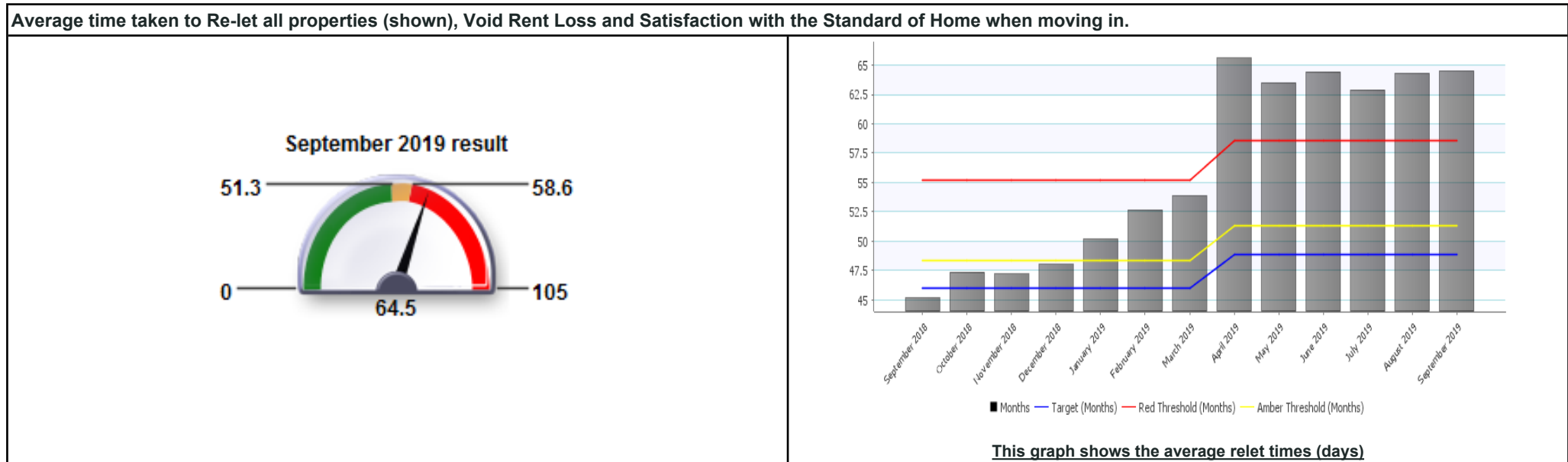
We will be reviewing the responsibilities of the variety of roles involved in managing arrears cases to ensure maximum efficiency and effectiveness as we transition to full implementation of our operating model.

Responsible officer:

Neil Carnegie

Last Updated:

September 2019



Why is this important?

The Scottish Social Housing Charter (SSHC) was introduced by the Housing (Scotland) Act 2010, which requires Ministers to set standards and outcomes that social landlords should be achieving for tenants and customers through their housing activities.

Charter Outcome 4 – Quality of Housing stipulates that Social Landlords ensure that:

‘tenants’ homes, as a minimum, meet the Scottish Housing Quality Standard (SHQS) when they are allocated; are always clean, tidy and in a good state of repair; and also meet the Energy Efficiency Standard for Social Housing (ESSH) by December 2020.

Charter Outcome 10 – Access to Housing – stipulates that Social Landlords ensure that:

People looking for housing find it easy to apply for the widest choice of social housing available and get the information they need on how the landlord allocates homes and their prospects of being housed.

Charter outcome 13 – Value for Money - stipulates that Social Landlords manager their business so that;

Tenants, owners and other customers receive services that provide continually improving value for the rent and other charges they pay

Benchmark Information:

2018-19

- Average relet times was **53.8** days. The 2018-19 Scottish Local Authority average was **35.9** days.
- Rent Loss due to Voids was **1.47%**. The 2018-19 Scottish Local Authority average was **0.84%**
- Percentage of new tenants satisfied with the standard of their home when moving in was **63.8%** The Scottish Local Authority average was **82.7%**

Target:Targets **2019/20**

- Average number of days to relet all properties was set at 48.8 days.
- Rent Loss due to Voids was set at 1.33%
- Percentage of new tenants satisfied with the standard of their home when moving in was set at 75%

This is what the data is saying:

For the reporting year 2019/20 the average relet time YTD is **64.5** days, an increase on the **62.9** days last reported to committee and significantly higher than the **48.8** days target.

The Void Rent Loss figure YTD for 2019/20 is **£701,121**. This equates to **1.61%** of the gross debit (rent due) for the financial year, an increase on the **1.50%** last reported to committee and higher than the **1.33%** target set

The YTD Satisfaction with the standard of home when moving is **60.8%** below the set target of **75%** but an increase on the **57.6%** last reported to committee.

This is the trend:

- **Relet times** – The number of properties relet as at 30th September 2019 is **1025** with an average relet time of **64.5** days, an increase on the **62.9** days last reported to committee. The increase in relet time is partly due to the reletting of **24** longstanding voids (>= 200 days) which had an average overall duration of **274** days and of those an average of **211.9** days getting repairs carried out on the properties.

Relet times of the **1025** properties broken down by area show:

- Marischal reporting an average relet time of **74.9** days with **6** of the **24** longstanding voids with a void duration of **268.6** days, **164.4** days getting repairs carried out.
- Mastrick has an average relet time of **38.1** days with **3** of the **24** longstanding voids, **2** voids were new build properties and did not require repairs work, **1** property was with repairs for **30** days. Total average void duration for the **3** properties was **255.7** days.
- Tillydrone has an average relet time of **76.9** days and had **15** of the **24** longstanding voids with a void duration of **279.7** days, **241.8** days getting repairs carried out.

- **Void Rent Loss** – There has been a steady increase in the void rent loss since the start of 2019/20. The void rent loss is a direct result of the relet times and if this trend continues an *estimated* year end figure would be around **£1,402,242**, (**1.61%**).

As at the 30th September 2019 the Void Rent Loss due broken down by area shows:

- Marischal- has a void rent loss of **£175,555**, this denotes to **1.69%** of the rent due in the area.

- Mastrick- is showing a void rent loss of **£132,264**, this is **0.94%** of the rent due in Mastrick.
- Tillydrone- has the highest void rent loss with **£393,301**, this represents **2.05%** of the rent due in the area.
- **Satisfaction of the standard of home when moving in**- there has been a decrease in satisfaction since the start of the 2019/20 financial year with the figure standing at **60.8%**, a decrease on the 2018/19 year end figure of **63.8%**. There has been a steady decrease in satisfaction year on year since 2016/17 where the figure stood at **67.0%**.

YTD there has been **40** comments received from new tenants:

37 of the comments were made regarding the standard of home when moving in:

- **36** where negative reviews/comments regarding standards of property or general repairs,
- **1** was positive feedback

The Customer Satisfaction Surveys have now been successfully migrated to the Citizen Space Digital Survey Platform. Tenants are now automatically invited via email to complete a satisfaction survey when a new tenancy commences. Tenants that do not have email will be contacted by phone.

This is the impact:

Some of the consequences of this performance are:

- Loss of rental income to the Council.
- New tenants are experiencing lengthy periods of time to wait from when being made an offer of accommodation to the time they can move in resulting in overall poorer satisfaction levels.
- Homeless people are spending long periods of time in temporary accommodation.

These are the next steps we are taking for improvement:

- Building Services established special teams which will concentrate on voids with accepted homeless offers.
- Building Services transferring resource from response maintenance to voids giving approximately 40% increase in trades to complete void repair works.
- Recruitment of team leaders in building services to ensure more efficient and effective operations.
- Additional housing officers enabling more proactive work on pre-termination and pre-offer inspections.
- Increased use of incentives to maximise offer acceptances.
- Review of letting standard which will include completion of SHQS and major works during void period which will improve standard of properties at relet and in turn increase customer satisfaction.
- Improved use of data and performance monitoring by teams.
- Introducing a digital solution for managing repair works.
- Our allocations team is now fully staffed and training for new staff is on-going.

Responsible officer:

Neil Carnegie/Graham Williamson

Last Updated:

September 2019

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ABERDEEN CITY COUNCIL

COMMITTEE	Operational Delivery Committee
DATE	12 th November 2019
EXEMPT	No
CONFIDENTIAL	No
REPORT TITLE	Aberdeen City Joint Inspection Report
REPORT NUMBER	OPE/19/408
DIRECTOR	Rob Polkinghorne
CHIEF OFFICER	Graeme Simpson
REPORT AUTHOR	Alison McAlpine
TERMS OF REFERENCE	2

1. PURPOSE OF REPORT

To share the report - **Joint Inspection of Services for Children and Young People in need of Care and Protection in Aberdeen City**, published 3 September 2019, which provides the Committee with independent external assurance as a result of Inspectorate’s independent examination of the systems, processes and practices in place across the multi agency partnership.

To remind the committee of the work being undertaken across Children’s Services, and how, in our view, the associated actions arising from this inspection are already included in existing strategic improvement plans such as our LOIP, our Child Protection Improvement Plan and our Corporate Parenting Action Plan.

2. RECOMMENDATIONS

That the Committee:

- 2.1 notes the findings of the ‘Report of a joint inspection of services for children and young people in need of care and protection in Aberdeen’ – September 2019 (Appendix A).
- 2.2 notes that the Community Planning Partnership is required to prepare a plan detailing the action it intends to take in response to the Inspection Report within 6 weeks of its publication, has submitted this action plan to the Care Inspectorate and that this action plan be shared with Members via a Service Update.

3. BACKGROUND

3.1 The Care Inspectorate are independent regulators who lead joint strategic inspections of services for children and young people in need of care and protection across Scotland.

3.1.1 In discharging their regulatory and scrutiny functions the Care Inspectorate works in partnership with Healthcare Improvement Scotland (HIS), Education Scotland and Her Majesty's Inspectorate of Constabulary for Scotland (HMICS) to independently undertake strategic inspections to determine the effectiveness of community planning partnerships to improve the lives of children and young people in need of care and protection and for whom community planning partnerships have corporate parenting responsibilities.

3.1.2 The role of the Care Inspectorate is to ensure that existing strategic improvement plans accurately reflect areas where improvement is required.

3.1.3 This included scrutiny of the Child Protection Improvement Plan, which is an iterative plan which is also in front of committee today.

3.1.4 Following a Scottish Government Review into child protection in 2017, a recommendation was made to review the method for strategic inspection of children's services.

3.1.5 As a result of this, the Care Inspectorate introduced a new methodology in July 2018 and Aberdeen City was the 4th Authority to be inspected under this new format.

3.1.6 Where previous inspections looked at all services delivered to children, the new methodology focusses on services that aim to care and protect children. As a result of this, it is difficult to make exact comparisons between this and the previous inspection undertaken in 2014/2015.

3.2 Work to prepare for inspection commenced across the partnership in Autumn 2018, with this focussing on evaluating the quality of services which were being provided to children and their families. As a result, partners were well placed to respond with evidence of our self-evaluation activity, when notice was served on the partnership regarding the inspection, on 22.12.18

3.3 A variety of types of activity took place to prepare staff across the partnership in advance of the inspectors arriving on site, including:

- 7 Community Planning Partnership briefings issued between Oct 2018 – March 2019
- 2 critical friend sessions
- 2 Chief Officer Group Sessions
- 2 Multi agency partnership events for all staff
- Weekly project team meetings

3.4 Direct inspection activity from the Care Inspectorate took place between January and May 2019 and encompassed interrogating information via a variety of fora including:

- Detailed inspection of 105 files of the most vulnerable children and young people in the City, selected at random by the Care Inspectorate
- Observation of a range of different types of meetings (5) held in respect of children where multi agency planning has been necessary
- Interviews with a large number of staff from across the partnership, individually or in larger focus groups (between 40 and 50)
- Reviewing a wide range of documents and joint self-evaluation materials provided by the partnership (300+)
- Meeting directly with children and young people (70) and their parents (36),
- Analysing the responses from surveys completed by children, young people, parents and carers (117)
- Analysing the responses from the survey of 718 staff from across the partnership (84% response rate)

3.5 The Care Inspectorate through their inspection seeks to determine the effectiveness of the partnership against five questions:

- i. How good is the partnership at recognising and responding when children and young people need protection?
- ii. How good is the partnership at helping children and young people who have experienced abuse and neglect stay safe, healthy and well and recover from their experiences?
- iii. How good is the partnership at maximising the wellbeing of children and young people who are looked after?
- iv. How good is the partnership at enabling care experienced young people to succeed in their transition to adulthood?
- v. How good is collaborative leadership?

3.6 The Care Inspectorate then evaluated the partnership against four indicators:

- i. Leadership and direction
- ii. Impact on families
- iii. Impact on children and young people
- iv. Improvements in the safety, wellbeing and life chances of vulnerable children and young people.

For each of these indicators the partnership was evaluated as '**Good**'. The grading scale is Unsatisfactory; Weak; Adequate; Good; Very Good and Excellent. The improved gradings reflects well on the efforts of staff across the partnership to care for and protect our most vulnerable children.

3.7 The following key strengths were identified within the Report:

- i. The quality and stability of the care provided by staff working with children and young people with an emphasis on building on strengths in families.
- ii. The robustness of multi-agency pre-birth assessment and planning processes and the early stage help these provide to vulnerable women and their unborn babies.
- iii. Staff recognition of signs of risk, effective information-sharing processes and responses to threats of significant harm.
- iv. The wide range of universal and targeted support services helping children, young people and their families to recover from cases of abuse and neglect.
- v. The effectiveness of joint working and the collaborative approach, vision, values and aims promoted by leaders.

3.8 The Report notes the following priority areas for improvement:

- i. Strategic oversight of corporate parenting was not as robust as that for child protection.
- ii. There were limitations in outcomes data with which the partners were able to demonstrate improving trends for looked after children and young people, particularly those looked after at home and care leavers.
- iii. Children and young people in need of care and protection were not benefitting from timeous assessments of their health needs while there were also gaps in some services in terms of addressing emotional health and well-being.

3.9 The draft report with gradings was shared with the Chief Officers Group (COG), who met with the inspection team. In response to this meeting, COG elected to follow the CI appeal process in relation to the evaluation scores for ***Impact of Services on Children and Young People*** and on ***Leadership and Direction***. Communication was subsequently received from the CI advising that we had been unsuccessful in our appeal. The Care Inspectorate recognised within their Report that the partnership's self-evaluation demonstrated a clear and thorough evaluation of itself. Given the fact that the Care Inspectorate did not identify any significant or new areas of improvement, it is disappointing that at least one Very Good grade was not awarded. However, feedback from the Care Inspectors indicates that the partnership is well on its way to achieving higher gradings and our existing improvement plans will hopefully achieve such in future inspections.

3.10 Gradings as awarded to the four local authorities who have undergone strategic inspection under Care Inspectorate's new methodology as follows:

Local Authority	Indicator 9 ¹	Indicator 2.2 ²	Indicator 2.1 ³	Indicator 1.1 ⁴
Aberdeen City	Good	Good	Good	Good
Argyll & Bute	Good	Good	Good	Adequate
City of Edinburgh	Good	Good	Very Good	Adequate
Fife	Good	Good	Good	Good

¹ 9 Leadership and direction

² 2.2 Impact on families

³ 2.1 Impact on children and young people

⁴ 1.1 Improvements in the safety, wellbeing and life chances of vulnerable children and young people

3.11 Areas for improvement and development cited by the Care Inspectorate had already been identified by the Community Planning Partnership within existing strategic planning documents (the LOIP, the Child Protection Improvement Plan and the Corporate Parenting Action Plan), a fact that is recognised within the Care Inspectorate's Report. As a result, we are confident that our strategic documents address the points raised by the Care Inspectorate hence no separate documents will require to be compiled. Committee Members will be provided with a copy of this agreed action plan as taken from our existing documentation, via a Service Update once this has been agreed by the Community Planning Partnership and the Chief Officers Group.

3.12 In light of this positive inspection from the Care Inspectorate there will be no follow up inspection. The next inspection of Children's Services is therefore unlikely to be for another three years.

3.13 In line with our continuous improvement agenda, a **lessons learned** workshop was held across the partnership, to consider what elements of our inspection preparation we would wish to develop in advance of future inspections. Feedback from this was fed back to the Adult Protection Committee, to inform their respective inspection preparation.

4. FINANCIAL IMPLICATIONS

4.1 There are no financial implications arising from the recommendations of this report.

5. LEGAL IMPLICATIONS

5.1 The Care Inspectorate are responsible for the scrutiny of children's services as set out in the Public Services Reform (Scotland) Act 2010, and therefore Aberdeen City Council in conjunction with the partnership fulfils its statutory responsibilities by participating in Inspection activity.

6. MANAGEMENT OF RISK

Category	Risk	Low (L) Medium (M) High (H)	Mitigation
Financial	Officer time will not be dedicated to the progression of inspection findings.	L	The implications of Inspection findings are commensurate with the ongoing learning and development approaches

			already embedded in child care and protection work across the city on a multi-agency basis.
Legal	We have statutory responsibilities to children, young people and their families in Aberdeen which if we failed to adhere to would render us in breach of these.	L	This Inspection Report has evaluated services for children and young people in Aberdeen as good in all four focus areas. They conclude that they have confidence in our continual improvement and scope to address the areas requiring improvement.
Employee	Officer time is not afforded to retain current standards of practice and to progress areas for development	L	The multi-agency nature of work to support children, young people and their families already relies on a collaborative approach where continual improvement and learning has been embedded. This work is shaped via the Chief Officer's Group, and the strategic plans in place, in line with stretch aims contained in the LOIP.
Customer	Required improvements and areas for development in practice are not actioned.	L	<p>Actions in line with Inspection Findings had already been identified within Aberdeen City's self evaluation hence work to make improvement is already underway.</p> <p>Children, young people and their families in Aberdeen can be assured that services in Aberdeen City are subject to continual quality assurance, in line with the Child Protection Improvement Programme, the Corporate Parenting Strategy, in line with this years' refreshed LOIP.</p>

Environment	<p>Quality of care establishments for children who are required to be accommodated away from their families might become compromised.</p> <p>Working environments may become compromised for staff and for children, young people and their families.</p>	L	<p>The culture and ethos afforded within our residential establishments has been recognised as positive as was intervention with children, young people and their families due to embedding of strength-based practice and our relational approaches, within the Inspection Report.</p>
Technology	<p>If we do not continue to progress our use of advances in technology we will fail to sustain our improvements.</p>	L	<p>Use of improved data collation was recognised within the Inspection Report. We are collaborating across the partnership as well as using microsoft cloud to mitigate against this risk.</p>
Reputational	<p>Findings of Inspection Reports in relation to Child Care and Protection can bring significant media interest and scrutiny of services delivered to children and young people in Aberdeen.</p>	L	<p>The public can be assured by the fact that this inspection report has graded child care and protection services as 'good' across all areas, showing marked improvement since the period of the last inspection carried out in 2015.</p> <p>Aberdeen City Council ensures compliance with action plans following inspection findings, as well as with legal requirements, national standards and guidance; partners respond to self and external scrutiny; and identified areas for improvement are addressed.</p>

7. OUTCOMES

Local Outcome Improvement Plan Themes	
	Impact of Report
Prosperous Economy	No significant impact.
Prosperous People	<p>This Inspection Report acknowledges the role that the Chief Officers Group and the Child Protection Committee play in supporting and assuring that the multi-agency partnership in Aberdeen City delivers on the outcomes of the LOIP – Prosperous People – Children are our Future and that they have the ‘best start in life,’ they are ‘safe and responsible’ and that they are ‘protected from harm.’</p> <p>Children who are protected from threats to their health, safety and economic wellbeing are more likely to prosper than those who are not.</p>
Prosperous Place	Recognition has been given to the benefits to maximising scope for children to remain within their own communities and work to this effect is recognised in the Inspection Report.

Design Principles of Target Operating Model	
	Impact of Report
Customer Service Design	The service is in process of redesigning in line with Target Operating Model. Findings of the Inspection Report will be taken into consideration.
Organisational Design	The service is in the process of redesigning in line with Target Operating Model. Findings of the Inspection Report will be taken into consideration.
Governance	<p>Appropriate oversight of services delivering public protection provides assurance to both the organisation and the public in terms of meeting the council’s statutory duties and contributes to compliance with agreed standards.</p> <p>The partnership’s joint action plan activity will be supported via the Corporate Parenting Strategy and the Child Protection Committee under the endorsement of the Chief Officers’ Group.</p>

Workforce	Through Aberdeen City's Performance and Quality Assurance Sub Committee to the Child Protection Committee, a shared learning approach is adopted, to ensure staff across the partnership are appropriately supported via workshops and training events to understand the range and complexity of child care and protection issues both locally and nationally and this is recognised within the Care Inspectorate Report.
Process Design	n/a
Technology	We will continue to utilise emerging technology, such as the Mind of My Own app, a means of gathering views of young people through a medium and at a time most suitable to their needs, in order to improve quality and efficiency of services.
Partnerships and Alliances	The scope of the inspection spanned all services to children and their families within Aberdeen City, and hence the partnership must acknowledge the strengths identified as well as ensuring compliance with identified areas for improvement.

8. IMPACT ASSESSMENTS

Assessment	Outcome
Equality & Human Rights Impact Assessment	S 1,8,9 complete and sent to the Equalities Team.
Data Protection Impact Assessment	Not required.
Duty of Due Regard / Fairer Scotland Duty	Not required.

9. BACKGROUND PAPERS

None

10. APPENDICES (if applicable)

Appendix A - Joint Inspection Report for Children and Young People in need of care and protection in Aberdeen.

11. REPORT AUTHOR CONTACT DETAILS

Alison McAlpine
Lead Service Manager (acting)
amcalpine@aberdeencity.gov.uk
01224 264100

Report of a joint inspection of services for children and young people in need of care and protection in Aberdeen City

Prepared by the Care Inspectorate in partnership with Education Scotland, Healthcare Improvement Scotland and HMICS

September 2019



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The cover image for this report is the competition winning photo by a young person in Aberdeen City.

Aberdeen City

Key facts: children and young people in need of protection



Key facts: children and young people who are looked after



Introduction

At the request of Scottish Ministers, the Care Inspectorate is leading joint inspections of services for children and young people in need of care and protection across Scotland. When we say 'children and young people' in this report, we mean young people under the age of 18 years or up to 21 years and beyond, if they have been looked after.

These inspections look at the differences community planning partnerships are making to:

- the lives of children and young people in need of care and protection
- the lives of the children and young people for whom community planning partnerships have corporate parenting responsibilities

The inspections take account of the full range of work with children, young people in need of care and protection and their families within a community planning partnership area.

When we say 'partners' in this report, we mean leaders of services who contribute to community planning, including representatives from Aberdeen City council, NHS Grampian, Police Scotland and the Scottish Fire and Rescue Service.

When we say 'staff' in this report we mean any combination of people employed to work with children, young people and families, including health visitors, school nurses, doctors, teachers, social workers, police officers, and people who work in the voluntary sector. Where we make a comment which refers to particular groups of staff, we mention them specifically, for example health visitors or social workers.

Our five inspection questions

These inspections focus on answering five key questions:

1. How good is the partnership at recognising and responding when children and young people need protection?
2. How good is the partnership at helping children and young people who have experienced abuse and neglect stay safe, healthy and recover from their experiences?
3. How good is the partnership at maximising the wellbeing of children and young people who are looked after?
4. How good is the partnership at enabling care experienced young people to succeed in their transition to adulthood?
5. How good is collaborative leadership?

Our quality improvement framework

In August 2018, the Care Inspectorate published a quality framework for children and young people in need of care and protection. This framework is used by inspection teams to reach evaluations of the quality and effectiveness of services. Inspectors collect and review evidence against all of the

indicators in the framework and use this to answer the five inspection questions. The evaluative answers to each question take account of evidence against up to 17 quality indicators from across the framework. In addition to answering the inspection questions we use the six-point scale below to evaluate three quality indicators and the domain of leadership:

- 1.1 - Improvements in the safety, wellbeing and life chances of vulnerable children and young people.
- 2.1 - Impact on children and young people.
- 2.2 - Impact on families.
- 9.1 – 9.4 – Leadership.

Our inspection teams

Our inspection teams are made up of inspectors from the Care Inspectorate, Healthcare Improvement Scotland, Her Majesty's Inspectorate of Constabulary for Scotland and Education Scotland. Teams include young inspection volunteers, who are young people with direct experience of care or child protection services. They receive training and support to contribute their knowledge and experience to help us evaluate the quality and impact of partners' work. Local file readers are also involved. These are individuals from the community planning partnership area which we are inspecting who support us in reviewing practice through reading case records. Not only does this support the inspection, but it also supports the partnership area in joint self-evaluation following inspection.

How we conducted this inspection

The joint inspection of services for children and young people in the Aberdeen community planning partnership area took place between January and May 2019. It covered the range of partners in the area that have a role in providing services for children, young people and families.

- We met with 70 children and young people and 36 parents and carers in order to hear from them about their experiences of services.
- We offered children, young people, parents and carers the opportunity to complete a survey about their views of services and received 75 responses from children and young people and 47 responses from parents and carers.
- We reviewed a wide range of documents and joint self-evaluation materials provided by the partnership.
- We spoke to staff with leadership and management responsibilities.
- We carried out a staff survey and received 746 responses.
- We talked to large numbers of staff who work directly with children, young people and families.
- We observed a range of different types of meetings.
- We reviewed practice by reading a sample of records held by services for 105 of the most vulnerable children and young people.

We are very grateful to everyone who talked to us as part of this inspection.

As the findings in this joint inspection are based on a sample of children and young people, we cannot assure the quality of service received by every single child in Aberdeen in need of care and protection.

Summary – strengths and priority areas for improvement

Key strengths

1. Staff were having a positive impact on the quality and stability of care and support experienced by children and young people and their families by emphasising and building on strengths in families.
2. Multi-agency pre-birth assessment and planning processes were robust. These enabled vulnerable women and their unborn babies to receive the help they needed at an early stage.
3. Staff were confident at recognising the signs of risk, which was supported by good information sharing processes and early discussions. Responses to immediate risk of significant harm were effective.
4. There was a wide range of universal and targeted support services available that helped children, young people and their families to recover from their experiences of abuse and neglect.
5. Joint working was effectively promoted by leaders who collaborated and shared a clear vision, values and aims.

Priority areas for improvement

1. Strategic oversight of corporate parenting was not as robust as that for child protection.
2. There were limitations in outcomes data with which the partners were able to demonstrate improving trends for children and young people who were looked after and, in particular, those looked after at home and care leavers.
3. Children and young people in need of care and protection were not benefitting from a timely assessment of their health needs and there were gaps in some services to address their emotional health and wellbeing.

Aberdeen City in context

Geography and demography

Aberdeen, on the north east coast, is Scotland's third most populous city. Aberdeen has two universities and remains a competitive city with gross value added (GVA) per head of population the highest in Scotland. It retains a strong oil and gas industry presence, despite the recent industry downturn.

Aberdeen council area is one of the most densely populated local authority areas in Scotland and extends over 186 square kilometres, with a population of 228 000.

Aberdeen's population has increased by 9% since 2008 while Scotland's population has increased by 5%. From 2016 projections, Aberdeen's population will increase by 3% by 2026 and by 6% by 2041. The equivalent figures for Scotland are a 3% increase by 2026 and a 5% increase by 2041.

In 2017, Aberdeen had an estimated 68,321 young people aged 0-25 years. Approximately 34,495 were 0-15 year olds. Almost 15% of Aberdeen's population are under 16 years old, compared with Scotland's under 16 population of 17%. Aberdeen's under-16 population is projected to increase by 7% by 2026 and by 1% by 2041. The equivalent Scotland figures are an increase of 2% by 2026 and a decrease of 2% by 2041, demonstrating a challenge for Aberdeen in its significantly higher projected figures for 0-15 year olds.

Social and economic

Aberdeen is divided into 283 data zones, nine (3%) of which fall within the 15% most deprived data zones in Scotland, a decrease from 13% in 2012. No data zones fall within the 5% most deprived data zones in Scotland, compared with three (1%) in 2012. Eight per cent of Aberdeen's population are income deprived, while 6% are employment deprived, both lower than the national average.

The partnership

Community Planning Aberdeen (CPA) has responsibility for improving outcomes for the people and communities of Aberdeen. The CPA board provides strategic leadership, supported by the CPA management group and seven themed outcome improvement groups.

The local outcomes improvement plan (LOIP) 2016 – 2026 was refreshed in 2018 and its aim is for Aberdeen to be 'a place where all people can prosper' and to become Scotland's first UNICEF child-friendly city. CPA has responsibility for scrutinising overall delivery of progress against the LOIP.

Related strategic plans for which the partnership has responsibility include the integrated children's services plan 2017 – 2020; the youth justice strategy; the community justice outcome improvement plan and the current child protection committee improvement programme 2019-2022.

The integrated children’s services partnership (ICSP), which reports to the integrated children’s services board, oversees progress towards meeting outcomes within the integrated children’s services plan. Locally, delivery plans are taken forward by locality partnership boards.

The public protection chief officers group has responsibility for public protection. The child protection committee and other relevant strategic groups report to the public protection chief officers group. The Aberdeen public protection chief officers group is also aligned to the North East of Scotland Leaders Group for Public Protection.

The political context

In recent years, the policy and practice landscapes have undergone significant changes. Local authorities and health boards are operating in increasingly complex legislative and policy environments. The pace of public service reform has accelerated as the Scottish Government continues to implement legislation converging around the policy drivers of early intervention, preventative spending and greater integration of services. Partners have been required to adjust to a range of new and challenging requirements and expectations. These changes, while welcomed in strengthening the commitment to deliver excellent services to children, young people and families, have impacted on practice and practitioners. Leaders have had to direct a shift in the balance of resources in response to evolving and dynamic environments while also supporting staff to remain competent and confident to support vulnerable children and young people. It is within this evolving context that this joint inspection of services for children and young people in need of care and protection took place.

Table 1: Children in need of care and protection: key strategic groups and plans in Aberdeen.

Children in need of care and protection: key strategic groups and plans featuring in this inspection	
Groups	Strategic plans/programmes
<ul style="list-style-type: none"> • Public protection chief officers group • Integrated children’s services board • Child protection committee • Corporate parenting improvement group • Champions board 	<ul style="list-style-type: none"> • Local outcomes improvement Plan 2016-2026 • Integrated children’s services plan 2017-2020 • Corporate parenting and champions board action plan 2016-2019 • Child protection improvement programme 2016-2019

The five inspection questions

1. How good is the partnership at recognising and responding when children and young people need protection?

Key messages

1. Recognition of, and responses to, children and young people at immediate risk of harm were very effective and staff were confident in their role, leading to a positive impact on children's and young people's safety.
2. Improvements had been made in **interagency referral discussions** (IRDs) which were impacting positively on the safety of children and young people.
3. Vulnerable mothers and their unborn babies were supported by robust and effective multi agency pre-birth assessment, information sharing and decision making.
4. Legal measures were appropriately considered and used where necessary to secure the immediate safety of the child.
5. Initial assessment, management and planning to address risk and need were effective in most cases.

Recognition and response

Children and young people at risk of immediate harm were being kept safe as a result of effective recognition and response and increased staff confidence. In our review of children's records, we evaluated the quality of response to immediate risk as good or above for most records. In a few cases, immediate response to concerns was evaluated as excellent. There was an assessment of risk in almost all records. The majority of these were evaluated as good or very good.

Pre-birth assessment and planning to support vulnerable mothers and their unborn babies were robust. The percentage of births affected by maternal drug use during pregnancy in Aberdeen has remained consistently higher than the Scottish average for the last six years, while the rest of Scotland has seen a decrease. The partnership had responded by implementing additional support measures through the pre-birth pathway and other initiatives. One initiative was the child protection clinic that monitored and reviewed the health needs of children with neonatal abstinence syndrome, foetal alcohol syndrome, historical abuse or neglect. Robust multi-agency planning arrangements helped to ensure that risks to the unborn baby, particularly where parental substance misuse was a factor, were regularly reviewed. Groups of multi-agency staff working across children's and adults' services were effectively co-ordinating support to families prior to, and in some cases up to two years after, the baby's birth.

This pre-birth pathway helpfully identified additional support from a range of services, including family support. Vulnerable pregnant women were supported from 25 weeks pregnant or earlier, if additional support was required. There was positive multi-agency collaboration between health, social work and family support services based at Aberdeen Maternity Hospital. These services provided timely and effective help. Specialist midwives also attended pre-birth case conferences. The role of the multi-agency team had expanded to offer contraception and other advice to vulnerable women before they were discharged from hospital.

The Aberdeen Intake Service, comprising the joint child protection team, Aberdeen Maternity Hospital units and the children's social work reception team had received an increasing number of child protection referrals over the last five years. The partnership believed this increase was due to greater awareness by staff of risks to children and young people and greater confidence in addressing these risks. We also found this to be the case. Additionally, there had been a change in data collection methods and Police Scotland vulnerable persons database records had been included in referrals, where these had previously been collated separately. The most frequently recorded concern was domestic abuse, followed by alcohol and drug misuse.

There had been 40 child protection referrals in relation to child sexual exploitation (CSE) in 2014. This had since almost halved and remained stable in subsequent years (24 on average). The higher number in 2014 was attributed by the partnership to greater awareness of child sexual exploitation following the publication of the Independent Inquiry into Child Sexual Exploitation in Rotherham (2014) and retrospective work undertaken on historic child protection referrals. The partnership had helpfully produced guidance for staff on CSE and supported staff through multi-agency training events. We could see the impact of this investment in multi-agency training and clear procedures on the increased identification of CSE in referrals.

The response to children at risk from domestic abuse was managed appropriately within the police concern hub process and through **multi-agency risk assessment conferences (MARAC)**. Domestic abuse remained a consistently high category for registration on the child protection register. The partnership had supported staff by developing training in this area. There was also a young women's service for those at risk of, or who had experienced, CSE. The child protection committee and Aberdeen Violence Against Women partnership were working collaboratively on multi-agency guidance on child protection and domestic abuse.

Risk management

Staff were confident in recognising the signs of potential risk of harm and used a variety of tools to support their assessments. The **Getting it right for every child (GIRFEC)** approach was well embedded across agencies and supported staff to share information, identify and analyse risk. Clear child protection processes and procedures were in place to support initial identification of risk.

The interagency referral discussion (IRD) process had been reviewed and was more collaborative. Quality assurance of the IRD process had been in place since 2018. This was beginning to address some of the challenges such as variability in attendance of health and education, delays in circulating decisions and improvements required in multi-agency risk assessments.

Support for children and young people who needed it at an early stage and through formal child protection systems was appropriately targeted. There had been an increase in the number of IRDs, a reducing trend in the number of child protection investigations and joint investigative interviews between 2014/15 and 2016/17. There had been a corresponding reduction in the numbers of records of investigation – the template used to record the child protection investigation. The conversion rate from the record of investigation to the decision to proceed to a pre-birth or an initial child protection case conference was aligned well. There had also been a reducing trend in the numbers of children and young people being placed on the child protection register. Partners attributed this to better and earlier intervention to offer early support to families where it was needed. We saw effective examples of this support. There had been a reduction in the number of **child protection orders** being sought between 2016/17 and 2017/18. The **child protection committee** monitored applications for child protection orders and reviewed cases to ensure that applications were appropriate and proportionate.

In almost all cases where legal measures were used, they were used appropriately and effectively to secure the immediate safety of the child.

Involvement of children, young people and parents/carers

In our review of case records, staff effectiveness at involving parents/carers and families in key processes was evaluated as good or better in most cases. In just over half of children's records, the quality of support given to the child or young person to understand and exercise their rights, comment on services or complain was evaluated as good or very good.

While independent advocacy support was made available for some families, it had not been offered or available to any child whose name was on the child protection register in the last 12 months. Similarly, in that time, only one child whose name was removed from the register was offered it. Some families told us that, although they understood the reasons why services were involved to keep children safe, they felt overwhelmed at the volume and pace of service involvement as an initial response to harm. These families may have benefitted from an offer of independent advocacy or other independent means of helping them to understand what was happening at this point.

Staff confidence and competence in protecting children

In most cases, the lead professional or named person had regular opportunities to discuss their work with a supervisor or manager.

Updated child protection guidance in 2018 and a programme of multi-agency training events had helped staff to feel more confident at recognising and responding to cumulative harm and neglect. Almost all staff responding to our survey said they had an up-to-date knowledge of child protection policies and were confident at recognising the signs of risk of harm. Much investment had been made in multi-agency training, led by the child protection committee, to ensure staff could better recognise and respond to signs of cumulative harm and neglect. Multi-agency training had made a positive difference to agencies gaining a common understanding of the thresholds of risk of harm. Staff across agencies had trust and confidence in each other to discuss concerns and come to an understanding

about thresholds of risk and how best to protect children. Staff were better supported to recognise risk to children and young people from domestic abuse, child sexual exploitation and child trafficking.

2. How good is the partnership at helping children and young people who have experienced abuse and neglect stay safe, healthy and recover from their experiences?

Key messages

1. There was an effective culture of collaborative working across all disciplines, which was having a positive impact on work with families.
2. Strengths-based approaches and relationship-based practice models were having a positive impact on helping to build trusting and respectful relationships between staff and families.
3. There was a wide range of universal and targeted support provided by statutory and third sector partners to help parents and support children and young people in their recovery from abuse and neglect.
4. The child protection committee was using data effectively to inform improvements in child protection practice and monitor these improvements to ensure they were sustained.
5. The mental health and emotional wellbeing concerns of children and young people were not being addressed well enough.
6. Approaches to seeking and recording the views of children and young people who had been involved in child protection processes were limited.

Collaborative working

Staff told us of a significant shift in culture and practice towards greater joint working. This was evident throughout the inspection. Collaborative working was underpinned by GIRFEC principles, joint training, a greater appreciation of others' roles and responsibilities, and improved use of joint guidance and shared tools. There was a helpful staff culture of resolution through appropriate discussion and challenge. The co-location of some groups of staff, for example those working with vulnerable unborn babies, supported joint working. Effective partnership working was also evident from our reading of children's records: in most cases in which children had been at risk of significant harm, staff demonstrated effective collaborative working.

Developing relationships and engagement in key child protection processes

There was a strong culture and ethos of relationship-based practice. This meant that staff sought to develop positive relationships with families as a basis for engagement and supporting them to keep children and young people safe. Many young people and their families had been helped to build trusting relationships with key staff through regular and meaningful contact. They were being helped to focus on important strengths in their circumstances and to make positive changes in their lives. For a small number of children and families, frequent staff changes had disrupted these relationships.

Staff worked hard to ensure that the views of children, young people, and parents were being heard and reflected in their assessments, reports and at many important decision-making meetings. Our review of records of children who had been at immediate risk of significant harm in the last two years found that most parents had been involved well in planning to keep their child safe. New approaches were being tested to further strengthen parents' participation in child protection case conferences and improve their experiences of these. While small in scale, early indications, including feedback from parents, were positive.

Most children and young people felt that they had some involvement in agreeing their plan. Our review of records showed more variability in how well staff were involving children and young people who had been at risk of significant harm in child protection processes. We evaluated just over half as good or better, with a further third evaluated as adequate. Independent advocacy was not routinely considered for children and young people whose names were on the child protection register.

Partners recognised that more needed to be done to record children's views in their plan. The online tool Mind of My Own had been very recently introduced to help capture the views of looked after children however, this had yet to be extended to include those on the child protection register. Success in capturing feedback from parents and carers about their experiences of the child protection system was limited, despite the range of approaches tested. This was an area for improvement by the child protection committee.

Children, young people and families are enabled to make change and supported to sustain improvements

From our review of children's records, most children and young people experienced at least some improvement in their wellbeing as a result of the help they received. Outcomes for children whose names were removed from the child protection register within the last 12 months had improved to some extent in most cases, with considerable improvement for one in four children. Over three-quarters of parents who responded to our survey felt that the help they received had made their and their children's lives better.

Most children and young people who had experienced abuse or neglect received the support they needed to help them recover from their experiences. Practical help and therapeutic support, through both universal and targeted provision, were helping to improve the safety and wellbeing of children and young people. For instance, the Intensive Family Intervention Team (IFIT) provided short-term, intensive practical and emotional support to families and children and young people who needed it.

Clear referral pathways ensured that children and their families received the help they needed quickly.

A range of effective, universally available community-based supports were in place. There had been a decrease in the use of structured, evidence-based parenting programmes. A few staff we met identified this as a gap in provision. Notwithstanding this, tailored support packages, using strengths-based approaches and trauma-informed practice, were helping parents to better understand their children's needs and make the changes needed to improve their circumstances. Strengths-based approaches meant that staff started their relationships with families by examining the strengths within the family. Trauma-informed practice meant that staff were trained to recognise the impact of trauma on the lives of children and young people and took account of this in their work.

Nurturing approaches in nurseries and schools facilitated a supportive, caring environment in which vulnerable children were helped to learn and develop. Creative use of **pupil equity funding** was enabling some schools to provide practical help and support to children and families and to bridge the gap between school and home. **RAFT (Reaching Aberdeen Families Together)**, a consortium of five third-sector services working together as a single service, was providing a whole-family approach to help build resilience for families with a range of support needs. This included families affected by substance misuse, mental health difficulties and domestic abuse. RAFT helpfully provided support at times when families often needed this most, such as evenings and weekends.

Families affected by domestic abuse were supported through structured, evidence-based programmes such as the **Caledonian programme** and therapeutic support provided by Women's Aid. **Multi-agency tasking and co-ordinating (MATAC)** and MARAC meetings, attended by staff from children's, adult and justice services, were increasingly used to review risks and coordinate safety plans. Targeted support provided by Barnardo's RISE (Reducing the Impact of Sexual Exploitation) and the Green Light project both provided help and advice to vulnerable young people at risk of sexual exploitation to make sense of their experiences.

Health managers and the wider partnership through the local outcome improvement plan were working hard to improve mental health support for children and young people who needed this. While some services were in place to help improve wellbeing and build resilience, staff expressed concern about the insufficient number of services to support those with lower-level emotional wellbeing or mental health concerns. A redesign of the Grampian-wide child and adolescent mental health service (CAMHS) had led to renewed referral criteria and the implementation of a choice and partnership approach (CAPA) to support capacity. The partnership reported that children were seen more quickly and signposted to other services where appropriate, although the service still held a waiting list. This new approach, however, was not well understood by some staff and young people. The CAMHS improvement plan also noted the need to develop a minimum data set to improve outcomes measurement.

Assessments and plans to reduce risk and meet needs

The child protection committee maintained a helpful overview of child protection practice across Aberdeen. A revised data framework with key proxy measures that indirectly demonstrated outcomes was helping the committee monitor the effectiveness of child protection practice and implement

change where necessary. This had led to improvements such as a significant reduction in the number of children whose names were on the child protection register for longer than 12 months and a reduction in numbers of children being re-registered.

In the main, assessment and planning was making a positive difference in supporting the recovery of children and young people who had experienced abuse and neglect. We reviewed the records of 57 children and young people who had been at immediate risk of significant harm in the last two years. In most cases, the quality of risk assessments was evaluated as good or very good. Children's plans to address risks showed more variability. We evaluated almost one-quarter as adequate and a few as weak. In almost three-quarters of cases, assessments and plans to address need were evaluated as good or very good. A few plans were not sufficiently SMART (specific, measurable, achievable, realistic, timebound) and lacked contingency measures to be applied when progress was not in line with expectations. This included cases in which long-standing issues such as parental substance misuse or domestic abuse were a risk factor to the child.

In just over half of children's records that we read, children's assessments benefitted from the use of chronologies of significant events to help inform decision making. While most staff understood how to use chronologies as an analytical tool to support assessment and risk management, almost one-quarter of respondents to our staff survey said they had not received training on this. Staff identified the lack of cohesion across ICT systems as a barrier to the development of integrated chronologies.

Staff were using a range of tools to support risk assessments. The social work service had recently commissioned Insight, a specialist service, to undertake parenting capacity assessments for children identified as being on the edge of care due to compromised parental capacity. This was a two-year pilot project co-delivered by two voluntary sector partners – Aberlour Childcare Trust and VSA. It was too soon to see the impact of these assessments, although this was an encouraging development.

Individual children's plans were being reviewed at intervals appropriate to the child's circumstances. We evaluated the quality of reviewing as good or very good in most cases that we read. While staff prioritised attendance at child protection meetings, capacity issues and staff vacancies meant that attendance was not always possible. Arrangements to involve education services in child protection meetings during holiday periods had been strengthened. Appropriate consideration was given to the need for statutory measures at child protection case conferences. Staff also offered additional support for parents whose child was being adopted. Parents were encouraged to be involved in life-story work to support the child's future placement.

The child protection committee had worked hard to improve the quality of assessments of risks and children's plans. Annual audits demonstrated a picture of improving performance. There remained scope for reviewing officers, independent of line management responsibility, to build on this work as part of their quality assurance role to develop greater oversight of practice standards.

Staff supervision

Staff across all agencies experienced routine opportunities to discuss their work with a manager through some form of supervision or professional discussion. Most staff benefitted from regular, high quality support from their manager that helped them to develop through constructive challenge and regular feedback. The **Reclaiming social work unit model** within the children's social work service supported shared caseloads and greater opportunities for reflective group discussions. Staff felt this helped them to focus more on managing risk. This model had been independently and positively evaluated and was welcomed by parents involved.

Good practice example: strengths-based and relationship-based practice

Strengths-based and relationship-based practices were embedded throughout interactions between professionals from all agencies and children, young people and their families. Relationships were characterised by trust, warmth and compassion and staff demonstrated a genuine desire to support families to the best of their abilities. The values of strengths and relationship-based practice were evident from all staff we spoke to and reflected by almost all children, young people, their parents and carers.

3. How good is the partnership at maximising the wellbeing of children and young people who are looked after?

Key messages

1. Staff across the partnership had developed strong and meaningful relationships that were having a positive impact on the experience and wellbeing of looked after children and young people.
2. Services for children and young people at risk of becoming looked after or experiencing difficulties in their placements were well-planned and effectively delivered.
3. The impact of strategies to shift the balance of care and reduce the high number of out-of-area placements for looked after children and young people was yet to be seen, but the partnership was closely monitoring this.
4. Children and young people who were looked after at home were experiencing poorer wellbeing and educational outcomes than those looked after in other care settings.
5. The health needs of children and young people who were looked after were not being fully met and comprehensive assessments were not being undertaken timeously.
6. The recently established corporate parenting improvement group had significant work to do to ensure that the partnership's ambition for looked after children was matched by real change.

Children and young people experience caring, consistent and trusting relationships

Looked after children and young people were benefitting from caring and nurturing relationships with staff. Almost all children and young people that we spoke with told us that staff listened to them and that they trusted staff. In most cases, children and young people had experienced consistent support from at least one key person over the previous two years. However, some children and young people had experienced frequent changes of social worker that had impacted on building trusting relationships. The impact of the relatively recently established role of the external residential childcare manager had been very positive in supporting staff engagement with children and young people. The capacity of social workers to better develop their relationships with children and young people had improved through the embedding of strengths-based and relationship-based practices. Children's panel members told us they had seen improvements in relationships between staff and young people and that young people were now more involved in hearings.

The partnership was committed to ensuring staff had a range of skills to develop relationships with children and work in a way that was trauma informed. There was a wide range of high-quality multi-agency training available to both staff and carers. The ethos of care had made a significant impact on reducing the numbers of young people reported missing and being charged with offences. This had been achieved through more effective joint working between police, social work and staff in children's houses. Although small in number, young people who had been trafficked into Scotland were being sensitively supported and their needs met well in Aberdeen.

Plans to maximise wellbeing

The plans for most looked after children were reviewed regularly and well by the independent reviewing service. Children's panel members had confidence in the assessments provided by all agencies and this was helping them to make informed decisions. There was trust and collaboration across the partnership at all levels in planning for children. Decisions were made about permanence in a timely way and three-quarters of permanence plans were progressing well.

There was some variability in the delivery of assessment and planning between children and young people in different types of care placements. Young people in residential care experienced a high standard of practice in assessment, planning and review. In the files of children looked after at home, practice was not as good across these processes. The practice of involving children in care planning was inconsistent. The partnership was aware of the need to improve this and had invested in the Mind of My Own app to improve the gathering of young people's views.

The majority of looked after children and young people were supported to maintain or re-establish contact with brothers and sisters. Assessments of contact were valued and used by decision makers. A few children and young people said they would like to have more support to maintain connections with family.

Improvements in wellbeing

Looked after children and young people benefitted from a wide range of high-quality services that were put in place at the right time for them. Most of the children and young people who completed our survey told us they felt safe and felt they were in the right place to get the help they needed. Almost all said that things had improved for them as a result of the help they received. Most parents or carers agreed with this and said that the help their child received had made their life better.

As a result of the help they received, most children and young people experienced at least some improvement in their wellbeing or circumstances. However, for children looked after at home, the degree of improvement was much less than for those in other community-based placements, such as kinship or foster care.

Looked after children and young people, those at risk of becoming looked after and those who were experiencing difficulties in their placements benefitted from a wide range of effective intensive support services. Through the proactive, creative and collaborative help from these services, children and young people were getting the assistance they needed when they needed it. When intensive support was no longer required, services ensured children, young people and their families maintained the right level of targeted help from family support teams or the youth team. Looked after children and young people were also successfully encouraged to take part in sport or volunteering opportunities with the support of Sport Aberdeen.

As of March 2018, the partnership had responsibility for approximately 550 looked after children and young people, with approximately half of these placed out with Aberdeen. This was a decrease of approximately 40 looked after young people from the previous year. In contrast to the overall Scottish picture, there had been an increase in numbers of children in residential and foster placements and a decrease in numbers with kinship carers and those looked after at home.

Where a child had been identified as needing permanent substitute family care, this had progressed well in almost three-quarters of cases. Foster carers were helped to understand and respond to the needs of looked after children and young people through the high-quality training they received from the alternative family care team. Kinship carers told us they had not received good or consistent support in the past. However, a team had recently been put in place to provide support to kinship carers and this was already improving their confidence.

The numbers of looked after children and young people reported missing had decreased. The partnership had adopted new policies and procedures that emphasised the importance of listening to children and young people who had been missing. A dedicated police officer, child sexual exploitation advisor and other staff worked well together to coordinate good practice in return home interviews and tailored interventions.

Through the **Virtual School**, Aberdeen had a designated headteacher whose role was to support improvement in the educational progress, attainment and achievement of all children and young people looked after by the local authority, including those that were educated in other local authorities. The initiative had improved the tracking and monitoring of progress of looked after

children and young people in schools and had ensured school procedures took account of their needs. Better joint working with the two universities in the city and North East Scotland College was also supporting the needs of looked after young people in further education. Initiatives such as the emerging literacy programme and a mentoring programme delivered in collaboration with Wood Group, a local energy company, were beginning to show a positive impact.

There was a slight increase in the school attendance of looked after children over 2017-18 from the previous year however, their attendance rate remained lower than their non-looked after peers. Those looked after at home had the lowest rate of attendance.

There had been a small reduction in exclusions for looked after children and young people in the last year. There was no real difference in exclusions between those looked after in a community placement and those looked after in a residential setting. Of those who were excluded from secondary schools, almost half were accommodated in children's homes. In terms of literacy, there was a decrease in the gap between looked after children and their peers. In relation to numeracy, this gap had increased. Overall, there remained a gap in attainment between looked after children and young people and their non-looked after peers. Children and young people who were looked after at home experienced the poorest attainment levels. For looked after school leavers, attainment was below the national average but had increased slightly in 2017-18.

The partnership had established ASPIRE, a new service to work on a multiagency basis to improve educational outcomes for children not in school full time. A quality assurance framework that would support better impact analysis of all programmes of work was also in development.

There were challenges in evidencing that the health needs of children and young people becoming looked after in Aberdeen were being met consistently and comprehensive health assessments were not being completed within the nationally recommended four-week timescale. Partners were working on some specific improvement actions. The dedicated nurse for looked after children was regularly tracking the progress of health assessments and was proactive in following up on the health needs of children who had been assessed, including those placed out of Aberdeen. This nurse was gathering data regarding the reasons for lack of completion of health assessments to better understand the challenges. Health visitors and school nurses also assessed the emotional health of looked after children and young people using recognised tools. Foster carers and residential care staff valued being able to access specialist consultation from CAMHS for young people in their care. This service, however, was underused by those supporting children and young people looked after at home or in kinship care and some staff supporting these groups of children and young people were unaware this could be accessed by them. Better access to a wider range of emotional health and wellbeing services would support work being done to improve outcomes for looked after children and young people.

Corporate parenting responsibilities

ACE (**Aberdeen Care Experienced**) provided opportunities for care experienced children and young people to express their views about services and set the agenda of the **champions board**. Following some initial successes in influencing policy and services, the champions board needed to improve its effectiveness by refocusing on its refreshed action plan. A lack of clear strategic oversight of

corporate parenting had limited the impact of the champions board. Some children and young people were not aware of ACE or the champions board. The appointment of a new Who Cares? Scotland development worker had given renewed impetus to this work and a wider group of care experienced young people was now engaged. The recent establishment of the corporate parenting improvement group meant there were better opportunities for strategic oversight to align the partnership's vision for corporate parenting with its delivery.

The children's specialist services forum monitored plans to place children and young people outwith and within Aberdeen however, the balance of care had not changed significantly. The use of purchased foster placements had increased. There was no overall evaluation of the impact services had in successfully keeping children and young people in Aberdeen or the impact of strategic efforts to shift the balance of care.

Children and young people in residential care had consistent access to independent advocacy through the children's rights service. In contrast, only a few looked after children and young people living in the community benefitted from using this service. The partnership was committed to addressing this and was undertaking a comprehensive review of children's rights in Aberdeen with the involvement of care experienced young people.

4. How good is the partnership at enabling care experienced young people to succeed in their transition to adulthood?

Key messages

1. Many care experienced young people were benefitting from strong and supportive relationships with staff.
2. Care experienced young people were supported to remain in care placements for longer and move towards independence at a pace that was right for them.
3. The partnership needs to do more to maintain contact with young people after they leave care in order to better understand the needs of all care leavers and improve their outcomes.
4. Young people with a disability were not experiencing consistently positive transitions between children's and adults' services.
5. There was much variance in the experiences and outcomes for care leavers.
6. Care experienced young people had been enabled to influence some service developments.

Young people enjoy sustained positive relationships with staff and carers

Most care leavers told us that they felt valued and respected and had experienced supportive relationships with staff and carers. Many care leavers were being supported by and had positive relationships with, staff in the youth team, which was a single-agency social work team. The youth team was successfully providing a dedicated service to care leavers with higher needs or risks to manage and recover from their adverse childhood experiences using trauma informed approaches. Some staff in other teams, including residential workers, had also remained involved with some care leavers, providing continuity in key relationships. However, there was a small number of care leavers who were not experiencing positive relationships with staff and felt isolated and unsupported.

The partnership had invested in training to support staff working in a trauma-informed way, for instance through **dyadic developmental psychotherapy**. This was having a positive impact on the relationship between staff and care leavers and the transition of young people into adulthood, as well as the confidence of staff.

Moves between children's and adults' services

Children and young people with disabilities who are in receipt of regular short breaks are entitled to the assessment, planning and review arrangements provided in law for looked after children and young people. This includes entitlements as care leavers. Aberdeen City does not include children and young people with disabilities in receipt of regular short breaks among their looked after children and young people population.

These children and young people were benefitting from regular reviewing arrangements. For children and young people with disabilities, supporting a successful transition from children's to adults' services was a challenge for the partnership. During this stage, there were mixed experiences and outcomes for this group of young people.

Parents of children and young people with disabilities described the wraparound care and support they received for their child while involved in children's services as excellent. A few parents told us, that the transition of their child to adult services had been a very stressful experience characterised by a lack of information and lack of clarity about the different processes and eligibility criteria involved. This message was reiterated in discussions with groups of staff. As the partnership was not routinely carrying out looked after reviews or pathways planning for young people with disabilities in receipt of short breaks, planning for transitioning to adult services was not taking place in a timely manner. There was an issue with connecting processes and communication between children's services and adult's services, which the partnership recognised as needing improvement. Some parents we spoke with were unaware of their entitlements to continue self-directed support as their child moved into adult services. A group had been recently established to identify and address issues in relation to this, but it was too early to see any impact from this work.

Continuing care

The partnership was actively promoting young people staying in their care placements for longer and considering moving on at a pace that was right for them. While remaining committed to supporting this Staying Put agenda, the partnership recognised the challenge this brought in relation to bringing young people back to Aberdeen from placements outside the local authority area. The impact of strategies to address these challenges was not yet being seen.

Positively, there had been an increase in the numbers of young people over the age of 16 remaining in residential placements. There had also been an increase in the numbers of young people remaining looked after until the age of 18 and a small but rising number of young people in continuing care placements. However, some looked after young people had limited knowledge of their continuing care entitlements. Almost all care experienced young people we spoke to felt settled and safe where they currently lived.

Supporting young people to live independently

While some care leavers had made good progress in their transition to adulthood, there were gaps in key areas of support for others, such as access to specialist health services or addressing homelessness.

The partnership was confident that it was doing everything possible to support looked after young people into adulthood, however, their housing, health outcomes and employment opportunities were variable. Wellbeing had improved for the majority of care leavers but for a significant number there was little or no improvement demonstrated. Care leavers generally found the nature of the support they received as beneficial to them, however, questions concerning the impact of support resulted in more mixed responses when we spoke to care leavers. Gaps in specialist health support for care leavers meant that some found it difficult to access or use support for particular services, including emotional wellbeing and mental health, sexual health support or addictions services.

A few young people told us about difficulties they had experienced returning to Aberdeen from being in care placements outwith the area and the negative impact these difficulties had had on their family relationships, social supports and overall emotional wellbeing.

The partnership had made specific policy arrangements for looked after young people to ensure they did not become homeless after leaving care. As a result, there had been an increase in care leavers sustaining their own tenancies over the past two years.

We heard from a few care leavers and staff that some care experienced young people had continued to experience homelessness over the past few years. The housing system relied on care experienced young people self-identifying or being directly asked if they were care experienced in order to receive support as a care leaver. Some felt unable to discuss their care status and so did not benefit from the policy arrangements in place to support them. Staff agreed that improved monitoring arrangements for care leavers would support better tailored support to meet all their needs, including housing.

The youth team remained the lead service if care leavers became involved in offending and staff provided tailored support when considering supervision of community-based orders. Staff stated that more could be done to increase the use of diversion and structured deferred sentencing to try to stop further progression through the criminal justice system for young people.

The partnership had employed five care experienced young people as children's rights development assistants on a part-time basis using Life Changes Trust funding. This gave these care experienced young people tangible employment opportunities, enhanced their own skills to reach their potential and supported other looked after children and young people to express their views and shape services.

Corporate parenting responsibilities

Staff were involving care leavers in planning in the majority of cases and almost all young people told us they had been involved in agreeing their plan. However, the quality of pathways assessments, plans and reviews for care leavers was variable. Less than half of plans to meet the needs for this group of young people that we read were evaluated as good or above and the reviewing of these plans was evaluated as weak in a small but significant number of young people's records. The partnership was performing well below the national average in relation to the completion of pathways plans and having a nominated pathways co-ordinator.

Positive destinations

The partnership had made improvements in supporting care experienced young people leaving school and entering further or higher education, training or employment. Accessing grants for further and higher education had contributed to this improvement. Skills Development Scotland and Opportunities for All were offering additional support to some young people in preparation for leaving school. The partnership also had some well-established links with local colleges to support care leavers into further and higher education. The number of looked after young people entering positive destinations had increased, remaining higher than the national average.

The percentage of looked after young people with one or more qualifications at SCQF level four had also increased. The percentage of care leavers with known economic activity in Aberdeen had increased in the last year. The partnership was supporting the development of a multi-agency hub at the Westburn Centre to provide co-ordinated support and greater accessibility to a range of specific services for young people, including care leavers.

Participation and involvement

The partnership was committed to hearing the voices of care leavers and involving them in decision making about service delivery. The recent employment of a development worker from Who Cares? Scotland and the establishment of a corporate parenting improvement group meant that the partnership was in a stronger position to support the participation and involvement of care experienced young people.

Good practice example: children's rights development assistants

Five children's rights development assistants had been employed by the partnership through Life Changes Trust funding on a part-time basis to support the children's rights service. Not only did this provide these young people with employment opportunities but it also enabled them to support looked after children and young people to become more involved in the development of services and planning.

The children's rights development assistants told us that the experience of carrying out paid work helped to give them confidence and develop new skills. They were involved in chairing the champions board, carrying out training and awareness raising, co-ordinating social media for care experienced young people and assisting children's rights officers in involving other looked after or care experienced young people.

5. How good is collaborative leadership?

Key messages

1. The partnership demonstrated a clear, shared vision and was aspirational in its aims to support the improvement of outcomes for children and young people in need of care and protection.
2. There were clear governance, reporting and accountability arrangements in place for senior leaders to assure themselves they were meeting their obligations in relation to children and young people in need of protection.
3. Leaders were successfully developing a joint approach to the transformation of services in order to manage an environment of increasing demands and decreasing resources.
4. There was less evidence of effective challenge by leaders to the variance in health, wellbeing and educational outcomes for particular groups of looked after children and young people, including those looked after at home.
5. Strategic and routine data analysis was more sophisticated for children in need of protection than children and young people for whom partners shared corporate parenting responsibilities.

Vision, values and aims

Leaders at all levels demonstrated a common purpose and a determination to drive improvements for children and young people in need of care and protection.

The partnership had a strong, shared vision of an Aberdeen 'where all people can prosper', which was threaded throughout all strategic plans and realised through its four priority areas and ambitious stretch aims. The local outcomes improvement plan (LOIP) was overseen by Community Planning Aberdeen and drove all multi-agency services. Staff very clearly identified with the LOIP and demonstrated a good understanding of its aims.

The partnership had taken the opportunity to constructively refocus on looked after and care experienced children and young people in a refresh of the LOIP stretch aims following a series of the multi-agency Taking Stock events in 2018.

The partnership's vision was delivered through a commitment to strengths-based practice based on demonstrable compassion and care from leaders who promoted a positive, values-based culture. This strengths-based approach was evident across agencies and created an empowering culture for staff. Almost 80% of staff agreed that their organisations' vision, values and aims were ambitious and challenging.

Leadership of strategy and direction: child protection

Leaders had a strong commitment to their responsibilities in relation to public protection and governance and reporting arrangements were in place to provide leaders with the relevant assurance that children and young people remained safe. Members of the chief officers group had long-standing professional relationships that had enabled them to develop professional trust and operate as a connected unit.

The group had clear monitoring and governance arrangements for the child protection committee, which shared the vision of chief officers and routinely sought assurance through robust reporting and audit mechanisms. Chief officers demonstrated appropriate challenge and influence over the work of the child protection committee and were confident about the ways in which they sought assurance about the safety of children and young people. They demonstrated a good understanding of the issues facing young people in need of protection. Chief officers made use of learning from Grampian-wide and national strategic groups, including the North East Leaders Group for Public Protection – a collaborative strategic group for public protection with partners from Aberdeenshire and Moray. Just over half of staff were confident that the chief officers group and the child protection committee provided strong leadership and direction to improve the quality of child protection services.

Leadership of strategy and direction: corporate parenting

Leaders demonstrated strong motivation to deliver their corporate parenting responsibilities. They showed care and compassion and talked about the importance of love in supporting children and young people in need of care and protection. There was less evidence of effective challenge by leaders as a collaborative group to the variance in health, wellbeing and educational outcomes of particular groups of looked after children and young people, including those looked after at home and care leavers. While there was explicit commitment to corporate parenting throughout strategic plans, leaders were less able to demonstrate assurances around these responsibilities in comparison to those

of child protection. In our staff survey, less than half of respondents felt that corporate parenting was progressing well due to strong leadership and direction.

Leaders faced challenges in aspects of corporate parenting such as the drive of the champions board, no tangible reduction in the high number of care placements outwith the local area, and variability in attendance, attainment and outcomes across and between different groups of looked after children and young people. Although a corporate parenting improvement group had been recently established to deliver more strategic oversight, it was too early to see the impact of its work.

Leadership of people and partnerships

There was strong commitment to collaborative working at a strategic leadership level. Strategic groups had good multi-agency representation from the right people with the right level of knowledge and authority to make relevant decisions. Staff told us about strong collaborative approaches to multi-agency working, positive professional relationships and effective challenge at a practitioner level. This joint working was further supported by co-location among many professionals. Most staff stated in our survey that they felt supported to be professionally curious and take bold decisions.

Just over half of staff surveyed felt that leaders were visible enough. Leaders tried to remain visible to staff and acknowledged that they needed to continue to prioritise and develop the ways in which they communicated with staff, particularly at a time when transformational change was happening at a quick pace. A communication strategy was being developed.

There was a positive learning culture led by chief officers. Most staff were enthusiastic about the impact of the variety of multi-agency training they had received. Leaders encouraged delegated leadership by promoting shared responsibility and supporting staff to work creatively to improve outcomes.

Leadership of improvement and change

Leaders had begun the difficult process of leading transformational change across services in order to address an environment of increasing demand and decreasing resources. The investment in alternatives to care and intensive family support services was effective in targeting support and early intervention for those children and young people at risk of becoming looked after.

There were workforce challenges in some areas, resulting in some high vacancy levels and use of agency staff. Leaders encouraged approaches to address these challenges and mitigate their impact on children and young people in need of care and protection. The impact of this could be seen in the 'grow your own' approach to developing staff internally, recruitment campaigns to attract new candidates and in work to support social work students to consider a career with their host placement.

The partnership demonstrated a collaborative multi agency approach to improvement and change from locality management groups up through governance routes to Community Planning Aberdeen. The joint self-evaluation showed that the partnership had a realistic understanding of its strengths

and areas for improvement. A quality assurance framework for children's services had been agreed however, this was not in place at the time of inspection.

The regular auditing activity undertaken by the child protection committee influenced service delivery and had resulted in tangible improvements in practice. Chief officers had led learning from reviews of cases.

The partnership had undertaken a population needs assessment that resulted in a comprehensive data summary report, enabling better identification of priority areas and shaping of strategic planning.

The Business Intelligence Unit, although less than a year in implementation, had the potential to support leaders to make data-informed decisions. Other than at the child protection committee, less attention had been given to qualitative or outcomes-based data. Information was focused on processes and organisational activity rather than reporting the difference interventions had made to the lives of children and young people. Although feedback from children, young people and families was collected at an individual service level, further work was required to ensure the wider involvement of children and young people in need of care and protection, and their families, in influencing service development.

Already, data had been used effectively to secure improvements in progress against targets in the local outcomes improvement plan. There had been reductions in the numbers of looked after children and young people reported as missing and reductions in the numbers of young people referred to the youth justice management unit or the children's reporter on offending grounds.

Leaders were committed to continuing to implement the reclaiming social work model in order to embed systemic practice. Evaluations of the model's implementation and impact were largely positive.

Leaders demonstrated a commitment to transformational change by pooling resources in order to address some of the challenges they faced as a partnership: they had established a 'managing demand' group led by the chief executive of the council. Leaders were clear that the services for which they were individually and collectively responsible must adapt to meet a changing need. The impact of some of these changes was yet to be felt, although early indications were positive in relation to the development of services to meet need.

Good practice example: effective use of data

The Business Intelligence Unit, although a relatively recent development, has the potential to support leaders make better data-driven and data-informed decisions. Already the unit was helping to embed the analysis of data in service planning through its production of the data summary report, which included disaggregated data on different care groups of children and young people. It will build on the established work of the child protection committee in reviewing performance measures. The children's forum of the unit works with service areas to identify business priorities and translate that into the data needed to support this function. The partnership has a clear vision about the purposeful use of data to drive service planning and improvement and the Business Intelligence Unit will provide the strategic and technical expertise in realising this ambition.

Conclusion

The Care Inspectorate and its partners are confident that Aberdeen community planning partnership can continue to improve and to address the points for action highlighted in this report.

This is based on:

- the robust frameworks in place to ensure that Aberdeen's children and young people at immediate risk of harm are, and remain, safe
- improvements in the collection and analysis of performance data linked to the strategic aims outlined in the local outcomes improvement plan
- the potential for the effective analysis of data and the work of the Business Intelligence Unit to support leaders make better data-informed decisions to target resources at the areas of greatest need
- the range of improvements already demonstrated in the wellbeing and life chances of many children and young people in need of care and protection
- the community planning partnership's own joint self-evaluation which identified strengths and areas for development reflected in this inspection report.

Careful attention to the governance and oversight of child protection has paid dividends in supporting improvements. Partners will now need to ensure they pay equal attention to governance arrangements for looked after children and young people and those who are care experienced in order to achieve similar results.

What happens next?

The Care Inspectorate will request that a joint action plan is provided that clearly details how the partnership will make improvements in the key areas identified by inspectors. The Care Inspectorate and other bodies taking part in this inspection will continue to offer support for improvement through their linking arrangements. They will also work with the partnership to monitor their progress in taking forward their joint action plan.

Appendix 1: Summary of evaluations

How good is our leadership?

Good

9. Leadership and direction

- Vision, values and aims
- Leadership of strategy and direction
- Leadership of people and partnerships
- Leadership of improvement and change

Rationale for the evaluation

Collaborative leadership and strategic direction demonstrated important strengths, particularly in relation to child protection. This was let down by less well-developed processes in the strategic oversight of corporate parenting.

The robust governance, which allowed partners to assure themselves about the safety and protection of children and young people was not as effective in relation to all care experienced young people, in particular, those looked after at home and care leavers.

The vision, values and aims of the partnership were coherent, shared and embedded throughout strategic plans, and supported improved outcomes for most children and young people in need of care and protection. Chief officers were committed to their wider public protection remit and leaders provided clear direction to, and oversight of, the child protection committee which resulted in very effective monitoring of child protection practice. Chief officers made use of learning from Grampian-wide and other national strategic groups, including the North East Leaders Group for Public Protection.

While leaders demonstrated commitment, care and compassion for corporate parenting responsibilities, greater attention and strategic oversight was necessary to reduce inequalities in attainment, attendance and wellbeing across this group of young people, despite some improvements. A corporate parenting improvement group had been established recently that had the potential to provide key strategic oversight and support better outcomes for those who were looked after and care leavers however, its impact had yet to be seen.

Leaders at all levels demonstrated professional trust, accountability and constructive challenge. They led a learning culture that built capacity, supported staff to be professionally curious and enabled them to work collaboratively and feel empowered. Despite the investment in training, there remained areas of practice that were evaluated less well or in which there was more variability in quality, requiring further strategic oversight. A quality assurance framework had been agreed but was not yet implemented.

Leaders demonstrated a shared commitment to pooling resources and funding to support transformational change and service redesign. While early days, the partnership had reviewed and refined priorities, outcomes and outcome measures to ensure the needs of children and young people were met.

How well do we meet the needs of stakeholders?

Good

2.2 Impact on families

Rationale for the evaluation

Parents and carers were benefitting from the help they received from services, which were making their lives better however, not all parents were experiencing the same consistent degree of support.

Almost all parents and carers understood why services were involved with them and the majority felt staff were trying to improve things for them. Relationship-based practice was contributing to this and parents' experiences reflected trusting relationships with staff that built confidence. They benefitted from timely and early intervention. Targeted and intensive services and the robust multi-agency work with vulnerable pregnant women were having a positive impact. Alternatives to care and intensive family support services targeted at families with children and young people at risk of becoming looked after were effective in their support.

However, a few parents and carers felt judged and were not able to build relationships, particularly when there were child protection concerns. Some were also overwhelmed at the point at which services became involved. A high turnover of staff, particularly social workers, had impacted negatively on some parents' ability to develop trusting relationships.

Tailored parenting support was meeting parents' individual needs. Where parents were initially wary of services, this approach helped to build their capacity to change. Parents benefitted from a wide range of community-based resources. In some localities, parents were actively involved in planning at community level and the partners were putting in place resources that were increasing parental confidence and resilience.

In most cases, staff were effective at involving the child's parents and carers and seeking their views. A few parents and carers, however, felt they were not listened to or did not have their views taken seriously. Independent advocacy was not routinely offered to parents.

Some kinship carers told us they had historically found it difficult to get support and advice. Kinship carers who had been supported by the new kinship care team had valued better communication and felt more confident as carers.

In most cases where a child had been separated from family members, the support given to maintain appropriate parental relationships was mostly effective. For some, the support continued after their children had returned home.

Self-directed support arrangements were having a positive impact for some families. Its effectiveness was compromised in some instances by delays in putting it in place and difficulties for some families in recruiting personal assistants. A few parents and carers wanted greater access to respite and had experienced a lack of clarity about the ways in which this could be accessed.

How well do we meet the needs of stakeholders?

Good

2.1 Impact on children and young people

Rationale for the evaluation

Many children and young people were experiencing positive outcomes from the intervention of services however, this was not the case consistently across the lives of all children and young people in need of care and protection.

Children and young people in need of protection were being kept safe as a result of timely intervention. Strong pre-birth planning processes and focused multi-agency working were contributing to the safety of unborn and vulnerable babies. Improvements in the interagency referral discussion process had led to timely decision making and effective risk assessment for most children and young people.

The outcomes of looked after children and young people were more variable. Despite positive improvements in attendance and attainment and a reduction in exclusion rates for this group, those who were looked after at home experienced poorer outcomes than their looked after peers. Health outcomes for looked after children and young people remained variable. Out-of-authority placements remained high, while kinship care placements and the numbers of children and young people looked after at home remained low. The impact of approaches to address the balance of care had not yet been seen.

Where the child or young person had been identified as needing permanent substitute family care, this had mostly been progressing well. Where children and young people had been separated from their families, they were encouraged to maintain appropriate contact with their parents and carers in over 80% of cases and with their brothers and sisters in just over half of cases.

Children and young people with disabilities and in receipt of regular short breaks were not included within the looked after children and young people population and their entitlement as care leavers was not apparent. They were benefitting from regular reviewing arrangements. In the transition stage, there were mixed experiences and outcomes for this group of children and young people.

The life chances of some care leavers were enhanced by an increased uptake of college placements and increased numbers of care leavers sustaining their own tenancies. A few care experienced young people had experienced homelessness despite the partnership's approach to address their housing needs. The partnership needs to do more to maintain contact with young people after they leave care.

Young people were encouraged and supported to remain in their placements until they were ready for independence, at a pace that was right for them. Very good support to foster carers and a new focus on supporting kinship carers were helping to improve the stability of existing placements. A small number of young people returning to Aberdeen from out-of-authority placements faced challenges in accessing services.

Children and young people were benefitting from consistent, strong, supportive and trusting relationships with staff however, not all children and young people experienced the same degree of support. The use of perceptual data about children's, young people's and their parents' experiences of the child protection system was limited. The partnership had identified this as an area for improvement.

While we saw evidence of staff advocating for children and young people in two-thirds of case records, extending this would provide even greater support for those in need of care and protection and ensure the inclusion of their views in all decision-making processes.

What outcomes have we achieved?

Good

1.1 Improvements in the safety, wellbeing and life chances of vulnerable children and young people

Rationale for the evaluation

The partnership demonstrated encouraging progress in processes, improvements and outcomes for children and young people in need of protection, more so than for those who were looked after or care experienced.

Effective recognition and response to immediate risk of harm and increased staff confidence was keeping children and young people safe. The child protection committee had appropriately reviewed and refined the amount of data they gathered. Through their data framework and renamed performance and quality subgroup, the committee had formed relevant proxy measures to help them answer 13 key questions. This enabled them to review trends over time and make regional and national comparisons.

Good use of reliable data measures was seen through the work of the child protection committee. Partners were beginning to link proxy measures to demonstrate outcomes for children and young people in need of protection. Reducing trends in the length of time children were on the child protection register and re-registration rates were attributed to improvements in the quality of children's assessments and more effective plans. Partners had successfully reduced the number of young people going missing from their care placements, attributed to better collaborative working and stronger relationships between young people and staff. The use of emergency measures to keep children, including newborn babies, safe had fallen. Improved multi agency arrangements for pre-birth planning for vulnerable women and their unborn babies had contributed to this. There had been a reducing trend, in line with the national trend, of young people committing offences. The partnership had also met its **Permanence and Care Excellence (PACE)** targets.

The virtual school was monitoring and tracking the educational progress of all looked after children and young people. Partners were beginning to see improvements in areas such as school attendance and exclusions and the percentage of children attaining SCQF level four literacy and numeracy was increasing. The improved analysis of data meant that the partnership had good disaggregated information across different care categories.

Despite these improvements, there remained areas of challenge in relation to some children and young people who were looked after and care leavers. Outcomes for those looked after at home were poorer than for those accommodated. Limited health and wellbeing outcomes data meant that the partnership did not have a comprehensive oversight of the holistic needs of all children and young people in need of care and protection. We saw much variance in the experiences and outcomes for care leavers.

These issues notwithstanding, the partnership had made encouraging progress in demonstrating improvements for many children and young people in need of care and protection.

Appendix 2: The quality indicator framework and the six-point evaluation scale

The six-point evaluation scale

The six-point scale is used when evaluating the quality of performance across quality indicators.

6 Excellent	Outstanding or sector leading
5 Very Good	Major strengths
4 Good	Important strengths, with some areas for improvement
3 Adequate	Strengths just outweigh weaknesses
2 Weak	Important weaknesses – priority action required
1 Unsatisfactory	Major weaknesses – urgent remedial action required

An evaluation of **excellent** describes performance which is sector leading and supports experiences and outcomes for people which are of outstandingly high quality. There is a demonstrable track record of innovative, effective practice and/or very high quality performance across a wide range of its activities and from which others could learn. We can be confident that excellent performance is sustainable and that it will be maintained.

An evaluation of **very good** will apply to performance that demonstrates major strengths in supporting positive outcomes for people. There are very few areas for improvement. Those that do exist will have minimal adverse impact on people's experiences and outcomes. While opportunities are taken to strive for excellence within a culture of continuous improvement, performance evaluated as very good does not require significant adjustment.

An evaluation of **good** applies to performance where there is a number of important strengths which, taken together, clearly outweigh areas for improvement. The strengths will have a significant positive impact on people's experiences and outcomes. However improvements are required to maximise wellbeing and ensure that people consistently have experiences and outcomes which are as positive as possible.

An evaluation of **adequate** applies where there are some strengths but these just outweigh weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because key areas of performance need to improve. Performance which is evaluated as adequate may be tolerable in particular circumstances, such as where a service or partnership is not yet fully established, or in the midst of major transition. However, continued performance at adequate level is not acceptable. Improvements must be made by building on strengths while addressing those elements that are not contributing to positive experiences and outcomes for people.

An evaluation of **weak** will apply to performance in which strengths can be identified but these are outweighed or compromised by significant weaknesses. The weaknesses, either individually or when added together, substantially affect peoples' experiences or outcomes. Without improvement as a matter of priority, the welfare or safety of people may be compromised, or their critical needs not met. Weak performance requires action in the form of structured and planned improvement by the provider or partnership with a mechanism to demonstrate clearly that sustainable improvements have been made.

An evaluation of **unsatisfactory** will apply when there are major weaknesses in critical aspects of performance which require immediate remedial action to improve experiences and outcomes for people. It is likely that people's welfare or safety will be compromised by risks which cannot be tolerated. Those accountable for carrying out the necessary actions for improvement must do so as a matter of urgency, to ensure that people are protected and their wellbeing improves without delay.

Appendix 3: The terms we use in this report

Aberdeen Care Experienced (ACE)

A website and group offering information to looked after and care experienced young people in Aberdeen and supporting them to influence the agenda of the champions board.

Caledonian programme

An integrated approach to addressing domestic abuse. It combines a court-ordered programme for men aimed at changing their behaviour, with support services for women and children.

Champions board

A forum intended to create a unique space for care experienced young people to meet with key decision-makers, service leads and elected members to influence the design and delivery of services that directly affect them and to hold corporate parents to account.

Child protection committee

A forum that brings together all the organisations involved in protecting children in the area. Its purpose is to make sure that local services work together to protect children from abuse and keep them safe.

Child protection order

An order issued by a sheriff in an emergency which removes the child to, or keeps them in, a place of safety.

Community planning partnership

The multi-agency arrangement in which public agencies work in partnership locally with communities, the private and third sectors to plan and deliver better services.

Dyadic developmental psychotherapy

An approach to support families and professionals work together to support children and young people who have experienced trauma and adverse childhood experiences.

Getting it right for every child (GIRFEC)

Getting it right for every child is the national approach in Scotland to improving outcomes and supporting the wellbeing of children and young people by offering the right help at the right time from the right people. It supports them and their parents to work in partnership with the services that can help them.

Inter-agency referral discussion (IRD)

The inter-agency referral discussion is the process of joint information sharing, assessment and decision-making about child protection concerns. The IRD is not a single event but takes the form of a process or a series of discussions.

Lead professional

A professional who co-ordinates assessment and planning to meet the needs of a child or young person when two or more agencies work together.

Multi-agency risk assessment conference (MARAC)

A meeting in which agencies identify and talk about the risk of future harm to people experiencing domestic abuse and, if necessary, their children, and draw up an action plan to help manage that risk.

Multi-agency tasking and co-ordinating (MATAC)

A multi-agency process to tackle domestic abuse. The process involves the perpetrator and the victim, to address behaviours and make changes to protect victims, including children.

Permanence and Care Excellence (PACE)

A programme delivered by the Centre for Excellence for Looked After Children in Scotland (CELCIS). It is a whole-systems approach to improving permanence for looked after children, working with all agencies involved in their welfare.

Pupil Equity Funding:

Scottish Government funding for schools to support them to close the poverty-related attainment gap.

RAFT (Reaching Aberdeen Families Together)

A service which brings together five local and national charities (Barnardo's, ADA, Foyer, Apex and Homestart) in a single service in Aberdeen. The service is funded by Aberdeen City council to provide short-term, early help to children, young people and families considered vulnerable and in need of support services in Aberdeen.

Reclaiming social work unit model

A redesign of social work services into small units with key staff working with children and families. The aim is to reduce the number of children in care and deliver more positive outcomes for children and families.

Staying Put

The Staying Put Scotland guidance was published by Scottish Government in October 2013, the result of work undertaken on behalf of its looked after children strategic implementation group. The guidance is intended to improve care planning and achieve positive outcomes for care experienced young people.

Virtual School

An Aberdeen resource designed to support improvements in the educational progress, attainment and achievement of all children and young people looked after by the local authority, including those that are educated in other local authorities. The Virtual School is led by the virtual school head teacher with support from colleagues in social work, the educational psychology service, the third sector, the central education team and a looked after children nurse.

Headquarters

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY
Tel: 01382 207100
Fax: 01382 207289

Website: www.careinspectorate.com
Email: enquiries@careinspectorate.gov.scot
Care Inspectorate Enquiries: 0345 600 9527



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ABERDEEN CITY COUNCIL

COMMITTEE	Operational Delivery Committee
DATE	12 November 2019
REPORT TITLE	Cluster Risk Registers
REPORT NUMBER	OPE/19/409
DIRECTORS	Andy McDonald and Rob Polkinghorne
CHIEF OFFICERS	Jacqui McKenzie, Andrew Howe, Derek McGowan, Mark Reilly, Graeme Simpson
REPORT AUTHOR	Chief Officers
TERMS OF REFERENCE	General 7.4

1. PURPOSE OF REPORT

To present the Cluster Risk Registers and Assurance Maps in accordance with Committee Terms of Reference and to provide assurance on the Council's system of risk management.

2. RECOMMENDATION(S)

That the Committee note the Cluster Risk Registers and Assurance Maps set out in Appendices A – C.

3. BACKGROUND

Committee Roles and Responsibilities

3.1 The Audit, Risk and Scrutiny Committee is responsible for overseeing the system of risk management and for receiving assurance that the Corporate Management Team (CMT) are effectively identifying and managing risks. To this end, it reviews the Council's Corporate Risk Register annually, as well as an annual report on the system of risk management which is included in the Annual Governance Statement.

3.2 The Risk Management Framework states that all other committees should receive assurance on the risk management arrangements which fall within their terms of reference. This is provided through the risk registers for the relevant Clusters which fall within the remit for this Committee. These are:-

1. Customer Risk Register by Cluster:

- Customer Experience
- Digital and Technology

- Early Intervention and Community Empowerment
2. Operations and Protective Services
 3. Integrated Children's Services

Risk Registers

- 3.3 The Corporate Risk Register captures the risks which pose the most significant threat to the achievement of the Council's organisational outcomes and have the potential to cause failure of service delivery.
- 3.4 The Cluster Risk Registers set out in appendices A-D and reflect the risks which may prevent each Cluster area from delivering on strategic outcomes.
- 3.5 Chief Officers and Directors have sought to ensure that Cluster Risk Registers link to organisational outcomes as set out in the LOIP and (where applicable) commissioning intentions within the Corporate Delivery Plan.
- 3.6 Over the coming twelve months, further work will be done to:-
 - Embed the Cluster Risk Register within the organisations risk management system which is currently being reviewed.
 - Reflect and implement internal audit recommendations on the risk management system.
 - Continue to review and improve the development of the Cluster Risk Registers and Assurance Maps.
 - Aim to demonstrate clear linkages with the Internal Audit Plan to ensure a risk-based approach to the Council's audit programme.
- 3.7 The Cluster Risk Register provides the organisation with the detailed information and assessment for each risk identified including;
 - **Current risk assessment (score)** – this is initial assessment of the risk by the risk owner prior to the application of any controls, mitigating actions and activities.
 - **Residual risk assessment (score)** – this is the assessment of the risk by the risk owner after the application of the controls.
 - **Controls** – these are the activities and items that will mitigate the effect of the risk event on the organisation.
 - **Control Assessment** – assessment of the controls identified will determine the control assessment. There are three categories of assessment:
 1. Not effective – less than 50% effective
 2. Partially effective – between 50% and 99% effective
 3. Fully effective – 100% effective
 - **Risk score** – each risk is assessed using a 4x6 risk matrix as detailed below. The 4 scale represents the impact of the risk and the 6 scale represents the likelihood of the risk event occurring.

Impact	Score						
Very Serious	4	4	8	12	16	20	24
Serious	3	3	6	9	12	15	18
Material	2	2	4	6	8	10	12
Negligible	1	1	2	3	4	5	6
Score		1	2	3	4	5	6

Likelihood	Almost Impossible	Very Low	Low	Significant	High	Very High
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3.8 Development and improvement of the Cluster Risk registers has continued since the Cluster Risk Registers were last reported to Committee:

- Cluster Risk Registers have been reviewed in conjunction with the LOIP and (where applicable) Commissioning Intentions within the Corporate Delivery Plan
- Cluster Risk Registers are regularly reviewed by Risk Owners and Managers
- Assurance Maps have been created and are incorporated into each Cluster Risk Register.

Assurance Maps

3.9 The Assurance Map provides a visual representation of the sources of assurance associated with each Cluster. This evidences the breadth and depth of assurance sources, so that the Committee and Senior Management Teams can determine where these are insufficient, whereas the Cluster Risk Register demonstrates how effectively risk is being managed through the controls which flow out of those sources of assurance.

3.10 The Assurance Map provides a breakdown of the “three lines of defence”, the different levels at which risk is managed. Within a large and complex organisation like the Council, risk management takes place in many ways. The Assurance Map is a way of capturing these and categorising them, thus ensuring that any gaps in sources of assurance are identified and addressed:

First Line of Defence “Do-ers”	Second Line of Defence “Helpers”	Third Line of Defence “Checkers”
The control environment; business operations performing day to day risk management activity; owning and managing risk as part of business as usual; these are the business owners, referred to as the “do-ers” of risk management.	Oversight of risk management and ensuring compliance with standards, in our case including ARSC as well as CMT and management teams; setting the policies and procedures against which risk is managed by the do-ers, referred to as the “helpers” of risk management.	Internal and external audit, inspection and regulation, thereby offering independent assurance of the first and second lines of defence, the “do-ers” and “helpers”, referred to as the “checkers” of risk management.

4. FINANCIAL IMPLICATIONS

- 4.1 There are no direct financial implications arising from the recommendations of this report. The report deals with risk to the achievement of strategic outcomes and this process serves to identify controls and assurances that finances are being properly managed.

5. LEGAL IMPLICATIONS

- 5.1 There are no direct legal implications arising from the recommendations of this report. Cluster Risk Registers serve to manage many risks with implications for the legal position and statutory responsibilities of the Council.

6. MANAGEMENT OF RISK

- 6.1 The Committee is provided with assurance from the Cluster Risk Registers presented that there are effective controls identified to manage the risks which would present achievement of strategic outcomes relevant to its terms of reference. There are no risks arising from the recommendations in the report.

7. OUTCOMES

- 7.1 Each risk on the Cluster Risk Registers is aligned to one or more of the themes within Local Outcome Improvement Plan.

Design Principles of Target Operating Model	
	Impact of Report
Organisational Design	The completion of Cluster Risk Registers aligned to the interim transitional structure supports the principles of organisational design.
Governance	Reporting to Committees on the Corporate Risk Register and Cluster Risk Registers allows members to scrutinise the system of risk management to help ensure its effectiveness. The

	registers also provide a tool by which to better manage achievement of our strategic outcomes.
Process Design	In reviewing our risk management processes, there is an opportunity to make sure that the risk to the Council's achievement of the strategic objectives, including those which external organisations and other stakeholders contribute to, is appropriately managed and mitigated.
Technology	It is anticipated that risk registers will be updated using digital methods in the medium term and in the longer term they will become integrated within a wider Assurance Framework.
Partnerships and Alliances	Risks to the delivery of organisational objectives can at times be related to arms-length external organisations. These will be reflected in the appropriate risk register(s). Furthermore, risk is overseen by the Assurance Hub which reports to the Audit, Risk and Scrutiny Committee on a regular basis.

8. IMPACT ASSESSMENTS

Assessment	Outcome
Equality & Human Rights Impact Assessment	Full EHRIA not required
Privacy Impact Assessment	Not required
Duty of Due Regard / Fairer Scotland Duty	Not applicable

9. BACKGROUND PAPERS

None

10. APPENDICES

Appendix A Customer Risk Register by Cluster:

- Customer Experience
- Digital and Technology
- Early Intervention and Community Empowerment

Appendix B Operations and Protective Services

Appendix C Integrated Children's Services

11. REPORT AUTHOR CONTACT DETAILS

Jacqui McKenzie
Chief Officer – Customer Experience
jamckenzie@aberdeencity.gov.uk
Tel: 01224 526809

Andrew Howe
Chief Officer – Digital and Technology
ahowe@aberdeencity.gov.uk
Tel: 01224 523366

Derek McGowan
Chief Officer – Early Intervention and Community Empowerment
demcgowan@aberdeencity.gov.uk
Tel: 01224 522226

Mark Reilly
Chief Officer - Finance
mareilly@aberdeencity.gov.uk
Tel: 01224 523096







Graeme Simpson
Chief Officer – Integrated Children’s Services
gsimpson@aberdeencity.gov.uk
Tel: 01224 523496

Customer Risk Register by Cluster



The Risk Register for the Customer function details the live risks of operational significance. Whilst we acknowledge there are other areas that present a risk to the Council if not managed correctly, these are monitored effectively in business as usual activities therefore not detailed in the function risk register. We actively monitor all operational risks and will appropriately escalate any risk if there is an increase in significance.

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Code	Title	Current Risk Score	Residual Risk Score	Cluster	Risk Owner	Risk Manager	LOIP Themes
CEXP-001	Customer Experience Service Delivery	16 	12 	Customer Experience	Jacqui McKenzie	Wayne Connell Allan MacCreadie Lucy McKenzie Marion Philip Bruce Reid	Prosperous People
DT001	Digital and Technology Service Delivery	16 	12 	Digital & Technology	Andrew Howe	Norman Cook Steve Robertson Chris Sellar	Enabling Technology
EICE001	Universal Credit	16 	12 	Early Intervention & Community Empowerment	Derek McGowan	Neil Carnegie	Prosperous People

Code	Title	Current Risk Score	Residual Risk Score	Cluster	Risk Owner	Risk Manager	LOIP Themes
EICE002	Void Properties	16 	12 	Early Intervention & Community Empowerment	Derek McGowan	Neil Carnegie	Prosperous People
EICE003	Commissioning Intentions – Children and Young People	9 	6 	Early Intervention & Community Empowerment	Derek McGowan	Derek McGowan	Prosperous People
EICE004	Commissioning Intentions – Adults	9 	6 	Early Intervention & Community Empowerment	Derek McGowan	Derek McGowan	Prosperous People
EIEC005	Commissioning Intentions - Place	6 	4 	Early Intervention & Community Empowerment	Derek McGowan	Derek McGowan	Prosperous People

Customer Experience Cluster

Code	CEXP001	Customer Experience Service Delivery		
Definition	Risk to delivery of key front-line services in the event of failures of systems or processes			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> Failure to deliver statutory services Customers unable to access services Health, wellbeing and safety of customers impacted Inability to deliver KPIs/ Service Delivery Targets Loss of income Reputational damage 	<ul style="list-style-type: none"> System failure Lack of robust control measures, e.g. Business Continuity plans Not maintaining skillset 	Implementation of robust Business Continuity Plans	Partially Effective	<p>Likelihood</p>
		Ongoing testing of existing Disaster Recovery Contract for Community Alarm Service	Fully Effective	
		Effective Disaster Recovery arrangements in place to ensure full requirements of Community Alarm service is met.	Partially Effective	
		Effective local administration of key systems for which the Customer Experience cluster is responsible for.	Partially Effective	
		Effective multi-skilling of staff to ensure business continuity	Partially Effective	
				Very serious
				Significant
Risk Owner	Jacqui McKenzie	Risk Manager	Wayne Connell Allan MacCreadie Marion Philip Lucy McKenzie Bruce Reid	Residual Risk Assessment
Latest Note	Risk reviewed and updated at Customer Experience Senior Management Team (SMT) meeting		30 Sep 2019	<p>Likelihood</p>
				Very serious
				Low

Customer Experience Assurance Map

Risk Reference	Risk Description	First Line of Defence (Do-ers)	Second Line of Defence (Helpers)	Third Line of Defence (Checkers)
CEXP001	<p>Customer Experience Service Delivery</p> <p>Risk to delivery of key front-line services in the event of failures of systems or processes</p>	<ul style="list-style-type: none"> Operational Test Schedules for Business Continuity Plans Operational procedures and guidance including those set out in the Business Continuity Plans in the event of a system or process failure. Risk Assessments Staff training and development on business continuity arrangements. Analysis following activation of business continuity arrangements / tests and improvement plans identified. 	<ul style="list-style-type: none"> Customer Experience Cluster Senior Management Team (SMT) undertakes review of Cluster Operational Risk Register Customer Function Senior Management Team (SMT) undertakes review of Cluster Operational Risk Register Assurance Team Business Continuity Group Sub-Group 	<ul style="list-style-type: none"> Annual reporting of Function / Cluster Risk Register to Operational Delivery Committee. Internal Audit Plan approved and overseen by Audit, Risk and Scrutiny Committee

Code	DT001	Digital & Technology Service Delivery		
Definition	The impact of IT service disruption on the ability of the Council to deliver key services to customers.			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> • Service disruption • Impact on Council Finances • Inability to share services • Reduced capability to deliver customer facing services • Unlawful disclosure of sensitive information • Individuals placed at risk of harm • Prosecution - penalties imposed • Reputational damage 	<ul style="list-style-type: none"> • Out of date Server OS (Windows Server 2008 End of Life January 2020) • Analogue to Digital switchover (ISDN and Analogue lines End of Life 2025) • Out of date client OS (Windows 7 End of Life January 2020) • No PSN accreditation • Unsupported software • Out of date software • Move to external cloud-based services • System downtime 	Vendor and Contract Management	Fully Effective	
		Assign adequate resources	Fully Effective	
		Horizon Scanning	Fully Effective	
		Monitoring and Alerting	Fully Effective	
		Testing	Fully Effective	
		Accreditation	Partially Effective	
		Software Catalogue	Fully Effective	
		Patch Management	Partially Effective	
		Critical System Availability Management	Fully Effective	
		IT Support Service	Fully Effective	
		Change Management	Fully Effective	
		IT Policy Management	Fully Effective	
		System Lifecycle Management	Partially Effective	
			Significant	
Risk Owner	Andrew Howe	Risk Manager	Norman Hogg	Residual Risk Assessment
Latest Note	Risk reviewed and updated by Risk Owner and Risk Manager – 1 st October 2019		1 Oct 2019	
			Very serious	
			Very Low	

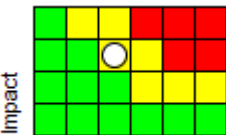
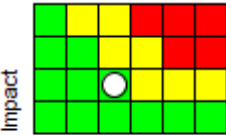
Digital and Technology Assurance Map

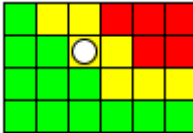
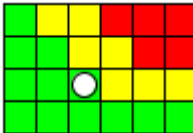
Risk Reference	Risk Description	First Line of Defence (Do-ers)	Second Line of Defence (Helpers)	Third Line of Defence (Checkers)
DT001	<p>Digital & Technology Service Delivery The impact of IT service disruption on the ability of the Council to deliver key services to customers.</p>	<ul style="list-style-type: none"> • Mandatory Information Governance Staff Training and IT Security Staff Training • Operational procedures and guidance notes • Policy documentation including, Information and Communication Technology (ICT) Acceptable Use Policy and ICT Access Control Policy, Protective Monitoring Policy • ICT System Risk Assessments • Data Privacy Impact Assessments • Investigation into incidents and breaches • Vendor Management • Monitoring & Alerting • Patch Management • Change Management 	<ul style="list-style-type: none"> • Corporate Management Team (CMT) Stewardship undertakes monthly review of Corporate Risks • Senior Management Team (SMT) undertakes review of Cluster Operational Risk Register • Information Governance Group 	<ul style="list-style-type: none"> • Annual Internal Audit Plan approved and overseen by Audit Risk and Scrutiny Committee • Cyber Essentials testing and accreditation • External IT Health Checks • Reports from Scottish Governance Cyber Resilience • External Penetration testing • IT Audits

Early Intervention & Community Empowerment Cluster

Code	EICE001	Universal Credit		
Definition	Universal Credit full roll out may reduce tenancy sustainment and increase rent arrears and homeless applications.			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> Increase in rent arrears levels in mainstream tenancies Customer satisfaction levels decrease Improvements made in the homeless journey cannot be maintained Negative impact on household finances Negative impact on health and wellbeing of tenants due to financial pressure LOIP objectives not met Increase in homelessness presentations Impact on HRA fund including availability of Capital 	<ul style="list-style-type: none"> Full roll out of Universal Credit on 31st October 2018 Increase in waiting periods for benefits to be received Some tenants may elect not to have their benefits paid directly to ACC as landlord Complexity of UC system 	Ongoing work with City partners and DWP	Fully Effective	<p>Impact</p> <p>Likelihood</p>
		Training package for ACC staff including Housing, Housing Support, Revenue and Benefits	Fully Effective	
		Increase in housing officer type roles	Partially effective	
		Rent Management Policy refreshed	Partially effective	
		Additional post created at Job Centre	Partially effective	
		Monitoring of UC impact ongoing and cttee report scheduled in November 2019 to identify any further actions required to manage and mitigate	Partially effective	
		Proactive use of direct payments	Fully Effective	
Risk Owner	Derek McGowan	Risk Manager	Neil Carnegie	Residual Risk Assessment
Latest Note	Risk reviewed and updated by Risk Owner and Risk Manager – 3rd October 2019		3 Oct 2019	<p>Impact</p> <p>Likelihood</p> <p>Very serious</p> <p>Very Low</p>

Code	EICE002	Void Properties			
Definition	Level of void properties affecting rental income and availability of homes available to let				
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment	
		Control	Control Assessment		
<ul style="list-style-type: none"> Loss of income -projected at £1.3m for 2019/20 Inability to break contracts in the Private Sector Leasing scheme, leading to projected savings of £150k not being realised in 2019/20 Lack of homes to house people in, affecting homeless journey times and leading to use of hotels and B&Bs, thereby increasing spend Reputational damage and formal engagement from Scottish Housing Regulator Poor customer experience 	<ul style="list-style-type: none"> Availability of skilled staff to repair homes Availability of staff to allocate homes Condition of some homes when handed back to ACC Relatively high levels of termination associated with greater availability of housing in the private rented sector 	Monthly review group analysing performance	Partially effective	<p>Impact</p> <p>Likelihood</p> <p>Very serious</p> <p>Significant</p>	
		Interventions by senior management	Partially effective		
		Increase in staffing for repairs and allocations	Partially effective		
Risk Owner	Derek McGowan	Risk Manager		Neil Carnegie	Residual Risk Assessment
Latest Note	Risk reviewed and updated by Risk Owner and Risk Manager – 3rd October 2019		3 Oct 2019	<p>Impact</p> <p>Likelihood</p> <p>Very serious</p> <p>Very Low</p>	

Code	EICE003	Commissioning Intentions – Children and Young People		
Definition	Failure to meet commissioning intentions may lead to increased demand on services			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> Poor outcomes for Children and Young People Increase in cumulative neglect cases / child protection cases Increase in children and young people being charged with offences / entering the criminal justice system Level or increasing demand on services Children and young people are affected by homelessness Increase in costs 	<ul style="list-style-type: none"> Resourcing Partnership approach to outcomes Skills and capability of service National agency policy – Crown Office, Police for example Availability of Council housing in the City – void properties 	Review of CLD services in conjunction with Education Scotland	Effective	 Likelihood
		Using IHI methodology to develop project charters	Partially effective	
		Training programme for specific skills – MEOC, Domestic Abuse, Adult Protection	Effective	
		Community Planning Aberdeen and Council scrutiny of performance	Effective	
		Violence Against Women Partnership Action Plan development	Effective	
		Develop and implement new Council housing domestic abuse policy	Partially Effective	
		Increase number of secondary schools with mentors in violence prevention scheme in place	Partially Effective	
				Serious
				Low
Risk Owner	Derek McGowan	Risk Manager	Neil Carnegie	Residual Risk Assessment
Latest Note	Risk reviewed and updated by Risk Owner and Risk Manager – 3rd October 2019		3 Oct 2019	 Likelihood
				Serious
				Very Low

Code	EICE004	Commissioning intentions – Adults			
Definition	Failure to meet commissioning intentions may lead to increased demand on services				
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment	
		Control	Control Assessment		
<ul style="list-style-type: none"> Poor outcomes for Children and Young People Increase in cumulative neglect cases Increase in children and young people being charged with offences / entering the criminal justice system Level or increasing demand on services Adults and families are affected by homelessness Increase in costs 	<ul style="list-style-type: none"> Resourcing Partnership approach to outcomes Skills availability National agency policy – Crown Office, Police for example Availability of Council housing in the City – void properties 	Review of CLD services in conjunction with Education Scotland	Effective	 Likelihood	
		Using IHI methodology to develop project charters	Partially effective		
		Training programme for specific skills – MEOC, Domestic Abuse, Adult Protection	Effective		
		Community Planning Aberdeen and Council scrutiny of performance	Effective		
		Void property review group	Partially effective		
		Violence Against Women Partnership Action Plan development	Effective		
		Develop and implement new Council housing domestic abuse policy	Partially effective		
				Serious	
				Low	
Risk Owner	Derek McGowan		Risk Manager	Neil Carnegie	Residual Risk Assessment
Latest Note	Risk reviewed and updated by Risk Owner and Risk Manager – 3rd October 2019		3 Oct 2019		 Likelihood
					Serious
					Very Low

Code	EICE005	Commissioning Intentions - Place		
Definition	Failure to meet commissioning intentions may lead to increased demand on services			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> Low levels of community resilience and ongoing reliance on ACC to provide services Low level of community participation in development of Locality Plans 	<ul style="list-style-type: none"> Resourcing Community links Co-ordinated approach to developing locality plans with HaSCP 	Public Protection Committee	Partially effective	<p>Likelihood</p>
		Organisational Resilience Group	Effective	
		Scrutiny from community Planning Aberdeen	Effective	
				Serious
				Very Low
Risk Owner	Derek McGowan	Risk Manager	Derek McGowan	Residual Risk Assessment
Latest Note	Risk reviewed and updated by Risk Owner- 3rd October 2019		3 Oct 2019	<p>Likelihood</p>
				Material
				Very Low

Early Intervention and Community Empowerment Assurance Map

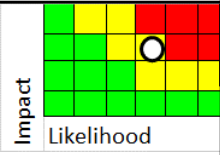
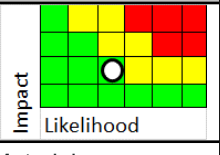
Risk Reference	Risk Description	First Line of Defence (Do-ers)	Second Line of Defence (Helpers)	Third Line of Defence (Checkers)
All	Early Intervention and Community Empowerment	<ul style="list-style-type: none"> • Staff training and development • Operational procedures and guidance documentation • Policy documentation • Strategy • Culture 	<ul style="list-style-type: none"> • Corporate Management Team (CMT) • Senior Management Team (SMT) undertakes review of Cluster Operational Risk Register • Operational Delivery Committee • Educational Operational Delivery Committee • Council • Community Planning Aberdeen 	<ul style="list-style-type: none"> • Annual Internal Audit Plan approved and overseen by Audit Risk and Scrutiny Committee • Annual External Audit and report • Operational Delivery Committee • Educational Operational Delivery Committee • Council • Audit, Risk and Scrutiny Committee • Community Planning Aberdeen

Integrated Children's and Family Services – Cluster Risk Register

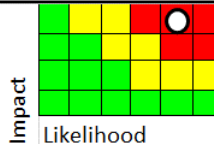
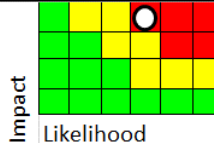
The Risk Register for the ICFS unction details the live risks of operational significance, the Risk Register is presented to both the Operational Delivery Committee and Education Operational Delivery Committee. Whilst we acknowledge there are other areas that present a risk to the Council if not managed correctly, these are monitored effectively in business as usual activities therefore not detailed in the function risk register. We actively monitor all operational risks and will appropriately escalate any risk if there is an increase in significance.

Risk Code	Risk Title	Current Risk Score	Residual Risk Score	Cluster	Risk Owner	Risk Manager	LOIP Themes
ICFS 002	Risk that performance management arrangements are not robust	12	4	Integrated Children's and Family Services	Graeme Simpson	Reyna Stewart	Prosperous People (children)
ICFS 005	Risk that service delivery is hindered by staff recruitment and retention issues	20	16	Integrated Children's and Family Services	Graeme Simpson	Eleanor Sheppard/Ali McAlpine	Prosperous People (children)
ICFS 007	Growing demographic demands result in service delivery pressures	12	9	Integrated Children's and Family Services	Graeme Simpson	Eleanor Sheppard/Gail Beattie	Prosperous People (children)
ICFS 008	Risk that financial planning is not robust	20	8	Integrated Children's and Family Services	Graeme Simpson	Eleanor Sheppard/Helen Sherrit	Prosperous Economy
ICFS 009	Risk of major CareFirst systems failure	12	8	Integrated Children's and Family Services	Graeme Simpson	Trevor Gillespie	Prosperous People (children)
ICFS 010	Failure to deliver statutory obligations	12	8	Integrated Children's and Family Services	Eleanor Sheppard	Louise Beaton/Fiona Lawrie	EOD only

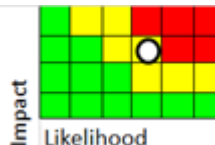
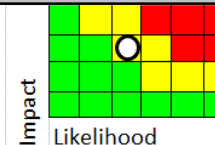
	for early learning and childcare						Prosperous People (children)
ICFS 011	Unaccompanied Asylum Seeking Children (UASC)	12	9	Integrated Children's and Family Services	Graeme Simpson	Isabel McDonnell	Prosperous People (children)
ICFS 012	Foster Carers being granted employee status	15	10	Integrated Children's and Family Services	Graeme Simpson	Isabel McDonnell	Prosperous People (children)
ICFS 014	Financial cost of increase in school role	15	10	Integrated Children's and Family Services	Graeme Simpson	Eleanor Sheppard	Prosperous People (children)
ICFS 015	Risk of major SEEMiS systems failure	12	8	Integrated Children's and Family Services	Eleanor Sheppard	Charlie Love	Prosperous People (children)

Code	ICFS002	Risk that performance management arrangements are not robust		
Definition	Performance management supports an effective compliance culture and change and continual improvement processes.			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
<ul style="list-style-type: none"> • Effectiveness - measurement of impacts and outcomes. • Consistency - approach to the transformation and improvement agendas. • Capacity and capability - accountability, evidencing Best Value delivery and Public Performance Reporting. • Reputation – confidence and trust which stakeholders have in the organisation. • Governance – assurance and accountability, government agency approval. 	<ul style="list-style-type: none"> • Performance culture is being embedded across ICFS. • Inconsistent use of performance indicators to inform service improvement. • Poor benchmarking activity. • Target-setting inadequate. • Performance metrics used not demonstrating impact on outcomes. 	Control	Control Assessment	
		Review of Key Performance Indicators (KPIs) to measure impact of effective service delivery in order to inform planning	Partially Effective	
		Robust governance structure at committee level with reporting of KPIs	Fully Effective	
		Access to dashboard for relevant staff to support quality assurance and improvement activity	Fully Effective	
		Progress in realising improvement (including implementation of the National Improvement Framework Plan) tracked through monthly monitoring of KPIs and overseen by Chief Officer		
		Performance reporting reviewed to assure and improve quality	Partially Effective	
				Serious Significant
Risk Owner	Graeme Simpson	Risk Manager	Reyna Stewart	Residual Risk Assessment
Latest Note	The use of performance data is central to the delivery of operational services. Schools and central improvement teams are making increasingly effective use of KPIs in tracking outcomes to better understand the impact of the service on children and young people. School leadership teams have systems in place to track individual pupil progress and data gleaned is used to inform school improvement planning. The new education structure will see accountability for performance against KPIs being owned by education Service Managers. This level of tracking will inform both our improvement work and give us assurance around sound financial planning.		September 2019	
	All CSW teams have a performance dashboard and these feed into a service reporting system. Similarly, within schools a dashboard has been developed for schools containing key and critical information. These tools allow for more effective support and challenge to be offered to services as part of the quality assurance arrangements.			
	A C&YP Data Forum has been established jointly chaired by the CO-BIU & CO-ICFS to develop existing data collection processes to enable more intuitive use of data to drive service improvement.			Material Very Low

	Regular reporting is provided to Committee and external bodies on key performance indicators.		
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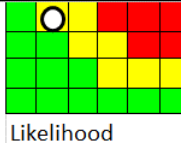
Code	ICFS005	Risk that service delivery is hindered by staff recruitment and retention issues		
Definition	The quality of the workforce is key to the delivery of high quality services and to implementing the transformation and improvement agendas. With high staff vacancies the pace of change may be slowed and more pressure put on the staff in post.			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
<ul style="list-style-type: none"> • Service delivery - the breadth of the curriculum delivered in schools, particularly affecting the senior phase. Children and Young People do not receive their full entitlement. • People – Services to children and their families fail to deliver on the statutory and policy expectations. • Operations – overall capacity and capability to deliver. • Resources – recruitment and retention (the pace of change and improvement may be reduced due to the number of Social Work and education vacancies). 	<ul style="list-style-type: none"> • Staffing levels for teachers and Social Workers do not meet with current and future business need. • Training and development opportunities are reduced due to staff shortages. • Cost of living in Aberdeen is above that of most places in Scotland. • The scale of change has created uncertainty about employment opportunities within the Council. • Morale is also affected by uncertainty around the new Target Operating Model and future employment opportunities with the Council. 	Control	Control Assessment	 Very serious High
		Service workforce plans are in place and continually refined to ensure that the plan responds to changing circumstances and opportunities to extend reach (including making better use of social media) where possible	Fully Effective	
		Annual census data is in place for teachers to ensure pupil teacher ratios are maintained	Fully Effective	
		Annual census data is in place for social work staff to ensure clarity on pressure points.	Fully Effective	
		Opportunities for retraining offered where posts are easier to fill (example PSAs being retrained as Early Years Practitioners)	Fully Effective	
Refreshed education professional learning model linked to Quality Assurance model being developed in collaboration with colleagues in schools				
Risk Owner	Graeme Simpson	Risk Manager	Eleanor Sheppard/Ali McAlpine	Residual Risk Assessment
Latest Note	<p>The recruitment of teachers and social workers across ICFS remains a challenge. Links with local universities remain positive but demand outstrips supply. There has been a marked increase in the number of HT posts attracting interest and this is attributed to the social media campaign designed to highlight the benefits of living and working in the city and taking a 'one council approach' to recruitment. This approach has resulted in a significant reduction in the number of vacancies in schools from August 2019.</p> <p>Areas of staffing vulnerability are known and contingency plans are in place via the use of supply teachers and agency staff. The use of agency staff has reduced significantly over the past year in children's social work bringing greater stability to service delivery but may increase as the service works to reduce the level of vacancy in schools.</p> <p>The education service is engaging with agencies to see if greater collaboration will help mitigate some of the</p>		30 th Sept 19	 Very serious Significant

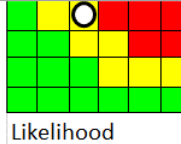
	pressures felt in some secondary faculties and there are some early positive indications. ACC requested an increased cohort of probationers to address shortages in primary schools but sadly numbers did not increase across secondary. CSW has amended its recruitment activities to attract NQSW particularly those who have had placement experience with ACC. Additionally the SW service is exploring the viability of a trainee SW post to support existing non-qualified staff achieve a degree and be retained with the Council.		
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Code	ICFS007	Growing demographic demands result in service delivery pressures		
Definition	Services are increasingly delivering to a greater number of looked after and accommodated children and to a greater number of school aged pupils.			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> • Capacity and capability – overcrowding leading to insufficient places to delivery statutory services • Service delivery - the best service cannot be guaranteed for children and young people. • Service Delivery - Not being able to respond to emerging needs of children and young people at risk of being accommodated. 	<ul style="list-style-type: none"> • A significant increase in house building is projected for the city in the coming years. • Immigration into Aberdeen from across the globe has resulted in an increase in the city's population, including children and young people. • Inaccurate projections regarding the increase in pupil rolls across the city and within individual schools • Failing to rationalise the school estate in order to ensure that buildings are located in the right places and that we have an efficient and affordable estate 	Pupil roll projections are conducted annually and monitored against school capacities and used to inform the routinely updated school estate strategy	Fully Effective	
		Proposals of how ACC will deliver expanded ELC entitlements are being developed by ICFS in collaboration with the Corporate Landlord and Capital.	Fully Effective	
		Numbers of looked after and accommodated children and young people are recorded and monitored and are relatively stable.	Fully Effective	
		Cross Council development of a School Estate Strategy to ensure that the estate is well placed and in good condition to meet our current and future needs	Partially Effective	
		Service Plans take account of demographic changes and how they will be met	Fully Effective	
Risk Owner	Graeme Simpson	Risk Manager	Eleanor Sheppard	Residual Risk Assessment
Latest Note	A review of the school estate is being undertaken by the Corporate Landlord in collaboration with Elected Members and other functions and clusters to ensure that we have an agreed strategic approach to this risk. New national funding is currently being considered to ensure that the Local Authority are well placed to submit a bid in line with the conditions attached.		30-9-2019	

	<p>The expansion of ELC has required a review of our estate in order that Aberdeen City can deliver the increased hours as set out in the legislation. The Early Years' Service is working closely with Corporate landlord and Capital to ensure a joined up and sustainable response.</p> <p>Numbers of LAC children have remained stable over recent years. However, it is recognised that ACC's balance of care is out of step with other LA's. This requires all agencies (ICFS; AHSCP; NHSG; Police and 3rd Sector) to work collaboratively to address ensuring we have appropriate and sufficient local resource to support children to remain within their family and local community.</p>		Serious
			Low

Code	ICFS008	Risk that financial planning is not robust		
Definition	The Council faces continuing and increasing pressure to deliver services in an environment of reducing financial resources. Robust financial planning is essential to ensure that high class services are delivered to the citizens of Aberdeen.			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
<ul style="list-style-type: none"> • Financial – service costs, budgets; poor management and reduction in available funds. • Legal/regulatory – criticism from the Council's External Auditor and Audit Scotland and breach of Financial Regulations. • Service delivery –the reduction of expenditure without due consideration of the impact on children and young people. 	<ul style="list-style-type: none"> • Financial pressures faced by the Council have been identified as needing to save £125 million over 5 years. • Overall reduction in the revenue and capital grants to the Council from the Scottish Government. • Contractual cost pressures increasing. Decisions about placing children out with the LA made independently. • Increasing demographics result in additional service obligations. • Changes in legislation and consequential service delivery implications are not effectively planned. • Expectations from the public that service delivery will be maintained at current levels. 	Control	Control Assessment	<p>Impact</p> <p>Likelihood</p>
		Council financial plans are agreed at the budget setting Council meeting each year	Fully Effective	
		Budget monitoring arrangements are in place between Service Managers / Head Teachers and Finance Service colleagues and improvement planning details proposed spending and is subject to quality assurance	Fully Effective	
		Budget responsibilities are set out in the Financial Regulations	Fully Effective	
		Opportunities for greater alignment of services across ICFS will be capitalised upon to maximise impact of collective resource, areas to include early years, safeguarding, additional support needs and Looked after and Care Experienced young people.	Fully Effective	
		New scheme of Devolved School Management is to be refined in light of national guidance	Partially Effective	
		Children in need of protection/additional support are tracked on an individual basis to ensure planning remains consistent with their needs.	Fully Effective	
				Very serious
				High

Risk Owner	Graeme Simpson	Risk Manager	Eleanor Sheppard/Ali McAlpine	Residual Risk Assessment
Latest Note	<p>The areas of financial challenge are clearly identified. In the main these relate to children placed out with the authority in fostering and residential care. A number of these statutory decisions are made independent of the local authority. For many children in foster care, they have been in these settings for a number of years and stability of care is critical to their long-term outcomes.</p> <p>The service has developed an edge of care service to support children to remain at home or within their current care setting to prevent an escalation within the care system. This ensures that all options are explored prior to placing a child out with the authority and developing its offer to kinship carers to increase the number placed in this care setting.</p> <p>A Service review is undertaken to ensure the service remains able to deliver on its statutory responsibilities within the available financial envelope.</p>		30 September 2019	 <p>Very serious</p> <p>Very Low</p>

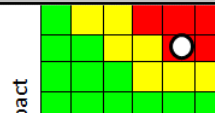
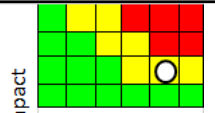
Code	ICFS009	Risk of major CareFirst systems failure		
Definition	Secure, well-functioning IT systems are critical to carrying out statutory Children's Social Work functions.			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
<ul style="list-style-type: none"> • Service delivery– frontline and essential services impacted. • Resources, capacity and capability – information access and child protection cannot be recorded. • Legal - statutory requirements in terms of the Children and Young People Act 2014 not met. 	<ul style="list-style-type: none"> • IT systems suppliers unable to provide adequate support to the Council, and Service practitioners. • Suppliers fail to have effective business continuity and disaster recovery planning arrangements. • Council and Mainframe systems ability to provide sufficient protection of data. • Systems unable to meet the needs of practitioners. 	Control	Control Assessment	 <p>Very serious</p> <p>Low</p>
		Appropriate staff training in place to ensure effective use of Carefirst systems	Partially Effective	
		Data systems are intuitive and support the identification of increased concerns for children.	Partially effective	
		Carefirst well established across children's Social Work	Fully Effective	

Risk Owner	Graeme Simpson	Risk Manager	Trevor Gillespie	Residual Risk Assessment
Latest Note	<p>A report was presented to Committee in June 2016 confirming agreement to extent the current contract of Carefirst but with the intention to bring back an options appraisal for the future. A project team has been established to progress this and a report will be presented to SCC in early 2019.</p> <p>Business Case approved at the Strategic Commissioning Committee 29 August 2019.</p>		<p>21 September 2018</p> <p>October 2019</p>	<p>Very serious</p> <p>Very Low</p>

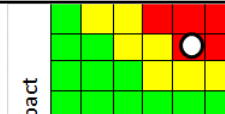
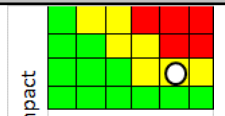
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Code	ICFS010	Failure to deliver statutory obligations for early learning and childcare		
Definition	Local authorities are required to deliver 600 hours per year of early learning and childcare for all 3 & 4 year olds and 27% of eligible 2 year olds and by 2020 this will increase to 1,140 per year by 2020.			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> • Legal/regulatory - statutory duties and requirements. • Service delivery – high quality services not available to meet local need and demand • Resources – Buildings will need to be built/adapted to accommodate the increased hours 	<ul style="list-style-type: none"> • The capacity of the primary school estate insufficient to meet the increased demands of the C&YP Act 2014. • Recruitment and retention of key staff along challenges of finding suitable partner providers will hamper the Council's ability to deliver its duties. • The fundamental shift in the approach to service delivery is not recognised by all agencies. • The 600 hours required for all eligible 3 and 4 year olds is currently not being fully utilised • not currently able to provide for all eligible 2 year olds. 	Quality assurance processes based on the new quality standard are in place with existing partner providers and local authority providers	Partially Effective	<p>Impact Likelihood</p>
		Planning being undertaken at a locality level to mitigate the risk of presuming that one size fits all	Partially Effective	
		Many staff working in ELCC will require to be educated to degree level (SVQ9)	Partially Effective	
		External inspections are carried out by Education Scotland and Care Inspectorate and a new ambitious quality standard will be used to assess quality	Fully Effective	
		Programme Management approach being taken to coordinate cross Council delivery.	Fully Effective	
				Serious
				Significant
Risk Owner	Eleanor Shepperd	Risk Manager	Aisling McQuarry	Residual Risk Assessment
Latest Note	<p>Committee Report submitted to EODC in September 2018 providing update to Elected Members. A cross Council project management approach has been established to ensure coordinated development of approach to delivering the 1140 hours. Strong and effective links exist with partner providers to support development of enhanced provision.</p> <p>Collaboration with funded providers regarding a sustainable rate is nearing completion. Considerable work has undertaken of late to ensure that future housing developments are accounted for in plans and that delivery models are efficient and effective in providing a sustainable model of delivery. The ELA Academy launched their 'Quality Awards' in June. The first cohort of ELC Trainees graduated at the end of last school session with the second cohort due to begin in August and plans for a third. There is sufficient interest in this retraining opportunity to ensure future cohorts will progress through the training course to fill support and practitioners roles</p>		Updated Oct 2019	<p>Impact Likelihood</p>
				Very serious
				Very Low

Code	ICFS011	Unaccompanied Asylum Seeking Children (UASC)		
Definition	UK Government keen for the dispersal of UASC from two English authorities to other parts of Country to allow for more equal distribution.			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
		Multi-Agency planning group meeting to support anticipated arrival	Fully Effective	
		Engagement with other LA's and SG	Fully Effective	
		System of dispersal currently voluntary and will allow for some planning prior to any decision to commit to UASC coming to Aberdeen City.	Partially Effective	
<ul style="list-style-type: none"> • Finance - UK government will provide some funding for each UASC this will not cover the full costs of their care and support • Resources - Lack of resources - staff and buildings to effectively plan for the support UASC. • Service Delivery - The needs of this group of young people will be unique and there is a lack of experience among staff team of this area of work. 	<ul style="list-style-type: none"> • limited accommodation options that are appropriate for UASC. • UASC will not be eligible to access employment or state funded education/training opportunities. Lack of meaningful day time occupation could lead to isolation/negative associations • Resources to provide for each UASC will not cover all their needs. • The needs of UASC are very different to other groups of young people in terms of legal status and experiences 	<ul style="list-style-type: none"> • The UASC (16/17) are predominantly migrant asylum seekers and will have different needs and expectations of the care provided. 	<p>Impact Likelihood</p>	
			Serious	
			Significant	
Risk Owner	Graeme Simpson	Risk Manager	Isabel McDonnell	Residual Risk Assessment
Latest Note	The Scottish Government has amended the legislation which allows for UASC to be dispersed. At present this is on a voluntary basis, although could move to a compulsory basis should demand grow. Current assessment would indicate that ACC is not able to offer placements to UASC. ACC staff have established links with the local faith community to explore support options should this situation change.		Updated October 2019	<p>Impact Likelihood</p>
	Impact will provide for different border controls and number of UASC entering UK anticipated to slow.			
			Serious	
			Low	

Code	ICFS012	Foster Carers being granted employee status		
Definition	Following a Court judgement in England this called into question the employment status of certain foster carers. Full implications of this judgement as it applies in Scotland is still to be determined.			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> • Finance - Foster carers to be treated as employees of the council with same entitlement to paid holidays, sick pay etc. • Resources – Limited foster carers, impact on children and resources - staff and buildings to effectively plan for the support UASC. • Service Delivery - The needs of this children and young people require stability and moving foster care placements to accommodate leave detrimental to their interests. 	<ul style="list-style-type: none"> • limited accommodation options due to supply of foster carers. • Resources to pay foster carers full employment status. • The needs of children require stability and consistency of care. 	Staff linked to national bodies – SWS & IFA who are engagement with discussions with SG.	Fully effective	 Impact Likelihood
		Engagement with other LA's and SG	Fully Effective	
Risk Owner	Graeme Simpson	Risk Manager	Isabel McDonnell	Residual Risk Assessment
Latest Note	<p>The implications for foster carers in Scotland is being considered on a national basis. At this stage it is not felt that it will apply to all carers but only to those whom Councils ask for one carer to be at home all the time to meet the needs of the child. At present Aberdeen City Council only has a small number of these carers.</p> <p>There is an Employment Appeal Tribunal scheduled for late in October 2019 in relation to a Scottish Authority appealing an employment tribunal decision that granted foster care workers employee rights in 2017.</p>		Updated October 2019	 Impact Likelihood
				Serious High

Code	ICFS014	Increase in school role
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Definition	There is a cost pressure of £500,000 resulting from an increase in school role			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> • Finance - risk of insufficient budget to continue with current staffing formula • Resources – risk that staff in post will feel overwhelmed by increased expectation of them • Service Delivery - risk of negative impact on quality of provision 	<ul style="list-style-type: none"> • increase in school age population Lack of forward planning to ensure that expenditure meets demand Lack of professional development to ensure staff work efficiently Lack of efficient systems to make the best use of staff time 	Review Devolved School Management to ensure that all demands are met	Partially effective	 Impact Likelihood
		Review of systems to ensure the best use of staff time to reduce inefficient systems	Not yet effective	
		Ensure current spend (including PEF and SAC funding) is effectively utilised to limit an escalation in needs	Partially effective	
		Continue to improve the professional learning offer to ensure that staff are well placed to delivery primary prevention and targeted intervention	Partially effective	
Risk Owner	Graeme Simpson	Risk Manager	Eleanor Sheppard	Residual Risk Assessment
Latest Note	Updated guidance on Devolved School Management has been made available and is informing a review of local arrangements. It is anticipated that this will be ready for publication in the Spring 2020. A change in approach to professional learning has been highly evaluated with next steps currently being shaped to ensure that a 5 year plan effectively enables the service to ensure that staff are well placed to deliver both primary prevention and early intervention and make best use of resource. A full review of systems will take place over session 19-20 and will likely form part of the ACC National Improvement Framework Plan as this will ensure that we are well placed to make best use of the expertise across our schools. This will include a focus on tackling bureaucracy in order to make the best use of available resource.		Update Oct 2019	 Impact Likelihood
				Serious
				High

Code	ICFS015	Risk of major SEEMiS systems failure		
Definition	Secure, well-functioning IT systems are critical to carrying out statutory Education functions.			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> • Service delivery– frontline and essential services impacted. • Resources, capacity and capability – information access, child protection, educational attainment and achievement cannot be recorded. • Legal - statutory requirements in terms of the Children and Young People Act 2014, The Education (Scotland) Act 1980 and Education (Scotland) Act 2016. 	<ul style="list-style-type: none"> • IT system supplier is unable to provide adequate support to the Council, and Service practitioners. • Supplier fails to have effective business continuity and disaster recovery planning arrangements. • Council and provider systems ability to provide sufficient protection of data. • Systems unable to meet the needs of practitioners. 	Appropriate staff training in place to ensure effective use of both SEEMiS systems	Partially Effective	 Impact Likelihood Very serious Low
		Update of SEEMiS membership agreement	Fully Effective	
		SEEMiS system now relocated into a new data centre with resilient backup	Fully Effective	
		Data systems are intuitive and support the identification of increased concerns for children.	Partially effective	
		SEEMiS provide timescales and assurance of delivery and readiness of Phase 1 and Phase 2 of SEEMiS Schools system.	Partially effective	
		SEEMiS provide timescales and assurance of delivery and readiness of SEEMiS Early Years	Partially effective	
Risk Owner	Eleanor Sheppard	Risk Manager	Charlie Love	Residual Risk Assessment
Latest Note	<p>SEEMiS School system has entered a phase of redevelopment with an August 2020 delivery for Phase 1 and August 2021 for Phase 2. SEEMiS are also developing a SEEMiS Early Years application which ACC will use from August 2020 to support early years expansion.</p> <p>This is a redevelopment of the two services (SEEMiS Schools and SEEMiS Early Years) using cloud infrastructure. It is expected that this will significantly improve the resilience of the service. This will also eliminate the technical debt of the existing SEEMiS service and remove the reliance on third-party software (Java).</p> <p>There will be dual-running of both the legacy SEEMiS Service and the new SEEMiS Schools from August 2020 until August 2021 at least which will have a degree of risk. The Early Years application will be a new product and will not dual run with any legacy system.</p>		Due dates re dec 2019 onwards	 Impact Likelihood Very serious Very Low

Integrated Children's and Family Services Assurance Maps

Risk Reference	Risk Description	First Line of Defence (Do-ers)	Second Line of Defence (Helpers)	Third Line of Defence (Checkers)
(ICFS 008/014)	Financial sustainability There is a cost pressure of £500,000 resulting from an increase in school role The Council faces continuing and increasing pressure to deliver services in an environment of reducing financial resources. Robust financial	<ul style="list-style-type: none"> The areas of financial challenge are clearly identified. In the main these relate to children placed out with the authority in fostering and residential care. A number of these statutory decisions are made independent of the local authority. For many children in foster care, they have been in these settings for a number of years and stability of care is critical to 	<ul style="list-style-type: none"> Corporate Management Team (CMT) Stewardship undertakes monthly review of Risk Register Senior Management Team (SMT) undertakes review of Cluster Operational Risk Register Regular finance meetings with Director Regular meetings with finance contacts with third tier officers and alert system in 	<ul style="list-style-type: none"> Monthly budget print outs <ul style="list-style-type: none"> Annual External Audit and report Annual Internal Audit Plan approved and overseen by Audit, Risk and Scrutiny Committee CIFA financial management review
		<ul style="list-style-type: none"> Analysis following activation of business continuity arrangements / tests and improvement plans identified. 		

	<p>planning is essential to ensure that high class services are delivered to the citizens of Aberdeen.</p>	<p>their long-term outcomes.</p> <ul style="list-style-type: none"> The service has developed an edge of care service to support children remain at home or within their current care setting to prevent an escalation within the care system. This ensures that all options are explored prior to placing a child out with the authority and developing its offer to kinship carers to increase the number placed in this care setting. Review Devolved School Management to ensure that all demands are met Review of systems to ensure the best 	<p>place to escalate risks Quality assurance of SAC provided by QIM (Closing the Gap)</p>	<ul style="list-style-type: none"> PWC budget review Annual credit rating review LSE compliance checks Audit Scotland and National Audit reports HMRC Treasury, Director of Finance and other bodies reports and advice Charities Commission reports and advice and reports on Trust Accounts
Risk Reference	Risk Description	First Line of Defence (Do-ers)	Second Line of Defence (Helpers)	Third Line of Defence (Checkers)
		<p>limit an escalation in needs</p> <p>Continue to improve the professional learning offer to ensure that staff are well placed to delivery primary prevention and targeted intervention</p>		


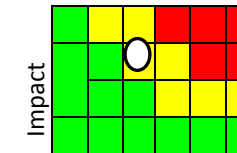
<p>(ICFS010/011/012)</p>	<p>Statutory Obligations</p> <p>Local authorities are required to deliver 600 hours per year of early learning and childcare for all 3 & 4 year olds and 27% of eligible 2 year olds and by 2020 this will increase to 1,140 per year by 2020.</p> <p>UK Government keen for the dispersal of UASC from two English authorities to other parts of Country to allow for more equal distribution. Following a Court judgement in England this called into question the employment status of certain foster carers. At full implications of this judgement as it applies in Scotland is still to be determined.</p>	<ul style="list-style-type: none"> • Quality assurance processes based on the new quality standard are in place with existing partner providers and local authority providers • Planning being undertaken at a locality level to mitigate the risk of presuming that one size fits all • Many staff working in ELCC will require to be educated to degree level (SVQ9) • External inspections are carried out by Education Scotland and Care Inspectorate and a new ambitious quality standard will be used to assess quality • Programme Management approach being taken to coordinate cross Council delivery. • • System of dispersal currently voluntary and will allow for some planning prior to any decision to commit to UASC coming to Aberdeen City • Staff linked to national bodies – SWS & IFA who are engagement with discussions with SG. 	<ul style="list-style-type: none"> • Corporate Management Team (CMT) Stewardship undertakes monthly review of Risk Register • Senior Management Team (SMT) undertakes review of Cluster Operational Risk Register • Regular updates shared with Elected Members and CMT through Project Sponsor • Committee reports 	<ul style="list-style-type: none"> • Regular contact with Scottish Government Assurance Team • Regular contact with Northern Alliance Early Years Assurance team • ADES • COSLA • External Audit
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Aberdeen City Council

Operations and Protective Services

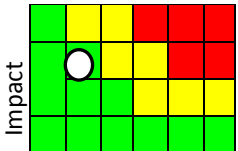
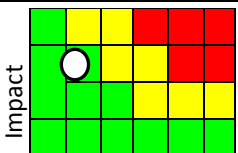
Cluster Risk Register

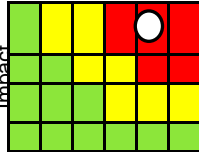
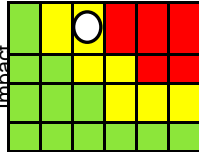
Risk Code	Risk Title	Page Nos	Specific Notes/Actions	Director/ Chief Officer	Risk Owner	Risk Manager
O&PS001	Commodities market fluctuations	3-4	Actions to be implemented	Rob Polkinghorne	Mark Reilly	Pam Walker
O&PS002	Brexit – Trans-frontier shipment of waste	5-6	Actions to be implemented	Rob Polkinghorne	Mark Reilly	Pam Walker
O&PS003	End of existing Suez Waste Management Contract	7-8	Actions to be implemented	Rob Polkinghorne	Mark Reilly	Pam Walker
O&PS004	Failure of sea defences	9-10	Suitable actions in place	Rob Polkinghorne	Mark Reilly	Doug Ritchie
O&PS005	SUDS Section 7	11-12	Suitable actions in place	Rob Polkinghorne	Mark Reilly	Doug Ritchie
O&PS006	Inability to respond to flooding and Winter incident	13-14	Suitable actions in place	Rob Polkinghorne	Mark Reilly	Doug Ritchie
O&PS007	Reduction in partnership/ collaboration working	15-16	Actions to be implemented	Rob Polkinghorne	Mark Reilly	Steven Shaw
O&PS008	Food Growing	17-18		Rob Polkinghorne	Mark Reilly	Steven Shaw
O&PS009	Loss of UKAS accreditation	19	Suitable actions in place	Rob Polkinghorne	Mark Reilly	Andrew Morrison
O&PS010	Loss of operator's licence	20	Suitable actions in place	Rob Polkinghorne	Mark Reilly	William Whyte
O&PS011	Fuel shortage	21	Suitable actions in place	Rob Polkinghorne	Mark Reilly	William Whyte

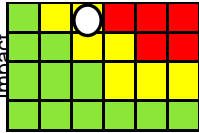
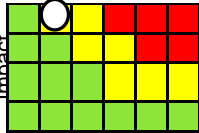
Code	O&PS001	Commodities market fluctuations for Recyclate and RDF and impact of Deposit Return Scheme (DRS)		
Definition	Fluctuation in commodities markets impacting on budgets			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> Current market position not identified correctly and suitable arrangements not in place Reduced performance Inability to balance budgets Inability to maintain standards expected Reputational damage Reduction in materials collection (and hence income) due to implementation of DRS Inability to place materials on the market Reduction in recycling rate 	<ul style="list-style-type: none"> Fluctuation of supply and demand Brexit reducing outlets in EU Minimum price levels Seasonal demands Transportation costs Quality of material 	Ensure communication of financial implication for Council through budget development process each year. Regular monitoring of budget position throughout the year.	Partially Effective	 <p>Impact</p> <p>Likelihood</p> <p>12</p> <p>Very Serious Low</p>
		Maintain good understanding of market impacts through best value/market testing activities through the Waste Management Services Contract	Partially Effective	
		Provide accurate monthly outturns to ensure corporate awareness of market fluctuations	Partially Effective	
		Produce high quality material that is more attractive to the market.	Partially effective	
		Modelling of potential impacts of Deposit Return Scheme (DRS) to ensure this is accounted for in outturns/budget. Maintain awareness of developments of DRS.		
Risk Owner	Mark Reilly	Risk Manager	Pam Walker	Residual Risk Assessment
Latest Note	Basket of goods reviewed on a very regular basis by Suez and their brokers, however state of market is generally a out of our or contractor's control and is subject to worldwide fluctuations in price and demand. MRF currently undergoing modifications which should increase quality of mixed paper stream.			 <p>Impact</p> <p>Likelihood</p> <p>9</p> <p>Serious Low</p>

Code	O&PS002	Brexit – Trans-frontier shipment of waste		
Definition	End/delay of trans-frontier shipment of waste within EU			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> Requirement to identify contingency option sourced performance Inability to handle current waste levels Inability to maintain standards expected Service Failure Reputational damage 	<ul style="list-style-type: none"> UK agreement on waste transfer within EU during transition period and beyond Landfill ban coming into effect 2025 Seasonal demands Current market outlets 	Monitor progress and, where able, influence policy development to reflect Aberdeen’s needs	Partially Effective	<p>Impact</p> <p>Likelihood</p> <p>12</p> <p>Very serious Very Low</p>
		Ensure organisation is briefed on potential changes as they become apparent and mitigation plans developed accordingly	Partially Effective	
		Ensure contingency is in place in the event of any delay or other impact		
		Account for potential cost increases in budget process		
		Development of new EFW facility will come online in late 2021/early 2022 which will remove this risk.		
Risk Owner	Mark Reilly	Risk Manager	Pam Walker	Residual Risk Assessment
Latest Note	<p>Suez have a contractual requirement to dispose of waste and have a business plan to increase suitable outlets</p> <p>Suez have access to landfill as an alternative and last resort option.</p> <p>Landfill Ban now extended to 2025 which allows landfill to continue.</p> <p>Budget outturns have taken account of potential additional landfill in summer due to seasonal reduction in demand.</p> <p>Energy from Waste</p>			<p>Impact</p> <p>Likelihood</p> <p>6</p> <p>Medium Low</p>

Code	O&PS003	End of existing Suez Waste Management Contract		
Definition	Impact of current contract coming to an end without a suitable replacement service in place			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> Service failure resulting in inability to collect some wastes (recyclables and organics) Failure to carry out all of the Council's statutory duties as both Waste Collection and Disposal Authority Increase in cost if an emergency contractor has to be appointed Increase in cost if an unplanned and poorly negotiated extension has to be issued to the current contractor. Long term higher costs if insufficient resources are allocated to allow full review of current contract and full options appraisal of future options. Potential opportunities missed (e.g. joint working with other authorities) 	<ul style="list-style-type: none"> Lack of resource and expertise allocated to the review process. Indecision regarding future direction. Lack of foresight of impacts of national changes (DRS, EPR, etc) Insufficient time given to process. Procurement process delays 	Establish working group to carry out review and map out procurement timeline.	Fully Effective	<p>Likelihood</p> <p>12 Very Serious Medium</p>
		Ensure budget is allocated to the review and procurement process.	Partially Effective	
		Restructure of current Waste & Recycling Team to create additional capacity to work on this project.	Partially Effective	
		Develop dedicated resource (contractor, temporary post, secondment) to manage the process.	Partially Effective	
Risk Owner	Mark Reilly	Risk Manager	Pam Walker	Residual Risk Assessment
Latest Note	<p>Team restructure currently at risk and under discussion with P&O. No budget confirmed for this. No resource allocated. Contract ends October 2025, draft outline timeline:</p> <p>Late 2019: Review of current plan/contract and options appraisal 2020 Approval of terms of reference Plan development – options development, cost and waste modelling</p> <p>2021 Draft Waste Strategy including procurement option/plan 2022 Consultation 2022/3 Procurement/liaison with current provider 2023/4 Draft Final Plan/Waste Strategy 2024 Council Approval & Publication (1 council or more?) Implementation Plan & Timetable 2025 Implementation</p>			<p>Likelihood</p> <p>12 Very serious Medium</p>

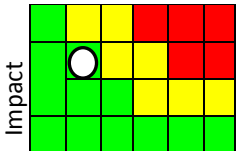
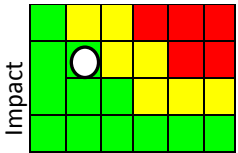
Code	O&PS004	Failure of sea defences and loss of infrastructure		
Definition	Failure of sea defences within ACC's remit			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> Serious loss of life and property Serious loss of infrastructure Potential flooding Reputational damage 	<ul style="list-style-type: none"> Extreme weather Poor coastal defence design/construction/age Poor maintenance Inadequate budget 	Monitoring coastal defences	Fully Effective	 <p>Impact</p> <p>Likelihood</p> <p>6</p> <p>Medium Very Low</p>
		Maintenance to sea defence structures	Fully Effective	
		Emergency response to breach of sea wall	Effective	
		Budget review process	Effective	
Risk Owner	Mark Reilly	Risk Manager	Doug Ritchie	Residual Risk Assessment
Latest Note	<ul style="list-style-type: none"> Continue to monitor and repair as budgets allow Report to Committee for approval of long-term strategy Ongoing work being carried out to the existing sea wall and revetment Condition Survey commissioned Emergency procedure for dealing with breach in sea wall 			 <p>Impact</p> <p>Likelihood</p> <p>6</p> <p>Medium Very low</p>

Code	O&PS005	Sustainable Urban Drainage Systems (SUDS) Section 7		
Definition	Increased costs to ACC due to change in Policy by Scottish Water			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> Additional Maintenance costs or Major costs to implement three pipe system Possible inclusion of Historical sites / Developments Increased Insurance claims Flooding to properties 	<ul style="list-style-type: none"> Change under SUDS procedure by Scottish Water Climate Change Increased Developments within the City. Current combined or two pipe system. 	Refuse to sign off section 7 document	Effective	 <p>Likelihood</p>
		Challenge decision by SCOTS group	Effective	
		Retain under maintenance agreements	Effective	
				<p>20 Very serious High</p>
Mitigating Actions				Residual Risk Assessment
<ul style="list-style-type: none"> Continue discussions with Scottish Water Seek Legal advice Continue discussions with other LA's and SCOTS 				 <p>Likelihood</p>
				<p>12 Very serious Medium</p>
Risk Owner	Alan Robertson	Risk Manager	Doug Ritchie	
Latest Note				25 September 2019

Code	O&PS006	Inability to respond to flooding and Winter incidents			
Definition	The Council must be aware and plan for and respond to Flooding instances across the City				
Potential Impact	Causes	Control Effectiveness			Current Risk Assessment
		Control	Control Assessment	Weight	
<ul style="list-style-type: none"> Public expectation is not met Additional costs involved in solving flooding issues LOIP Stretch Outcome 14.2 will not be met in particular at Deeside / Peterculter / Denmore and Bridge of Don. Also issues due to winter maintenance during severe weather incidents. LOIP Stretch Outcome 14.2 will not be met in relation to increase community participation 	<ul style="list-style-type: none"> Inadequate budget. Inability to recruit staff. Interpretation of legislation. Extent of LA responsibilities Lack of resilience within the council Climate change and severe winter incidents 	Training			 <p>Likelihood</p>
		Budget review process			
		Staff recruitment			
				12 Very serious Low	
Mitigating Actions				Residual Risk Assessment	
<ul style="list-style-type: none"> Staff and budget allocations need to be reviewed at regular intervals. Flooding plans are already in place with respect to Deeside / Peterculter / Denmore and Bridge of Don. These will continue to be monitored and reviewed as required Winter maintenance plan is in place and will be reviewed annually with all partners Set up local resilience team. Work with Emergency Planning and the LRP Cross service exercise days 1 Ton Salt bag process already in place and continuing to grow year on year. Community salt bins are now located in 20 locations throughout the City 				 <p>Likelihood</p>	
				8 Very serious Very Low	
Risk Owner	Doug Ritchie	Risk Manager		Mark Reilly	
Latest Note				29 September 2019	

Code	O&PS007	Reduction in partnership/collaboration working		
Definition	Reduction in joint working with internal/external resources and Environmental Services			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> • Unable to delivery service delivery at current levels • Loss of goodwill of partners/volunteers • Reputational damage • Reduction in income • Loss of volunteer hours • Reduction in service standards • Less investment in parks and green space 	<ul style="list-style-type: none"> • Deterioration of working relationships • Inability of partners to continue levels of support • Lack of internal resources to recruit/liaise • Budget cuts impact on matched funding 	Continue to develop current working relationships	Fully Effective	<p>Impact</p> <p>Likelihood</p> <p>12</p> <p>Very Serious Low</p>
		Seek partnership in in all service projects, campaigns and programmes	Partially Effective	
		Seek help with partnerships to raise grant funding.	Partially Effective	
		Develop new areas of partnership working such as schools and businesses.	Partially Effective	
Risk Owner	Mark Reilly	Risk Manager	Steven Shaw	Residual Risk Assessment
Latest Note	Evidence of continued support reflected in enthusiasm of partners/volunteers and awards received from Green Flag, Britain in Bloom, APSE, etc.			<p>Impact</p> <p>Likelihood</p> <p>6</p> <p>Medium Low</p>

Code	O&PS009	Loss of UKAS accreditation		
Definition	The Laboratory losing, temporarily, its external UKAS accreditation following findings raised at either an annual, or unannounced UKAS visit			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> the financial implications of the potential loss of one, or more, local authority clients the financial implications of the potential loss of private clients the reputational damage of not providing an accredited service 	<ul style="list-style-type: none"> failure to comply with essential accreditation requirements poor performance in external quality assurance proficiency schemes inadequate staff training 	Comprehensive in-house quality system audit programme to cover all aspects of current quality system	Fully Effective	<p>Likelihood</p> <p>6</p> <p>Medium Very Low</p>
		Maintaining an awareness of current accreditation requirements through receiving regular updates from UKAS	Fully Effective	
		UKAS included as a main topic in team meetings and as an objective in PR&D's	Fully Effective	
		Participation in external quality assurance proficiency schemes to monitor laboratory performance	Fully Effective	
		Comprehensive training records maintained for all staff	Fully Effective	
Risk Owner	Mark Reilly	Risk Manager	Andrew Morrison	Residual Risk Assessment
Latest Note				<p>Likelihood</p> <p>6</p> <p>Medium Very low</p>

Code	O&PS0010	Loss of operator's licence		
Definition	Effect of services inability to use goods vehicles through loss of operator's licence			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> Inability to carry out functions where goods vehicles are required Additional potential costs to services Prosecutions for significant breach of criminal law, which may lead to civil claims Reputational damage Customer and service dissatisfaction 	<ul style="list-style-type: none"> Failure to comply with statutory requirements Increased on road inspection failures Poor standard of work and lack of compliance process Increased MOT failures Focused attention by statutory body Poor information from service IT system 	Fleet improvement/replacement programme	Fully Effective	 <p>Likelihood</p> <p>6</p> <p>Medium Very Low</p>
		Thorough compliance process in place and monitored	Fully Effective	
		Working processes review and updated	Fully Effective	
		Thorough investigation process for failures in place	Fully Effective	
Risk Owner	Mark Reilly	Risk Manager	William Whyte	Residual Risk Assessment
Latest Note				 <p>Likelihood</p> <p>6</p> <p>Medium Very low</p>

Code	O&PS011	Fuel Shortage		
Definition	Fuel Shortage and rising costs leading to loss service			
Potential Impact	Causes	Control Effectiveness		Current Risk Assessment
		Control	Control Assessment	
<ul style="list-style-type: none"> Inability to carry out emergency services Additional potential costs to services Reputational damage Customer and service dissatisfaction 	<ul style="list-style-type: none"> 	Currently, Aberdeen City have bunkered fuel in 4 places, Altens East and Kittybrewster	Fully Effective	<p>Likelihood</p> <p>6</p> <p>Medium Very low</p>
		Fuel cards still in place for reserve	Fully Effective	
		Fuel services still looking at alternative fuel vehicles	Fully Effective	
		Thorough investigation process for failures in place	Fully Effective	
		Reduce use of fuel stored for only emergency vehicles	Partially Effective	
Risk Owner	Mark Reilly	Risk Manager	William Whyte	Residual Risk Assessment
Latest Note				<p>Likelihood</p> <p>6</p> <p>Medium Very low</p>

Risk Reference	Risk Description and Score	First Line of Defence (Do-ers)	Second Line of Defence (Helpers)	Third Line of Defence (Checkers)		
O&PS004	<p>Failure of Sea Defences</p> <p>There is a need to have effective monitoring and maintenance in place with respect to the existing sea defences and infrastructure.</p> <p>This may be further compounded where Climate change will increase the severity and frequency of severe weather events, in Aberdeen (heavy winter rainfall, flooding, a rise in sea level, erosion, reduction summer rainfall, higher temperatures).</p> <table border="1" data-bbox="255 882 575 1034"> <tr> <td data-bbox="255 882 421 1034">Residual Risk Score</td> <td data-bbox="421 882 575 1034" style="background-color: #00FF00; text-align: center;">6</td> </tr> </table>	Residual Risk Score	6	<ul style="list-style-type: none"> • Staff training and development • Operational plans and guidance including surveys, monitoring of existing infrastructure, committee reporting and guidance. • Contract Management Guidance and Procurement Regulations • Procedures to implement contract management policies • Climate risk Assessments • Weather impact Assessments • Regular monitoring and Infrastructure Assessments • Budget planning for anticipated impacts. • Emergency plans, Operational response procedures. 	<ul style="list-style-type: none"> • Corporate Management Team (CMT) Stewardship undertakes monthly review of Contract Management Risk • Senior Management Team (SMT) undertakes review of Cluster Operational Risk Register • Contract review by Demand Management Board • Audit, Risk and Scrutiny Committee oversight of risk management system • Strategic Commissioning Committee • Inclusion in plans, programmes, strategies including those for planning, transport & housing • Local Resilience Partnership undertaking resilience planning and preparedness across all partners. • Public protection committee oversight of resilience arrangements • Operational Delivery Committee. 	<ul style="list-style-type: none"> • Annual Climate Change report (Public Bodies Climate Change Duties) submitted to Scottish Government. • Regional and National reports from Scottish Government, UK Government and SEPA. • North Regional Resilience Partnership • Grampian Local Resilience Partnership • Annual Internal Audit Plan approved and overseen by Audit Risk and Scrutiny Committee • Scottish Government performance review and reports • Testing of emergency plans at partner level
Residual Risk Score	6					

Risk Reference	Risk Description and Score	First Line of Defence (Do-ers)	Second Line of Defence (Helpers)	Third Line of Defence (Checkers)
O&PS005	<p>Sustainable Drainage System (SUDS) Section 7 Scottish Water are currently requesting that all local Authority's sign up for them vesting and management/maintenance of SuDS that deals with surface water from both private curtilages and roads. It is the intention that the agreement will set out clear responsibilities for both above ground and below ground maintenance of SuDS features that are vested by Scottish Water and also deal with road run-off. For the council this would involve both future and historical developments and put a huge burden on the Council's finances. This may be further compounded where Climate change will increase the severity and frequency of severe weather events, in Aberdeen (heavy winter rainfall, flooding, a rise in sea level, erosion, reduction summer rainfall, higher temperatures).</p> <p>Residual Risk Score 12</p>	<ul style="list-style-type: none"> • Staff training and development • Operational plans and guidance including Climate Risk Guidance. Environmental risks (including climate risks) incorporated in business cases, committee reporting and guidance. • Operational Plans • Climate Risk Assessments. • Weather Impact Assessment. • Appropriate budgets being in place • Investigation with other LA's / SCOTS and our Legal teams whether we can refuse to sign up to the legal agreement. • Budget Planning and anticipated impacts / budget requirements. 	<ul style="list-style-type: none"> • Corporate Management Team (CMT) Stewardship undertakes monthly review of risks. • Senior Management Team (SMT) undertakes review of Cluster Operational Risk Register • Strategic plans including North East Flood Risk Management Plan and Strategy; and development of Climate Adaptation Framework (Aberdeen Adapts). • Audit, Risk and Scrutiny Committee oversight of risk management system. • City Growth and Resources Committee oversight of climate change reporting. • Inclusion in plans, programmes, strategies including those for planning, transport, housing. • Local Resilience Partnership undertaking resilience planning and preparedness across all partners • Operational Delivery Committee 	<ul style="list-style-type: none"> • Annual Climate Change Report (Public Bodies Climate Change Duties) submitted to Scottish Government. • Regional and National reports from Scottish Government, UK Government and SEPA • Adaptation Capability Framework Benchmarking Tool • North Regional Resilience Partnership • Grampian Local Resilience Partnership

Risk Reference	Risk Description and Score	First Line of Defence (Do-ers)	Second Line of Defence (Helpers)	Third Line of Defence (Checkers)
O&PS006	<p>Inability to respond to flooding and Winter incidents</p> <p>The Council must ensure that it puts in place adequate training, planning and Plans for Flooding & Winter incidents.</p>	<ul style="list-style-type: none"> • Staff training and development • Operational plans and guidance including Climate Risk Guidance. Environmental risks (including climate risks) incorporated in business cases, committee reporting and guidance. • Operational Plans • Winter Maintenance Plans • Climate Risk Assessments. • Weather Impact Assessment. • Appropriate budgets being in place • Community involvement • Cross Service training events • Budget Planning and anticipated impacts / budget requirements. 	<ul style="list-style-type: none"> • Corporate Management Team (CMT) Stewardship undertakes monthly review of risks. • Senior Management Team (SMT) undertakes review of Cluster Operational Risk Register • Strategic plans including North East Flood Risk Management Plan and Strategy; and development of Climate Adaptation Framework (Aberdeen Adapts). • Audit, Risk and Scrutiny Committee oversight of risk management system. • City Growth and Resources Committee oversight of climate change reporting. • Inclusion in plans, programmes, strategies including those for planning, transport, housing. • Local Resilience Partnership undertaking resilience planning and preparedness across all partners • Operational Delivery Committee 	<ul style="list-style-type: none"> • Annual Climate Change Report (Public Bodies Climate Change Duties) submitted to Scottish Government. • Regional and National reports from Scottish Government, UK Government and SEPA • Adaptation Capability Framework Benchmarking Tool • North Regional Resilience Partnership • Grampian Local Resilience Partnership
	<p>Residual Risk Score</p> <p style="text-align: center; background-color: yellow;">8</p>			

Risk Reference	Risk Description and Score	First Line of Defence (Do-ers)	Second Line of Defence (Helpers)	Third Line of Defence (Checkers)
O&PS007	<p>Reduction in partnership/collaboration working.</p> <p>Reduction in joint working with internal/external resources and Environmental Services There is a need to have strong and effective partnership / collaboration in place with Environmental Services. This to ensure Aberdeen's green space continues to grow and improve.</p>	<ul style="list-style-type: none"> • Staff training and development • Park Management Plans • Operational procedures and procedures. • Internal / external communication and networking. • Committee reporting • LOIP Improvement projects 11.3, 13.2 	<ul style="list-style-type: none"> • Corporate Management Team (CMT) Stewardship undertakes monthly review of Contract Management Risk • Senior Management Team (SMT) undertakes review of Cluster Operational Risk Register • Operations Committee oversight on service KPIs including number of community partnerships in place. • Audit, Risk and Scrutiny Committee oversight of risk management system • Local Outcome Improvement Plan (LOIP) • APSE benchmarking. • Aberdeen Open Space Strategy • Aberdeen Food Growing Strategy 	<ul style="list-style-type: none"> • Community Planning Aberdeen Board (CPA Board) • Local Outcome Improvement Plan (LOIP)
	<p>Residual Risk Score</p>			

Risk Reference	Risk Description and Score		First Line of Defence (Do-ers)	Second Line of Defence (Helpers)	Third Line of Defence (Checkers)
O&PS009	Loss of UKAS accreditation.		<ul style="list-style-type: none"> Comprehensive training of all staff. Maintaining an awareness of current accreditation requirements through receiving regular updates from UKAS UKAS included as a main topic in team meetings and as an objective in PR&Ds 	<ul style="list-style-type: none"> Comprehensive in-house quality system audit programme to cover all aspects of current quality system. 	<ul style="list-style-type: none"> Participation in external quality system audit programme to cover all aspects of current quality system.
	Residual Risk Score	6			

Risk Reference	Risk Description and Score	First Line of Defence (Do-ers)	Second Line of Defence (Helpers)	Third Line of Defence (Checkers)
O&PS010	Loss of operator's licence	<ul style="list-style-type: none"> • Drivers / Operators • Workshop Mechanics • Workshop Supervisors / Foreman • Service User's Supervision 	<ul style="list-style-type: none"> • Workshop Manager • Fleet Compliance Team 	<ul style="list-style-type: none"> • Fleet Manager • External Audit provider FTA • External Tachograph Auditer • DVSA • Police Scotland
	Residual Risk Score			

Risk Reference	Risk Description and Score	First Line of Defence (Do-ers)	Second Line of Defence (Helpers)	Third Line of Defence (Checkers)
O&PS011	Fuel shortage and rising costs leading to loss of service	<ul style="list-style-type: none"> • Drivers / Operators • Service User's Supervision • Business Support Team 	<ul style="list-style-type: none"> • Business Support Team • Service User's Supervision • External fuel providers (contingency plan) • Fuel Card provider • Local Resilience Partnership 	<ul style="list-style-type: none"> • Workshop Manager • Business Support Team • Procurement Team • Emergency Planning
	Residual Risk Score			

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