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# **Audit and Risk Management Committee**

Date: Monday, 1 December 2008

Time: 6.15 pm

**Venue:** Committee Room 2 - Wallasey Town Hall

Contact Officer: Mark Delap 0151 691 8500

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# **AGENDA**

#### 1. DECLARATIONS OF INTEREST

Members are asked to consider whether they have personal or prejudicial interests in connection with any item(s) on this agenda and, if so, to declare them and state what they are.

2. MINUTES (Pages 1 - 16)

To receive the minutes of the meeting held on 30 September and 4 November 2008.

- 3. ANNUAL GOVERNANCE REPORT ACTION PLAN UPDATE (Pages 17 20)
- 4. PROGRESS REPORT ON THE DATA QUALITY REVIEW 2006/2007 RECOMMENDATIONS (Pages 21 30)
- 5. AUDIT COMMISSION REPORT ON DEMOCRATIC ARRANGEMENTS (Pages 31 36)
- 6. CORPORATE RISK AND INSURANCE MANAGEMENT (Pages 37 40)
- 7. OFFICE SECURITY PROGRESS REPORT (Pages 41 44)

## 8. CAA PILOT SCHEME - UPDATE

Verbal report of the Deputy Chief Executive/Director of Corporate Services

- 9. FINANCIAL AND PERFORMANCE MONITORING SUMMARY (Pages 45 72)
- 10. INTERNAL AUDIT WORK: SEPTEMBER NOVEMBER 2008 (Pages 73 84)
- 11. ANY OTHER URGENT BUSINESS APPROVED BY THE CHAIR

# **AUDIT AND RISK MANAGEMENT COMMITTEE**

Tuesday, 30 September 2008

Present: Councillor P Southwood (Chair)

Councillors RL Abbey J Crabtree

S Mountney C Povall

<u>Deputies:</u> Councillors P Reisdorf (In place of S Quinn)

<u>Cabinet Member:</u> Councillor S Holbrook

#### 17 DECLARATIONS OF INTEREST

Members were asked to consider whether they had personal or prejudicial interests in connection with any item(s) on this agenda and, if so, to declare them and state what they were.

No such declarations were made.

#### 18 MINUTES

The Director of Law, HR and Asset Management presented the minutes of the meeting held on 30 June 2008, which had been received or approved by the Council on 14 July 2008.

In response to a question from the Chair in relation to the distribution of the Statement of Accounts summary leaflet (minute 7 refers), the Director of Finance indicated that it would be sent to all members of the Council, once the revised Statement of Accounts had been approved (see minute 21 post).

Resolved – That the minutes of the meeting held on 30 June 2008, having been confirmed by the Council, be received.

#### 19 APPOINTMENT OF VICE-CHAIR

Further to minute 3 (30 June 2008), which deferred consideration of this matter, the Director of Law, HR and Asset Management requested the Committee to consider the appointment of a Vice-Chair for the remainder of the municipal year.

Resolved – That Councillor S Quinn be appointed Vice-Chair for the remainder of the municipal year.

# 20 AUDIT COMMISSION SUMMARY REPORT - ADULT SOCIAL SERVICES - FOLLOW UP OF PIDA DISCLOSURE

Mr Iain Miles of the Audit Commission introduced the summary report 'Adult Social Services – Follow up of PIDA Disclosure' dated August 2008, which had been produced following an investigation of concerns that had been brought to the

attention of the Audit Commission in October 2007 under the Public Interest Disclosure Act 1998 (PIDA). The concerns were in respect of aspects of the Council's provision of services within Adult Social Services and Supporting People, and although a number of issues were outside the remit of the external auditors, there were two areas considered relevant, which involved the Council's procedures in respect of –

- Arrangements for the commissioning and monitoring of contracts for Supported Living and Supported People services, to ensure the Council was receiving value for money; and
- Application of the Department of Health's Fairer Charging Policy.

He outlined the objectives of the review and set out the detailed findings in relation to commissioning and monitoring of contracts and fairer charging. The main conclusions were that the contract arrangements for Supporting People and Domiciliary Care met good practice in many respects. However, the contract arrangements for Supported Living needed to be progressed further if they were to ensure the Council was getting good Value for Money (VFM) and he set out the areas that needed to be addressed. Specific reference was made to Bermuda Road, Curlew Way and Edgehill Road Supported Living establishments. The contracts for Domiciliary Care services were open ended and did not specify a termination date and the Council had not yet formally determined if those services were to be advertised again allowing new providers to bid at lower costs. The review concluded that to provide ongoing VFM, the Council needed to ensure that the service was subject to tendering on an agreed periodic basis.

In relation to the application of the Fairer Charging policy, the review had concluded that the Council was slow in fully applying the Fairer Charging guidance which was issued in September 2003, the Council's Fairer Charging policy not having been applied in full until 2007. One of the allegations raised under PIDA was that there was a 'Special Charging Policy' applied by the Social Services Department, dating back to 1999, that covered Supported Living service users with Learning Disabilities. The allegation made was that the policy had not been approved by Committee and was 'excessive and unlawful'. The review confirmed that a charging policy was applied at some Supported Living establishments and it was not clear from discussions with officers the extent to which the charging policy was in place or whether it had been approved by Members.

During a review of its charging policy, the Department for Adult Social Services had informed service users that where charges under Fairer Charging would be lower than the original charges, compensation would be awarded from April 2003. However, although no such compensation had yet been given, officers had confirmed that service users would be reimbursed where it became clear that they had contributed more than was due under Fairer Charging. This review was planned to be completed by March 2009. A member of the public made a number of comments in relation to matters contained within the Audit Commission Report.

He reported also that the Council now had in place a number of procedures which reduced the risk of potential financial abuse of service users not being identified and suitably addressed. However, there remained a substantial risk that users receiving services from one of the Council's Supported Living providers were being charged

unfairly. The provider concerned had not arranged for the completion of financial assessment forms for service users and as a result the Council was not in a position to know whether the aggregate of charges levied on service users by the Council and contributions required by the provider were in compliance with the Fairer Charging Guidance. It was not clear who was currently ensuring that service users were receiving adequate protection from the risk of financial abuse. He indicated that the situation had existed for several years and the Council needed to ensure, as a matter of urgency, that appropriate safeguards were in place to protect service users from the risk of any potential financial abuse.

The report highlighted areas where arrangements could be strengthened and included a number of recommendations to address the issues. The Director of Adult Social Services had welcomed the Audit Commission report, and the Head of Service (Wellbeing and Communities) referred to the Action Plan that had been produced to ensure compliance with the recommendations. She was confident that all of the issues had been addressed by the Department, and commented that a police investigation had concluded that there had been no illegal events. However, there remained concern that there was a risk that an independent Supported Living provider could be charging people unfairly for services, although there was no evidence of this. She indicated that a review was being undertaken to ascertain whether people had contributed more than was due under Fairer Charging for services provided by the Council. The review was planned to be completed by March 2009 and where it became clear that service users had contributed too much, the Department would ensure that reimbursement payments would be made.

In response to a question from a member, the Head of Service (Wellbeing and Communities) indicated that although there had not been a 'special charging policy' for care in 1999, some Supported Living service users may have been expected to pay for day to day expenses such as food and transport. It was unclear whether such an arrangement had been approved by members.

Members raised concern over the fact that the internal 'Whistleblowing' process had not worked and that there were a number of failures that ultimately led to the employee drawing the matter to the attention of the Audit Commission. Members expressed their concern that charges may have been levied without first having been considered by members and commented that the issue of compensation should be included in the department risk log. Concern was also raised in relation to the length of time that the issues had been ongoing without resolution and the Chair commented that the dates for compliance in the Action Plan were too distant and that it should be redrawn to ensure earlier compliance with all of the Audit Commission's recommendations.

Members of the Committee and the Cabinet Member for Corporate Resources commented also that the Audit Commission Report should be referred to the Cabinet for consideration, together with a full report response to it from the Director of Adult Social Services.

At the request of the Chair, the Deputy Chief Executive summarised the views expressed by the Committee and agreed to liaise with the Director of Adult Social Services to ensure that urgent progress would be made.

#### Resolved -

- (1) That the Audit Commission Report 'Adult Social Services Follow up of PIDA Disclosure' be referred to the Cabinet for consideration and to the Social Care, Health and Inclusion Overview and Scrutiny Committee, in order for it to give consideration to the issues involved, and to investigate the failure of the internal 'whistleblower' process.
- (2) That the Action Plan contained within the PIDA report be re-drafted to ensure earlier compliance with the recommendations contained within it.
- (3) That the officers be requested to investigate whether a charging policy had been in place dating back to 1999 and, if so, whether or not it had not been approved by members.

#### 21 STATEMENT OF ACCOUNTS

Further to minute 7 (30 June 2008), the Director of Finance reported that following approval by the Committee, the Statement of Accounts had been subject to audit, and the District Auditor's findings were set out within the Annual Governance Report (see minute 22 post). The Director apologised for the late submission of the documents and commented that they would be made available earlier next year. Members complained at the lateness of the report and the lack of time to review it in advance. Consequently, members received a full and detailed presentation of the document. The Director summarised a number of amendments to the financial statements that had been agreed with the District Auditor and were detailed in the Annual Governance Report. He commented that none had any impact on the financial position of the Council.

The Audit Opinion would be issued following consideration of the Annual Governance Report and the approval of the amended Statement of Accounts. Once approved, the District Auditor had indicated that he would again issue an unqualified opinion and state that the accounts presented fairly the financial position of the Council at 31 March 2008. The Auditor's report was incorporated within the final version of the Statement of Accounts and enabled the accounts to be agreed before the statutory deadline of 30 September.

As in previous years, further enhancements and improvements were made to the year-end process, including the quality and content of the Statement and supporting papers. The Audit Commission view of the arrangements for producing the Statement of Accounts was that they were satisfactory, produced by the target date and the working papers were deemed to be good. In addition, the accounts for 2007/2008 reflected a number of major changes in accounting policy that originated in the SORP (Statement of Recommended Practice) 2007, which required considerable changes to be made to the arrangements to account for capital and financial instruments.

#### Resolved -

(1) That the amendments to the Statement of Accounts for 2007/2008, the Annual Governance Report and the Letter of Representation (Appendix 1 of the Annual Governance Report) be noted.

- (2) That the letter of Representation be agreed and the revised Statement of Accounts for 2007/2008 be approved.
- (3) That, subject to the agreement of the Annual Governance Report, the recommendations contained within it be approved.
- (4) That regular progress reports be presented to this Committee with regard to achieving compliance with the recommendations contained within the Annual Governance Report.

#### 22 AUDIT COMMISSION - ANNUAL GOVERNANCE REPORT

The District Auditor, Mr M Thomas presented the Annual Governance Report, and apologised for its late submission to the Committee. The report summarised the findings from the 2007/2008 audit, and identified the key issues for the Committee to consider before the issue of opinion, conclusion and certificate. He expected to issue an unqualified opinion on the financial statements which, although complete, contained some errors. He commented that during the audit, management had agreed to 5 adjustments to the figures in the accounts that had been recommended, and also made amendments to some notes to the accounts. The more significant issues included a material adjustment of £9.465m to the prior year figure for tangible fixed assets and a note to explain the treatment of an increase of £9m in the estimate of pension fund assets that was agreed should not be amended. In total the adjustments had no overall impact on revenue resources.

He commented that the arrangements for production of financial statements were satisfactory and that the draft financial statements had been produced by the target date with good working papers to support the financial statements. He indicated that this had also been a year when new and more complex accounting and reporting arrangements had been introduced, for example, the introduction of the new revaluation reserve, accounting for financial instruments and the new Annual Governance Statement. The Council has introduced those new requirements successfully whilst also improving on issues raised last year. The report made recommendations for some further improvement in quality assurance processes and internal control across the Council.

With regard to value for money, the Council had made proper arrangements to secure economy, efficiency and effectiveness in its use of resources for the year ending 31 March 2008 and it was therefore proposed to issue an unqualified conclusion.

The District Auditor highlighted key areas of judgement and audit risk that had been considered as part of the audit, and he set out a number of recommendations, which would form the basis of an Action Plan to address issues that had been identified in relation to accounting practice and financial reporting; and weaknesses in internal control. He commented also that before an opinion was issued, the Authority was required to provide written representations in respect of a number of matters. He provided an explanation of the information required and included in the report a draft letter of representation.

In response to comments from the Chair, the Director of Finance stated that the risks and recommendations set out in the report would be included in internal risk logs. He also proposed to present regular update reports on progress against the Action Plan and confirmed that all of the District Auditors recommendations had been reflected in the revised Statement of Accounts.

#### Resolved -

- (1) That the revised Statement of Accounts be approved and signed by the Chair of the Audit and Risk Management Committee.
- (2) That the draft Letter of Representation be approved and signed by the Chair for submission to the District Auditor.
- (3) That the Action Plan be agreed, subject to the submission of regular progress reports to future meetings of the Committee.
- (4) That the Director of Law, HR and Asset Management be requested to schedule next years meeting earlier in the Committee cycle, when formulating the 2009/2010 Committee Calendar.

#### 23 GRANT CLAIMS AND RETURNS - AUDIT COMMISSION REPORT

The Director of Finance reported upon issues raised in the Audit Commission report on grant claims related to the 2006/2007 financial year.

The District Auditor presented the Audit Commission annual report on grant claim performance and issues and he commented that the Council had been proactive in developing good management arrangements for the submission of grant claims. He outlined the main conclusions from the audit and highlighted a number of concerns.

The Director set out key actions for 2007/2008 and commented that the Authority had already brought in measures to tackle most of the issues raised in the Audit Commission report and a number of other measures would also be undertaken to address the issues raised. All of the recommendations within the Audit Commission report had been accepted and would be implemented with immediate effect.

#### Resolved -

- (1) That the report, and the actions to address the recommendations contained within the Audit Commission report, be noted.
- (2) That the thanks of the Committee be accorded to the District Auditor for his detailed report.

# 24 CORPORATE PLAN FINANCIAL AND PERFORMANCE MONITORING SUMMARY

The Deputy Chief Executive/Director of Corporate Services presented a copy of the report of the Chief Executive on financial and performance monitoring, which had been considered by the Cabinet on 4 September 2008 (minute 177 refers). The report presented an overview of the performance of the Council in delivering the

vision for Wirral as set out in the Corporate Plan and covered the first quarter of 2008/2009. It provided an overview of the Authority's performance and detailed appendices gave a more detailed break down against performance, capital and revenue budgets and risks. It also identified the list of three year targets for the Corporate Plan.

The Chair expressed the view that the report was not fit for purpose and, in response to comments from members with regard to the way the information contained within the report was presented, the Deputy Chief Executive commented that the Cabinet had expressed similar views and had requested a brief summary report to detail each priority for improvement and the progress made against that priority in lay terms, so that improvements made could be easily understood in terms of their overall benefit to Wirral. In areas where improvements were not being achieved, actions being taken to remedy the position would be set out in the same way.

Future reports would be improved in terms of their 'user-friendliness' and he commented on the rationale for a 'traffic signal' indication of progress that had been discussed by the Cabinet. A member commented that it was misleading to have Amber indicating that the target was missed by between 5% and 10% OR exceeded by between 5% and 10% (Green meant that it was within 5% above or below the target and Red missed by more than 10%). The Director indicated that meetings were scheduled with the Cabinet Member for Corporate Resources to further consider the format of future reports and the Chair expressed the view that she should also be present at those meetings to ensure that any change to the format of future reports would take into account the views of the Audit and Risk Management Committee. The Deputy Chief Executive agreed to discuss the request with the Cabinet Member.

Resolved – That, subject to the views expressed by the Committee in relation to its format, the report be noted and a revised version of the document be presented to a future meeting of the Committee.

# 25 WIRRAL'S PERFORMANCE MANAGEMENT FRAMEWORK: ANNUAL REVIEW OF THE COUNCIL'S CORPORATE PLAN FOR 2009/2010

The Deputy Chief Executive/Director of Corporate Services presented his report, which had been considered by the Cabinet on 25 September 2008 (minute 196 refers), upon proposals for reviewing the Council's Corporate Plan. The new Corporate Plan had been agreed by the Council on 21 April 2008, with the new vision and objectives agreed by the Cabinet on 14 November 2007. The review was to inform the budget setting process for 2009/2010 and to ensure that the objectives and improvement priorities remained valid, relevant and appropriate, and that the associated delivery plan was refreshed.

The Cabinet (minute 196) resolved that -

- (1) the Council be recommended to agree –
- (i) that the main priorities for improvement identified for 2008/2009 remain the most important areas of focus for the Council and should therefore be retained as priorities for 2009/2010; and

- (ii) the minor revisions relating to recycling and the need for a sustainable and stable budget;
- (2) Chief Officers develop departmental plans and budget proposals for 2009/2010 that reflect the strategic objectives set out in the Corporate Plan and the revised priorities for improvement indicated in the Appendix to the Director's report;
- (3) the Departmental Plans and the changes for the Corporate Plan delivery framework be reported to the Cabinet on 15 January 2009, with the latter then submitted to Council for formal approval.

#### Resolved – That the report be noted.

#### 26 AUDIT COMMISSION REPORT - DEMOCRATIC ARRANGEMENTS

Further to minute 5 (30 June 2008), the Director of Law, HR and Asset Management reported upon progress against the Action Plan that had been developed in response to issues identified by the Audit Commission in relation to Democratic Arrangements. He indicated that compliance with the Action Plan would continue to ensure value for money for the residents of Wirral, and in response to a comment from the Chair, he proposed to present a further update to the next meeting of the Committee.

#### Resolved -

- (1) That the report be noted.
- (2) That a further update report be presented to the next meeting of the Committee.

#### 27 LONE WORKERS SECURITY

Further to minute 71 (7 April 2008), the Deputy Chief Executive/Director of Corporate Services reported upon progress in relation to the Lone Working Security Policy. He presented the revised Health and Safety Arrangements for Management of Lone Working and commented that the arrangements had been developed through existing practices within a number of Council departments.

In response to a question from a member, he confirmed that the revised management arrangements had been shared with departmental teams and that the trade unions had been consulted. The proposals would now be presented to the next Corporate Health and Safety Committee for consideration.

Resolved – That the revised Management Arrangements for Lone Working be noted, and any issues arising from them be brought to the attention of the Deputy Chief Executive/Director of Corporate Services.

# 28 COMPREHENSIVE PERFORMANCE ASSESSMENT - USE OF RESOURCES ACTION PLAN

#### Resolved -

(1) That the progress against the Use of Resources Action Plan be noted.

- (2) That regular reports be presented to the Cabinet and to the Audit and Risk Management Committee on progress against the Action Plan, which will be revised in line with forthcoming Audit Commission guidance.
- (3) That an update report on the CAA pilot scheme be presented to the next meeting of the Committee.

#### 29 RISK MANAGEMENT STRATEGY

#### Resolved -

- (1) That the revised Corporate Risk Management Strategy be noted.
- (2) That those Members who were not able to be present at previous risk management training sessions be invited to attend a future event.

#### 30 CORPORATE RISK AND INSURANCE MANAGEMENT

#### Resolved -

- (1) That the report be noted.
- (2) That a further report be presented to the next meeting of the Committee.

#### 31 INTERNAL AUDIT WORK - JUNE TO AUGUST 2008

The Director of Finance reported that in order to assist in effective corporate governance and to fulfil statutory requirements, the Internal Audit Section of the Finance Department reviewed management and service delivery arrangements within the Council as well as financial control systems. Work areas were selected for review on the basis of risks identified in the Corporate Risk Register and as assessed by Internal Audit in consultation with Chief Officers and Managers. His report identified and evaluated the performance of the Internal Audit Section and included details of the actual work undertaken over the period and the number of 'High' risk recommendations identified in reports.

#### Resolved – That the report be noted.

#### 32 **MEMBERS TRAINING**

The Director of Finance reported that, in accordance with best practice, two basic training sessions per annum had been held for members of the Committee, provided by one of the authors of 'Audit Committees – Practical Guidance for Local Authorities'. He reported that a number of Members had requested the provision of a more advanced training session and that this had been arranged for 8 October 2008, at Wallasey Town Hall. The Chair commented on the value of audit training and encouraged all members of the Committee to attend if it was possible for them to do so.

#### Resolved – That the report be noted.

#### 33 LOCAL GOVERNMENT CHRONICLE (LGC) AWARDS 2008

The Director of Finance reported upon the submission of an entry to the LGC Awards 2008. The awards had been held for a number of years and were intended to celebrate the highest levels of achievement in local government, and he commented that the Council had been successful last year in being declared the winner of the Procurement Initiative Award. He suggested that if the Authority was again short listed, members may wish to consider attendance at the awards ceremony on 3 November 2008 at the Dorchester hotel in London. He confirmed that the cost of travel and overnight accommodation for those attending could be met from within the existing budget provision.

Resolved – That, should the Authority be short listed in the LGC Awards 2008, attendance at the awards ceremony at the Dorchester Hotel in London on 3 November 2008 be referred to the Cabinet for approval of duty.

# 34 ANY OTHER URGENT BUSINESS APPROVED BY THE CHAIR - THE IMPACT ON THE AUTHORITY OF THE PRESENT FINANCIAL CLIMATE

In response to a question from a member, the Director of Finance reported upon the impact on the Authority of the volatility of the current financial markets. He commented that variable interest rates had a substantial impact on the value of the Authority's assets. Higher interest rates resulted in higher returns from the Authority's investments, although the rates at which the Council could borrow money had also increased.

In addition, there had been an increase in the number of benefits claimants and there had been a reduction in income as a result of increased collection difficulties. He reported also, that from today, the Council had ceased temporary investments in banks, and invested with the Government instead.

Resolved – That the report be noted.

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# AUDIT AND RISK MANAGEMENT COMMITTEE

Tuesday, 4 November 2008

Present: Councillor P Southwood (Chair)

Councillors RL Abbey S Mountney

J Crabtree C Povall

<u>Deputies:</u> Councillors D Mitchell (In place of S Quinn)

<u>Cabinet Member:</u> Councillor S Holbrook

#### 35 **DECLARATIONS OF INTEREST**

Members were asked to consider whether they had personal or prejudicial interests in connection with any item(s) on this agenda and, if so, to declare them and state what they were.

No such declarations were made.

#### 36 MINUTES

The Chair referred to a number of proposed amendments to the draft minutes of the meeting held on 30 September 2008, which she had previously discussed with other members of the Committee, who had endorsed the proposed changes.

Resolved – That the draft minutes of the meeting held on 30 September 2008 be amended and presented to the next meeting of the Committee for approval.

# 37 AUDIT COMMISSION SUMMARY REPORT 'ADULT SOCIAL SERVICES - FOLLOW UP OF PIDA DISCLOSURE'

#### A. REPORT OF THE DIRECTOR OF ADULT SOCIAL SERVICES

Further to minute 20 (30 September 2008), the Director of Adult Social Services sought to address concerns expressed by members in relation to matters contained within the Audit Commission Summary Report 'Adult Social Services – Follow up of PIDA Disclosure', specifically in relation to aspects of the Council's provision of services within Adult Social Services and Supporting People and the application of Fairer Charging.

He reported that the action plan agreed with the Audit Commission had been further reviewed and the timescale for completion of all work had been brought forward. However, the actions contained within the plan were of a high level and, in response to a comment from the Chair, he proposed to formulate a lower level, more specific action plan.

He set out the context of 'Fairer Charging' having regard to details provided by the Department of Health in 1997 and to full guidance being issued in 2003. He accepted

that Wirral had been slow to adopt the Fairer Charging policy, which had been the subject of progress reports to the Social and Health Services Select Committee (minute 94 (22 April 2002) refers) and to the Social Care and Health Select Committee (minute 116 (17 March 2003) refers). In response to comments from members, he commented that extensive consultation had been undertaken and following the presentation of a further report to the Cabinet on 1 December 2005 (minute 361 refers), the full application of Fairer Charging was applied to all from 2006. In response to a further question as to whether the Council was financially disadvantaged by the delay in the implementation of Fairer Charging, the Director commented that it would be a substantial task to ascertain the financial circumstances of service users during the period 2003 – 2006.

He reported that to date, assessments had been undertaken on 351 people and, of those, it appeared that 8 cases had been assessed under the 'Charging for Residential Care Guidelines', rather than 'Fairer Charging' being applied. However, where higher incorrect charges had been levied, re-imbursement would be made. The total financial liability at the present time was £78,499.62. In response to a question from a member, the Director was unable to confirm whether any of the 8 cases referred to were in relation to occupants of Bermuda Road, Curlew Way or Edgehill Road Supported Living establishments. In response to members comments, he proposed to provide information direct to members in relation to the location of those people who had been incorrectly assessed.

With regard to concerns expressed by members that, without authority, a 'special charging policy' had been applied, he indicated that the funding arrangements for people in Supported Living were complex, with the service costs being funded from three sources:

- Housing funded mainly by Housing Benefits
- Support Costs funded by Supporting People and DASS sometimes with funding from Health
- Daily Living Costs met by individuals alone or as a living group.

The Director reported that he understood it to be around the 'Daily Living Costs' that concerns had been highlighted and, whilst work to address concerns with independent providers continued, he indicated that one anomaly had been identified in September 2008 and was being investigated in relation to 5 people living at Balls Road, the only Supported Living accommodation owned by the Council. Although investigations were ongoing, he had evidence in relation to four of the five cases, who were paying differential amounts as a result of being in receipt of differential amounts of Housing Benefit. The arrangement dated back some time and pre-dated Fairer Charging. However, a member expressed the view that the concern highlighted was not around 'daily living costs', but about special charging applied at Bermuda Road, Curlew Way and Edgehill Road.

The Director believed that the term 'special charging policy' had been born in the area of 'daily living costs'. Although archive files from the time were no longer available, officers who had been employed in the Department prior to the introduction of Fairer Charging were clear in their recollection regarding some preparatory work that had been undertaken. However, they had confirmed to the Director that to their knowledge no special charging policy had been agreed or applied by the Council. He proposed to issue guidance in relation to daily living allowances but commented that

it rightly remained an area for discretion. A member referred to paragraph 39 of the Audit Commission Summary Report, which suggested that a charging policy was applied at some Supported Living establishments. The Director commented that having reviewed the available information, it appeared that any charges applied related to assessments under the 'Charging for Residential Care Guidelines', rather than the Fairer Charging policy which was fully applied in 2006.

The Director referred to specific ongoing concerns in relation to an individual provider obstructing the application of Fairer Charging and he indicated that the Department, with legal advice, was now pursuing other processes to secure compliance, with regard to the remaining financial assessments. He reported also upon progress with the accreditation exercise for contracting services and safeguarding vulnerable people and expressed the view that a robust safeguarding policy and procedure were in place in Wirral.

In response to further comments from a member in relation to average charges paid by service users, the Director indicated that approximately a third of people assessed paid no charge, a third paid a percentage of disposable income of approximately £10 per week, whilst a third paid a variable range, up to the full cost of the service. He agreed to provide details of the total annual cost direct to members.

Councillor Mountney indicated to the Committee that he was in receipt of further evidence and requested a brief adjournment in order to consult with the Director of Law, HR and Asset Management and the Deputy Chief Executive.

At 1925 the meeting stood adjourned for 10 minutes.

Following the adjournment, and in response to questions from members, the Director of Law, HR and Asset Management stated that he was not yet in a position to comment upon matters brought to his attention during the adjournment, which required further investigation. However, he was satisfied that Councillor Mountney had acted in an appropriate manner.

#### B. REPORT OF THE DIRECTOR OF FINANCE

The Director of Finance reported that following the last meeting of the Committee, he had requested Internal Audit to conduct an audit to investigate allegations made regarding the proper handling of this matter. At the request of Members it had also been necessary to evaluate –

- whether the system and procedures utilised to add a named supported living provider to the Adult Social Services Accreditation List were effective and complied with by the Department at all times; and
- whether Whistleblowing procedures in operation within the Adult Social Services
   Department were effective and had been complied with for this particular case.

During the audit, a request had also been received to review issues in relation to the charging policy. However, due to the timescale involved it had not been possible to complete this element of the work and a further report would be presented to the next meeting of the Committee.

He set out fully the objectives of the audit together with findings and conclusions. No evidence was identified to support allegations of impropriety or inappropriate behaviour by any member of staff employed by Wirral Council in connection with this case and it appeared that many of the issues related to the activities of a named supported living provider and its employees. A number of issues were identified within the system in operation for maintaining an Accreditation List for supported living providers and these were currently being addressed by the Department. However, there was evidence to indicate that all of the relevant policies and procedures were complied with when an assessment was undertaken of the named supported living provider prior to them being added to the list.

The Director commented also that evidence suggested that the Whistleblowing Policy and procedures implemented by the Adult Social Services Department complied with the corporate policy and best practice in general. However, for this particular case, it was unclear whether, from the outset, management had established the exact nature of the issues identified and agreed with the individual whether the case should be investigated as a Grievance or a Whistleblowing. In response to a question from a member, the Director indicated that the Department had dealt with the issue as a grievance and there was no reference in any documentation provided to the case being dealt with as a whistleblowing. It was the Department's opinion that the case only became a whistleblowing when it was reported to the Audit Commission and investigated under the Public Interest Disclosure Act 1998.

A member referred to the compromise agreement that was reached with the Council to end the individual's employment on 4 April 2008, on account of there being irrecoverable differences. The Director confirmed that auditors had sight of the agreement but he was unable to disclose any of its terms because of a confidentiality clause that was prepared and agreed by the Individual, the Adult Social Services Department, Legal and Member Services and Human Resources.

On a motion by Councillor Southwood, seconded by Councillor Abbey, it was -

#### Resolved (4:0) -

- (1) That the report of the Director of Adult Social Services and the amended action plan be noted.
- (2) That a further report be presented to the Committee in January 2009, detailing actions taken to adhere to the amended action plan.
- (3) That a further, lower level and more specific action plan be produced and referred to the Social Care, Health and Inclusion Overview and Scrutiny Committee.
- (4) That the report of the Director of Finance be noted and the recommendations contained within the Internal Audit reports be endorsed, subject to the Adult Social Services Departmental Management Team being notified of all risks identified by the Accredited List Internal Audit report so that consideration can be given to their inclusion in the Corporate or relevant Departmental Risk Register.

| (5) That the Director of circulate guidance to all and/or whistleblowing iss | Chief Officers with | • | • |
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#### **WIRRAL COUNCIL**

#### **AUDIT AND RISK MANAGEMENT COMMITTEE**

#### **1 DECEMBER 2008**

#### REPORT OF THE DIRECTOR OF FINANCE

#### **ANNUAL GOVERNANCE REPORT - ACTION PLAN UPDATE**

#### 1. EXECUTIVE SUMMARY

1.1. This Committee considered the Audit Commission Annual Governance Report on 30 September 2008 and recommended that the action plan be presented to this meeting of the Committee.

#### 2. AUDIT COMMISSION ANNUAL GOVERNANCE REPORT

- 2.1 The District Auditor presented his report to this Committee on 30 September 2008. This covered the Council Statement of Accounts 2007/08, which received an unqualified audit opinion, and consideration of key issues facing the Council going forward.
- 2.2 The report identified a number of recommendations. The Committee resolved that regular progress reports be presented with regard to achieving compliance with the recommendations contained in the action plan.

#### 3. PROGRESS REPORT

- 3.1 Production of an implementation plan
- 3.1.1 The recommendations contained in the Annual Governance Report and draft action plan have been considered by Officers. A completed plan has now been produced that allocates responsibility, gives details of implementation and a date for anticipated implementation (see Appendix). Further progress on implementing the plan is in the following paragraphs.
- 3.2 Recommendation R3 Consider the issued raised in the Annual Governance Report that should be include in the Letter of Representation
- 3.2.1 This was completed with the consideration of the Audit Commission report to the meeting of this Committee on 30 September 2008.
- 3.3 Recommendation R13 Consider the financial and governance implications of the Public Interest Disclosure Act (PIDA) report
- 3.3.1 Further reports were considered by this Committee, on 4 November 2008.
- 3.4 Recommendation R6 Review reserves and provisions to ensure they are at an appropriate level and remain prudent

3.4.1 All reserves and provisions have been reviewed and a report is due to presented to the Cabinet on 10 December 2008.

#### 4. FINANCIAL AND STAFFING IMPLICATIONS

4.1 There are no financial or staffing implications arising directly from this report.

#### 5. **EQUAL OPPORTUNITIES IMPLICATIONS**

5.1. There are none arising directly from this report.

#### 6. **HUMAN RIGHTS IMPLICATIONS**

6.1. There are none arising directly from this report.

#### 7. COMMUNITY SAFETY IMPLICATIONS

7.1. There are no specific implications arising from this report.

#### 8. LOCAL MEMBERS SUPPORT IMPLICATIONS

8.1. There are no specific implications for any Member or Ward.

#### 9. LOCAL AGENDA 21 IMPLICATIONS

9.1. There are none arising directly from this report.

#### 10. PLANNING IMPLICATIONS

10.1. There are none arising from this report.

#### 11. BACKGROUND PAPERS

- 11.1. The Annual Governance Report Audit Commission September 2008.
- 11.2 Follow up of Disclosure under Public Interest Disclosure Act 1998 (PIDA) Audit Commission August 2008.
- 11.3. Adult Social Services PIDA Disclosure Internal Audit Report November 2008.

#### 12. **RECOMMENDATION**

12.1. That the progress on delivering the action plan be noted.

IAN COLEMAN
DIRECTOR OF FINANCE

FNCE/273/08

# ANNUAL GOVERNANCE REPORT – ACTION PLAN

| Page | Reference | Details   | Priority<br>1=Low<br>2= Med<br>3=High | Responsibility  | Agreed | Comments and actions   | Anticipated<br>Implementation |
|------|-----------|---|---------------------------------------|---|--------|--|-------------------------------|
| 8    | R1        | Build on arrangements for the Annual Governance Statement (AGS) by involving Members at an earlier stage and strengthening the corporate ownership:  • Present the AGS to the Audit and Risk Management Committee at a separate meeting to the approval of the accounts to provide Members with more opportunity to consider and challenge the issues raised in the statement.  • Ensure the drafting of the AGS is done by a corporate group rather than being the responsibility of Internal Audit. | 2                                     | Finance<br>Mark Niblock                                       | Yes    | The AGS will be presented and considered at the Audit & Risk Management on 30 March 2009. The Corporate Improvement Group will consider departmental responses prior to review by the Corporate Governance Group. Internal Audit will produce the AGS from Departmental responses. | 30 March 2009                 |
| 8    | R2        | Ensure supporting records for community assets are complete and are accurately reflected in the financial statements.   | 2                                     | Regeneration<br>Jim Lester                                    | Yes    | Information currently being collated. An assessment will be made to consolidate as required in the Statements.   | 31 Dec 2008                   |
| 10   | R3        | Consider the issues raised in the Annual Governance Report that should be included in the Letter of Representation.   | 3                                     | Finance<br>Tom Sault  | Yes    | Letter of Representation approved by Audit & Risk Management committee 30 September 2008.  | Completed<br>30 Sept 2008     |
| 10   | R4        | Further improve the quality assurance processes that underpin the production of information for the statement of accounts.  | 2                                     | Finance<br>Jenny Spick  | Yes    | Processes will be enhanced and built into the timetable for 2008/09.   | 30 June 2009                  |
| 10   | R5        | Review the underlying records and the accounting treatment of infrastructure assets to ensure strict compliance with the SoRP.  | 3                                     | Technical<br>Services&<br>Finance<br>Mark Smith<br>Gavin Shaw | Yes    | Work being undertaken to identify and analyse the infrastructure assets.   | 31 Dec 2008                   |

| 10 | R6  | Review reserves and provisions to ensure they are at an appropriate level and remain prudent.   | 1 | Finance<br>Tom Sault  | Yes | Cabinet reports every six months review the Councils reserves and provisions                              | 10 Dec 2008<br>30 June 2009 |
|----|-----|---|---|---|-----|---|-----------------------------|
| 10 | R7  | Ensure the Whole of Government Accounts consolidation pack is produced earlier in future years to ensure the Department for Communities and Local Government deadline is met.                 | 1 | Finance<br>Reg Huyton   | Yes | Work will be undertaken to develop earlier production of the Whole of Government Accounts Return 2008/09. | 1 Oct 2009                  |
| 13 | R8  | Ensure classification and valuation of assets is robust and that valuation and finance staff take joint responsibility to ensure assets are correctly reflected in the statement of accounts. | 2 | Law, HR and<br>Asset<br>Mgt/Finance<br>Sam Hird<br>Reg Huyton | Yes | The processes for joint assessment of assets and their valuation will be strengthened.                    | 28 Feb 2009                 |
| 13 | R9  | Discuss with Merseyside Pension Fund how a more accurate estimation of the value of Fund assets can be made whilst still meeting deadlines for financial reporting.                           | 1 | Finance<br>Reg Huyton<br>Gerard Moore<br>Jenny Spick          | Yes | Options are to be discussed with the Pension Fund.  | 31 Dec 2008                 |
| 13 | R10 | Improve internal controls in respect of payroll procedures and ensure consistent compliance across the Council.   | 3 | Law, HR and<br>Asset Mgt<br>Paul Bradshaw                     | Yes | A review of existing controls being undertaken, changes to then be made.                                  | 31 March 2009               |
| 13 | R11 | Review schools bank accounts to ensure funds are held and applied for proper purposes.  | 2 | Children and<br>Young People<br>Andy Roberts                  | Yes | Liaising with schools to determine that the bank accounts held are correctly assigned.                    | 31 Jan 2009                 |
| 13 | R12 | Ensure all related party transactions returns are received from Members and officers to be included in the 2008/09 accounts and test disclosure.  | 1 | Finance<br>Reg Huyton   | Yes | Procedures strengthened to ensure that 100% of returns are received by 30 June.                           | 30 June 2009                |
| 3  | R13 | Consider the finance and governance implications of the Public Interest Disclosure Act report.  | 3 | Adult Social<br>Services/<br>Internal Audit                   | Yes | Investigations by DASS and Internal Audit.  | Ongoing                     |

# Agenda Item 4

WIRRAL COUNCIL

AUDIT AND RISK MANAGEMENT COMMITTEE - 1ST DECEMBER 2008

REPORT OF THE DEPUTY CHIEF EXECUTIVE/DIRECTOR OF CORPORATE SERVICES

# PROGRESS REPORT ON THE DATA QUALITY REVIEW 2006-07 RECOMMENDATIONS

## 1. Executive Summary

1.1. The purpose of this report is to provide members with a progress report against the action plan following the Audit Commission's recommendations from their data quality review in 2007.

## 2. Background

- 2.1. In 2007 the Audit Commission undertook a review on the authority's data quality procedures. The conclusion of this inspection was:-
- 2.2. "The Council's management arrangements for data quality meet required standards. Data quality systems and processes are developing, although they are not yet being applied consistently. The Council is committed to improving its data quality arrangements and progress has been made since our review. The Council has some arrangements in place for the governance, monitoring and review of data quality, although these are not formalised in an overarching data quality strategy. Systems and process are sufficiently developed and defined, with resources in place to collect performance information. However, there still remain a high number of errors found with reported performance data and roles and responsibilities of staff involved in this process are not in place or clearly defined. The use made of Internal Audit in the data quality process needs to be further considered".
- 2.3. The Audit Commission's recommendations following on from their conclusion formed part of the Authority's action plan and have been progressed during the year by the council's corporate policy team and performance management group. Progress against these recommendations is attached as Appendix A.
- 2.4. The Audit Commission are currently concluding their findings for the 2007/08 data quality review and regular reports will be provided to this committee.

#### 3. Progress to date

3.1. A considerable amount has changed regarding the performance framework of the council, including changes to the data quality standard, the introduction of the national indicator set, a new corporate plan and improvement priorities and the negotiation of a new local area agreement; consequently a lot of preparatory work has been carried out behind the scenes to prepare for these changes. Much of this

has now taken place and therefore the updated plan is now being put before this committee.

## 4. Financial & staffing implications

4.1. There are no financial or staffing implications arising from this report.

# 5. Equal Opportunities implications

5.1. There are no equal opportunities implications arising from this report.

## 6. Community Safety implications

6.1. There are no community safety implications arising from this report.

## 7. Local Agenda 21

7.1. There are no local agenda 21 implications arising from this report.

## 8. Planning implications

8.1. There are no planning implications arising from this report.

## 9. Anti-poverty implications

9.1. There are no anti-poverty implications arising from this report.

## 10. Social inclusion implications

10.1. There are no social inclusion implications arising from this report.

## 11. Local Member Support implications

11.1. There are no local member support implications arising from this report.

## 12. Background Papers

- 12.1. The following background papers were used in the preparation of this report:-
- **12.2.** Data Quality Review 2006 -2007 Audit Commission

#### 13. Recommendations

**13.1.** Members note the contents of the report

#### J. WILKIE

Deputy Chief Executive/Director of Corporate Services

This report was prepared by Bev McEneany, who can be contacted on 691 8164

# Data quality review 2007 - action plan progress

| Rec        | Recommendation  | Priority           | Progress to date   |
|------------|---|--------------------|--|
|            |   | 1 = low<br>2 = med |  |
|            |   | 3 = high           |  |
| Gov        | Governance  |                    |  |
| Z          | Ensure data quality objectives are clear and linked to        | ဇ                  | Wirral council has in place a corporate framework for management and accountability of data quality through the implementation of the data quality                     |
|            | performance management  |                    | policy which sets out the roles and responsibilities of every member of staff with specific data quality obligations. The data quality policy was written by corporate |
| <b>R</b> 2 | Ensure roles and responsibilities                             | 3                  | policy in consultation with corporate improvement group (CIG) and performance  |
|            | of individuals specific to data quality are prepared, clearly |                    | management group (PMG). The data quality policy is a formal council policy and wilful disregarding of data quality responsibilities are treated extremely. In order    |
|            | defined and embedded within the performance framework         |                    | to provide clear leadership from the top of the organisation, the Deputy Chief Executive has overall strategic responsibility for the approach to data quality,        |
|            |   |                    | and leads on this agenda within the chief officers' management team (COMT).  |
| R3         | Monitor and enhance the role of data quality champions as     | က                  | Performance is a standing item on the COMT agenda. Implementation of the   |
|            | necessary   |                    | data quality policy began with chief officers and a direct communication from the Chief Executive to all staff with data quality responsibilities. In addition, the    |
|            |   |                    | cabinet portfolio holder for corporate services also has responsibilities in relation  |
|            |   |                    | to performance management, which includes data quality. This ensures that the importance of maintaining data quality retains a high profile.                           |
|            |   |                    | Corporate improvement group (CIG) exists to drive forward the council's  |
|            |   |                    | improvement and efficiency agendas. This includes strategic responsibility for ensuring the culture of data quality is embedded throughout the organisation.           |
|            |   |                    | Corporate improvement group members act as data quality champions for their  |
|            |   |                    | department.  |
|            |   |                    | Operational responsibility for measuring effectiveness of data quality throughout  |
|            |   |                    | the organisation lies with performance management group (PMG). This group performs a range of activities to ensure the quality of information and data used            |
|            |   |                    |  |

|         | Recommendation | Priority                       | Progress to date  |
|---------|----------------|--------------------------------|---|
|         |                | 1 = low<br>2 = med<br>3 = high |   |
|         |                |                                | in performance information including:   |
|         |                |                                | <ul> <li>PI audits and spot checks on high risk and outlier performance indicators.</li> <li>This is now a formal process built in as part of the performance reporting cycle to automatically query any anomalous data.</li> <li>Coordination of departmental performance reporting, quality assuring coordination of departmental performance reporting.</li> </ul>   |
|         |                |                                | Members of performance management group are responsible for the operational implementation of data quality.   |
| Page 24 |                |                                | The data quality policy states that members of these two corporate groups have specific responsibility for data quality and the members of these groups act as data quality champions within the authority. Their role is to contribute to the preparation of corporate data quality policy and procedures and to ensure that these policies are applied within all departments.  |
|         |                |                                | The departmental representatives within these two corporate groups ensure data collection and validation procedures are applied consistently within departments. They are tasked with ensuring arrangements are in place for data to be collected on a 'right first time' basis.  |
|         |                |                                | Further evidence that the approach to ensuring data quality across the authority has been embedded is that this topic has been considered by corporate risk management group. In future data quality checks will be undertaken annually and findings reported to performance managers. Data quality is formally embedded within the council's corporate risk management strategy that was reported to cabinet in 2007. This defines information / technological risks that relate to the loss of or inaccuracy of data and the use of / reliance on technology. |

| Re         | Recommendation  | Priority                       | Progress to date  |
|------------|---|--------------------------------|---|
|            |   | 1 = low<br>2 = med<br>3 = high |   |
| Po         | Policies  |                                |   |
| <b>A</b> A | Prepare corporate data quality procedures and policies. Ensure they are consistently applied by all departments | က                              | Wirral's data quality policy has been rolled out across the authority to all staff with responsibilities around ensuring the quality of performance information and data. This was initially in the form of a bulletin from the chief executive, which reiterated the importance of 'right first time' when collecting performance information, included a copy of the data quality policy and an explanatory briefing note and asked recipients to sign and return a form confirming that the information had been read and understood.  |
|            |   |                                | Partner agencies with shared responsibility for performance reporting have also received the data quality policy and have received training on an as needed basis.  |
|            |   |                                | In addition, each performance indicator has its own audit file containing records of the data and notes on how that data is obtained and used to calculate the outturn. These are usually a combination of hard copy files and information contained on the PIMs website. As part of the PMG spot check programme, audit files are examined to ensure that latest guidance is being used and interpreted correctly and that calculations are performed in accordance with this guidance. Where problems are identified, these are addressed quickly through the departmental data quality champions. Since the introduction of the spot check programme, the number of errors found has reduced, demonstrating that the 'right first time' approach is becoming more embedded throughout the authority. |
|            |   |                                | The council's corporate data quality policy was implemented in 2007. It already contains the standards set out in the Audit Commission's <i>Standards for better data quality</i> and this document was used in its preparation. The policy is due for review in 2010 and will take account of data quality standards expected at that time, however, the new local performance framework including national  |

| L        |  |                     |  |
|----------|--|---------------------|--|
|          | Recommendation   | Priority            | Progress to date   |
|          |  | 1 = low             |  |
|          |  | 2 = med<br>3 = high |  |
|          |  |                     | indicators will necessitate a more timely review of this policy.   |
| (,       | Systems and processes  |                     |  |
| <u> </u> | R5 Ensure data collection and                                  | 3                   | The process for accurately reporting PI outturns on a 'right first time' basis   |
|          | validation procedures are applied across all departments       |                     | ensures that separation of duties is evident and includes the calculation being checked by the calculating officer before being re-checked and signed off by the |
|          |  | (                   | responsible officer. Each PI is then also checked and signed off by an   |
|          | R6 Introduce arrangements to ensure data is collected on the   | ო                   | independent verifying officer from that department.  |
|          | 'right first time' basis                                       |                     | A new approach to the auditing of performance indicators (PIs) was undertaken in response to R7. Members of the performance management group and other           |
| Page     | R7 Review Internal Audit's role and involvement with regard to | 7                   | colleagues undertook validation work each quarter on those indicators that could be reported.  |
| e 26     |  |                     | The following criteria were used in making this assessment:  |
| <b>;</b> |  |                     | <ul> <li>Those PIs likely to be on the Audit Commission's list</li> </ul>  |
|          |  |                     | <ul> <li>Those having a variance of +/- 15% on previous year</li> </ul>  |
|          |  |                     | Pls that are in the bottom quartile     Dis that are rule based  |
|          |  |                     | PIs that have had definition changes   |
|          |  |                     | Findings were reported to the performance management team. A meeting was then held between internal audit and the performance management team to                 |
|          |  |                     | discuss these findings. As a result, it was agreed that internal audit would review any high risk PIs.   |
|          |  |                     | The objective was to ensure that the systems and processes for the production of the performance indicator were operating effectively and could be relied upon   |
|          |  |                     | and that the filliag been confernly complicat.   |

| Recommendation  | Priority                       | Progress to date   |
|---|--------------------------------|--|
|   | 1 = low<br>2 = med<br>3 = high |  |
| People and skills   |                                |  |
| R8 Complete an assessment of data quality skills across the Council   | 2                              | The corporate data quality policy is clear that data quality is the responsibility of every member of staff entering, extracting or analysing data from any of the authority's information exetens. In addition, a range of groups and individuals   |
| R9 Define roles and responsibilities of staff involved in the data quality process. Consider incorporating data quality roles and responsibilities into staff job | 7                              | have specific responsibilities to promote and ensure data quality, from the deputy chief executive to provide clear leadership from the top of the organisation, to the calculating officer responsible for ensuring that the PI is calculated according to the latest PI manual and its accompanying checklist. Any training needs arising in relation to data quality assurance and are identified and   |
| describiloris   |                                | deait with through the councils key issues exchange (appraisar) programme.   |
| R10 Set data quality standards for staff and introduce arrangements to monitor  | 7                              | The cascading and communication of the data quality policy throughout the organisation began with a direct communication from the chief executive to all staff with responsibilities around data quality. These individuals are identified in  |
| R11 Introduce data quality training as required   | 7                              | order to maintain the integrity of data within the performance system, only staff who have understood, signed and returned the data quality confirmation sheet are authorised to enter data into the PIMs system.  |
| Data use  |                                |  |
| R12 Introduce arrangements to ensure consistency of data use between departments  | 7                              | All performance information is stored and displayed on the council's web based performance information system. This system has the facility to generate reports for a variety of different purposes (departmental reports and corporate performance reports for the relevant overview and scrutiny committees, reports for LAA programme board and internal management reports for use at team meetings). All of these data returns are supported by complete audit trails within the responsible departments. |
|   |                                | In order to maintain the integrity of performance information and data, the PIMs system is administered centrally by corporate policy's performance team. This   |

2

| Recommendation  | Priority                               | Progress to date  |
|---|--|---|
|   | 1 = low<br>2 = med                     |   |
|   | III   10   10   10   10   10   10   10 | means that figures entered into PIMs cannot be changed without genuine reason and corporate policy authorisation. This applies to both local authority performance figures and data entered from partner agencies.  |
|   |  | The council's performance management processes ensure that these reports are seen by the relevant officers at the right times. Performance reports are prepared by corporate policy's performance management team, shared with PMG and then sent to CIG. This group reviews the information before reporting takes place to COMT. Cabinet receives performance reports on a quarterly basis, six weeks after each quarter end. Performance reports are also considered by their appropriate overview and scrutiny committees. |
|   |  | Performance reports are exception based and therefore risk based, highlighting areas of concern and prompting scrutiny of whether resources are being directed effectively. For example, attention will be drawn to under performance and corrective actions put in place to address this. Over performance will prompt consideration of whether resources are being used effectively or can be   |
|   |  | redistributed to target areas of poor performance at risk of not delivering intended outcomes for local people.   |
| Performance indicators  |  |   |
| R13 Ensure systems are in place for collecting and validating cultural services performance information | 2                                      | Cultural Services performance information is presented to meet the requirements of the corporate Data Quality Policy (April 2007) and the data is input onto the performance indicator management system (PIMS)   |
|   |  | All officers involved in performance data collection are aware of their responsibilities. For each individual performance indicator there is a nominated calculating officer, responsible officer and verifying officer.  |
|   |  | Data is collected as regularly as possible, quarterly being the recommendation if possible, depending on the nature of the individual indicator.  |

9

|         | Recommendation  | Priority                       | Progress to date  |
|---------|---|--------------------------------|---|
|         |   | 1 = low<br>2 = med<br>3 = high |   |
|         |   |                                | For each performance indicator there is a specific departmental performance indicator manual. The manual specifies how the indicator is calculated and the checks that are made to ensure the accuracy of the data. This document is signed off by both the responsible officer the calculating officer as an agreement to the process for collecting and validating the indicator. An annual verification is carried out by performance management group |
|         |   |                                | In addition, officers now attend a departmental performance group so that good practice in each individual section can be shared and common problems can be addressed prior to data submission deadlines.   |
| Page 29 | R14 Ensure correct definitions are followed when collecting pedestrian crossing performance information                               | 0                              | Calculating and Responsible Officers work to the latest DfT news letter and guidance on BVPI 165. The information is contained in a controlled file within which we hold the Data Quality Policy created April 07 and reviewable in April 2010. Calculation, checking, verification and responsible Officer sign off the final figures at year end.   |
|         | R15 Introduce validation procedures to ensure speed in fixing street lights source information agrees with supporting (prime) records | a                              | It would not be possible to actually introduce validation procedures at this stage of the current contract (which expires in March 2009) as the repair records and the initial scouting records which generate the instruction to repair are all paper based and there is currently no staff resource available to interrogate these operational records to produce evidence to support the prime records.  |
|         |   |                                | From April 2009 when the new Highway and Engineering Services contract commences, a performance management framework has been built into the contract documentation and it will be easier to measure the contractor's performance in relation to street lighting repairs and as a consequence the performance figures will be easier to produce. Validation procedures can also be set up at this time.   |

| Docommondation                     | Driority | Discussion of operations of the property of th |
|------------------------------------|----------|--|
|                                    | 1 = low  |  |
|                                    | 2 = med  |  |
|                                    | 3 = high |  |
| R16 Ensure data returns to         | 2        | The Best Value Indicators (BV109) are run each quarter and we always run the   |
| government departments agrees      |          | quarterly PS2 (submitted to government department) at the same time to ensure  |
| with information used to calculate |          | that the information submitted to government department agrees with the  |
| speed of planning performance      |          | information reported to Cabinet and Scrutiny.  |
| information (BVPI 109)             |          |  |

WIRRAL COUNCIL

AUDIT AND RISK MANAGEMENT COMMITTEE - 1st December 2008

REPORT OF THE DIRECTOR OF LAW, HR AND ASSET MANAGEMENT

#### AUDIT COMMISSION REPORT ON DEMOCRATIC ARRRANGEMENTS

#### 1 **EXECUTIVE SUMMARY**

- 1.1 The Audit Commission report on the Council's democratic arrangements was considered by the Committee at its meeting on 30 June 2008. The agreed action plan is attached at Appendix 1. The Committee considered progress at its meeting on 30<sup>th</sup> September 2008 (minute 26 refers) and Members requested a further report.
- 1.2 This report provides an update on progress since the last meeting of the Committee.

#### 2. PROGRESS ON ACTION POINTS

#### 2.1 Recommendation 1

Assess and review the amount of senior officer time spent on serving the current democratic arrangements and whether that currently provides value for money.

2.2 It was not possible to complete this recommendation within the last cycle – this information will be collated during the present cycle up to Council on 15<sup>th</sup> December 2008.

#### 2.3 Recommendation 2

Continue to support and develop the training for the scrutiny function. Including the on going provision of training for new scrutiny members and the development of more tailored training such as performance management.

2.4 The provision of additional scrutiny training was considered by the Member Training Steering Group at its meeting on 6<sup>th</sup> October 2008 and it was agreed that this would be incorporated into the Member Training Programme for 2009/10. Training on performance management was provided for Members on 29<sup>th</sup> January 2008. The scrutiny toolkit for Members was approved by the Council at its meeting on 3<sup>rd</sup> November 2008 and is available in the electronic Members Library to assist all Members in carrying out their scrutiny role. In addition, Scrutiny Chairs are visiting another local authority in January to observe the scrutiny function.

#### 2.5 Recommendation 3

Review the current scrutiny committee structure and clearly identify the remit of each committee in order to reduce duplication of activity and review. Including:

- ensure that performance information is reported to the most relevant committee; and
- that all committee have put in place work programme for the coming municipal year.
- 2.6 At its meeting on 9<sup>th</sup> July 2008 the Cabinet resolved that
  - "...In the light of the adoption of the new Corporate Plan, Cabinet is minded therefore to consider recommending to Council a system where five Overview and Scrutiny Committees mirror instead the five agreed Corporate Objectives in order to allow those committees to play a real part in delivering the Council's agreed agenda.

However, Cabinet realises that this is an issue that will need substantial consultation and debate with all those concerned and therefore agrees to review the position with the object of taking new proposals, with detailed terms of reference, to the appropriate Council to take effect from the next Council AGM."

2.7 It is therefore anticipated that any changes to the current scrutiny committee structure will be brought forward for consideration prior to implementation in May 2009, subject to the consultation and debate referred to above.

Performance information is reported to the relevant overview and scrutiny committee. Once the final future structure for overview and scrutiny committees is agreed, Officers will put in place arrangements to ensure that performance information is reported to the relevant committee.

2.8 All scrutiny committees have agreed work programmes for 2008/9.

#### 2.9 Recommendation 4

Continue to review the arrangements for cabinet in order to further reduce the number of items considered. Including:

- review the effectiveness of the virtual committee in reducing items taken to cabinet; and
- monitor the impact of the new scheme of delegation in reducing the cabinets work load and explore the opportunity to extend the scheme further.
- 2.10 A new Committee Management system was introduced on 12<sup>th</sup> September 2008 which improves the range of information available to Members on the Council's intranet. One aspect of this is an improved library facility where items of general interest to Members are filed. All Members are notified when new items are posted. This aims to reduce the number of committee reports for information that are considered by enabling information to be disseminated to Members electronically.

2.11 At its meeting on 14<sup>th</sup> July 2008 the Council agreed a revised scheme of delegation to Cabinet Portfolio Holders and this was complemented by a revised protocol which was agreed by Cabinet on 4<sup>th</sup> September 2008. This extends the level of delegation to Portfolio Holders and should therefore reduce the number of items considered by the Cabinet. Monitoring of both the use of the electronic library and the scheme of delegation is on-going.

#### 2.12 Recommendation 5

Review current performance indicators to ensure they enable members to understand the impact and value for money of the Council activities.

- 2.13 Corporate indicators have been reviewed for 2008/9 and will be reviewed again on an annual basis.
- 3 FINANCIAL AND STAFFING IMPLICATIONS
- 3.1 There are no financial and staffing implications.
- 4. LOCAL MEMBER SUPPORT IMPLICATIONS
- 4.1 There are no local Member support implications.
- 5. LOCAL AGENDA 2I STATEMENT
- 5.1 There are no Local Agenda 21 implications.
- 6. PLANNING IMPLICATIONS
- 6.1 There are no planning implications.
- 7. EQUAL OPPORTUNITY IMPLICATIONS
- 7.1 There are no equal opportunity implications.
- 8. **COMMUNITY SAFETY IMPLICATIONS**
- 8.1 There are no community safety implications.
- 9 HUMAN RIGHTS IMPLICATIONS
- 9.1. There are no human rights implications.
- 10. BACKGROUND PAPERS
- 10.1 There are no background papers under the Access to Information Act.
- 11. **RECOMMENDATION**
- 11.1 That this report be noted.

# **Appendix 1 – Action plan**

| Page<br>No | Recommendation  | Priority<br>1 = Low<br>2 = Med<br>3 = High | Responsibility               | Agreed | Comments  | Comment                | Date                 |
|------------|---|--|------------------------------|--------|---|------------------------|----------------------|
| 6          | R1 Assess and review the amount senior officer time spent on ser the current democratic arrange and whether that currently providue for money.  | ving<br>ments                              | Chief Officers               | Yes    | Average figures for the current democratic arrangements to be collated and assessed.  | In progress            | 3/12/08              |
| 6          | R2 Continue to support and develor training for the scrutiny function including the on going provision training for new scrutiny members the development of more tailor training such as performance management.  | n.<br>n of<br>ers and                      | Matthew Hebden               | Yes    | Additional scrutiny training sessions to be arranged for Chairs and new scrutiny members following the elections.  Performance management training has been carried out since the production of this report.  | In progress  Completed | 30/03/09<br>29/01/08 |
| 6          | R3 Review the current scrutiny corstructure and clearly identify the of each committee in order to reduplication of activity and review Including:  • ensure that performance information is reported to the relevant committee; and  • that all committee have put place work programme for the coming municipal year. | e remit<br>educe<br>w.<br>e most           | Simon Goacher Chief Officers | Yes    | To be carried out as part of the Annual Review of the Constitution  Review the provision of performance information to ensure the relevance to specific OSCs. Guidance is being produced by corporate performance on how / when scrutiny committees should receive performance reports. |                        | 30/09/08             |
|            |   |  | Andrea Grant                 |        | Development of work programmes to be considered as the first item of business at each OSC in the new Municipal Year.  | Completed              | 14/07/08             |

| Page<br>No | Recommendation   | Priority<br>1 = Low<br>2 = Med<br>3 = High | Responsibility | Agreed | Comments  | Comment                                    | Date     |
|------------|--|--|----------------|--------|---|--|----------|
| 6          | R4 Continue to review the arrangements for cabinet in order to further reduce the number of items considered. Including:  • review the effectiveness of the virtual committee in reducing items taken to cabinet; and  • monitor the impact of the new scheme of delegation in reducing the cabinets work load and explore the opportunity to extend the scheme further. | 2  | Simon Goacher  | Yes    | The scheme of delegation to be reviewed as part of the Annual Review of the Constitution.   | Completed<br>and<br>monitoring<br>on-going | 14/07/08 |
| 6          | R5 Review current performance indicators to ensure they enable members to understand the impact and value for money of the Council activities.   | 2  | Russ Glennon   | Yes    | Corporate indicators have been reviewed for 2008/9 and will be reviewed again annually. Finance Department is exploring unit / service cost indicators. | Completed                                  | 30/09/08 |

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WIRRAL COUNCIL

**AUDIT AND RISK MANAGEMENT COMMITTEE** 

**1 DECEMBER 2008** 

REPORT OF THE DIRECTOR OF FINANCE

#### CORPORATE RISK AND INSURANCE MANAGEMENT

#### 1. **EXECUTIVE SUMMARY**

1.1. This report provides information to Members on recent progress in these services and anticipated developments in the coming months.

## 2. INSURANCE MANAGEMENT PROGRESS

- 2.1. Detailed liability claim statistics to 30 September 2008 have been compiled and the account continues to perform well. Repudiation rates remain at a high level and the trend in new claims reported remains at a historically low level.
- 2.2. Of the three liability cases heard at initial trial during September and October 2008 all were won with legal costs to be recovered from the claimants. Three further matters have been heard by the Appeal Court. All have been successful and the decisions in these separate cases, Cenet v Wirral, Spencer v Wirral (both Highway cases) and A v Wirral (an historic abuse matter) have all set positive case law that has been widely reported and will be relied upon in future by other defendants. Significant legal costs can also be recovered. A further decision was successfully appealed in Williams v Wirral on the basis that the original County Court decision was flawed and the case has been sent back to the lower court for retrial. These decisions clearly vindicate the costs / risks of challenging perceived incorrect first instance decisions in appropriate cases.
- 2.3. The Insurance Fund budget for 2009/10 has been compiled and was reported to Cabinet on 27 November 2008. As agreed by Cabinet on 22 May 2008 the savings on the Property Insurance contract and the additional costs for the increased scope of the cover have been contained and so there is no increased requirement. The increased cover against storm, flood and burst pipes became effective from 30 June 2008 and eleven losses totalling approximately £44,000 arising from adverse weather on 5/6 September 2008 have been met by the Insurance Fund. Work has commenced on reviewing the basis of charging schools to align charges more precisely to the risk exposure which should result in an increased recharge to school budgets.
- 2.4. The Risk & Insurance Team has met departments to begin developing the specification and award criteria for the tender for the Engineering Inspection and Insurance contract. Work has also started in relation to the Motor Insurance contract. Both of these expire on 31 March 2009.

- 2.5. The Marine Insurance policy was renewed on 30 September 2008 with the existing insurer. There were no significant changes in terms or premium.
- 2.6. The performance of the liability claims handlers has been of concern following the introduction of a new IT process within the company. The issues are being addressed with representatives at a senior level. This follows excellent work undertaken during the first three years of this contract and the situation continues to be monitored.
- 2.7. Settlements totalling approximately £200,000 have been received from insurers in respect of a number of major fires which occurred in the 2003/04 policy year. A further payment in settlement of the Rock Ferry High School fire is expected.
- 2.8. The Risk & Insurance Officer is negotiating an early expiry of the insurance broking and consultancy with Aon Limited to avoid having to tender for a broker at the same time as the tendering for the Motor and Engineering Insurances. The value of the service falls below the threshold of UK public sector procurement legislation and the outcome will be confirmed in the next report.
- 2.9. Interviews were held with loss adjusting companies on 30 September 2008 and GAB Robins were selected as the preferred company for use where adjusters need to be appointed on property claims.

## 3. **CORPORATE RISK MANAGEMENT – PROGRESS**

- 3.1. An entry was submitted in the Risk Management category of the 2008 Local Government Chronicle Finance. This made the final shortlist of three.
- 3.2. The Corporate Improvement Group conducted its second quarterly review and update of the 2008/09 Corporate Risk Register with this informing the Financial and Performance Monitoring Report to Cabinet on 27 November 2008.
- 3.3. The Risk & Insurance and Policy and Performance Teams have been working on improvements to the mechanisms for identifying and reporting risks to delivering the objectives in departmental plans in advance of the 2009/10 service planning cycle.
- 3.4. Work continues to ensure that risk management is embedded into the governance arrangements for the Local Area Agreement (LAA). A pilot self-assessment workshop on 15 October 2008 identified a number of structural risks to delivery. The Risk & Insurance Team also continues to support preparations for the introduction of the Comprehensive Area Assessment (CAA) regime.
- 3.5. The Risk & Insurance Officer is attending the corporate training group meeting on 13 November 2008 to examine the inclusion of risk management material

into the Corporate Induction process whilst the possibility of an e-learning package for Members and employees is being investigated.

### 4. INSURANCE MANAGEMENT – ISSUES FOR NEXT PERIOD

- 4.1. Liability claims statistics to December 2008 will be compiled.
- 4.2. There are currently 5 claims scheduled for an initial court hearing between November 2008 and January 2009.
- 4.3. The chosen supplier for broking and insurance consultancy services will formally advertise the Motor and Engineering insurance contracts.
- 4.4. Work will begin on the renewal of the Liabilities and Computer policies which expire on 31 March 2009 but which are subject to current Long Term Agreements.
- 4.5. The Risk & Insurance Team will investigate the feasibility of commissioning a study to provide a more accurate indication of the level of funding required to meet liabilities relating to those periods where insurers cannot be identified or have become insolvent.

## 5. RISK MANAGEMENT – ISSUES FOR NEXT PERIOD

- 5.1. The Corporate Improvement Group will carry out the next quarterly review of the Corporate Risk Register to inform the Financial and Performance Monitoring Report to Cabinet on 5 February 2009.
- 5.2. Chief Officers and the Corporate Improvement Group will undertake the annual review of the Corporate Risk Register which should be reported to Cabinet on 10 December 2008.
- 5.3. The principal risks to the delivery of departmental aims will be identified for reporting to Cabinet on 15 January 2009 as one element of Departmental Plans for 2009/10.
- 5.4. The Risk & Insurance Officer will continue to work with the Policy and PerformanceTeam over preparations for the introduction of CAA in April 2009.
- 5.5. The risk management arrangements for the new LAA (including baseline risk assessments for each of the Priorities for Improvement) will be developed further.

### 6. FINANCIAL IMPLICATIONS

6.1. There are none arising directly from this report.

## 7. STAFFING IMPLICATIONS

7.1. There are none arising directly from this report.

- 8. **EQUAL OPPORTUNITIES IMPLICATIONS**
- 8.1. There are none arising directly from this report.
- 9. **ENVIRONMENTAL IMPACT STATEMENT**
- 9.1. There are none arising directly from this report.
- 10. LOCAL MEMBER SUPPORT IMPLICATIONS
- 10.1. There are none arising directly from this report.
- 11. BACKGROUND PAPERS
- 11.1. Agendas and minutes of meeting with AON Limited and data from the Figtree claims database.
- 11.2. Liability claim statistics.
- 12. **PLANNING IMPLICATIONS**
- 12.1. There are none arising directly from this report.
- 13. **RECOMMENDATIONS**
- 13.1. That a further update be presented to the next meeting.

IAN COLEMAN DIRECTOR OF FINANCE

FNCE/264/08

## WIRRAL COUNCIL

## **AUDIT & RISK MANAGEMENT COMMITTEE - 1 DECEMBER 2008**

### REPORT OF THE DEPUTY CHIEF EXECUTIVE/DIRECTOR OF CORPORATE SERVICES

#### OFFICE SECURITY - PROGRESS REPORT

## 1. EXECUTIVE SUMMARY

1.1 This report seeks to assure members that the issues raised in the previous report on office security, presented on 7<sup>th</sup> April 2008, and in subsequent correspondence from the chair have been successfully addressed (minute 68 refers).

## 2. BACKGROUND

- 2.1 Members may recall that I provided a report on office security to this Committee in April 2008 based on the findings of an Internal Audit report. There were still a number of outstanding issues and it was requested that the Health, Safety & Resilience Manager provide a further report on progress to a future meeting.
- 2.2 There was initially some confusion about the accuracy of the information contained within the Internal Audit report and some doubt over the current position for the premises listed. Members were made aware that Facility Security is one of the areas now included as part of the facilities management Legislative Compliance audit and therefore it would be more appropriate for this officer to report back on progress.
- 2.3 There was also a request for the Conditions of Hire agreement for municipal buildings to be circulated to all committee members.

## 3. PROGRESS

I am pleased to inform Members that the several issues raised by internal audit and "left over", pending further action have now been successfully addressed. All Facility Managers have now confirmed to the Legislative Compliance Officer, each issue has been completed satisfactory.

The request for a copy of the Conditions of Hire for Municipal Buildings be sent to each committee member was actioned by the Committee Clerk on the 23 May 2008.

### 3. FINANCIAL IMPLICATIONS

3.1 Some of the recommendations arising from the audit process will have financial implications. This information is being shared with both Asset Management and also with the relevant staff within Technical Services.

## 4. STAFFING IMPLICATIONS

4.1 There are no direct staffing implications as a result of this report.

### 5. EQUAL OPPORTUNITIES IMPLICATIONS

5.1 There are no direct Equal Opportunities implications

### 6. COMMUNITY SAFETY IMPLICATIONS

6.1 Community safety will be improved by the security improvements on Council premises as a result of the audit process.

### 7. LOCAL AGENDA 21 IMPLICATIONS

7.1 There are no Local Agenda 21 implications

### 8. PLANNING IMPLICATIONS

8.1 There are no planning implications

#### 9. ANTI-POVERTY IMPLICATIONS

9.1 There are no anti-poverty implications

## 10. HUMAN RIGHTS IMPLICATIONS

10.1 There are no Human Rights implications

## 11. SOCIAL INCLUSION IMPLICATIONS

11.1 There are no social inclusion implications

## 12. LOCAL MEMBER SUPPORT IMPLICATIONS

12.1 There are no local support implications

## 13. BACKGROUND PAPERS

13.1 None

### 14. RECOMMENDATIONS

- 14.1 That the report be noted.
- 14.2 That an annual report will be provided for the April committee on the work of the Legislative Compliance Officer.

## J. WILKIE

## DEPUTY CHIEF EXECUTIVE/DIRECTOR OF CORPORATE SERVICES

This report was prepared by Mark Camborne, Health, Safety & Resilience Operations Manager who can be contacted on 606 2071.

## **APPENDIX 1**

| Finding  | Solar Campus   | Westminster House | Hamilton Building | Wallasey Complex | Cheshire Lines | Conway, Municipal<br>and Treasury | Bebington Complex | Liscard Complex                                  | Castle Chambers |
|--|----------------|-------------------|-------------------|------------------|----------------|-----------------------------------|-------------------|--|-----------------|
| Documented security policy not in existence detailing local procedures.  | 1              | 1                 | 1                 | <b>✓</b>         | <b>√</b>       | <b>√</b>                          | 1                 | 1  | 1               |
| Complex Manager not formally trained.  | 1              |                   |                   |                  |                |                                   |                   |  |                 |
| Complex Manager not designated.  |                |                   |                   |                  |                |                                   |                   |  | <b>✓</b>        |
| Formal risk assessments not performed regularly.   |                | 1                 |                   |                  |                |                                   | 1                 |  | H               |
| Health and Safety Fire policy not updated and fire risk assessments not performed regularly.   |                |                   |                   |                  |                | ✓                                 | ✓                 | ✓  |                 |
| Bomb incident plan not available.  |                | ✓                 |                   |                  |                |                                   | ✓                 |  |                 |
| Burglar alarm tests not evidenced.   |                |                   | ✓                 |                  |                | ✓                                 |                   |  |                 |
| CCTV not in operation.   | <b>✓</b>       |                   |                   |                  | ✓              |                                   | ✓                 |  |                 |
| Vulnerable doors and windows not protected by shutters or grilles.   |                |                   |                   |                  | ✓              |                                   | 1                 | ✓  |                 |
| Door entry codes not changed regularly.  | <b>✓</b>       |                   |                   |                  |                | ✓                                 |                   |  |                 |
| No documented list of key holders.   |                |                   | <b>√</b>          |                  | 1              | <b>√</b>                          |                   |  |                 |
| Not aware if complex secure in the event of power failure.   |                |                   | <b>✓</b>          |                  | 1              |                                   |                   |  |                 |
| Standard forms not used for issue of access cards.   | 1              | 1                 | <b>✓</b>          |                  | ✓              |                                   | 1                 |  | 1               |
| ID Cards not issued to all staff.  |                |                   |                   |                  | ✓              | ✓                                 |                   |  | <b>✓</b>        |
| Stock records of access cards not maintained.  | ✓              | ✓                 | ✓                 | ✓                |                |                                   |                   |  |                 |
| Stock Key fobs and ID cards not stored securely.   |                |                   |                   | ✓                |                |                                   |                   |  |                 |
| Return of access cards not included as standard item at exit interviews.   |                |                   |                   | ✓                |                |                                   |                   |  |                 |
| Badges not issued to visitors.   | <b>✓</b>       |                   |                   |                  |                |                                   | 1                 |  | <b>✓</b>        |
| Deliveries not always signed for.  |                |                   |                   |                  | <b>√</b>       |                                   |                   |  |                 |
| Guidance not issued re use of assets off site.   |                | 1                 |                   |                  | 1              | <b>√</b>                          |                   |  |                 |
| Security incident report book not maintained.  | <b>✓</b>       | ✓                 |                   |                  | ✓              | <b>✓</b>                          |                   |  | 1               |
| Crime prevention not advertised and promoted within the complex.   | · /            |                   |                   | 1                | · /            | <b>√</b>                          | 1                 | -  | Ť               |
| No system for liaison with police.   | Ť              |                   |                   | •                | ·              | •                                 | Ť                 | <b>✓</b>   | 1               |
| No signing in procedure for Visitors.  |                |                   |                   |                  | Ť              |                                   | <b>✓</b>          | Ť  | <b>√</b>        |
| Doors being held open with a snip device.  |                |                   |                   |                  |                | ✓                                 |                   |  |                 |
| Not aware if the fire alarm is connected to a relevant organisation.   |                |                   | ✓                 |                  |                |                                   |                   |  |                 |
| Exterior doors not connected to the burglar alarm system.  | <del>  _</del> | ✓                 |                   |                  |                |                                   |                   |  |                 |
| Complex Managers unaware of security issues, and disseminating them to staff.  No Lone Working Policy providing guidance for staff working alone.        | <b>✓</b>       |                   |                   | ✓                |                |                                   |                   | ✓  | 1               |
| No Inventory is kept or regularly updated.   |                |                   |                   |                  |                |                                   | 1                 |  | <b>•</b>        |
| Attendance at Complex Managers Meetings.   | <b>✓</b>       | ✓                 |                   |                  |                |                                   |                   |  |                 |
| Burglar Alarms not installed.  |                |                   |                   |                  | ✓              |                                   |                   |  |                 |
|  |                |                   |                   |                  |                |                                   |                   |  |                 |
| Training on going with Legislative Compliance Officer, Confirmation Received from  | 1              |                   |                   |                  |                |                                   |                   |  |                 |
| Mike Clarke all other items completed  Confirmation received 10/4/08 all actions will be completed by 31/5/08  |                | 1                 |                   |                  |                |                                   |                   |  |                 |
| Confirmation email received 19/2/08 Simon Cuerden all items completed  |                |                   | <b>✓</b>          |                  |                |                                   |                   |  |                 |
| Confirmation email received 7/2/08 Peter Goodman all items completed   |                |                   |                   | ✓                |                |                                   |                   |  |                 |
| Confirmation email received 28/2/08 Rob Dolphin all items completed  |                |                   |                   |                  | ✓              |                                   |                   |  |                 |
| Emergency Arrangements currently being reviewed by Legislative Compliance Officer as part of a scheduled program across all Finance. Confirmation email  |                |                   |                   |                  |                | ✓                                 |                   |  |                 |
| received 29/2/08 from John Caruthers all other items completed 1/4/08.  Confirmation via post received 29/2/08 Graham Knowles all items completed 1/4/08 |                |                   |                   |                  |                |                                   | 1                 | <del>                                     </del> |                 |
| Emergency Arrangements currently being reviewed by Legislative Compliance  |                |                   |                   |                  |                |                                   | +                 | $\vdash$   | $\vdash$        |
| Officer as part of a scheduled program across Technical Services. All other items complete.  |                |                   |                   |                  |                |                                   |                   | ✓  |                 |
| Confirmation received 12/11/08 all actions have been completed.  |                |                   |                   |                  |                |                                   |                   |  | ✓               |

✓= Fully implemented no further action required
Blank Space = Nothing to report on that action.
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#### WIRRAL COUNCIL

**CABINET** 

**27 NOVEMBER 2008** 

### REPORT OF THE CHIEF EXECUTIVE

### FINANCIAL AND PERFORMANCE MONITORING SUMMARY

### 1. EXECUTIVE SUMMARY

1.1. This is one of a series of reports submitted throughout the year presenting an overview of the performance of the Council in delivering the Vision for Wirral as set out in the Corporate Plan and is for the quarter-ended 30 September.

### 2. OVERVIEW

- 2.1. The main influence continues to be the economic situation. The financial pressures within the global economy have repercussions at national and local levels as the volatility of the world financial markets continues.
- 2.1.1 Wirral benefitted through exercising prudent financial management around cash flow and investments that realised additional income and a reduced need for temporary borrowing. However the impact upon the banking sector has placed at risk £2 million of investments with an Icelandic bank although there remains every possibility that this will be recovered.
- 2.1.2 The current, and projected, world economic position is placing additional pressures upon all who rely on the financial sector with implications for the delivery of the Wirral Investment Strategy, major investment schemes and the NewHeartlands initiative. As such the developing links with the thriving China economy present an opportunity for securing additional investment to Wirral.
- 2.1.3 Against this background the Council continues to seek to maintain progress in achieving the priorities set out in the Corporate Plan whilst recognising the impact on the building industry and, as a consequence, the worklessness priority.
- 2.2. The following sections report on the progress in delivering the priorities including the financial and risk issues with further details down to departmental level in the appendices. The underpinning projects are presently either on target or actions are in place to enable them to be achieved during the year. In terms of the supporting indicators again, of those presently measurable, most are on target.
- 2.3. The key issues highlighted and requiring to be addressed in the forthcoming period are the:-
  - continuing development of the personalisation agenda;
  - safe reduction of the number of looked after children;
  - development and implementation of the strategic asset review;
  - management of the potential overspends in 2008/09 within Adult Social Services, Children & Young People and Regeneration;
  - decisions to enable the setting of the Council budget for 2009/10.

## 3. CORPORATE PLAN AND PERFORMANCE

- 3.1 On 13 March 2008, Cabinet agreed the Council's Corporate Plan which detailed how the vision 'of a more prosperous and equal Wirral, enabling all communities and people to thrive and achieve their full potential' would be achieved. The vision set five clear objectives, and identified eleven immediate priorities for improvement in the year ahead.
- 3.2 This section includes narrative and performance indicators on the priorities for improvement areas for 2008/09. The narrative includes the progress made to date, challenges remaining and further improvements to be completed.

## 3.3.1 Reduce worklessness

### **Progress made:**

Wirral continues to make steady progress in reducing the number of Incapacity Benefit (IB) and Lone Parent claimants. However, reductions in these benefit groups have been negated by rises in Job Seekers Allowance claimants. The Wirral Economic Development and Skills partnership (WEDS), through the Working Wirral programme has commissioned activity to support workless people into training an employment in line with the agreed priorities.

The reach out programme has achieved impressive outcomes which include supporting 1,016 workless residents from Wirral's most deprived communities into employment. It has also developed extensive partnership working by making referral to other organisations including Registered Social Landlords, Primary Care Trust and Merseyside Fire and Rescue. This activity has been enhanced by the launch of *Reach Out Plus* that provides in-work mentoring to priority groups such as lone parents and Incapacity Benefit recipients.

## **Challenges remaining:**

The current global economic slowdown has led to a rise in unemployment in the UK and this is expected to get worse over the next twelve months, with JSA trends in Wirral rising above the national average.

WEDS continues to press central government to provide confirmation of funding for Working Neighbourhood Funding for 2009/10 and 2010/11 and have concern that further delay could significantly impact on future commissioning timescales. Refresh discussions will commence shortly with regards to Wirral's Local Area Agreement, it is important to note that the worklessness target is an already challenging target and will be even more challenging due to the economic slow down. This improvement target will be discussed with Government Office in the refresh discussions.

### How we're making further improvements:

Wirral will continue to support economically inactive residents to move into employment as well as supporting vulnerable residents who are in employment but have low or no qualifications and may struggle to return to the labour market if hit by the economic downturn. Wirral continues to work strongly with partners sub regionally to develop employment and skills policy, including developing a multi area agreement submission to central government and the Working Wirral programme will continue to be used to respond to local circumstances in line with council and investment strategy agreed priorities. Wirral is further improving its

engagement with employers to ensure they benefit from the range of support services offered locally.

## 3.3.2 Increase enterprise

## **Progress made:**

Wirral continues to support enterprise growth through the Wirralbiz programme and the current LAA stretch targets have been achieved in terms of the number of new business starts and those which are still in operation after twelve months of trading.

## Challenges remaining:

The current transitional funding for new business starts finishes in March 2009 and Wirral Council is working closely with the Northwest Development Agency (NWDA) to ensure that any future activity in Wirral is in line with the National Business Support Simplification Programme (BSSP) and also the activities funded by the Regional Development Agency.

Wirral also has a high proportion of small businesses who are not VAT registered and support for business will be tailored around the BSSP to support business growth. This is critical given the current economic slowdown.

## How we're making further improvements:

We continue to work with the NWDA to ensure Wirral adds value to regional programmes to support businesses in Wirral to grow.

## 3.3.3. Increase levels of recycling

## **Progress made:**

Recycling rates for July – September have increased to around 41%. This is an increase on the last quarter (39.86%), primarily due to good garden waste tonnages.

The doorstep survey of 6,000 residents has been completed and has identified that residents prefer to receive specific recycling information direct to their door.

### Challenges remaining:

To continue to increase participation and decrease contamination particularly in areas of low uptake.

## How we're making further improvements:

Multi Occupancy recycling will be rolled out from January – March 2009, this will help to increase levels of recycling. In addition on street recycling receptacles are to be introduced in main shopping areas to encourage the public to recycle while out and about early New Year

A study will take place in November 2008 to identify areas of low material capture throughout the borough; these areas can then be targeted with specific campaigns to increase participation.

A funding bid has been put into WRAP to support a communications campaign based on education and awareness using participation officers to reduce contamination levels and increase recycling rates.

## 3.3.4. Reduce the Council's carbon footprint

## **Progress made:**

The Investment in Energy Efficiency Programme continues to reduce emissions, progress was reported to Cabinet in September.

On the 25 September 2008 Cabinet approved the creation of the Sustainability Unit within the Department of Law, H.R. and Asset Management to improve energy efficiency and to work with Businesses and the Community to raise awareness of the urgent need to reduce Wirral's Carbon footprint, to take action to reduce Carbon emissions and to sign up to the CRed community carbon reduction programme.

As detailed in the above report, part of the development of the Sustainability Unit is the establishment of a Climate Change Officer and a Sustainability (Cred) Liaison Officer. A report to the Employment and Appointments Committee has been drafted together with the production of Job Descriptions. The report is due to be presented to the committee on 3 December 2008.

Two Energy Awareness officers have been recruited and are now in post to push the energy savings message to staff. An environmental awareness poster campaign (as detailed blow) has been produced and is currently being rolled out across the council.

## Challenges remaining:

Energy costs have risen significantly over the last twelve months and are likely to add around six million pounds to the Council's annual expenditure. A large part of the authority's energy consumption is buildings related.

It is vital that the Climate Change and CRed officers are appointed and the Sustainability Unit set up as soon as is practicable within the new department. These two new posts are key to progressing NI 185, once the Sustainability (CRed) Liaison Officer has been appointed we will be able to complete the development of the Wirral CRed website and promote the scheme and CO2 emission reduction initiatives across the borough.

To ensure increased awareness of this priority amongst council staff and managers across the Council.

### How we're making further improvements:

The Strategic Asset Review will consider energy conservation as a key consideration during the current review of all the Council's buildings and will make appropriate recommendations.

A waste energy survey is being conducted with council staff to get a baseline figure of staff's understanding of energy reduction methods.

Energy Saving week will take place 3–11 November, with 7 events across the council for employees. Target has been set for recruitment of 30 energy champions from throughout the organisation.

As part of the work of the Nottingham Declaration Working Group, which includes our partners Wirral PCT and Cheshire and Wirral Partnership NHS Trust, a cofunded joint poster campaign has been produced around the themes contained within the Council's Climate Change Strategy of Awareness, Energy, Transport and Adaptation. The joint launch will take place in November 2008 to coincide with Energy Saving week.

## 3.3.5. Reduce number of people killed or seriously injured in road accidents.

## **Progress made:**

Numbers of people killed or seriously injured continued to fall. In the past quarter a successful pilot campaign of Bring Accidents down 2 zero has taken place. Results of this campaign showed that 74% of drivers preferred the new scheme with the voluntary 20mph speed limit to physical speed reducing measures and 89% of drivers thought that the scheme should be provided in other areas of Wirral.

## **Challenges remaining:**

New locations need to be identified and agreed in order to roll out the Bring Accidents down 2 zero campaign.

## How we're making further improvements:

Partners continue to work closely to monitor progress of this priority for improvement.

Working in partnership with the Police a Christmas Drink Driving campaign will be implemented over the next quarter and education programmes within schools will continue including Go Goliath and 4 Wheel Ed. Road Safety Officers are continually delivering Road Safety Education in primary and high schools across the Borough. A new Schools Road Safety Campaign to encourage children to walk to school will be implemented in the New Year.

In addition an anti-speeding and in car safety campaign in partnership with the Police during the month of October.

## 3.3.6. Promote greater independence and choice

## **Progress made:**

Progress this quarter against many key performance indicators is significantly improved upon the same period last year, in particular timeliness of payments. Staff have taken responsibility for the personalisation agenda and have been implementing changes and promoting their benefit throughout this period. This has resulted in an immediate impact on improved outcomes for service users.

A detailed project management methodology has ensured that changes were delivered to deadlines with robust impact and risk assessment, incorporating Equality Impact Assessments of the projects. The IDeA review of Healthier Communities reported "the Council's partnership with Wirral PCT is strong and mature with evidence of joint working".

Structured investment by DASS & Primary Care Trust to develop early an intervention network & a range of "transitional care services". The Home Assessment and Reablement Team is now in place and is embedding the reablement ethos across the whole range of provider services. This is ensures timely transfers from hospital care and where appropriate, new pathways into these services which avoids the need for secondary care. There is a strong evidence base demonstrating improved outcomes from people who have used these services.

## Challenges remaining:

The Department has commenced a major restructure to transform social care and continues to face significant financial pressures.

Capturing the new information required for a number of the new performance indicators in partnership with the PCT has been a challenge during this period.

## How we're making further improvements:

The issue relating to partnership performance indicators is being resolved as a result of productive partnership working with the PCT.

A three year strategy has been adopted to address financial pressures, with the Efficiency Plan (Budget Stabilisation Strategy) monitored at Departmental level, linked to the Transformational Change Programme Board.

A steering group for the Joint Strategic Needs assessment has been established with a full time project manager appointed. The JSNA to be published shortly will address issues of equality and inclusion, with specific target groups highlighted amongst learning disabilities, mental health, older people and carers.

DASS has also undertaken to become a member of the Carers UK forum called Employers for Carers, which will demonstrate the Department's active involvement in setting positive practice standards and will hopefully encourage other local employers to follow. It is intended that this development will be marked by a communication to all staff about their rights as carer's via their November pay-slip which will in turn be reported upon as part of Carer's Rights Day in December 2008.

Work on early intervention continues to be prioritised for example the development of the System dynamic modelling tool based on Wirral's Dementia Pathways working with Care Services Efficiency Delivery Programme.

Key focus for the coming months will be the further development of integrated posts and work to reduce duplication across the health and social care economy as part of the Wirral Integrated Services Programme (WISP).

# 3.3.7. Raise overall educational attainment, particularly lower achieving young people

## **Progress made:**

At Key Stage 1 Levels 2+ and 3+ performance is slightly down. This is mainly the result of work undertaken to moderate assessments in order to ensure that a more accurate benchmark was established. A gender gap is apparent at KS1which is in line with the national trend but the actual position will become clearer once the figures for Wirral's statistical neighbours are available.

At Key Stage 2 complete data for all schools is not available. The current position is that good progress has been made at level 4+ for all indicators. All of the indicators are above Fischer Family Trust (FFT) level B, with overall performance in English equivalent to the Fischer Family Trust (FFT) level D and a significant improvement for boys in all subjects.

The picture at Key Stage 3 is less clear because of the significant percentage of schools that received incomplete data for one or more subjects. Provisional indications are that we continue to perform better than the national figures but performance in 2008 has either remained static or dropped slightly. The recent announcements about the cessation of Key Stage 3 SATs will impact upon how we measure progress across this Key Stage and across secondary schools in the future.

At Key Stage 4 Wirral pupils have achieved over 50% (50.4%) for five GCSE subjects at A\*-C grades, including English and Maths. Overall, 66% of students have achieved 5 A\*-C grades. This is above the FFT level B. At A-level there has been a significant improvement in the percentage of pupils gaining A–C grades, from 63.7% in 2007 to 67.6% in 2008. The Average Point Score per student has also increased.

With regard to looked-after children, there continues to be a wide shortfall in performance:

- At Key Stage 2 they are, respectively, 23, 17 and 11 percentage points below the Wirral average for English, Maths and Science;
- At Key Stage 3, the gaps were 57, 44 and 49 percentage points.
- At Key Stage 4, provisional figures indicate that 10% of children achieved 5+ A\*-C grades including English and maths compared to 8% in 2007 and 50.4% for all Wirral children. 51% achieved 5+ A\*-G grades compared to 68% in 2007 and 98% for all Wirral children
- Further analysis of the performance of Looked After Children, using pupil-level FFT data and value-added data is being undertake to see whether LAC pupils made the progress they should have done even though the overall outcomes are lower in 2008 than 2007.

## **Challenges remaining:**

Improving the outcomes for Maths at all Key Stages will be a priority.

National Strategies through the Target Setting Guidance expect all schools to set targets at FFT-D, and SIPs in Wirral have engaged with schools so they set targets that are appropriately aspirational to FFT-D. The Government has also produced combined statistics for English and Maths, with the aim of ensuring that standards in both subjects are improved simultaneously.

There is also the challenge of increasing the proportion of pupils who make two levels progress across the Key Stages.

Improving the tracking and monitoring of the progress of Looked After Children, using FFT data is a priority to ensure that LAC achieve their potential, taking into account prior attainment. In addition improving the performance of National Challenge schools is also crucial.

### How we're making further improvements:

Wirral, as with most other local authorities, has made its views clear on the KS3 marking issue and has submitted anecdotal evidence to the Sutherland Report Committee. There has been some significant variations in the performance of individual schools at Key Stage 3 (level 5+) which still needs to be analysed.

The attainment of looked-after children is examined on an individual basis and various factors that might affect performance are taken into account, such as level of attendance. Designated teachers for Looked After Children are in place. Schools have been given an additional £500 per pupil through their budgets to assist in work to support Looked After Children.

## 3.3.8. Safely reduce the number of looked after children

## **Progress made:**

The number of children who are looked after at the year end (March 2009) is targeted to reduce to **590**. In September 2008 the position against the target was 608.

We expect to receive between 250 – 300 referrals each month; these are requests for a service. The target is that 71% of these referrals will proceed to an initial assessment (NI 68). A high percentage of work progressing to an initial assessment – confirms that people know what and when to refer to Social Care – and is indicative of a good understanding of criteria for referral. In September 2008 the position against the target was 53.3%.

Our target is to reduce the number of repeat referrals from 26% last year, to 23% or below. Low numbers of repeat referrals signifies that a request for service is fully and properly responded to – it evidences that thresholds are becoming appropriately lower, and prevents children and families being stuck in a revolving door. Some repeat referrals will always be appropriate, since it shows that cases are not remaining open unnecessarily; and people return to seek help when experiencing further difficulties. In September 2008 the position against the target was 25%.

Our target is to make sure (NI 59) 72% or more initial assessments are completed within 7 working days, and (NI 60) 80% or more core assessments are completed within 35 working days. In September 2008 are position against these targets was NI59 68.2% NI60 60%.

Compared to statistical neighbours, we would expect to have between 160-170 children to have a child protection plan. Best practice indicates that between 10-15% of children subject to a plan have been on the CPR previously (NI 65). The target is to have 6% or less, children who have ceased to be subject to a child protection plan during the year, who have been subject to a plan for two years or more (NI 64). In September 2008 the position against the target was NI65 16.2% NI64 2.8%.

## **Challenges remaining:**

Safely reducing the numbers is not about delaying children becoming looked after when this is required to meet their needs – so, there may be relatively high numbers of children who become looked after, however the length of time children remain looked after is reduced, as appropriate plans, which include support, are put in place.

On a Team basis we will be identifying children whose plans need to be expedited to support their return home; remove the Care Order if they are safely living at home or to achieve permanence through adoption or Special Guardianship. There will be individual Team Targets based on known children's needs.

### How we're making further improvements:

Developing a consistent approach and clear understanding about when to convene a case conference shows a good understanding of when the level of concern about a child and / or family warrants a child protection plan. Prompt convening of case conferences is evidence of children and families not being stuck in limbo, or experiencing drift once a decision is made that the level of concern is such that a case conference should be convened.

Each Team will consider all children who are subject to Section 20 (Children Act 1989) and review their circumstances through the Legal Gatekeeping process to identify whether parent/s are properly exercising PR/the child is safely supported within this arrangement.

The target is to reduce the number of children placed with parents to 110 by the end of 2009. This will involve consideration of all children's plans on a Team by Team basis, focusing on those children subject to an interim care order and living at home, and those children placed with parents for a long period of time – to determine whether there is evidence that they will be safely supported in the community with no order at all, or a supervision order. This will require the presentation of compelling evidence to Court, based on sound assessment and analysis.

## 3.3.9. Improve the use of the Council's land and assets

## **Progress made:**

The principles that will guide the Council's Strategic Asset Review in the future have now been agreed. A working group of senior managers has been established to undertake seven area based reviews of the Council's public facing assets. These reviews are now complete and will be reported to Cabinet. The Strategic Development Plan for Leisure and Cultural Services was also approved this quarter and will be taken forward as part of the Strategic Asset Review.

## Challenges remaining:

Routine maintenance and necessary structural repairs of the Council's building stock remains costly. There is a programme of planned preventative maintenance in place; however, given the age of many buildings it is inevitable that unforeseen problems will emerge causing unplanned restrictions on use.

Energy costs have risen significantly in the last year adding significantly to the Council's annual expenditure budget. A large proportion of the Council's energy bill is buildings related.

## How we're making further improvements:

A full review of the Council's office and administrative buildings (including Facilities Management arrangements) is underway with a view to moving to a smaller number of buildings and maximizing value for money.

The remaining Area reviews have commenced and are being expedited to ensure the Asset Review progresses on a Borough wide basis.

Discussions are underway with the PCT and the Police (and other potential public and voluntary sector partners) to explore opportunities for shared use of assets.

In addition Cabinet reports are being prepared on:

- An update on backlog maintenance (together with an action plan)
- A draft policy on community management and ownership of public assets
- A draft policy on asset disposals

## 3.3.10 Create a sustainable and stable budget, providing value for money

### **Progress made:**

The Council Budget for 2008/09 was agreed in March and was supported by the s151 officer statement as being sustainable.

The regular financial monitoring updates have highlighted potential overspends and increased 'one-off' resources. The overspending is primarily in Adult Social Services as reported to Cabinet in September.

The Annual Efficiency Statement 2007/08 reported to Cabinet in June was submitted to, and subsequently, agreed by Government in July.

A review of the high spending areas as identified by the Audit Commission 'spend profiles' was reported to Cabinet on September 25.

The Director of Finance provides regular updates on the Projected Budget position to Cabinet and this is supported by regular liaison between Cabinet and Chief Officers to assess the implications and address the gap between likely spend and resources.

## **Challenges remaining:**

To address the identified areas of overspending in 2008/09 to ensure overall spend remains within the resources available.

To report to Government the achievements in respect of NI 179. (the net value of ongoing cash releasing gains).

To agree a sustainable and stable budget for 2009/10 by March 10 2009.

## How we're making further improvements:

The Director of Adult Social Services is providing regular updates to Cabinet on progress in stabilising the departmental budget.

Clarification now received around the reporting of NI 179 and a projection for 2008/09 is required in October.

The Projected Budget position is regularly reported to Cabinet with investment/saving decisions being taken at the appropriate times.

## 3.3.11 Improve the Council's budgeting process to fully reflect its priorities

## **Progress made:**

The 2008/09 Council Budget resolution included references to, and linkages to, the Council priorities.

An Efficiency Investment Fund of £5.3 million was created as part of the 2008/09 budget with further amounts set aside for future years.

The Council strategies including the Customer Access Strategy, Medium Term Financial Strategy, IT Strategy and Risk Strategy were revised in line with the agreed Corporate Plan and then approved by Cabinet on 23 July.

In September Cabinet re-affirmed that the Corporate Plan priorities for 2008/09 remain as the priorities for 2009/10.

The budget process has been further refined in terms of the information flow to Members and Officers. The regular updates give greater clarity and focus upon the key changes.

## **Challenges remaining:**

The present financial climate is bringing additional pressures on the available Council resources and the delivery of the aims and objectives of the Corporate Plan. This links to the setting of a sustainable and stable budget for 2009/10.

## How we're making further improvements:

The Efficiency Investment Fund is available for initiatives that require resources to deliver future benefits and to invest in the priority areas of the Council. This will continue as part of the budget setting process.

Any submissions for increased resources, including from the capital and IT programmes require a Business Case which is weighted towards meeting the agreed priorities.

3.4 This following section shows the performance indicators and key projects for the priority for improvement areas 2008/09.

## 3.4.1 Reduce Worklessness

| PI No.    | Title  | Yr End<br>Target               | Yr End<br>Forecast | Quarter 2<br>Target | Quarter 2<br>Actual | On Target | Direction of<br>Travel | Corrective Action |
|-----------|--|--------------------------------|--------------------|---------------------|---------------------|-----------|------------------------|-------------------|
| NI<br>152 | Working age people on out of work benefits   | 17.74%<br>(Lower is<br>Better) | 17.23%             | 17.84%              | 17.23%              | Green     | n/a                    |                   |
| NI<br>153 | Working age<br>people claiming<br>out of work<br>benefits in the<br>worst<br>performing<br>neighbourhoods<br>(WNF) | 35.22<br>(Lower is<br>Better)  | 35.07              | 35.22               | 35.07               | Green     | n/a                    |                   |

| Key Project   | Lead Department    | Quarter 2 status<br>(green, amber or red<br>- see below) | Corrective action<br>(amber or red only) |
|---|--------------------|--|--|
| Implementation of the Full Employment and Skills plan | Corporate Services | GREEN  |  |

## 3.4.2 Increase Enterprise

| PI No.        | Title  | Yr End<br>Target | Yr End<br>Forecast | Quarter 2<br>Target | Quarter 2<br>Actual | On<br>Target | Direction of<br>Travel | Corrective<br>Action  |
|---------------|--|------------------|--------------------|---------------------|---------------------|--------------|------------------------|---|
| LOCAL<br>4128 | Number of<br>new<br>business<br>start-ups<br>supported<br>through<br>Wirral Biz or<br>Business<br>Link in Wirral<br>as measured<br>by data from<br>both<br>organisations | 262              | 262                | 160                 | 171                 | Amber        | •                      | This is a demand led initiative. The performance over the last quarter recognises the increased demand for the service. |

| Key Project   | Lead Department    | Quarter 2 status<br>(green, amber or red<br>- see below) | Corrective action<br>(amber or red only) |
|---|--------------------|--|--|
| Implementation of the Enterprise Strategy   | Corporate Services | GREEN  |  |
| Co-ordinate the implementation of local, sub regional and regional enterprise development and business support strategies | Corporate Services | GREEN  |  |

## 3.4.3 Increase levels of recycling

| PI No.    | Title   | Yr End<br>Target            | Yr End<br>Forecast | Quarter 2<br>Target | Quarter 2<br>Actual | On Target          | Direction of<br>Travel | Corrective Action   |
|-----------|---|-----------------------------|--------------------|---------------------|---------------------|--------------------|------------------------|---|
| NI<br>191 | Residual<br>household<br>waste per<br>household                                       | 636<br>(Lower is<br>Better) | 600                | 315                 | 287.35              | Amber              | n/a                    | Green waste & recycling is diverting more residual from landfill and we are performing better than expected.  |
| NI<br>192 | Percentage<br>of household<br>waste sent<br>for reuse,<br>recycling and<br>composting | 34%                         | 35%                | 36%                 | 40.50%              | Over<br>Performing | n/a                    | The over-performance can be explained by unexpectedly high recycling yields coming on top of the anticipated seasonal increase in green waste. As such, no corrective action is required but we should adjust our year-end forecast. It is difficult to be precise at this stage but an increase of at least 1% on the 34% target seems justifiable. A further assessment will be made at Q3. |

| Key Project  | Lead Department    | Quarter 2 status<br>(green, amber or red<br>- see below) | Corrective action<br>(amber or red only) |
|--|--------------------|--|--|
| Increase participation in alternate weekly collection scheme | Technical Services | GREEN  |  |
| Promote waste minimisation initiatives to householders       | Technical Services | GREEN  |  |
| Encourage recycling and minimisation of municipal waste      | Technical Services | GREEN  |  |

## 3.4.4 Reduce the council's carbon footprint

There are no performance indicators to report for this priority area at Q2.

| Key Project  | Lead Department    | Quarter 2 status<br>(green, amber or red<br>- see below) | Corrective action<br>(amber or red only) |
|--|--------------------|--|--|
| Continue the Energy Efficiency<br>Investment Programme     | Technical Services | GREEN  |  |
| Develop and implement Wirral CRed initiative               | Technical Services | GREEN  |  |
| Produce a Developer's Guide for<br>Sustainable Development | Technical Services | GREEN  |  |
| Development of Sustainability Unit within Wirral Council   | Technical Services | GREEN  |  |

## 3.4.5 Reduce number of people killed or seriously injured in road accidents

There are no performance indicators to report for this priority area at Q2.

| Key Project   | Lead Department    | Quarter 2 status<br>(green, amber or red<br>- see below) | Corrective action<br>(amber or red only) |
|---|--------------------|--|--|
| Develop initiatives to deliver road safety education, training and publicity                    | Technical Services | GREEN  |  |
| Implement engineering measures to improve road  | Technical Services | GREEN  |  |
| Work with Merseyside Police via the<br>Accident Reduction Partnership to<br>improve road safety | Technical Services | GREEN  |  |

## 3.4.6 Promote greater independence and choice

| PI No.    | Title  | Yr End<br>Target | Yr End<br>Forecast | Quarter 2<br>Target | Quarter 2<br>Actual | On Target          | Direction of<br>Travel | Corrective Action   |
|-----------|--|------------------|--------------------|---------------------|---------------------|--------------------|------------------------|---|
| NI<br>130 | Social care<br>clients<br>receiving Self<br>Directed<br>Support<br>(Direct<br>Payments<br>and Individual<br>Budgets) | 322.3            | 241                | 255.2               | 155.6               | Red                | n/a                    | The Direct Payments Team is continuing to monitor the take up of Direct Payments and exploring reasons why people are opting not to enter into an agreement for a Direct Payment. Solutions to these barriers will then be explored in order to eliminate or reduce them. A Monitoring Group is established with a risk management action plan monitored on a monthly basis From April 2009 a Resource Allocation System (RAS) will be in place and Individual Budgets will be an option for all. |
| NI<br>135 | Carers receiving needs assessment or review and a specific carer's service, or advice and information                | 18.0%            | 18%                | 10.0%               | 23.63%              | Over<br>Performing | n/a                    | Performance for this new national indicator has exceeded targets at present. Monthly monitoring of performance will continue, and consideration will be made to refresh targets as part of the LAA review.  |
|           | People<br>supported to<br>live<br>independently<br>through social<br>services (all<br>adults)                        | 2185.80          | 2185.80            | 2161                | 2326.44             | Amber              | n/a                    | Currently over performing and corrective action is not required at present. Targets will be refreshed within the new Departmental Plan.   |

| NI<br>146 | Adults with learning disabilities in employment | 8% | 6.0% | 3.5% | Red | n/a | The next quarter (Q3) will show an increase due to people completing the JOBS (Jointly Overcoming Barriers equals Success) programme and entering the jobs market. |
|-----------|---|----|------|------|-----|-----|--|
|-----------|---|----|------|------|-----|-----|--|

| Key Project  | Lead Department       | Quarter 2 status<br>(green, amber or red<br>- see below) | Corrective action<br>(amber or red only)   |
|--|-----------------------|--|--|
| Enablement and re-ablement                                 | Adult Social Services | GREEN  |  |
| Carers Strategy  | Adult Social Services | GREEN  |  |
| Access and assessment arrangements                         | Adult Social Services | AMBER  | Clear timescales and plans to implement changes to the structure.  |
| Promoting independence                                     | Adult Social Services | GREEN  |  |
| Develop Self Directed Support services                     | Adult Social Services | AMBER  | Action plan in place and monitoring group from April 2008 resource allocation system will be in place and individual budgets an option for all. Key element of personalisation agenda. |
| Implement the Strategic Framework for Health and Wellbeing | Adult Social Services | Awaiting Status  |  |
| Joint Strategic Needs Assessment                           | Adult Social Services | GREEN  |  |

## 3.4.7 Raise overall educational attainment, particularly lower achieving young people

| PI No.   | Title   | Yr End<br>Target | Yr End<br>Forecast | Quarter 2<br>Target | Quarter 2<br>Actual | On Target | Direction of<br>Travel | Corrective Action |
|----------|---|------------------|--------------------|---------------------|---------------------|-----------|------------------------|-------------------|
| NI<br>72 | Achievement of at least 78 points across the Early Years Foundation Stage with at least 6 in each of the scales in Personal Social and Emotional Development and Communication, Language and Literacy | 54%              | 48.3%              | 54.0%               | 48.3%               | Red       | •                      | Provisional*      |
| NI<br>73 | Achievement at level 4 or above in both English and Maths at Key Stage 2  |                  | 74%                |                     | 74%                 |           | n/a                    | Provisional*      |
| NI<br>74 | Achievement at level 5 or above in both English and Maths at Key Stage 3  |                  | 70.7%              |                     | 70.7%               |           | n/a                    | Provisional*      |
| NI<br>75 | Achievement of 5 or more A*-<br>C grades at GCSE or<br>equivalent including English<br>and Maths  | 52%              | 49.9%              | 52.0%               | 49.9%               | Green     | 1                      | Provisional*      |
| NI<br>83 | Achievement at Level 5 or above in Science at Key Stage 3   | 76%              | 73.3%              | 76.0%               | 73.3%               | Green     | n/a                    | Provisional*      |

| PI No.    | Title  | Yr End<br>Target              | Yr End<br>Forecast | Quarter 2<br>Target | Quarter 2<br>Actual | On Target | Direction of<br>Travel | Corrective Action   |
|-----------|--|-------------------------------|--------------------|---------------------|---------------------|-----------|------------------------|---|
| NI<br>87  | Secondary school persistent absence rate   | (Lower is<br>Better)          | 5.7%               |                     | 5.7%                |           | n/a                    | Provisional*  |
| NI<br>92  | Narrowing the gap between the lowest achieving 20% in the Early Years Foundation Stage Profile and the rest        | 31.5%<br>(Lower is<br>Better) | 32.0%              | 31.5%               | 32.0%               | Green     | n/a                    | Provisional*  |
| NI<br>93  | Progression by 2 levels in<br>English between Key Stage 1<br>and Key Stage 2                                       |                               | 83.5%              |                     | 83.5%               |           | n/a                    | Provisional*  |
| NI<br>94  | Progression by 2 levels in<br>Maths between Key Stage 1<br>and Key Stage 2   |                               | 76.9%              |                     | 76.9%               |           | n/a                    | Provisional*  |
| NI<br>95  | Progression by 2 levels in<br>English between Key Stage 2<br>and Key Stage 3                                       |                               | 29.9%              |                     | 29.9%               |           | n/a                    | Provisional*  |
| NI<br>96  | Progression by 2 levels in<br>Maths between Key Stage 2<br>and Key Stage 3   |                               | 59.9               |                     | 59.9                |           | n/a                    | Provisional*  |
| NI<br>97  | Progression by 2 levels in<br>English between Key Stage 3<br>and Key Stage 4                                       |                               | 58%                |                     | 58%                 |           | n/a                    | Provisional*  |
| NI<br>98  | Progression by 2 levels in<br>Maths between Key Stage 3<br>and Key Stage 4   |                               | 22.1%              |                     | 22.1%               |           | n/a                    | Provisional*  |
| NI<br>99  | Looked after children reaching level 4 in English at Key Stage 2   | 60%                           | 61.5%              | 60.0%               | 61.5%               | Green     | n/a                    | Provisional*  |
| NI<br>100 | Looked after children reaching level 4 in maths at Key Stage 2   | 62.5%                         | 61.5%              | 62.5%               | 61.5%               | Green     | n/a                    | Provisional*  |
| NI<br>101 | Looked after children acheiving<br>5 A*-C GCSEs (or equivalent)<br>at Key Stage 4 (including<br>English and maths) | 13.5%                         | 10.3%              | 13.5%               | 10.3%               | Red       | n/a                    | Provisional/Unvalidated - The attainment of lookedafter children is examined on an individual basis and various factors that might affect performance are taken into account, such as level of attendance. Designated teachers for Looked After Children are in place. Schools have been given an additional £500 per pupil through their budgets to assist in work to support Looked After Children. |

<sup>\*</sup>All audited data for attainment figures will be received in January.

| Key Project   | Lead Department            | Quarter 2 status<br>(green, amber or red<br>- see below) | Corrective action<br>(amber or red only)                           |
|---|----------------------------|--|--|
| Project plan to close the attainment gap where poverty affects achievement                      | Children & Young<br>People | GREEN  |  |
| Strategies Intervention Project   | Children & Young<br>People | GREEN  |  |
| Ensure there are no schools in Ofsted categories  | Children & Young<br>People | AMBER  | Intervention and support provided to the one school in a category. |
| Develop a range of intervention strategies to support underachieving and under attaining pupils | Children & Young<br>People | GREEN  |  |
| develop literacy and numeracy via family learning programmes                                    | Children & Young<br>People | GREEN  |  |

## 3.4.8 Safely reduce the number of looked after children

| PI No.   | Title  | Yr End<br>Target            | Yr End<br>Forecast | Quarter 2<br>Target | Quarter 2<br>Actual | On Target | Direction of<br>Travel | Corrective Action  |
|----------|--|-----------------------------|--------------------|---------------------|---------------------|-----------|------------------------|--|
| NI<br>61 | Timeliness of placements of looked after children for adoption following an agency decision that the child should be placed for adoption | 68.0                        | 68.0               | 50.0                | 50.0                | Green     | n/a                    |  |
| NI<br>62 | Stability of<br>placements of<br>looked after<br>children:<br>number of<br>placements  | 11%<br>(Lower is<br>Better) | 13.0%              | 11%                 | 13.2%               | Red       | •                      | We have identified all young people with two moves so far this year to be alert to their potential instability & are being extra vigilant about how we support them in their current placement to prevent them having a 3 <sup>rd</sup> move. This figure of 13.2% falls within the OFSTED "Very Good" category. |
| NI<br>63 | Stability of<br>placements of<br>looked after<br>children: length<br>of placement  | 63.0                        | 65.5               | 63.0                | 65.5                | Green     | 1                      |  |
| NI<br>68 | Percentage of<br>referrals to<br>children's social<br>care going on to<br>initial<br>assessment  | 71%                         | 71.0%              | 71.0%               | 53.3%               | Red       | <b>1</b>               | A review of data recording practice has been undertaken. A team by team analysis of performance against this target is being prepared monthly in order to more closely identify issues. As a result of this work it is anticipated that over future months improvements will occur.                              |

| Key Project   | Lead Department            | Quarter 2 status<br>(green, amber or red<br>- see below) | Corrective action<br>(amber or red only) |
|---|----------------------------|--|--|
| Project plan to safely reduce the number of looked after children | Children & Young<br>People | GREEN  |  |

## 3.4.9 Improve the council's use of land assets

| PI No.        | Title  | Yr End<br>Target | Yr End<br>Forecast | Quarter 2<br>Target | Quarter 2<br>Actual | On Target               | Direction of<br>Travel | Corrective Action  |
|---------------|--|------------------|--------------------|---------------------|---------------------|-------------------------|------------------------|--|
| LOCAL<br>6275 | The number of<br>working<br>days/shifts lost<br>due to sickness<br>absence | 8.5              | 10.00              |                     | 10.21               | No target<br>set for Q2 | 4                      | Detailed work is being undertaken with Departments and this should ensure that the figure is likely to continue a downward trend |

| Key Project                               | Lead Department               | Quarter 2 status<br>(green, amber or red<br>- see below) | Corrective action<br>(amber or red only) |
|---|-------------------------------|--|--|
| Undertake a Strategic Asset Review        | Law, HR & Asset<br>Management | GREEN  |  |
| Deliver and implement the people strategy | Law, HR & Asset<br>Management | GREEN  |  |

## 3.4.10 Create a sustainable budget, providing value for money

There are no performance indicators to report for this priority area at Q2.

| Key Project  | Lead Department | Quarter 2 status<br>(green, amber or red<br>- see below) | Corrective action<br>(amber or red only)   |
|--|-----------------|--|--|
| Agree a budget which is sustainable, and which identifies resources for further developing Council Services.   | Finance         | GREEN  |  |
| Contain expenditure within agreed budgets and provide services to agreed standards.  | Finance         | AMBER  | Potential DASS overspend of £3.6m reported to Cabinet on 4th September. Further report to November Cabinet   |
| Review comparative data to ensure we provide our services most cost effectively taking into the needs of our community   | Finance         | GREEN  |  |
| Implement our procurement strategy to ensure that services and goods are acquired economically and efficiently, and if advantageous, in partnership with others. | Finance         | AMBER  | Further improvements in communication and coordination are taking place corporately in order to reinforce procedures and ensure that invoices are processed more efficiently. The Procure to Pay section is analysing information which will identify and classify service areas that do not forward invoices in a timely manner, allowing for targeted support and corrective action. |

| Key Project   | Lead Department               | Quarter 2 status<br>(green, amber or red<br>- see below) | Corrective action<br>(amber or red only)  |
|---|-------------------------------|--|---|
| Implement agreed change programme which includes change, financial systems, customer access and IT development. | Finance                       | AWAITING STATUS BUT RED (PART)                           | Cabinet agreed 23 July to team to prepare scope for implementation of the HR System. Suspended due to non-acceptance by sponsor department. Update to Cabinet on 27 November. |
| Exceed government standards for Housing and Council Tax benefits and Council Tax collection.                    | Finance                       | GREEN  |   |
| Delivering the pay review   | Law, HR & Asset<br>Management | GREEN  |   |

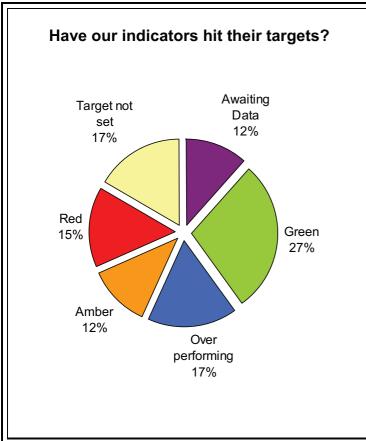
## 3.4.11 Improving the council's budgeting process to fully reflect its priorities

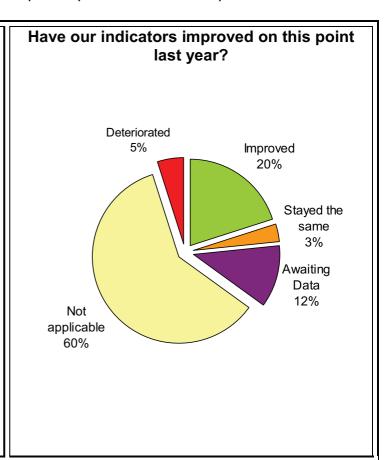
There are no performance indicators to report for this priority area at Q2.

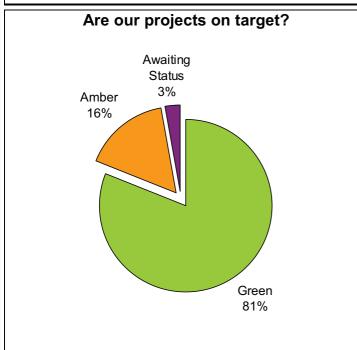
| Key Project  | Lead Department | Quarter 2 status<br>(green, amber or red<br>- see below) | Corrective action<br>(amber or red only) |
|--|-----------------|--|--|
| Reflect the implications of the priorities in the Corporate Plan in our Medium Term Financial Plan and corporate planning processes. | Finance         | GREEN  |  |

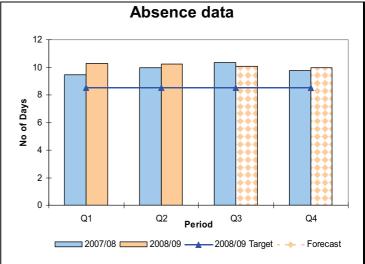
## 3.5 Corporate Plan Performance Summary

3.5.1 The charts below show the overall council position for all key performance indicators and projects within the council's 2008/09 corporate plan at the second quarter.









The graph above shows absence for 2008/09 compared with 2007/08. The target for 2008/09 is 8.5 days and the end of year forecast is 10.0 days. Q1 & 2 shows a deterioration compared with the same period in 2007/08.

## 3.6 Performance Exceptions

This section includes all corporate plan indicators which are red at Quarter 2 not including priority for improvement indicators. All other performance exceptions can be found in Appendix A.

| PI No.        | Title  | Yr End<br>Target                | Yr End<br>Forecast | Quarter<br>2<br>Target | Quarter<br>2 Actual | On<br>Target | Direction of Travel | Corrective Action   |
|---------------|--|---------------------------------|--------------------|------------------------|---------------------|--------------|---------------------|---|
| NI<br>15      | Number of most<br>serious violent<br>crimes (PSA 23:<br>Priority Action 1)<br>per 1000<br>population           | 0.37<br>(Lower<br>is<br>Better) | 0.44               | 0.18                   | 0.22                | Red          | n/a                 | There has been a steady rise in the number of serious violence offences between the months July and September, 2008. Domestic Violence and Alcohol separately play their part in contributing to these figures but beyond that there remains no pattern to this offence. Performance in this area is subject to a monthly meeting of senior Police Officers in an effort to reduce the number of offences.  |
| NI<br>117     | 16 to 18 year olds who are not in education, employment or training (NEET)                                     | 7.4%<br>(Lower<br>is<br>Better) | 9.0%               | 9.0%                   | 10.3%               | Red          | <b>⇔</b>            | The Authority EET Action plan is in place which outlines partner responsibilities and contributions to achieving the NEET target. The Wirral Wise Programme, supported by ESF, has commenced, with its 3 strands of interventions targeted at young people who are NEET, aimed at progression via placements and work trials. The September Guarantee thresholds have been met in Wirral this year, with: 94.95% of Year 11 and 80.51% of 17 year olds having a recorded offer of a place in EET. Targeted action with vulnerable young people and within NEET hotspot areas continues. The annual Activity survey of Year 11 leavers which is continuing up to the November count date currently indicates over 90% of the cohort in Learning. |
| LOCAL<br>4049 | Total number of<br>homes acquired,<br>demolished,<br>refurbished or built<br>as a result of<br>HMRI investment | 950                             | 950                | 354                    | 196                 | Red          | •                   | Discussions with contractors to remedy outstanding snags with Group Repair improvements. They are virtually all complete and should report in Q3. Targeted marketing to increase Energy efficiency outputs.   |

## 3.7 Corporate Plan Project Exceptions

| Project   | Priority for<br>Improvement | Department            | Status | Corrective Action  |
|---|-----------------------------|-----------------------|--------|--|
| Progressing the production of the Local Development Framework                                       |                             | Corporate<br>Services | AMBER  | Full resource continues to be utilised   |
| Develop neighbourhood management approach in deprived communities including education & enforcement |                             | Technical<br>Services | AMBER  | Partnership approaches are being discussed but have not yet been implemented. The approach will be influenced by the imminent review of Wardens duties and responsibilities. |
| Develop and implement heritage strategy   |                             | Regeneration          | AMBER  | Tenders going out October/November   |

| Project                           | Priority for<br>Improvement | Department            | Status | Corrective Action   |
|-----------------------------------|-----------------------------|-----------------------|--------|---|
| Work of the Family<br>Safety Unit |                             | Regeneration          | AMBER  | This is an overall status for 2 other Family Safety / Domestic Violence Projects which are also Amber.  |
| Achieve level three in ESLG       |                             | Corporate<br>Services | AMBER  | Ensure delivery of project plan through regular monitoring of hotspots and intervention where necessary   |
| Customer Access<br>Strategy       |                             | Finance               | AMBER  | Customer Care standards are being re-launched to all staff and to the public in October 2008. The revised Customer Access Strategy was approved by Cabinet on 23rd July. Both general website useage and e-citizen registrations are well in excess of original projections, indicating the growing importance of the web as an access channel. An upgrade to our current web software is under review in order to ensure optimum access and ease of use. This will further enhance the Council's web presence. |

3.8. Customer feedback is now recorded on the Customer Relationship Management (CRM) system and includes both complaints and compliments. Of the Stage 1 complaints these primarily related to Technical Services and service delivery issues in refuse collection. A total of 17 enquiries were received from the Ombudsman primarily around schools admissions (12). This reflects the normal cyclical trend with the admission enquiries under investigation. Of the compliments recorded the majority were for Adult Social Services.

#### 4. FINANCIAL MONITORING

- 4.1. The net Council spend for 2008/09 is £299 million. The monitoring compares spend against the approved budget which includes growth and policy options as well as the agreed savings targets. When setting the 2008/09 budget the projected balances at 31 March 2009 were £5 million.
- 4.2. At 30 September the position, as detailed in Appendix B, is:-

| Details   | £million | £million |
|---|----------|----------|
| Projected General Fund balances at 31 March 2009          |          | 5.0      |
| when setting the budget for 2008/09                       |          |          |
| Cabinet decisions   |          |          |
| 26 June - Financial out-turn for 2007/08 showed an        |          | +2.5     |
| underspending and contribution to balances                |          |          |
| 9 July - Release of Insurance Fund reserve to general     |          | +3.0     |
| balance   |          |          |
| 23 July - Receipt of Local Authority Business Growth      |          | +1.3     |
| Incentive (LABGI) grant to general balance                |          |          |
| 23 July - Funding for street lighting energy and Children |          | -0.9     |
| & Young People transport costs                            |          |          |
|   |          |          |
| Projected variances / potential overspends                |          |          |
| Overspend   |          |          |
| Adult Social Services                                     | +3.5     |          |
| Children & Young People                                   | +1.7     |          |
| Regeneration  | +0.6     |          |
| Underspend  |          |          |
| Treasury Management                                       | -1.2     | -4.6     |
| Potential liability                                       |          |          |
| Reported to Cabinet 23 July in respect of fuel and        |          | -2.6     |
| energy costs in 2008/09                                   |          |          |
| General Fund balances at 31 March 2009 based              |          |          |
| upon the latest projections                               |          | 3.7      |

- 4.3. The completion of the year-end accounts resulted in an increase in the projected balances at 31 March 2008 by £2.5 million. The main spending pressures within Adult Social Services more than offset by the increase in Housing Benefit grant and the benefits from Treasury Management activities.
- 4.4. The release of £3 million from the Insurance Fund reserve to the general balance is a result of the continuing improved performance in respect of

- insurance and risk management. This improved performance evidenced by the annual Actuarial assessment and the potential liability for claims.
- 4.5. The receipt of the final payment of the Local Authority Business Growth Incentive (LABGI) grant of £1.3 million, which related to the 2007/08 financial year, was added to balances. In terms of fuel and energy costs it was agreed that £780,000 be provided from balances this year to meet the increased energy costs for street lighting in Technical Services and £125,000 for fuel costs relating to Children & Young People transport costs. Financial pressures were identified based upon the likely outcome of the energy contracts due to be tendered for in autumn 2008.
- 4.6. Within Adult Social Services the pressures of increasing demand for care services that resulted in an overspend in 2007/08 remain. In terms of savings there are issues around the achievement of the total required this year. The Director has reported this to Cabinet and whilst he is investigating alternative and one-off savings Cabinet has recognised the probability of a £3.6 million overspend primarily within Community Care.
- 4.7. Under Children and Young People the areas of Special Education Needs (SEN) including transport and the care of young people (which resulted in an overspend in 2007/08) and changes to court proceedings are projecting to overspend. The challenges from the employee related savings targets and impact upon existing vacancy control targets together with the service reengineering savings brought forward from 2007/08 form the significant part of the projected overspend of £1.7 million. Actions taken so far have reduced this projection from £3 million and the Director is considering other options to reduce costs.
- 4.8. Within Regeneration income and energy costs are projected to be at variance with the budget and efforts are being made to contain spend within the budget allocated. However, the options proposed to deliver the Service Re-engineering savings targets brought forward from 2007/08 have yet to be approved meaning an overspend of £0.6 million is likely.
- 4.9. Treasury Management includes the management of cash flow and the need to borrow to fund investment has been re-engineered reducing the requirement for temporary borrowing. The savings achieved in 2007/08 continue and will deliver £0.5 million in 2008/09. Opportunities from the increased rates offered by the banking sector have been taken as a consequence of the improved cash management and at this stage of the year the additional income realised is in the order of £0.7 million. Whilst further benefits are anticipated the unpredictability in the financial sector means any surplus resources are now being invested in lower risk / lower return Government investments.

### 5. CAPITAL MONITORING

5.1. The capital programme for 2008/11 was approved by Council on 17 December 2007 and confirmed as part of the budget by Council on 3 March 2008. The monitoring, which is detailed in Appendix C, compares the original programme with the latest forecast which includes slippage from 2007/08 that was agreed by Cabinet on June 26.

| Spend                   | Original<br>Approval<br>£000 | Forecast<br>June<br>£000 | Forecast<br>September<br>£000 |
|-------------------------|------------------------------|--------------------------|-------------------------------|
| Adult Social Services   | 2,952                        | 3,696                    | 3,815                         |
| Children & Young People | 32,221                       | 26,377                   | 26,426                        |
| Corporate Services      | 410                          | 1,160                    | 1,160                         |
| Law, HR and Asset Mgt   | 1,860                        | 2,111                    | 2,111                         |
| Regeneration            | 29,079                       | 36,876                   | 36,876                        |
| Technical Services      | 11,318                       | 12,589                   | 12,589                        |
| Total programme         | 77,840                       | 82,809                   | 82,977                        |

5.2. The resources table similarly compares the developing programme and reflects the agreed changes, including slippage of spend from 2007/08. The generation of capital receipts through the sale of assets is used to fund the programme and at this stage £4 million is included for use in 2008/09. Income from sales, whilst uncertain in the exact timing of receipt, offers flexibility in the timing of its use and can be used to either balance the current programme or to address future budgetary issues.

| Spend             | Original<br>Approval | Forecast<br>June | Forecast<br>September |  |
|-------------------|----------------------|------------------|-----------------------|--|
|                   | £000                 | £000             | £000                  |  |
| Borrowing         | 31,092               | 30,257           | 31,073                |  |
| Grant – HMRI      | 9,800                | 8,900            | 8,900                 |  |
| Grant – Education | 20,899               | 17,868           | 17,100                |  |
| Grant – Other     | 11,636               | 21,368           | 21,487                |  |
| Revenue           | 413                  | 416              | 417                   |  |
| Capital Receipts  | 4,000                | 4,000            | 4,000                 |  |
| Total resources   | 77,840               | 82,809           | 82,977                |  |

- 5.3. The Director of Adult Social Services has commenced the consultation on a review of intermediate care that will also impact upon the decisions regarding adult accommodation provision. All schemes are therefore subject to review pending the outcome of the consultation.
- 5.4. The Building Schools for the Future (BSF) One Pathfinder project continues to progress in accordance with the timescales agreed with the Department for Children, Schools and Families. With the Department having re-profiled the funding a start on site is expected early in 2009.
- 5.5. Under the national scheme to develop Children's Centres Phase 1 and Phase 2 has now seen 17 of the 19 centres opened. The remaining two were reprogrammed into 2008/09 and are at the tender stage.
- 5.6. The funding from the Department for Children, Schools and Families for the Primary Capital Strategy is anticipated to be clarified in September. The local authority strategy document having been submitted for consideration.
- 5.7. The Oval Sports Centre is undergoing a substantial programme of works both to the main building and to the creation of 5-a-side pitches. This has been the subject of well reported delays for a variety of reasons and report is to be

presented to Cabinet in December. The redevelopment of New Brighton is progressing well which includes the Floral Pavilion that is anticipated to open in November.

- 5.8. The Special Initiatives element of the programme includes schemes and related funding in respect of Objective One (£5.5 million) and the Single Regeneration Budget (£4.5 million). The schemes contribute towards the conclusion of the Merseyside-wide programme which is shown under 2008/09 but will be further refined as it is not due to complete until 2010.
- 5.9. The Housing Market Renewal Initiative (NewHeartlands) continues to progress although the impact of the worldwide and national financial situation is affecting developers. The size and nature of the programme requires both the programme and the funding to be more flexible with the re-phasing of expenditure and resources kept under review to maintain progress.
- 5.10. In terms of future years the proposals for addressing the Bidston Moss Viaduct are nearing conclusion with the Department for transport having ear-marked the scheme for funding, subject to the constituent authorities agreeing to a share of the funding. This was reported to, and agreed by, Cabinet on May 22.
- 5.11. Cabinet is advised that in accordance with the Constitution there is a request to approve variations in the capital programme in respect of Adult Social Services IT infrastructure funded from grant and the Bromborough Pool Bridge overspend from within the LTP allocation.

## 6. RISK MONITORING

- 6.1 The revised Corporate Risk Register was agreed by Cabinet on 13 March 2008. This was the baseline document and is reviewed quarterly with Appendix D highlighting progress and any additional issues identified.
- 6.2 For most of the risks the planned improvements in control actions have been implemented along with further identified actions to ensure that the risks are being controlled. Examples of positive developments include:-

| Risk<br>No. | Description   | Positive Developments in Control Actions   |
|-------------|---|--|
| 1.          | Death or serious injury to a service user, staff member, or anyone to whom the Council owes a duty of care. | The first IOSH Managing Safely Course was delivered in September. 6 revised health & safety arrangements completed and subject to consultation. Health & safety audits in Cultural Services completed. |
| 2.          | Failure to prepare adequately for/manage the impact of a pandemic.  | Lists of critical employees have been identified for priorities for anti-viral drugs.  |
| 5.          | The Council does not maintain arrangements for good corporate governance                                    | A further risk management training session for Members was delivered on 24 July. Revised representation on Audit & Risk Management Committee was agreed for the September cycle.                       |

| 8.  | The strategies supporting our key priorities are not executed effectively                     | Key strategies were revised and reported to Cabinet on 23 July.   |
|-----|---|---|
| 12. | We do not fully exploit all available resources, including technology.                        | Key strategies were reviewed and reported to Cabinet on 23 July. A standardised business case pro-forma for bid submissions has been introduced.  |
| 15. | Failure to execute the Council's Investment Strategy (or failure of the Strategy to deliver). | Managerial capacity and focus on the Investment Strategy was strengthened through the establishment of the Department of Law, HR and Asset Management in September.   |
| 17. | Failure in safeguarding arrangements (adult or child)   | Two new posts for safeguarding adults with mental health challenges filled.   |
| 21. | Susceptibility of IT provision to disruption  | Improvements to the controlled environment for the main IT suites have been implemented. A report on a possible new data centre for the authority has been drafted.   |
| 24. | Impact of volatility and downturn in the economy  | Treasury management policies reviewed. Regular dialogue has been taking place with external investment consultants. Maturing investments have been placed with the Government. Enhanced monitoring of key budget areas has been introduced through the financial monitoring report. |

6.3 Those areas where progress in implementing controls has not proceeded to timetable or where information is not available are:

| Risk | Description   | Areas where Control Actions have yet  |
|------|---|---|
| No.  | -   | to be progressed  |
| 3.   | Key Council services are not resilient to disruption and                                      | As business continuity plans have not yet been received from the majority of  |
|      | business continuity arrangements are inadequate.  | departments the target date for finalising all plans has been put back to January 2009.                                     |
| 6.   | Community expectations are not properly understood or managed well.                           | The programme for the sustainability appraisal of the LAA is slightly behind schedule.                                      |
| 9.   | Partnerships are not well planned and we do not work effectively with others                  | Preparatory work for CAA regime is slightly behind schedule.  |
| 15.  | Failure to execute the Council's Investment Strategy (or failure of the Strategy to deliver). | Membership of the Corporate Investment<br>Group has been established. However its<br>initial meeting has yet to take place. |
| 19.  | Failure to progress the regeneration of economically disadvantaged areas                      | Membership of the Corporate Investment<br>Group has been established. However its<br>initial meeting has yet to take place. |
| 23.  | Financial and environmental impact of delay in or failure to acquire and gain planning        | No progress has been made by the MWDA in the acquisition of suitable sites.   |

| conser  | s for sites need | ed to |
|---------|------------------|-------|
| deliver | the MWDA procur  | ement |
| progra  | ıme              |       |

- 6.4 The following have been identified as having potential corporate significance and are subject to further review and consideration:-
  - (i) Impact of volatility and a downturn in the economy
  - (ii) Susceptibility of IT provision to disruption.
  - (iii) Financial and environmental impact of delay in or failure to acquire and gain planning consents for sites needed to deliver the MWDA procurement programme.

### 7. OTHER IMPLICATIONS

7.1. There are no equal opportunities, human rights, community safety, local member support, local agenda 21 or planning implications arising directly from this report.

### 8. BACKGROUND PAPERS

8.1 Wirral Corporate Plan 2008/11.

Appendix A – Performance Monitoring Summary.

Appendix B – Financial Monitoring Summary.

Appendix C – Capital Monitoring Summary.

Appendix D – Corporate Risk Monitoring Summary.

## 9. RECOMMENDATIONS

- 9.1. That Cabinet review the performance to date and identify any areas for further action.
- 9.2. That the variations in the capital programme in respect of Adult Social Services IT infrastructure funded from grant and the Bromborough Pool Bridge overspend from within the Local Transport plan (LTP) allocation be approved.
- 9.3. That the report, without appendices, for the quarter ending 31 December be presented to the Cabinet in February. The full report, which should include the detailed appendices, to be made available on the Virtual Committee.

STEPHEN MADDOX CHIEF EXECUTIVE This page is intentionally left blank

WIRRAL COUNCIL

**AUDIT AND RISK MANAGEMENT COMMITTEE** 

**1 DECEMBER 2008** 

REPORT OF THE DIRECTOR OF FINANCE

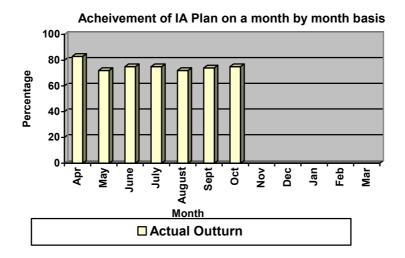
INTERNAL AUDIT WORK: SEPTEMBER TO NOVEMBER 2008

### 1. EXECUTIVE SUMMARY

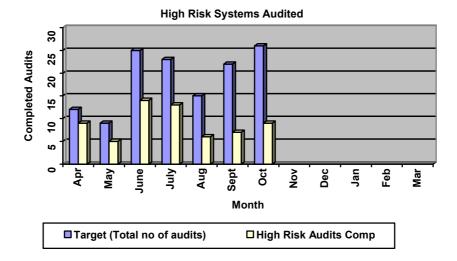
- 1.1. In order to assist in effective corporate governance and fulfil statutory requirements, the Internal Audit Section of the Finance Department reviews management and service delivery arrangements within the Council as well as financial control systems. Work areas are selected for review on the basis of risks identified on the Corporate Risk Register and as assessed by Internal Audit in consultation with Chief Officers and Managers.
- 1.2. This report identifies and evaluates the performance of the Internal Audit Section and includes details of the actual work undertaken over the period and the number of 'High' risk recommendations identified in reports. Items of significance identified during the audit process that require the attention of the Members are detailed.

## 2. INTERNAL AUDIT – PERFORMANCE

- 2.1. This report summarises the audit work completed between 1 September 2008 and 10 November 2008. The specific nature of the work that has been undertaken or is currently ongoing is identified in Appendix I. 75 audit reports were produced during this period. 88 high and 55 medium priority recommendations were identified in the reports issued. Management has agreed to implement all of the recommendations made within a satisfactory timescale. Those reports identifying high priority recommendations are analysed in more detail in section 3 of this report.
- 2.2. The Internal Audit Section constantly evaluates the effectiveness of its performance including a number of performance indicators in key areas as identified for the period 1 September 2008 to 31 October 2008:
- 2.2.1. To ensure that 90% of the Internal Audit plan is completed by 31 March 2009.

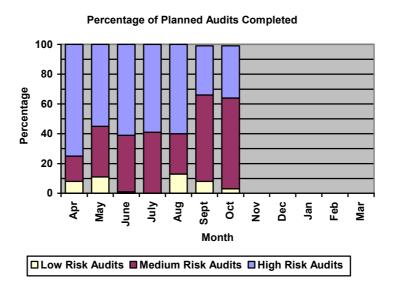


- a. This is an input based measure i.e. the estimated number of days required each month to deliver the whole of the audit plan. For the seven months of the year to date achievement has averaged 75% against a target of 90%. This is primarily as a result of staffing resource problems being experienced over the period. However, whilst this is an important measure, it is of more relevance for the Council to ensure that the major risks to the Authority are reviewed.
- b The Internal Audit Plan comprises a substantial number of audits designed to review the risks to Council systems. These audits are weighted according to the significance of the risk posed and ranked as either high, medium or low priority. It is essential that all of the high risk audits are completed during the audit plan year.
- 2.2.2. High Risk systems audited as a percentage of total audits completed.
  - a. To ensure that all of the key risks identified in the Internal Audit Plan are reviewed, I monitor the number of high risk audits undertaken as a percentage of all audits and have prioritised the delivery of these audits and focused on these during the year. This is analysed in more detail in the chart below.

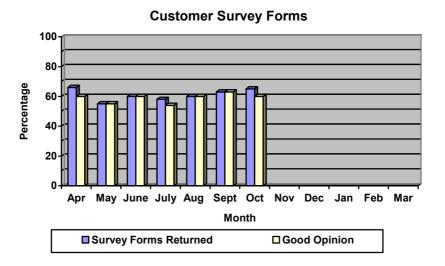


- b. The chart clearly identifies that the number of high risk audits undertaken is a significant proportion of the total number of audits completed each month, particularly in the early part of the year, and reflecting the deliberate policy of the Internal Audit Section to complete as many of these audits as early as possible. Of the 89 high risk audits identified in the audit plan 63 of these have actually been completed to date and Internal Audit is on target to complete all of these by the year end.
- c. As a result of this, any further shortfall in delivery of the audit plan in the later part of the year should not impact significantly upon the completion of these high priority audits.

## 2.2.3. Planned audits completed.



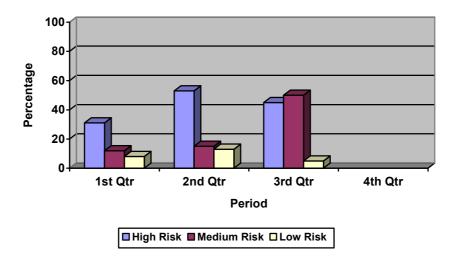
- a. I measure the estimated number of planned audit reports which will be completed each month. It is expected that 327 audit reports will be issued this year. To date 155 reports have actually been produced, representing a proportionate figure of 47% of the total number of reports, and including 71% of the proportionate high risk audit reports.
- b. The performance is below target for this time of the year and is directly related to the staffing issues which have been experienced during the year to date. Attempts have been made to address this issue and a recent recruitment drive has resulted in three of the five vacancies being filled, although only one of these has been by an external candidate.
- 2.2.4. Percentage of Customer Satisfaction Forms returned indicating a 'good' opinion of the service.



a. Customer survey forms are completed by the clients following the completion of an audit and pose a number of questions relating to the audit, its findings and the conduct of the auditor. The chart identifies the percentage of those forms returned that indicate a positive opinion of the service. This clearly indicates that the Internal Audit Section is viewed very positively by its clients and is regarded as adding value to the systems that it audits. Where feedback from clients identifies issues appropriate measures have been taken by management to address these and prevent any recurrence.

2.2.5. The percentage of audits completed by risk category.

#### **Audits Completed by Risk Category**



a. This chart reflects the deliberate policy of the Internal Audit Section to ensure that all high risk audits are completed during the year as it is essential to the well being of the Council that any risks in these areas are addressed. It is anticipated that with existing resources all of the high risk audits and a significant proportion of the medium risk will be completed. Any audits that are unable to be undertaken during the year will be carried forward to next years Audit Plan and the risk to the effectiveness of Council systems reassessed as part of this process.

## 2.2.6. Follow up Audits

a. To comply with current best practice and Audit Commission recommendations, follow-up audits are undertaken for all completed audits up to six months after the completion date, to confirm the implementation of agreed recommendations. The majority of the required follow up audits relating to work undertaken this year have now been completed and the remainder are currently ongoing. No significant delays have occurred in this area despite the resource problems experienced to date. No outstanding issues were identified that require the attention of the Audit and Risk Management Committee at this time.

### 3. INTERNAL AUDIT PLAN - PROGRESS OF WORK

3.1 The following table identifies audits undertaken over the period which include recommendations of a high priority nature. All the audits were of systems categorised as 'High Risk' except those identified with an asterisk.

| Audit   | Total Recs Agreed | Recs Not Agreed |
|---|-------------------|-----------------|
| * Capital Investment Programme                      | 2                 | -               |
| Finance Gifts and Hospitality – Follow Up Review    | 1                 | -               |
| Credit Cards – Follow Up Review                     | 3                 | -               |
| Transport - Review                                  | 3                 | -               |
| Members Gifts and Hospitality – Follow Up Review    | 1                 | -               |
| DASS Gifts and Hospitality – Follow Up Review       | 4                 | -               |
| Accreditation Listing                               | 3                 | -               |
| Corporate Services Gift and Hospitality – Follow Up | 1                 | -               |
| Performance Indicators – Mid Year Review            | 1                 | -               |
| FMSIS Review – Liscard Primary School               | 2                 | -               |
| FMSIS Review – Leasowe Early Years                  | 4                 | -               |
| FMSIS Review – Christchurch (Birkenhead)            | 10                | -               |
| FMSIS Review – St Albans School                     | 7                 | -               |
| FMSIS Review – St Annes Primary School              | 7                 | -               |
| FMSIS Review – Overchurch Junior School             | 8                 | -               |
| FMSIS Review – Thornton Hough School                | 5                 | -               |
| FMSIS Review – Woodchurch Primary School            | 9                 | -               |
| * Aids and Adaptations - Review                     | 2                 | -               |
| Annual Governance Statement - Review                | 1                 | -               |
| Training  | 3                 | -               |
| * Cheque Control - Review                           | 1                 | -               |
| Contracts Insurance – Review                        | 1                 | -               |
| Community Energy Efficiency Fund                    | 1                 | -               |
| * Coastal Survey Contract                           | 1                 | -               |
| Surveillance Systems – Review                       | 4                 | -               |
| * The Oval Engineering Works – Final Accounts       | 1                 | -               |
| * Abakhan Properties – Final Accounts               | 1                 | -               |

3.2 All of the action plans in respect of the audits identified have been returned fully completed and identify appropriate timescales for the implementation of agreed recommendations. Follow up audits will be completed over the next six months.

### 4. FINANCIAL AND STAFFING IMPLICATIONS

- 4.1. There are none arising from this report.
- 5. LOCAL MEMBER SUPPORT IMPLICATIONS
- 5.1. There are no local Member support implications.
- 6. LOCAL AGENDA 21 STATEMENT
- 6.1. There are no local agenda 21 implications.
- 7. PLANNING IMPLICATIONS
- 7.1. There are no planning implications.
- 8. **EQUAL OPPORTUNITIES IMPLICATIONS**
- 8.1. There are no equal opportunities implications.
- 9. **COMMUNITY SAFETY IMPLICATIONS**
- 9.1. There are no community safety implications.
- 10. HUMAN RIGHTS IMPLICATIONS
- 10.1. There are no human rights implications.
- 11. BACKGROUND PAPERS
- 11.1. Internal Audit Annual Plan 2008/09.
- 11.2. Audit Reports.
- 12. **RECOMMENDATION**
- 12.1. That the report be noted.

IAN COLEMAN
DIRECTOR OF FINANCE

## **APPENDIX I**

### **INTERNAL AUDIT PLAN 2008/09**

## **WORK CONDUCTED/ONGOING - 1 SEPTEMBER to 10 NOVEMBER 2008**

# 1. SYSTEMS

(a) Finance - Training

Cheque ControlCredit Cards

- Conflict of Interest

- Council Tax Debit Control

- One Stop Shops

- Creditors

- Risk Management

- Debtors

- Housing Benefits

- NNDR

- Capital Investment Programme

- Archiving

(b) Corporate Services - Local Area Agreements

- Performance Indicators

(c) Children & Young People - Schools

- Financial Management Standard in

Schools
- Creditors
- Transport

(d) Technical Services - Contract Tendering Procedures

Highways ProcurementContracts Insurances

Estimates for Works ContractsAsbestos Works - TenderingCoastal Survey Contract

- Abandoned Vehicles

(e) Regeneration - Community Energy Efficiency Fund

Licensing Income ManagementPacific Road Bar OperationNeighbourhood Renewal Fund

- First Home Scheme

- Trading Standards Business Support

- Environmental Health

- (f) Corporate Systems
- Corporate Governance
- Corporate Complaints
- Regulation of Investigatory Powers
- Risk Management
- Performance Management
- National Fraud Initiative
- Money Laundering
- Health and Safety
- Credit Cards
- **Adult Social Services** (g)
- Gifts and Hospitality
- Risk Management
- Accreditation Listing
- Charging Policy
- Whistleblowing Policy
- (h) Law, HR and Asset
  - Management

- Contracts
- Governance
- Members Gifts and Hospitality
- Absence Recording
- Access
- Payroll

#### 2. **SCHOOLS**

13 FMSIS Schools (a)

#### 3. **OTHER ESTABLISHMENTS**

- (a) **Sports Centres**
- Birkenhead Central Library (b)
- **Community Centres** (c)

#### 4. ICT

- (a) Data Security Standards (PCI)
- **Data Transfer Security** (b)
- Members ICT Governance (c)

#### 5. PERFORMANCE AND BEST VALUE

- Performance Indicators (a)
- Local Area Agreements (b)

#### 6. **ANTI-FRAUD**

- (a) National Fraud Initiative
- (b) Mobile Telecommunications
- Money Laundering (c)

#### **INVESTIGATIONS** 7.

- (a) PIDA
- Print Unit (b)
- (c) Pension Fund

#### 8. **OTHER**

- (a)
- Wirral Methodist/Family Housing Association's 6 Final Accounts (totalling £ 1 million) examined (b)

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