

**CLACKMANNANSHIRE COUNCIL**

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**Report to: Housing, Health and Care Committee**

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**Date of Meeting: 31<sup>st</sup> March 2016**

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**Subject: Social Services Performance Report**

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**Report by: Head of Social Services**

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**1.0 Purpose**

- 1.1 This report presents information on the performance indicators, and on progress in implementing the strategic priorities and projects, for Social Services' performance for Quarter 3, 2015/2016 (October – December 2015).
- 1.2 It incorporates the service's performance against our agreed priorities and target measures. A separate financial report is presented to Committee.

**2.0 Recommendations**

- 2.1 It is recommended that Committee note and agree this report and provide comment and challenge as appropriate.

**3.0 Considerations**

- 3.1 This report provides Committee with an update on the Service's performance in relation to the Business plan. The specific financial progress is detailed more fully in the Finance Report.
- 3.3 Performance information is recorded on covalent and verified by Service Managers and Assistant Heads of Service. This recording mechanism enables members to identify and scrutinise trends in performance against agreed targets. Strengths and areas for improvement, together with key actions, are highlighted in the commentary and in the narrative section of the report. Commentary on the performance is included in the progress report and can be found in Appendix 1.

**Child Care Service and Criminal Justice Service**

- 3.4 The key actions and performance measures for Child Care and Criminal Justice Services are linked to the core priorities for Stirling and Clackmannanshire Council.

The actions focus on the implementation of the Children and Young People (Scotland) Act 2014, the Corporate Parenting Strategy, supporting early and timely intervention, protecting the most vulnerable children and making best use of all our resources to improve service delivery. The performance measures are aligned to these key actions. For example, the measures about the percentage of care leavers with a pathway plan, are linked to the delivery of the Corporate Parenting Strategy.

- 3.5 There has been improvement under the 'Vulnerable People And Families Are Supported' priority, in comparison to the previous quarter in performance against key target measures for Quarter 2, with a reduction in the number of red 'alert' statuses.
- 3.6 Children on the child protection register who had a regular core group remains on target. Children on the child protection register visited and seen weekly has not achieved 100% however this is as a result of one non engaging family however the child's wellbeing is being monitored through other partners.
- 3.7 The ongoing implementation of the National Risk Assessment Framework and recognised assessment tools is currently sitting at 80%. Significant progress has been made in this area however there is a gap in relation to Getting Our Priorities Right (GOPR) which is an assessment framework for young people misusing or affected by parental substance misuse. This is related to a Forth Valley development with a lack of agreement at this stage in deciding on an agreed format. There is concerted effort being made to resolve this situation.
- 3.8 Criminal Justice Services continue to report 100% of reviews of high risk offenders completed within agreed timescales. Following recommendations by the Accounts Commission in relation to Public Performance Reporting it has been agreed to publish additional indicators for Criminal Justice including;
  - Percentage of Community Pay Back Orders converted by court,
  - Percentage of cases with acceptable levels of managerial oversight,
  - Percentage of MAPPA Level 2 meetings held within timescales, and
  - Percentage of Unpaid Work placements commencing within 7 days.

These will be reported in future performance reporting and will be included in the Social Services Business Plan for 2016/17.

### **Adult Care Service**

- 3.9 The key actions and performance measures for Adult Services are linked to the core priorities for both Councils. The actions focus on the redesign of older peoples services with an emphasis on shifting the balance of care towards effective care at home, progressing Health and Social Care Integration and making best use of all our resources to improve service

delivery. The performance measures are aligned to these key areas. For example, the measures related to the percentage of people 65 and over with intensive support needs receiving services at home is linked to shifting the balance of care towards effective care at home.

- 3.10 Adult Services continue to perform well across the full range of performance measures. The Service has consistently performed above the Scottish average and performs well when compared with other Councils of a similar size and profile. This means that a higher proportion of those aged over 65 with intensive care and support needs in Clackmannanshire are supported to remain in their own homes rather than an institutional setting. Although the target was reviewed in 2015/16 to make it more challenging, performance continues to be above target for Quarter 3.
- 3.11 The national standard for delayed discharges from hospital was reduced from over four weeks to two weeks in 2015. Although this a more challenging target, there have been no delayed discharges in Quarter 3. This is a significant achievement, taking into account the reduction from the original target from six weeks and the increase in the number of referrals from hospital. The Service continues to work in partnership with NHS Forth Valley, to extend the availability of short term assessment options for those at risk of hospital admission as well as for those who are fit for discharge. The Integrated Care Fund is also being used to further develop services and supports designed to both avoid unplanned admissions to hospital and further reduce the length of time individuals are delayed in their discharge from hospital.
- 3.12 Performance in relation to the percentage of Adult Support and Protection continue to improve. Discussions held within the agreed timeframes was increased in Q3 from 75% to 100% to reflect the national standard and increase challenge to the service. The Clackmannanshire and Stirling Adult Support and Protection Committee recently had a development day to review its role, remit and priorities, and an improvement action plan is being developed by the independent chair for the Adult Support and Protection Committee as well as the Child Protection Committee across Clackmannanshire and Stirling.
- 3.13 Complaints: there were no formal stage 2 complaints received in the period. This reflects the prompt action taken to address initial negative contact, and does not include the receipt of 11 stage 1 received complaints in the period. Targeted training and dedicated support to team managers has ensured a more thorough and timely response at first point of contact.
- 3.14 There is increased scrutiny within the Senior management Team in relation to reporting on complaints. New systems have been introduced to both report on and monitor complaints and to take appropriate action in relation to the customer experience.

## **Financial Position**

3.15 Please see updated Financial Report.

#### 4.0 Sustainability Implications

4.1 None.

#### 5.0 Resource Implications

5.1 *Financial Details*

5.2 The full financial implications of the recommendations are set out in the report. This includes a reference to full life cycle costs where appropriate.  
Yes

5.3 Finance have been consulted and have agreed the financial implications as set out in the report.  
Yes

5.4 Staffing - There are no staffing implications associated with this report.

#### 6.0 Exempt Reports

6.1 Is this report exempt? No

#### 7.0 Declarations

The recommendations contained within this report support or implement our Corporate Priorities and Council Policies.

(1) **Our Priorities** (Please double click on the check box )

The area has a positive image and attracts people and businesses	<input type="checkbox"/>
Our communities are more cohesive and inclusive	<input type="checkbox"/>
People are better skilled, trained and ready for learning and employment	<input checked="" type="checkbox"/>
Our communities are safer	<input checked="" type="checkbox"/>
Vulnerable people and families are supported	<input checked="" type="checkbox"/>
Substance misuse and its effects are reduced	<input checked="" type="checkbox"/>
Health is improving and health inequalities are reducing	<input checked="" type="checkbox"/>
The environment is protected and enhanced for all	<input checked="" type="checkbox"/>
The Council is effective, efficient and recognised for excellence	<input checked="" type="checkbox"/>

(2) **Council Policies** (Please detail)

#### 8.0 Equalities Impact

8.1 Have you undertaken the required equalities impact assessment to ensure that no groups are adversely affected by the recommendations? No

This report is for information only. No policy changes or changes to service provided are recommended.

**9.0 Legality**

9.1 It has been confirmed that in adopting the recommendations contained in this report, the Council is acting within its legal powers. Yes ✓

**10.0 Appendices**

10.1 Please list any appendices attached to this report. If there are no appendices please state "none"

Appendix 1 - Social Services Business Plan 2015-16 report from Covalent



**11.0 Background Papers**

11.1 Have you used other documents to compile your report? Yes (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

**Author(s)**

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**Approved by**

NAME	DESIGNATION	SIGNATURE
Val de Souza	Head of Social Services	
Nikki Bridle	Depute Chief Executive	



Quarter 3 Progress Report













KEY TO SYMBOLS













PIs					
Status		Short Term Trends		Long Term Trends	
Compares actual performance with target		Compares actual performance with most recent previous		Compares actual performance with previous over the longer term	
	Alert		Performance has improved		Performance has improved
	Warning		Performance has remained the same		Performance has remained the same
	OK (performance is within tolerance limits for the target)		Performance has declined		Performance has declined
	Unknown		No comparison available - May be new indicator or data not yet available		No comparison available

ACTIONS	
Expected Outcome	
	Meet target/complete within target dates
	Will complete, but outwith target
	Fail to complete or cancelled

RISKS		
Current Rating = Likelihood x Impact (1 - 5)	Status	
		Rating 16 and above
		Rating 10 to 15
		Rating 9 and below
<p>The likelihood of a risk occurring, and the impact if it does occur are each scored on a scale of 1 to 5, with 1 being the least likely or the least significant impact. Detailed guidance on scoring is provided in the Risk Management Policy and guidance.</p>		

# 1 HIGH LEVEL SUMMARY

Our Public Services Are Improving								
PIs		2		1		2		4
Actions		0		7		4		0
Risks		3		0		0		0



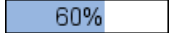



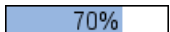

Vulnerable people and families are supported								
PIs		1		2		6		5
Actions		0		0		4		0
Risks		0		2		1		0




\* Does not include 'Data Only' indicators.














## 2 DETAILED REPORT

### Priority Outcomes.- Vulnerable people and families are supported









Covalent Code	ACTION	By When	Lead	Progress	Expected Outcome	Latest Note (as at December 2015)
SOS SSS 050	Implement the process in relation to the role of the Lead Professional under the Children & Young Persons legislation and the transition between the Lead Professional and Named Person service	Aug 2016	Liam Purdie			The role of the Lead Professional is fully understood and implemented within the Children's Service. With Social Work primarily being the Lead Professional for all cases allocated.
SOS SSS 051	Roll out of the Outcomes Framework for all children in Children's Services to evidence outcomes for children and families	Aug 2016	Liam Purdie			The outcomes framework has been rolled out to include all children subject to Child Protection Registration, as well as those who are subject to being Looked After by the LA ( At Home & Accommodated ). Outcomes scoring is embedded in all GIRFEC and National Risk Framework training.
SOS SSS 052	Roll out and review use of the recognised assessment tools such as National Risk Assessment Framework, Graded Care and Substance Misuse Tools.	Aug 2016	Liam Purdie			Staff have been trained in the use of the National Risk Assessment Framework, and this is now part of rolling programme of training. Audit activity increasingly indicates the use of a recognised assessments tools in the interventions provided for the children we work with.
SOS SSS 053	Finalise in conjunction with NHS FV the Strategic Plan for adult health and social care services	Mar 2016	Val de Souza			Draft Plan has been approved and is out for consultation until 24th December, 2015. Housing Contribution Statement has been prepared for Stirling Council to accompany this. Strategic Needs Assessment has been drafted and will be presented to the Strategic Planning Group in January, 2016.

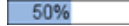



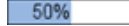









Code	Description	2012/13	2013/14	2014/15	2015/16	Q3 2015/16		Latest Note (as at December 2015)	Lead
		Value	Value	Value	Target	Value	Short Trend		
CHC SCR 002	% of children requiring supervision seen by supervising officer within 15 working days	80%	86%	76%	100%	86%		Performance has dipped from the previous Quarter 2 (100%). This however relates to one child out of seven out with the 15 days. This related to a non engaging family.	Liam Purdie
ADC ADA 01a	% of people aged 65 and over with intensive care needs (10+ hours) receiving services at home as a % of all older people receiving long term care	42%	45%	47%	45%	46%		Performance is lower than Quarter 2 (48%) but still above target.	Phillip Gillespie
ADC ADA 008	Delayed hospital discharges over 2 weeks	New indicator previously 4 weeks.		2	0	0		Performance is better than previous Quarter 2 (1). Based on data validated and published by ISD.	Phillip Gillespie

Code	Description	2012/ 13	2013/ 14	2014/ 15	2015/ 16	Q3 2015/16		Latest Note (as at December 2015)	Lead
		Value	Value	Value	Target	Value	Short Trend		
CHC SCR 01a	% Reports submitted to the Children's Reporter within 20 working days (IARs & SBRs no panel)	48%	90%	81%	75%	72%		Performance is better than the previous Quarter 2 (71%) and within target tolerance.	Liam Purdie
CHC CPR 078	Children on the Child Protection Register with at least one Core Group in the past month	80%	86%	95%	95%	95%		Performance has dipped from previous Quarter 2 (99%), but on target.	Liam Purdie
CJS ADP 001	% of Criminal Justice reviews of high risk offenders that took place by scheduled date	100%	100%	100%	100%	100%		Performance continues to meet the 100% achieved over several quarters. On target.	Val de Souza
CHC CPR 029	Children on the child protection register visited weekly and seen	100%	100%	94%	100%	96%		Performance is the same as the previous Quarter 2 (96%) and within tolerance, only 1 child not seen within agreed parameters.	Liam Purdie
ADC ADA 022	% Adult Support and Protection investigations that have independent advocacy offered	New indicator		37.5%	55%	annual		Annual indicator to be reported on before March 2016.	Phillip Gillespie
ADC ADA 019	% of Adult Protection discussions held within 24 hours of referral	66%	68%	73%	100%	83%		Performance is slightly less than previous Q2 (86%). The target was increased to 100% in Q3 to challenge performance. Previously this indicator was set at 75% and returns regularly exceeded this level. The Council's ASP procedures seek Initial Discussions to be had and recorded within one working day of referral therefore it was agreed that this indicator should be 100%. There is planned training on Recording Procedures in Clackmannanshire for all council officers.	Phillip Gillespie
CHC LAC 18a	% Children looked after away from home with 3+ placements	7%	6%	0%	Data only	6%		Performance has dipped from previous Q2 (2.6%). This figure represents 9 out of 155 looked after and accommodated children whose placements changed over 3 times in the last 12 months.	Liam Purdie
CHC TCA 003	% Care leavers aged 16+ with a pathway co-ordinator	29%	29%	100%	100%	100%		Performance is same as Q2 (100%), and on target.	Liam Purdie
SOS CUS 006	% of service users surveyed who feel safer as a result of social services involvement	88%	78%	65%	80%	annual		Annual indicator to be reported on before March 2016.	Val de Souza
CHC TCA 002	% Care leavers aged 16+ with a pathway plan	29%	29%	89%	75%	91%		Performance is better than previous Q2 (49%) and above target.	Liam Purdie
SOS CUS 007	% service users surveyed who report	86%	77%	65%				Annual indicator to be reported on before March 2016.	Val de Souza

Code	Description	2012/ 13	2013/ 14	2014/ 15	2015/ 16	Q3 2015/16		Latest Note (as at December 2015)	Lead
		Value	Value	Value	Target	Value	Short Trend		
	maintained or increased independence as a result of intervention				80%	annual			
ADC ADA B2b	Self Directed Support spend on people aged 18 or over as a % of total social work spend on adults	1.1%	1%	TBC	5%	annual	?	Annual indicator to be reported on before March 2016. This is a LGBF/SOLACE benchmarking indicator that is reported nationally.	Val de Souza
SOS CHC PER 001	Internal Foster Care disruption within period	New indicator			Data only		?	New indicator - data collection being organised.	Liam Purdie



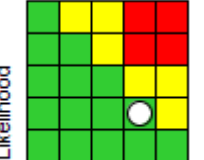
### Priority Outcome - Our Public Services Are Improving


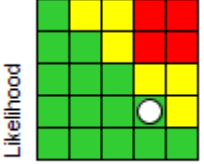
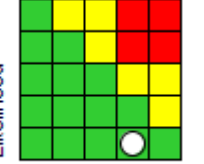
Covalent Code	ACTION	By When	Lead	Progress	Expected Outcome	Latest Note (as at December 2015)
SOS SSS 040	Ensure effective budget management arrangements are in place and are effectively reported	Mar 2016	Val de Souza	 85%		Finance is discussed at weekly Senior Management team meetings. The budget action plan for both adults and childcare services is overseen by the relevant Assistant Head of Service. Regular meetings take place between Service Mgrs and Service Accountants. A Business Manager was recruited in February 2016 to support and oversee the business processes.
SOS SSS 042	Ensure customer standards are effectively reported and managed	Mar 2016	Val de Souza	 75%		Performance framework and scorecards in place across service which are linked to customer standards. Draft scorecard in place to support reporting on integrated adult health and social care services. This includes reports on customer satisfaction and user survey data.
SOS SSS 043	Produce a Social Services specific approach to Workforce Planning in line with corporate approach to Workforce Planning	Mar 2016	Val de Souza	 50%		Engagement and planning for Adult Care Priorities are supporting social services scoping and planning for workforce. This is mirrored in work on children's services redesign in line with embedding GIRFEC and implementation of Children and Young People's Act. Workforce Strategy has been developed to support Health and Social Care Integration. Service working with Corporate Services to progress service specific development of workforce planning. Appropriate reporting arrangements in place including reports to committee.
SOS SSS 044	Review approaches to staff engagement and strengthen opportunities for front-line staff to be involved in improvement activities	Mar 2016	Val de Souza	 80%		Senior Management Team have hosted all staff engagement events with the aim to share visions and encourage front-line workers to take ownership of service aims. They have indicated commitment to continue these on a more regular basis - perhaps service specific. Staff at all levels have been invited to attend and contribute to Health Social Care Integration consultation events. Staff in children's services are working on a programme of supported audit in order to produce improvements in care planning, risk assessment and outcomes. This is also being done through lead ASP officer in adults. Service engagement sessions planned for March 2016 to provide information to all staff about changes following decision about Shared Services.


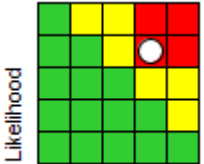
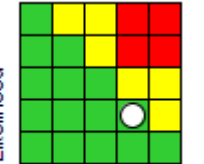
SOS SSS 054	Review of Adult day service provision	Mar 2017	Phillip Gillespie			<p>Review of all Adult Day Services - The proposal supports integrated Care Pathway Strategic Themes by redesigning activity on complex care provision. This is a three year MCB programme.</p> <p>Phase 1 ( 21015-2016 ) Consultations with staff and partners to identify stakeholders. Develop the scope of the project, the savings, project team, and links other council wide projects. This work has been completed</p> <p>Phase 2 (2106-2107) . Further consultations with communities, Agree and identify an appropriate model of delivery which meets customers and statue responsibilities. Reviews include high cost service pathways, developing locality hubs that support early intervention. This work will review current day and community support arrangements with a view to developing therapeutic models of support that are enabling and integrated with health.</p>
SOS SSS 055	Develop options for delivery of shared residential childcare facility	Mar 2016	Liam Purdie			<p>Following approval at council in February 2016 agreement to pursue this as an active business case has been approved. The service in partnership with Facilities Management will pursue this and report to future committees.</p>
SOS SSS 056	Review Social Services equipment provision and distribution arrangements	Mar 2017	Phillip Gillespie			<p>This is being progressed within 'Making Clackmannanshire Better'. Business Cases have been completed and approved. The key aim of this option is to provide a standardised, streamlined service integrated across Forth Valley that maintains a balance between costs and service provision. This option will comprise two phases:</p> <p>Phase 1: (2015 – 2016) ...this will involve a range of improvement and efficiency activities concerned with logistics, stock control, ordering and processing systems, rationalisation and infection control standards.</p> <p>Phase 2: Jan 2017 onwards – to develop and implement a fully integrated Forth Valley-wide service</p>
SOS SSS 057	Implement redesign of Adult intake/reception services	Mar 2016	Phillip Gillespie			<p>Pilot of triage service and eligibility toolkit has been put on hold due decision not to pursue Shared Services.</p>
SOS SSS 058	Improve delivery of Child Protection Services	Mar 2017	Liam Purdie			<p>Following a review of the funding for the single case management system programme, and the decision not to fully integrate as a shared service, this programme will now no longer be pursued in this format. The council have however agreed through the council budget meeting in February 2016 to pursue a case management system for Clackmannanshire council that is fit for purpose.</p>
SOS SSS 059	Re-design of children's Social Services	Mar 2017	Liam Purdie			<p>Initial plans will now be reviewed following decision not to proceed with a shared service.</p>
SOS SSS 060	Embed self-directed support across Social Services	Mar 2017	Val de Souza			<p>Implement outcomes based support plan - options shared with operational staff, and framework to be agreed. Preferred models identified. Implement commissioning framework in line with SDS options - dedicated member of staff identified to work on this. Links made with procurement service for advice.</p>

Code	Description	2012/ 13	2013/ 14	2014/ 15	2015/ 16	Q3 2015/16		Latest Note (as at December 2015)	Lead
		Value	Value	Value	Target	Value	Short Trend		
SOS CUS 001	Stage 2 Social Services complaints received	3	3	1	Data only	0	▬	There have been no Stage 2 complaints received for Social Services within the accounting period.	Christine Sutton
SOS LAG 003	% of staff who feel that the annual appraisal system helps them improve the way they do their job	54%	54%	32%	60%	annual	?	Annual indicator to be reported on before March 2016	Val de Souza
GOV SAB SOS	Annualised Days lost by FTE	Previous recording system		10.23 days	Council average	4.09	↑	Performance is better than previous Q2 (4.31) but higher than Council average.	Val de Souza
ACC BUV SOS	Projected variance as % of actual budget	+0.88 %	+3.11 %	+3.99 %	+/- 2.55%	6.87%	↑	Q3 figure is better than previous Q2 (6.94%) see separate finance report for most up to date details.	Val de Souza
SOS LAG 027	% staff who feel they have the ability to improve the service their team provides	55%	57%	50%	65%	annual	?	Annual indicator to be reported on before March 2016	Val de Souza
SOS CUS 002	% Social Services who achieve Care Inspectorate evaluation scores of 4 and above across residential and day services	94%	64%	82%	90%	96%	↑	Performance is an improvement on Q2 (86%) and above target.	Val de Souza
SOS CUS 008	% of customers very or fairly satisfied with the overall service they receive	91%	82%	76%	90%	annual	?	Annual indicator to be reported on before March 2016	Val de Souza
SOS IBP 008	% of case files audited where there is evidence of regular review of care or supervision	100%	71%	86%	90%	85%	↑	Performance is better than previous Q2 (82%).	Val de Souza
SOS IBP 007	% of case files audited where there is evidence of service user involvement in their care at the review stage	100%	61%	85%	75%	85%	↑	Performance is better than previous Q2 (68%).	Val de Souza


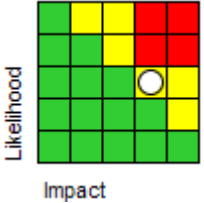
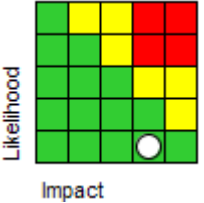
## Social Services Risk Register 2015-16

Covalent Code	Risk Description		Status		Current Rating	16	Target Rating	8
SOS 015	Redesign activity does not match pace and scale of change required.							
<b>Potential Effect</b>	<ul style="list-style-type: none"> <li>Impact on financial expenditure, failure to deliver efficiencies, impact on the sustainability of services and ability to meet future needs</li> <li>Workforce skills profile do not meet redesign activity</li> <li>Failure to meet standards and deliver action plan improvements in line with Care Inspectorate requirements for internally and externally commissioned services</li> </ul>				 Likelihood Impact		 Likelihood Impact	
<b>Related Actions</b>	SOS RIS 024	Health & Social Care Strategic Plan (Adults)			<b>Internal Controls</b>		Health & Social Care Strategic Plan SOS HSCP	
	SOS RIS 023	Re-aligning Children's Services Program to develop Joint Commissioning Strategy for Childrens Services.					Health & Social Care Joint Management Team meetings SOS HSC JMT	
	SOS RIS 022	Workforce development and skills plan being developed corporately and by Social Services					Health & Social Care Strategic Planning Group SOS HSCPG	
							Social Services Transforming Care Board SOS TCB	
<b>Latest Note</b>	Work to progress Making Clackmannanshire Better is ongoing. This work is closely monitored to assess progress on delivering efficiencies and target savings. Ongoing budget monitoring and action plans in place and updated on a weekly basis. Governance arrangements revised and implemented: Transforming Care Board in place. Service specific programme management office established.				<b>Managed By</b>		Val de Souza	


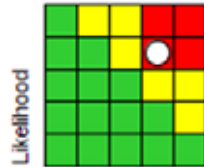
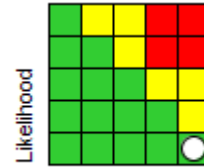
Covalent Code	Risk Description		Status	Current Rating	8	Target Rating	4
SOS 016	There is a risk that procedures do not accurately relate to operational and statutory requirements						
<b>Potential Effect</b>	Failure to: <ul style="list-style-type: none"> <li>meet Scottish Government objectives</li> <li>meet Council objectives</li> <li>deliver the required services</li> <li>risk of harm to current or potential service users</li> </ul>						
<b>Related Actions</b>	SOS RIS 004	Work has commenced to update operational procedures and guidance.		<b>Internal Controls</b>		Service Plans SOS SPM	
	SOS RIS 025	Children's services action plan				Inspection and external audit SOS IEA	
	SOS RIS 026	Audit activity across Children's Services					
<b>Latest Note</b>	Procedural guidance has also been developed to meet the requirements of the Social Care (Self-directed Support) (Scotland) Act 2013			<b>Managed By</b>		Liam Purdie and Phillip Gillespie	


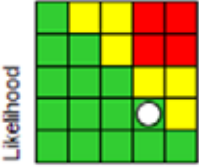
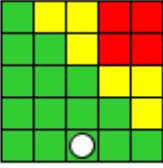
Covalent Code	Risk Description		Status	Current Rating	16	Target Rating	8
SOS 017	Organisational information and knowledge are not effectively managed due to poor information sharing, records and absence management and succession planning, increased dependence on IT systems and unrecorded knowledge held by staff members.						
<b>Potential Effect</b>	<ul style="list-style-type: none"> <li>Performance reporting difficulties</li> <li>Poor information exchange</li> <li>Higher cost on service delivery</li> <li>Higher level of resources used on duplication of tasks</li> </ul>						
<b>Related Actions</b>	SOS RIS 016	Implementation of Child Care Case Management System		<b>Internal Controls</b>		Joint IT Governance Group COU SHS IGG	
						Business Continuity Plans FCS CUS BCP	

				Disaster Recovery and Business Continuity arrangements for shared Social Services SOS BCONT
<b>Latest Note</b>			<b>Managed By</b>	Michael Grassom

Covalent Code	Risk Description	Status		Current Rating	12	Target Rating	4
SOS 026	Quality of care not maintained due to reduced capacity for contract monitoring. Service delivery standards are not met.						
<b>Potential Effect</b>	<ul style="list-style-type: none"> <li>▪ • Pressure on contract compliance staff</li> <li>▪ • Paying for services not provided and outcomes not met</li> <li>▪ • Non compliance with statutory reqs</li> <li>▪ • Critical services may not be supplied</li> <li>▪ • Recruitment &amp; retention</li> <li>▪ • Complaints ignored</li> <li>▪ • Poor performance monitoring</li> <li>▪ • Poor regulation inspection</li> <li>▪ • Workforce planning issues</li> </ul>						
<u>Related Actions</u>				<u>Internal Controls</u>		Corporate Procurement Strategy RAG GOV PRO	
					Health & Social Care Integration Strategic Plan SOS HSCP		
					Corporate Contract Standing Orders RAG GOV GSO		
					Market Positioning Statement for Health & Social Care SOS MPS		
						Commissioning arrangements are outcome orientated SOS COMA	
<b>Latest Note</b>				<b>Managed By</b>		Chris Sutton	



Covalent Code	Risk Description	Status	Current Rating	16	Target Rating	5
SOS 022	We may fail to have sufficient competent, confident staff and managers to undertake core duties					
<b>Potential Effect</b>	<ul style="list-style-type: none"> <li>Failure to deliver the required services and meet statutory requirements</li> <li>Risk of harm to current or potential service users</li> <li>Failure to meet standards and deliver action plan improvements in line with Care Inspectorate requirements for internally and externally commissioned services</li> </ul>					
<u>Related Actions</u>			<u>Internal Controls</u>	Corporate health & safety policies RAG GOV H+S		
				Integrated Children's plan - FV GIRFEC agenda SOS CHC ICS		
				Supervision SOS PRD		
				Public Protection Forum COU SHS PPF		
				Child protection procedures SOS CHC CPP		
				MAPPa guidance SOS CJA MPA		
			Learning & Development Programs in place SOS WLD			
			Performance Forum SOS PER			
<b>Latest Note</b>			<b>Managed By</b>	Val de Souza		

Covalent Code	Risk Description	Status		Current Rating	8	Target Rating	3
SOS 025	Failing to engage effectively with staff						
<b>Potential Effect</b>	<ul style="list-style-type: none"> <li>Disruption to service delivery. Negative impact on Employee Morale, Risk of harm to service users or potential service users</li> <li>Industrial action</li> </ul>						
<b>Related Actions</b>				<b>Internal Controls</b>		Industrial relations meetings. SOS INR	Staff engagement plan SOS SEP
<b>Latest Note</b>	Schedule of meetings in place with Trade Unions.			<b>Managed By</b>		Val de Souza	