Clackmannanshire Council

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Greenfield, Alloa, Scotland, FK10 2AD (Tel.01259-450000)

Resources and Audit Committee

Thursday 19 June 2014 at 1.30 pm

Venue: Council Chamber, Greenfield, Alloa, FK10 2AD

Date	Time

RESOURCES AND AUDIT COMMITTEE

Resources

- scrutiny of corporate budgets, financial performance and asset management
- scrutiny of decision-making of other Standing Committees and the Council, with the ability to call in decisions (inc Council)
- initiate or undertake scrutiny reviews
- monitor the performance of the organisation against agreed outcomes, standards and targets
- scrutiny of community planning and its effectiveness
- monitoring of service and financial performance of Finance & Corporate Services
- oversee the development and implementation of frameworks for managing Council resources and the development and application of the Council's governance framework
- ensure systematic appraisal of the Council's control environment and framework of internal control, particularly via monitoring and review of the Annual Governance Statement

Audit

Receive the following reports and accompanying analysis:

- external audit reports and action plans resulting from such
- internal audit update reports and action plans resulting from such
- internal audit results of investigations
- Annual Statement of Accounts

Consider and monitor the operational and strategic internal audit plans and reviewing internal audit performance.

Monitor and review actions taken on internal and external audit recommendations.

Promote internal control by the systematic appraisal of risk management processes, including corporate risk strategy and risk management procedure.

12 June 2014

A MEETING of the RESOURCES AND AUDIT COMMITTEE will be held within the Council Chamber, Greenfield, Alloa, FK10 2AD, on THURSDAY 19 JUNE 2014 at 1.30 PM.

NT Bridle

NIKKI BRIDLE
Depute Chief Executive

B U S I N E S S

Contact Finance and Corporate Services, Clackmannanshire Council, Greenfield, Alloa FK10 2AD
(Tel 01259 452106/452004) (Fax 01259 452230) (email customerserivce@clacks.gov.uk) (www.clacksweb.org.uk)

Service

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RESOURCES AND AUDIT COMMITTEE – MEMBERS (Committee Quorum 4)

Councillors			**Wards**		
Councillor	Archie Drummond	(Convenor)	2	Clackmannanshire North	INDP
Councillor	Donald Balsillie		2	Clackmannanshire North	SNP
Councillor	Janet Cadenhead		4	Clackmannanshire South	LAB
Councillor	Craig Holden		4	Clackmannanshire South	SNP
Councillor	Kathleen Martin		5	Clackmannanshire East	LAB
Councillor	Bobby McGill		2	Clackmannanshire North	LAB
Councillor	Jim Stalker		1	Clackmannanshire West	LAB
Councillor	Gary Womersley		3	Clackmannanshire Central	SNP

**Clackmannanshire
Council**

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**MINUTES OF MEETING of the RESOURCES AND AUDIT COMMITTEE held within the
Council Chamber, Greenfield, ALLOA, FK10 2AD, on THURSDAY 1 MAY 2014 at
10.00 am.**

PRESENT

Councillor Archie Drummond, Convenor (In the Chair)
Councillor Janet Cadenhead
Councillor Craig Holden
Councillor Les Sharp *(S)*
Councillor Jim Stalker
Councillor Graham Watt *(S)*
Councillor Gary Womersley

IN ATTENDANCE

Nikki Bridle, Director of Finance and Corporate Services
Stuart Crickmar, Head of Strategy and Customer Services
Ahsan Khan, Head of Housing and Community Safety
Julie Burnett, Senior Support Services Manager
Iain Burns, Internal Audit Team Leader
Cherie-Ann Jarvie, Strategy and Performance Manager
Susan MacKay, Revenues and Payment Manager
Liz Shaw, Chief Accountant
Andrew Wyse, Team Leader, Legal Services (Clerk to the Committee)

***

Before the start of business, the Convenor welcomed Mr Andrew Wyse, Legal Team Leader,
as the Clerk to the Regulatory Committee.

***

RA91   APOLOGIES

Apologies for absence were received from Councillor Donald Balsillie, Councillor Bobby
McGill and Councillor Kathleen Martin.

Councillor Les Sharp attended as substitute for Councillor Balsillie and Councillor Graham
Watt attended as substitute for Councillor McGill.

RA92   DECLARATIONS OF INTEREST

None.

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RA93   MINUTES OF MEETINGS

(i)   RESOURCES AND AUDIT COMMITTEE - 11 MARCH 2014

The minutes of the meeting of the Resources and Audit Committee meeting held on Tuesday 11 March 2014 were submitted for approval.

The Clerk to the Committee pointed out an error on page 9 of the minutes:

RA.85 Council Financial Performance 2013/14 (Decision (i))
Decision (1) To be amended to read "the Committee agreed unanimously to note the forecast general fund revenue *underspend* for the year of £0.251m", and not 'overspend' as stated in the minutes. The Clerk advised that this was correctly stated in the report to the Committee.

Decision

Subject to the above amendment, the minutes of the meeting held on Tuesday 11 March 2014 were agreed as a correct record and signed by the Convenor.

(ii)   RESOURCES AND AUDIT SUB COMMITTEE - 19 FEBRUARY 2014

The minutes of the meeting of the Resources and Audit Sub Committee meeting held on Wednesday 19 February 2014 were submitted for approval.

Decision

The minutes of the meeting of the Resources and Audit Sub Committee meeting held on Wednesday 19 February 2014 were agreed as a correct record and signed by the Convenor.

**RA94   ANNUAL REPORT 2013/14 - FUNDING TO VOLUNTARY
               ORGANISATIONS**

A report which provided the Committee with an overview of funding to voluntary organisations during 2013/14 was submitted by the Strategy and Performance Manager.

A recent review of funding to voluntary organisations and incorporation in the 2014/15 budget process had enabled the Council to determine which organisations it funds and why, in line with Accounts Commission guidance.

Motion

That the Committee agrees the recommendations set out in the report.

Moved by Councillor Archie Drummond. Seconded by Councillor Les Sharp.

Decision

Having commented on and challenged the report, the Committee agreed to note the information set out in the Annual Report for 2013/14 Funding to Voluntary Organisations and the actions taken to manage this funding effectively .

RA95   COUNCIL FINANCIAL PERFORMANCE 2013/14

A paper which provided an update on the financial performance of the Council to date in respect of both revenue and capital spend for the current financial year 2013/14 was submitted by the Chief Accountant. Projected outturns up to March 2014 were set out in the report.

Motion

That the Committee agrees the recommendations set out in the report.

Moved by Councillor Archie Drummond. Seconded by Councillor Gary Womersley.

Decision

Having commented on and challenged the report, the Committee agreed to note the following:

(i)   the forecast general fund revenue underspend for the year of £0.906m

(ii)   the progress on delivering the planned savings in the year

(iii)   the overspend of £0.323m forecast on the Housing Revenue Account

(iv)   the underspend on General Services capital of £7.607m of which £2.636m are savings in delivery of the programme with the remainder carried forward to 2014/15

(v)   the underspend on HRA Capital of £1.608m of which £0.409m are savings in delivery of the programme with the remainder carried forward to 2014/15

The Committee also agreed that a report on actuality in terms of practice and governance in accounting in DLO to HRA transactions and to encompass waste management, be submitted to a the Resources and Audit Committee before the end of the calendar year.

Action

Director of Finance and Corporate Services

RA96   RISK BASED SCRUTINY REVIEWS - PROGRESS UPDATE

A report which reported on progress on the risk based scrutiny reviews on Supporting Vulnerable People and Families in Clackmannanshire and Community Engagement in Clackmannanshire was submitted by the Strategy and Performance Manager.

At its meeting on 5 December 2013, the Committee received the findings of two reviews - Supporting Vulnerable People and Families in Clackmannanshire and Community Engagement - both of which identified a number of areas for improvement and made a number or recommendations.

Motion

That the Committee agrees the recommendations set out in the report.

Moved by Councillor Archie Drummond. Seconded by Councillor Les Sharp.

Decision

Having commented on and challenged the report, the Committee agreed to note the progress on the risk based scrutiny reviews on Supporting Vulnerable People and Families in Clackmannanshire and Community Engagement in Clackmannanshire.

RA97　　　　**INTERNAL AUDIT AND FRAUD PROGRESS REPORT**

A report in accordance with the Financial Regulations which provided the Committee with an update on work completed from the Internal Audit and Fraud Annual Plan 2013/14 approved by the Resources and Audit Committee on 2 May 2013, was submitted by the Internal Audit and Fraud Team Leader.

Motion

That the Committee agrees the recommendations set out in the report.

Moved by Councillor Archie Drummond. Seconded by Councillor Les Sharp.

Decision

Having commented on and challenged the report, the Committee agreed to note the progress made on the Internal Audit and Fraud Annual Plan 2013/14 and also progress of work underway to implement the 2014/15 Plan.

RA98　　　　**INTERNAL AUDIT AND FRAUD ANNUAL REPORT**

A report which provided the annual Internal Audit opinion on the Council's internal control environment as required by Clackmannanshire Council Financial Regulations and Performance Standard 2450 of the Public Sector Internal Audit Standards (PSIAS) was submitted by the Internal Audit and Fraud Team Leader. The report also outlined internal audit and counter fraud work undertaken by the Internal Audit and Fraud Team.

The Internal Audit and Fraud Team Leader pointed out 2 typographical errors in the Annual Report submitted as Appendix 1 to the report:

Page 120 - Paragraph 3.3 - to be amended to read:

"It should be noted that for the 12 final reports issued to date, Internal Audit provided significant assurance for 6 reviews and reasonable assurance for 4."

Page 123 - Paragraph 4.4 - to be amended to read:

"Internal Audit measures its performance against a set of *four* Key Performance Indicators (KPI)."

Motion

That the Committee agrees the recommendations set out in the report.

Moved by Councillor Archie Drummond. Seconded by Councillor Craig Holden.

Decision

Having commented on and challenged the report and the opinion contained therein, the Committee agreed to note the information set out in the report.

RA99   DIRECTOR OF FINANCE PERFORMANCE BENCHMARKING 2012/13

A report which provided the Committee with an update on performance of the financial operations of the Council, as benchmarked through the Director of Finance performance indicators was submitted by the Revenues and Payments Manager.

The Director of Finance Key Performance Indicators (DofF KPIs) are collected and collated by the Chartered Institute of Public Finance and Accountancy (CIPFA) during the summer with benchmarked results available for all members at the end of each calendar year.

The Revenues and Payments Manager pointed out that paragraph 5.5 of Appendix D (page 143) should be completed to read as follows:

"The costs for the Payments Team Leader were reflected within the costs of collection, the cost of the Payments team and the cost of the Payroll Team which reflected the line management and leadership role that they brought during their term in post."

Motion

That Committee agrees the recommendations set out in the report.

Moved by Councillor Archie Drummond. Seconded by Councillor Les Sharp.

Decision

Having commented on and challenged the outcomes set out in the report, the Committee agreed to note the review of financial operational performance for 2012/13.

ENDS 11.50 am

CLACKMANNANSHIRE COUNCIL

Report to:	**Resources & Audit Committee**

Date of Meeting:	**19th June 2014**

Subject:	**2013/14 Year End Risk Report**

Report by:	**Head of Strategy & Customer Services**

1.0 Purpose

1.1. This report provides Resources & Audit Committee with an update on significant risks facing the Council, together with the Internal Controls already in place and, where appropriate, further planned actions to reduce risks to the Council.

2.0 Recommendations

2.1. It is recommended that the Committee reviews the report in **Appendix A** and **Appendix B**, then comments and challenges, as appropriate, and notes.

3.0 Considerations

3.1. **Appendix A** outlines the purpose of risk management and the methodology followed to review the corporate risk log. A summary of changes to the log in the last 6 months (to 31st Mar 2014) is then provided:

- There are currently 4 red risks, 5 amber risks and 3 green risks;
- 9 of these risks are being Treated and 3 must be Tolerated;
- The rating (or score) of 2 risks increased, 6 remained the same, 2 decreased, 1 new risk was added and 1 risk will be removed.

3.2. The full corporate risk log is then provided, showing details of previous and future work to mitigate the risks, where this is possible.

3.3. **Appendix B** contains the corporate risk analysis and reporting guidelines (approved by Resources & Audit Committee in December 2012), including the frequency with which corporate and service risks should be reported to the respective Committees.

4.0 Sustainability Implications

4.1. There are no direct sustainability implications arising from this report.

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

5.5.   There are no direct staffing implications arising from this report.

6.0   Exempt Reports

6.1.   Is this report exempt?   Yes ☐ (please detail the reasons for exemption below)   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	☑
Our communities are more cohesive and inclusive	☑
People are better skilled, trained and ready for learning and employment	☑
Our communities are safer	☑
Vulnerable people and families are supported	☑
Substance misuse and its effects are reduced	☑
Health is improving and health inequalities are reducing	☑
The environment is protected and enhanced for all	☑
The Council is effective, efficient and recognised for excellence	☑

(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?
Yes ☐   No ☑

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 A - Corporate Risk Log

Appendix B - Risk Analysis & Reporting

11.0 Background Papers

11.1 Have you used other documents to compile your report? (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)

Yes ☐ (please list the documents below) No ☑

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Judi Richardson	Performance & Information Adviser	2105

Approved by

NAME	DESIGNATION	SIGNATURE
Stuart Crickmar	Head of Strategy & Customer Services	
Nikki Bridle	Director of Finance & Corporate Services	

Appendix A - Corporate Risk Log

Clackmannanshire Council

Purpose & Methodology

The Council produces many plans for how we will deliver services, but these can only be realistic if we also consider what might stop us achieving our goals. The Council must consider risks to the delivery of corporate objectives and ensure controls are in place to monitor and/or mitigate each risk through a systematic risk management process. Corporate risks are reported six-monthly to Resources & Audit Committee and service risks are reported quarterly to service Committees. This appendix summarises changes to, and details of, corporate risks at the end of the 2013/14 financial year.

In some cases, despite mitigating action, the rating has remained high or increased as further information becomes available. In others, mitigating action or other factors have reduced the risk. Our approach for managing risks is either 'Treat' (action is required) or 'Tolerate' (actions within our control are complete and plans in place to manage the risk, should it materialise). Risks with implications for more than half the Council, or with significant implications for a specific service, are escalated to the corporate log where they are monitored until their significance reduces.

Each review involves gathering information from internal and external sources and forums. Meetings are then held with Corporate and Service Management Teams, including:

- Reviewing existing corporate and service risks with their owners;
- Peer-reviewing the entire corporate log (including with officers in areas not directly affected by particular risks) to gain wider perspectives and discuss 'knock-on' effects;
- Assessing whether issues from the review of information sources should be added;
- Asking for suggestions of potential new risks which are, again, peer-reviewed.

As part of the 2013/14 end of year review, a number of potential new risks were raised but agreed to be inappropriate for inclusion at this time. Risks identified through the governance assurance process are listed in risk 33 (Major Governance Failure), but the most significant areas are also included as separate risks to increase awareness and scrutiny. The 2014/15 internal and external audit plans highlight various areas for investigation, referenced in the relevant risks in the log. There was also discussion around the Accounts Commission report 'An Overview of Local Government in Scotland' (27-Mar-14).
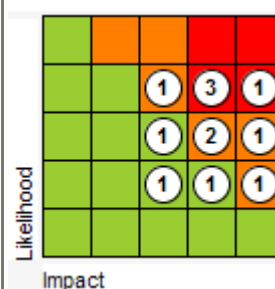
The integrity of the Convention of Scottish Local Authorities was considered, as were the implications of the Independence Referendum, or extended devolved powers. These issues, among others, have been taken into account in defining the risks regarding reactive and proactive change management. Any specific risks which arise from these areas will be considered in future reviews of the Corporate Risk Log. Corporate risk management approaches and training, as well as the format and content of reports to the Resources & Audit Committee will continue to be developed on an ongoing basis.

Summary of Changes

| | Distribution of Ratings |

At the end of the 2013/14 financial year (out of a total of 12 risks), 4 are now red, 5 are amber and 3 are green. 9 risks are being Treated and 3 must be Tolerated.

- The rating of 2 risks increased: Partnerships & Relationships, and Information & Knowledge Management,
- The rating of 6 risks remained the same: Financial Resilience, Changing Demographics, Climate Change, Harm to Child(ren), Governance, and Health Emergency,
- The rating of 2 risks decreased: Welfare Reform, and Industrial Unrest,
- 1 risk was newly added to the log: Organisational Change, and
- 1 risk will be removed from the log (pending approval): Influence & Accountability (which will reduce totals above for green and Tolerate).

Abbreviations:

ALL	Allocations	CAR	Community & Regulatory Services	CoSLA	Convention of Scottish Local Authorities
COU	Council	CPN	Corporate Plan	CPP	Community Planning Partnership
CRR	Corporate Risk Register	CUS	Customer Services	DEV	Development Services
EDU	Education	GOV	Governance	HCS	Housing & Community Safety
HMO	Housing Management Operations	IMP	Improvement Plans	MCB	Making Clackmannanshire Better
NHS	National Health Service	RIS	Risk Mitigation Actions	SAP	Strategy & Performance
SBP	Service Business Plan	SCCS	Sustainability & Climate Change Strategy	SCH	Schools
SCS	Strategy & Customer Services	SEPA	Scottish Environmental Protection Agency	SLA	Service Level Agreement
SOS	Social Services	SSS	Shared Social Services	SUS	Support Services
TEM	Tenancy Management				

Approach Treat							

Code	COU CRR 008	**Priority Outcomes**	9. The Council is efficient, effective and recognised for excellence	**Status**	🛑	**Change Since Last Review**	▬
Title	Insufficient Financial Resilience						
Owner	Director of Finance & Corporate Services			**Current Rating**	20	**Target Rating**	20

Description	The Council does not have sufficient funds to meet its liabilities and cannot meet essential service demands or customer expectations, or respond to external agendas.
Potential Effect	Reputational damage, legal implications and severe and extended loss of service provision. Possibility of Alliance partners also being affected contributes to the potential impact, given the interdependencies.

Related Actions	Implement budget efficiencies	CAR CAR 004	**Internal Controls**	Budget Challenge & Financial Monitoring
	Ensure necessary service efficiencies/budget reductions are achieved	SCS SCS 022		Invest to Save Principles & Processes
	Complete review of financial regulations and proposals for any amendments	SUS SUS 001		Making Clackmannanshire Better Programme

Latest Note	At Mar-14 Council reserves are £*m, however, funding gap of £*m forecast for the period to 2017/18. Budget Strategy refocused and Budget Challenge sessions review progress. Reviews of procurement, priorities, performance and service delivery models will be required to establish a sustainable cost base.
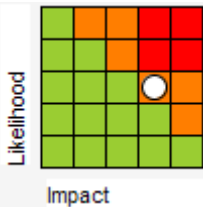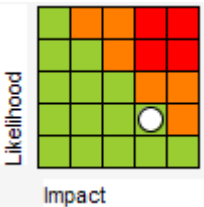
Code	COU CRR 032	**Priority Outcomes**	1. The area has a positive image and attracts people and businesses; 5. Vulnerable people and families are supported	**Status**	🛑	**Change Since Last Review**	D
Title	Council & Community Impact of Welfare Reform						
Owner	Head of Housing & Community Safety			**Current Rating**	16	**Target Rating**	16

Description	The welfare reform agenda increases deprivation in the area, removes between £8 million and £10 million from the local economy and requires the Council to provide additional services and support due to a national priority of reducing welfare expenditure.
Potential Effect	Potential reversal of efforts to reduce deprivation and improve economic development in the area, as well as reputational, budget and staffing implications of providing new services (the impact of the transfer to Universal Credit cannot yet be quantified).

Related Actions	Review tenant rent levels for different types and sizes of properties, in partnership with Revenues Services.	HCS SBP 018	**Internal Controls**	Welfare Reform Working Group
	Implement new Allocations Policy	HMO ALL 002		Crisis & Community Grants
	Implement risk assessment and early intervention framework for those at risk of tenancy failure.	HMO TEM 002		Housing Options Service

Latest Note	In addition to the Clacks Works and Housing Options services, a multi-agency group is producing plans and providing information to staff, politicians and local groups, and advising CoSLA and the Scottish Government. Continued funding has been secured, there has been a lower than expected uptake in areas such as Discretionary Housing Payments, and predicted difficulties with rent increase inflation is now likely to be less severe than expected.

🟢 Low risk - 9 or below   🔺 Medium risk - 10 to 15   🛑 High risk - 16 or above | Rating has increased   ▬ Rating is consistent   D Rating has decreased   N Newly added   R Remove from log
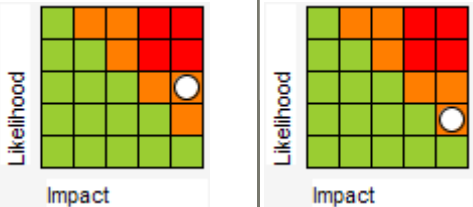
Code	COU CRR 009	**Priority Outcomes**	9. The Council is efficient, effective and recognised for excellence	Status		**Change Since Last Review**	I
Title	Poor Information & Knowledge Management						
Owner	Director of Finance & Corporate Services			**Current Rating**	16	**Target Rating**	15

Description	Organisational information and knowledge are not effectively managed due to poor information sharing, records and absence management and succession planning, increased dependence on unstable IT systems and unrecorded knowledge held by staff members.
Potential Effect	Increased difficulty and time to access information and loss of tacit information and knowledge when staff leave or are absent, resulting in duplication or non-completion of (possibly statutory) duties. Loss of productivity when systems do not operate effectively, causing frustration and impact on staff morale.

Related Actions	Gain council approval and Implement the revised People Strategy to support MCB programme	SCS SAP 019	**Internal Controls**	People Strategy
				Information Management Strategy
	Gain council approval and Implement the revised Communications & Marketing Strategy to support Making Clackmannanshire Better	SCS SAP 020		Information & Communication Technology Strategy

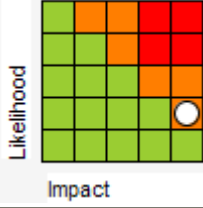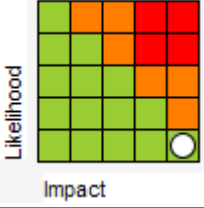| **Latest Note**	Assessment of adherence to guidance on the iDox document management system and retention schedule carried out. Work ongoing in the areas of Freedom of Information and Data Protection, and Business Continuity Plans being revised in light of move to Kilncraigs. Revised Information Management, ICT, and People Strategies have been developed and recommendations provided by Internal Audit.

Code	COU CRR 028	**Priority Outcomes**	5. Vulnerable people and families are supported; 9. The Council is efficient, effective and recognised for excellence	Status		**Change Since Last Review**	I
Title	Mis-management of Partnerships & Relationships						
Owner	Chief Executive			**Current Rating**	16	**Target Rating**	12

Description	Failure to effectively manage partnerships and relationships due to a lack of agreement on or articulation of a clear purpose, goals or delivery model, or resource-sharing or performance management arrangements. Particular risk to major partnerships, such as Shared Services with Stirling Council and Health & Social Care Integration.
Potential Effect	Reduced momentum for further integration, failure to meet needs or statutory requirements if customer focus lost, with significant consequences for vulnerable groups. Impact on staff morale and productivity, and need for further redesign, recruitment, retraining or retendering if partnerships fail, with financial and reputational implications.

Related Actions	Address the challenges of Social Housing and changes in legislation by promoting efficient and integrated services in and out with the Council	COU CPN 008	**Internal Controls**	Single Outcome Agreement
	Review joint resourcing to maximise impact of collective resources including a review of potential opportunities for co-location of key staff	CPP CPP 005		Service Level Agreements
	Develop a proposal with NHS to lead the service into Health and Social Care integration.	SOS SSS 017		Shared Services Programme Board

Latest Note	Prioritisation of improving outcomes, sharing best practice, achieving efficiencies and clarifying objectives and resource needs. Effective communication plans, Trade Union engagement and options appraisal. Governance processes, Internal Audit and SLA monitoring ensure sound practices are followed. Rating has increased as previously focussed solely on Shared Services, and due to impact of Health & Social Care Integration on budget and workforce profile of Council.

Low risk - 9 or below   Medium risk - 10 to 15   High risk - 16 or above   I Rating has increased   Rating is consistent   D Rating has decreased   N Newly added   R Remove from log

Code	COU CRR 005	**Priority Outcomes**	9. The Council is efficient, effective and recognised for excellence	**Status**	⚠	**Change Since Last Review**	▬
Title	Failure to Respond to Changing Demographics						
Owner	Director of Finance & Corporate Services			**Current Rating**	15	**Target Rating**	10

Description	The Councils fails to appropriately redesign services due to not predicting or acting on predictions of changing needs or behaviours or increasing demand for services, in areas such as the 'ageing population' (including more single-person households) and increasing school roles.
Potential Effect	Inappropriate allocation of resources and assets, misalignment of corporate objectives with customer needs, inability to demonstrate Best Value, and possible financial and reputational consequences of responding to situations that have not been planned for.

Related Actions	Develop a revised Corporate Customer Service Strategy	SCS CUS 002	**Internal Controls**	Customer Service Excellence Preparation/Surveillance
	Gain council approval and Implement the revised Communications & Marketing Strategy to support Making Clackmannanshire Better	SCS SAP 020		Communications Strategy
				Community Engagement Process

Latest Note	Improvements in community engagement and planning and work towards Customer Service Excellence standard ongoing across services, improving availability and accuracy of customer insight, performance and demographic information. Further work required to demonstrate how this informs decisions on service redesign and ensure staff and customers fully aware of why and how changes are being made so that expectations are realistic.
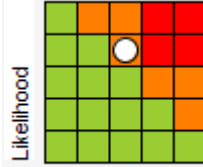
Code	COU CRR 027	**Priority Outcomes**	1. The area has a positive image and attracts people and businesses; 4. Our communities are safer	**Status**	⚠	**Change Since Last Review**	▬
Title	Failure to Adapt to Changing Climate						
Owner	Director of Services to Communities			**Current Rating**	12	**Target Rating**	12

Description	The Council fails to use and develop sustainable practices and/or does not plan effectively for climate change causing extreme weather events, leading to flooding, heat waves, droughts, fires or severe winter weather, of which the Council must manage the consequences.
Potential Effect	Significant service disruption, including to telecoms and roads infrastructure, and damage to property. Staff unable to get to work and increased workload in Emergency Planning, Housing, Roads and Customer Services, with financial, reputational and legal implications, as well as negative impact on local residents and businesses.

Related Actions	Implement Sustainability and Climate Change Strategy.	CAR DEV 009	**Internal Controls**	Forth Valley Local Resilience Partnership
	Include climate change impacts in service risk register guidance.	CAR SCCS 01.2		Sustainability & Climate Change Strategy
				Flood Management Plan

Latest Note	While work has started on climate change adaptation strategy, emerging threat of coastal flooding means risk rating remains consistent. Council is member of various Forth Valley advisory groups and contributes to SEPA's national flood hazard mapping, informing local strategies. Council has flood warning scheme, prioritised watercourse clearance regime, flood page on Clacksweb and provides guidance to developers on considering flood risk.

🟢 Low risk - 9 or below   ⚠ Medium risk - 10 to 15   🔴 High risk - 16 or above   I Rating has increased   ▬ Rating is consistent   D Rating has decreased   N Newly added   R Remove from log

Code	COU CRR 034	Priority Outcomes	9. The Council is efficient, effective and recognised for excellence	Status		Change Since Last Review	N
Title	Insufficient Pace of Organisational Change						
Owner	Chief Executive			Current Rating	12	Target Rating	8

Description	The Council fails to proactively drive the fundamental redesign of services and organisational practices with the speed required to address the funding gap due to ineffective change management
Potential Effect	Inefficient and unsustainable processes and working practices and increasing, rather than mitigating, financial and customer risks. Lack of clarity and focus on statutory and priority areas with disruption to service delivery and harm to vulnerable individuals with associated audit/legal implications and reputational damage.

Related Actions	MCB programme management & development of target operating models - support communication of vision	SCS SAP 010	Internal Controls	Communications Strategy
				People Strategy
	MCB Workstream 1 Making it Happen - Tullibody Pilot	SCS SCS 002		Making Clackmannanshire Better Programme

Latest Note	Senior Managers' Forum briefed on MCB Programme, with workstreams: Making it Happen (the Tullibody Pilot), Focussing on Early Intervention, Developing Integrated & Sustainable Services, Making Best Use of Assets & Resources and Making Our Organisation Stronger. Revised People and Communications Strategies being implemented to support programme and work continues on developing and piloting target operating models.
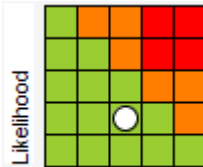
Code	COU CRR 011	Priority Outcomes	5. Vulnerable people and families are supported; 6. Substance misuse and its effects are reduced	Status		Change Since Last Review	—
Title	Harm to Child(ren)						
Owner	Head of Social Services; Head of Education			Current Rating	10	Target Rating	5

Description	A lack of intervention or action by the Council fails to prevent the serious harm of a child/children.
Potential Effect	The effects of the injury or death on the individual, family, friends and staff members, and reputational harm or criminal proceedings, with associated costs, as well as the impact of reputational damage and negative publicity on morale, workforce development and sustainability.

Related Actions	All early years establishments will have suitably qualified staff.	EDU SCH 014	Internal Controls	Corporate Parenting Strategy
	Develop action plan and allocate resources to review operational procedures and guidance	SOS RIS 004		Child Protection Performance & Quality Assurance Framework
	Increased focus on Workforce Planning and Workforce Development	SOS RIS 009		Integrated Children's Services Plan

Latest Note	Significant progress with recruitment reducing employees' caseloads and improving skills and experience. Planning processes more robust, receiving positive comment from Children's reporter and panel members, and better management and increased capacity allows for earlier intervention. Parental substance misuse and domestic violence remain notable issues and are correspondingly prioritised. Further action will be based on findings of Children's Services inspection.

Low risk - 9 or below   Medium risk - 10 to 15   High risk - 16 or above   I Rating has increased   — Rating is consistent   D Rating has decreased   N Newly added   R Remove from log
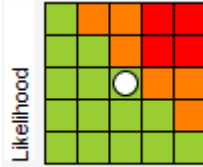
Code	COU CRR 033	Priority Outcomes	9. The Council is efficient, effective and recognised for excellence	Status	✅	Change Since Last Review	⚊
Title	Major Governance Failure						
Owner	Senior Support Services Manager			Current Rating	8	Target Rating	4

Description	A significant failure of compliance with statutory duties due to a lack of awareness or understanding of corporate policies or codes of conduct, or through non-adherence, including through management or elected member override of controls of procedures.
Potential Effect	Significant reputational damage, injury or loss of life, legal action, financial loss or disruption to service delivery.

Related Actions	Governance Improvement Plans across all services	COU GOV IMP	Internal Controls	Scheme of Delegation
				Resources & Audit Committee
				Governance & Audit Processes

Latest Note	Governance and audit processes identify service and corporate improvement actions. Corporate themes: workforce development, business transformation, procurement, roles and responsibilities of elected members and officers, risk management, shared service governance and information management. Further actions and progress in Council restructuring, including reviewing roles and responsibilities will be reported to Resources & Audit Committee.

🟢 Low risk - 9 or below   🔺 Medium risk - 10 to 15   🔴 High risk - 16 or above   I Rating has increased   ⚊ Rating is consistent   D Rating has decreased   N Newly added   R Remove from log

Approach Tolerate

Code	COU CRR 022	**Priority Outcomes**	9. The Council is efficient, effective and recognised for excellence	**Status**		**Change Since Last Review**	-
Title	Public Health Emergency						
Owner	Chief Executive			**Current Rating**	12	**Internal Controls**	
Description	Significant numbers of Council staff and customers become ill due to the occurrence of a public health emergency, such as a flu pandemic.					Business Continuity Plans	
Potential Effect	Depending on the nature of the health emergency, potentially short- and long-term health implications for members of the public and staff absence if either ill themselves or caring for family and/or friends. Substantial disruption to back-office support functions and front-line service provision, including to customer groups already considered vulnerable.					Pandemic Flu Plan	
						Major Incident Operational Procedures	

Code	COU CRR 023	**Priority Outcomes**	9. The Council is efficient, effective and recognised for excellence	**Status**		**Change Since Last Review**	D
Title	Industrial Unrest						
Owner	Chief Executive			**Current Rating**	9	**Internal Controls**	
Description	Industrial action by Council staff (including shared service staff employed by Stirling Council), partners or suppliers arises, normally in relation to local or national budget-related changes to terms and conditions, or restructuring.					Business Continuity Plans	
Potential Effect	Impact on staff morale and productivity with associated impact on service delivery, costs and reputation, as well as significant impact on customers dependent on services. In the case of partner or supplier strike action, we may decide not to complete all aspects of normal service delivery, such as not using certain equipment during a Fire Service strike. Strike action by suppliers, such as utility or fuel providers, may require negotiation with partners to prioritise resource allocation, with service provision reducing or ceasing temporarily in non-priority areas.					Forth Valley Local Resilience Partnership	
						Trade Union Communications Protocol	

Code	COU CRR 029	**Priority Outcomes**	9. The Council is efficient, effective and recognised for excellence	**Status**		**Change Since Last Review**	R
Title	Loss of Local Influence & Accountability						
Owner	Chief Executive			**Current Rating**	6	**Internal Controls**	
Description	The Council is unable to retain the influence that it currently has over how Council, Health, Police and Fire services are delivered locally, and loses local accountability over these services, due to public service reform.					Single Outcome Agreement	
Potential Effect	Loss of autonomy on how services are delivered locally and dilution or reduction of community involvement in service design, with associated reputational damage and potential for services to fail to meet customer needs. As Police and Fire service reforms are embedded and management and reporting structures re-aligned, this risk has not materialised as expected and will be demoted from the corporate log to any relevant service logs if concerns still exist in specific service areas.					Resources & Audit Committee	
						Management Structures/ Restructuring	

Low risk - 9 or below   Medium risk - 10 to 15   High risk - 16 or above   I Rating has increased   - Rating is consistent   D Rating has decreased   N Newly added   R Remove from log

23

Low risk - 9 or below   Medium risk - 10 to 15   High risk - 16 or above   I Rating has increased   Rating is consistent   D Rating has decreased   N Newly added   R Remove from log

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Appendix B - Risk Analysis & Reporting Guidelines

Analysing a Risk

Risk management is a key planning tool that is an integral component of corporate and service business planning. It involves, on at least an annual basis, identifying things that could stop the Council or Service from delivering on its objectives, so they can be systematically managed and taken into account when making decisions. The risk management cycle is outlined in the flowchart below. Risks must focus on specific issues and be as explicit as possible about their impact on the Council, though this is often difficult when speculating about hypothetical scenarios. Risk registers don't need infinite detail on every possible thing that could go wrong, but they should provide a clear and succinct view of the main issues. The four areas to be analysed in relation to a risk are:

Cause — The source or trigger of a risk. Risks generally originate from wider issues in the internal or external environment, often outwith our control. Examples are: climate change, the aging population, legislative changes or issues relating to the nature and culture of the organisation. Note: the cause is **not the key focus of the risk**.

Event — How the cause specifically affects the Council. This may be a single point in time, such as Council staff not delivering services (cause: industrial action), or it may develop more gradually, such as inability to meet increasing demand for services (cause: the effects of the financial crisis on local citizens). Several events may arise from the same cause (e.g. the financial crisis may also cause budget overspend or reduced staff numbers) each of which should be analysed and recorded separately.

Consequence — The result of the event occurring. This should be more specific than 'inability to deliver services' as this is the fundamental consequence of any risk to the Council. As much detail as possible should be given of the stakeholders and services affected, and the potential extent of reputational, legal or financial implications.

Approach — Whether the Council should <u>treat</u> or <u>tolerate</u> an identified risk. This decision is closely related to cause and event. If the cause of the risk is outwith the Council's control, e.g. pandemic flu or climate change, treat is unlikely to be a realistic prospect. In such circumstances the risk would be tolerated, though contingencies could be considered within business continuity arrangements. If the cause or trigger is considered within the Council's control, e.g. regulatory criticism or customer dissatisfaction, then action should be considered to treat the risk.

Evaluating a Risk

Once the nature of the risk has been analysed, as many elements as possible should be clarified, or even quantified. While evaluation and scoring are an approximation and can't be determined using entirely scientific methods, they should take into account as much management, organisational and environmental information as possible. Risk evaluation should include looking at:

- **The past** - whether it's happened before, what caused it, and whether it was managed effectively.
- **The present** - whether similar circumstances are developing, and how others are managing it,
- **The future** - whether forecasts and projections suggest it will happen again in the near future,
- **Organisational changes** - whether changes to leadership, policies or resources affect the risk,
- **External changes** - whether PESTEL[1] factors will influence how the risk should be managed,
- **Relevant actions** - how Council projects and initiatives increase or decrease the risk,
- **Performance indicators** - to tell us if the risk's occurring, or if we're managing it effectively.

Perceptions of risk can vary substantially and personal experience or a widely publicised example can make a risk appear more significant. Similarly, if press coverage of a certain issue reduces, it may imply that the risk has reduced (such as reduced reporting on the flu pandemic, despite this still being a significant threat). Different individuals may also have different perceptions of risk. It's therefore important to document key information about the risk, including a justification of the scoring and any supporting statistics and facts. Peer reviews are also useful for challenging the risk evaluation to ensure that it's robust and not purely based on someone's subjective impression of an issue.

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[1] Political, Economic, Social, Technological, Environmental and Legislative.

Scoring a Risk

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. The Original rating does **not** take into account mitigating actions, the Current rating takes into account completed actions, and the Target rating takes into account actions planned to take place before the next assessment (see page 3).

Likelihood

Evaluation information should help in assessing how likely it is that the risk will happen. This is only ever a 'point in time' judgement as circumstances can change significantly between assessments.

1. Unlikely   There is little evidence that the risk is likely to occur
2. Possible   There is a fairly low chance of the risk occurring
3. Quite Possible   There is a reasonable chance of the risk occurring
4. Likely   There is a strong chance of the risk occurring
5. Very Likely   It is fairly certain that the risk will occur, or it has already occurred

Impact

This is an assessment of the extent of the risk's impact. It's highly unlikely that the impact will involve only one of these elements, so the more elements involved, the greater the impact score will be.

Score	Financial [2]	Reputational	Harm	Disturbance	Audit/Legal
1. Not material	Less than 0.01% of budget	Managed incident, no customer impact but in the public domain	Minor injury	Minor disruption to one service	Query from audit body or mention in Shared Risk Assessment
2. Material	0.01% - 0.5% of budget	Local media interest and/or customer complaint	Multiple minor injuries or serious injury	Minor disruption to multiple services	Negative audit/inspection report
3. Serious	0.5% - 5% of budget	Regional (central Scotland) media interest and/or multiple customer complaints	Multiple serious injuries	Serious disruption to multiple services and/or some loss of service	Follow-up action or repeated negative audit/inspection reports
4. Very serious	5% - 10% of budget	National media interest and/or serious loss of confidence	Death	Major disruption and/or loss of multiple services	Legal action
5. Catastrophic	Over 10% of budget	Major national media interest	Multiple deaths	Extended loss of service	Legal action from multiple sources

Overall Risk Rating (or Score)

The result of multiplying the likelihood and impact scores is the risk rating (or the risk score). This example shows an impact of 4 and a likelihood of 3, so 4 x 3 = 12, therefore the rating is 12 and the risk is amber. As risk registers need to focus on the most significant risks, it's common for there to be more amber and red risks than green. The highest possible rating is 5 x 5 = 25.

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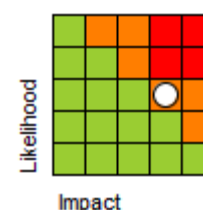
[2] The total service expenditure budget for 2012-13 is around £104m so for corporate risks the financial values are roughly: 0.01% = £10,000; 0.5% = £500,000; 5% = £5m; 10% = £10m. The percentages above should be used to calculate financial values for service logs based on the service budget.

The Risk Management Cycle

Service Management Teams	Review risks annually as part of Business Planning → Service register updated, actions assigned in Business Plan → Considered monthly, risks identified or removed → Corporate Impact*?	No
Emergency Planning Officer	Check alignment with Business Continuity Plans → Develop Annual Statement of Preparedness	
Corporate Management Team	Review risks annually as part of Corporate Planning → Corporate register updated, actions assigned → Considered quarterly, risks identified or removed	Yes
Committees	Corporate risks reported 6-monthly to Resources & Audit	Service risks reported quarterly to Service Committee

*Risks should be considered for inclusion on the corporate log if there is a 'corporate impact': risks potentially affecting more than half of Council services (4 of the 7 services), or potentially significant risks for less than half of the Council (red risks on a service register).

Recording a Risk

When defining or reviewing risks, the following areas should be recorded:

ID (or Code)	The code used to refer to a risk, which will remain the same regardless of changes to the details or scoring (this does not indicate the risk's severity). Codes for the corporate risk register are assigned by the Performance & Information Adviser. Coding for service registers should be discussed with the appropriate superuser.
Title	A **brief** summary of the nature of the risk.
Description	Key details of the risk including the **cause** and **event** (see page 1). While the cause of a risk may be external to the Council, it is the event (the way the Council is directly affected) that a risk should focus on.
Potential Effect	The possible **consequences** of the risk materialising (see page 1). This may refer to the groups of staff, customers or other stakeholders affected, the specific effects on particular areas of service provision, and potential extent of reputational, legal or financial implications.
Approach	Whether the risk is to be Tolerated or Treated.
Related Links	The decision to Treat a risk should stimulate an action or actions. Actions should be captured in business plans, linked to risks, and monitored via established processes.
Internal Controls	Existing strategies, processes and arrangements that are relevant to the risk should be selected from the Internal Controls list (superusers can add items to this list).
Latest Note	To be completed where the approach is Treat. Progress made in mitigating the risk, including planned or completed actions, and how this has/will impact the risk rating. Relevant statistics or performance information should also be included.
Rating (or Score)	The score of a risk's severity, calculated by multiplying the likelihood of it occurring by the impact of it occurring (see page 2). **Original** What the rating would be if we had no controls in place. Though this doesn't appear in some reports, it can be a useful starting point for assessing the Current rating. This is not just the first score, but the 'gross' score if we had nothing in place to mitigate the risk. **Current** The rating which reflects the present position, taking into account actions that have already been completed and external factors. **Target** The rating we aim to achieve by the next review of the register (quarterly or 6-monthly), taking into account planned actions and external factors.
Managed by	The owner, or person responsible for managing the risk. For the corporate register, this will be the Chief Executive, Director or Head of Service, depending on the service areas impacted by/responsible for the risk. It should be ensured that service owners have appropriate authority to manage the risk effectively.
Status	Whether the risk is currently grouped as red, amber or green, depending on its 'Current Rating' (see diagram on page 2): 🔴 Red - risks with a current rating of 16 and above, 🔺 Amber - risks with a current rating from 10 to 15, ✅ Green - risks with a current rating of 9 or below.
Change	A symbol indicating how the rating's changed since the last review. Sometimes mitigating actions are cancelled out by a worsening external situation, so ratings may remain the same despite our efforts. (There's currently no Covalent field to record this in so the symbol's added once the report's exported into Word). **I** Increased rating (more likely to occur or a greater impact) **D** Decreased rating (less likely to occur or a lesser impact) ▬ Consistent rating (remaining the same) **C** Corrected rating (the previous rating is judged to have been inaccurate) **N** The risk has been newly added to the register **R** The risk should be removed from the register

CLACKMANNANSHIRE COUNCIL

Report to Resources and Audit Committee

Date of Meeting: 19 June 2014

Subject: Annual Complaints Report 2013/14

Report by: Customer Services Manager

1.0   Purpose

1.1.   The purpose of this report is to update Committee on the volume and nature of customer complaints recorded in 2013/14, key performance information related to the handling of complaints and areas for further improvement.

2.0   Recommendations

2.1.   It is recommended that Committee note, comment on and challenge:

   a) the volume and nature of complaints recorded in financial year 2013/14, including comparisons with the previous year, and

   b) ongoing improvements in the way complaints are recorded, reported and being used to drive improvement and customer satisfaction.

3.0   Background

3.1.   A new Complaints Handling Procedure (CHP) was introduced in late September 2012, in line with national guidelines set out by the Scottish Public Services Ombudsman (SPSO) to help simplify, standardise and improve complaints handling across Scottish local government.

3.2.   A key driver for the new system was to reduce the significant resource and hence cost in dealing with complaints, as part of wider Public Sector Reform. The model CHP aims to resolve more complaints at source, learn more from customer feedback and use feedback to improve service delivery.

3.3.   Clackmannanshire Council was assessed as 'Fully Compliant' with the model CHP and officers have continued to work with SPSO colleagues throughout this year to deliver further improvements.

3.4.   Areas for improvement highlighted in last year's annual report have been taken forward with individual council services, including the provision of additional support and training to front line staff.

3.5. Council services are required to demonstrate that they analyse their complaints data to identify trends, patterns and opportunities for service improvement. Additionally, councils are expected to publish externally the outcomes of complaints by, for example, using case studies and examples, typically through a "You Said, We Did" approach. Quarterly reports are also published on ClacksWeb about how well we are performing in handling complaints.

3.6. A slightly different nationally agreed system exists for social services complaints whereby complainants dissatisfied with the stage 2 response can request an appeal be heard by a Complaints Review Committee.

4.0   Progress to date

4.1. A total of 173 complaints were logged in the complaints database in 2013/14 (compared to 152 in 2012/13).

4.2. These are broken down further in Appendix 1 by service area, category of complaint, number dealt with at stage 1 and stage 2, percentage resolved within target timescale and number upheld/not upheld/partially upheld.

4.3. Key points of note from this year's performance data are:

- 151 out of 173 (87%) were resolved at Stage 1 (93% in 2012/13).

- 79% of Stage 1 complaints were resolved within the target time of 5 days (74% in 2012/13).

- 22 complaints were passed to Stage 2 for investigation; 17 out of the 22 (77%) were responded to within the target time of 20 days (67% in 2012/13).

- 86 out of the 173 complaints were either upheld or partially upheld (50%) - compared to 51% in 2012/13.

- The main reason for complaints was about aspects of Service Provision (45%), then Employee Issue/Attitude (16%). (Main reason in 2012/13 was quality of service (59%), then employee issue/attitude (18%).)

- There was a total of 63 positive comments formally recorded in year (59 in 2012/13).

4.4. Customers unhappy with the Council's final response to their complaint can raise the matter with the SPSO and request an investigation. There were a total of 6 complaints raised with SPSO in 2013/14; 3 were not upheld (planning process, restricted contact, composite classes), 1 was partially upheld (planning process) and 2 are ongoing (anti social behaviour, temporary accommodation).

4.5. One complaint was submitted to, and upheld by the Pensions Ombudsman regarding a complaint made by a former employee against a decision made by the Pension Scheme administered by Falkirk. (The Pensions Ombudsman is a non-departmental public body of the Department for Work and Pensions.)

4.6. This is only the second year of the new scheme therefore considered too early to identify any discernible trends, particularly where services are being encouraged to actively improve the recording and hence volume of customer complaints.

5.0 Areas for development

5.1. A number of improvements have been made in the last 12 months, however in line with good practice guidelines produced by SPSO, it is prudent to identify areas for improvement in the coming year:

- There is evidence of some complaints not being recorded on the database, and not being accepted as a justifiable complaint. Services are being actively encouraged to see complaints as a positive opportunity to improve services.

- There is a need for all services to demonstrate that action has been taken to correct things that have gone wrong, typically by publishing case studies and examples of improvements via ClacksWeb.

- There are opportunities to improve the recording of positive feedback received from customers and clients, which should then be shared with staff.

- Whilst there has been an increase in the number of complaints recorded in 2013/14, this should not be seen as a bad thing - many services are actively encouraging the recording of both positive and negative customer feedback and should be encouraged for such an approach, whereas there may be under-reporting in other areas.

- Given the large number of customer interactions processed on a daily basis, the total number of complaints formally recorded is still very small in comparison. (173 complaints out of approximately 500,000 contacts per year equates to 0.03% or approximately 1 in every 3,000 contacts.)

6.0 Conclusions

6.1. The Council's performance in recording and responding to complaints is being routinely monitored using a range of performance indicators.

6.2. Ongoing improvements have been made since the new 2-stage system was introduced in September 2012.

6.3. Year on year comparisons are now being made, and will be made in future to assess trends in complaints handling under the new 2-stage procedure. This will help drive improvements.

6.4. Further improvements in the next year will focus on improving external reporting arrangements.

7.0   Sustainability Implications

7.1.   There are no sustainability implications arising directly from this report.

8.0   Resource Implications

8.1.   There are no financial implications arising directly from this report.

9.0   Exempt Reports

9.1.   Is this report exempt?   No

10.0   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	❐
Our communities are more cohesive and inclusive	❐
People are better skilled, trained and ready for learning and employment	❐
Our communities are safer	❐
Vulnerable people and families are supported	❐
Substance misuse and its effects are reduced	❐
Health is improving and health inequalities are reducing	❐
The environment is protected and enhanced for all	❐
The Council is effective, efficient and recognised for excellence	☑

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

11.0   Equalities Impact

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

12.0   Legality

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

13.0   Appendices

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

Appendix 1 - Annual Complaints Review 2013/14

14.0 Background Papers
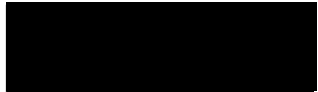
14.1 Have you used other documents to compile your report? (All documents must be
kept available by the author for public inspection for four years from the date of meeting at
which the report is considered)
No

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Brian Forbes	Customer Services Manager	2187

Approved by

NAME	DESIGNATION	SIGNATURE
Stuart Crickmar	Head of Strategy & Customer Services	█████████
Nikki Bridle	Director of Finance & Corporate Services	█████████

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APPENDIX 1 - ANNUAL COMPLAINTS REVIEW 2013/14

1st April 2013 to 31st March 2014:

Full Year 2013/14	S&CS	Support Serv.	Comm & Reg	Facilities	Education	Social Serv.	Members	Council
Total number of complaints	14	10	59	43	32	14	1	**173**
Total stage 1	12	9	54	40	23	12	1	**151**
Stage 1 within timescale	12	6	48	35	15	3	1	**120**
Stage 1 % in timescale	100%	67%	89%	88%	65%	25%	100%	**79%**
Stage 1 Upheld or Partially Upheld	9	6	28	29	10	8	0	**90**
Stage 1 Not Upheld	3	3	26	11	13	4	1	**61**
Total stage 2	2	1	5	3	9	2	0	**22**
Stage 2 within timescale	1	1	4	3	8	0	0	**17**
Stage 2 % within timescale	50%	100%	80%	100%	89%	0%	0%	**77%**
Stage 2 Upheld or Partially Upheld	1	0	1	2	1	1	0	**6**
Stage 2 Not Upheld	1	1	4	1	8	1	0	**16**
Total Number Upheld	2	6	19	17	6	1	0	**51**
Total Number Partially Upheld	7	0	12	5	4	7	0	**35**
Total Number Not Upheld	5	4	28	21	22	6	1	**87**
By Category	S&CS	Support Serv.	Comm & Reg	Facilities	Education	Social Serv.	Members	Council
Education	0	0	0	0	20	0	0	20
Communication	0	2	2	2	1	0	0	7
Employees	7	0	8	7	4	1	0	27
Other	0	1	15	7	0	3	0	26
Policy & Procedure	0	0	7	2	6	0	1	16
Service Provision	7	7	27	25	1	10	0	77
TOTAL	**14**	**10**	**59**	**43**	**32**	**14**	**1**	**173**

Total number of complaints
2013 - 2014

Total Council Complaints
Comparison
2012 - 2013 and 2013 - 2014

CLACKMANNANSHIRE COUNCIL
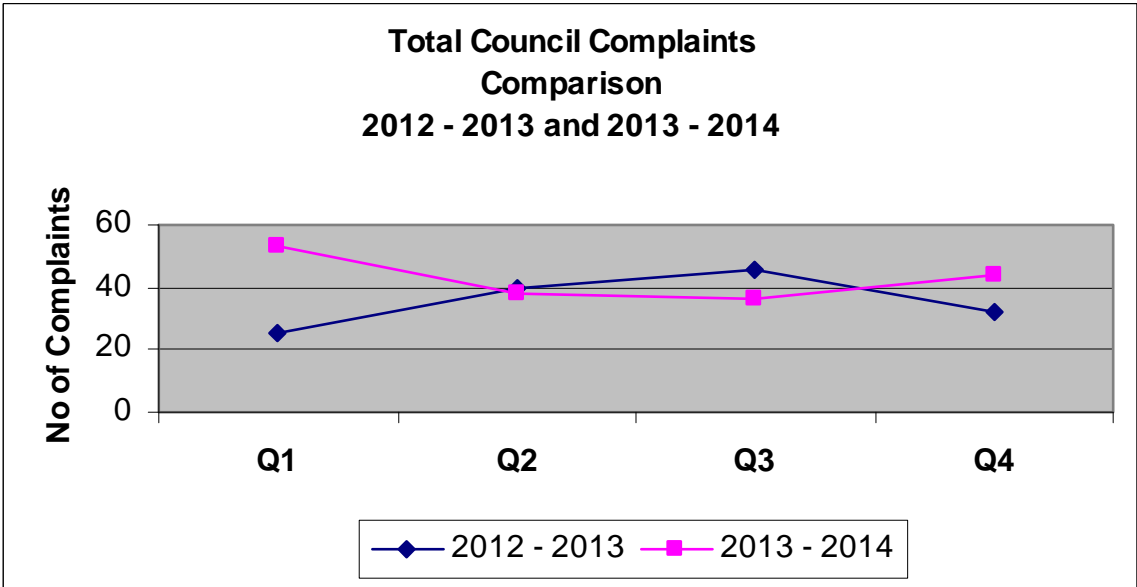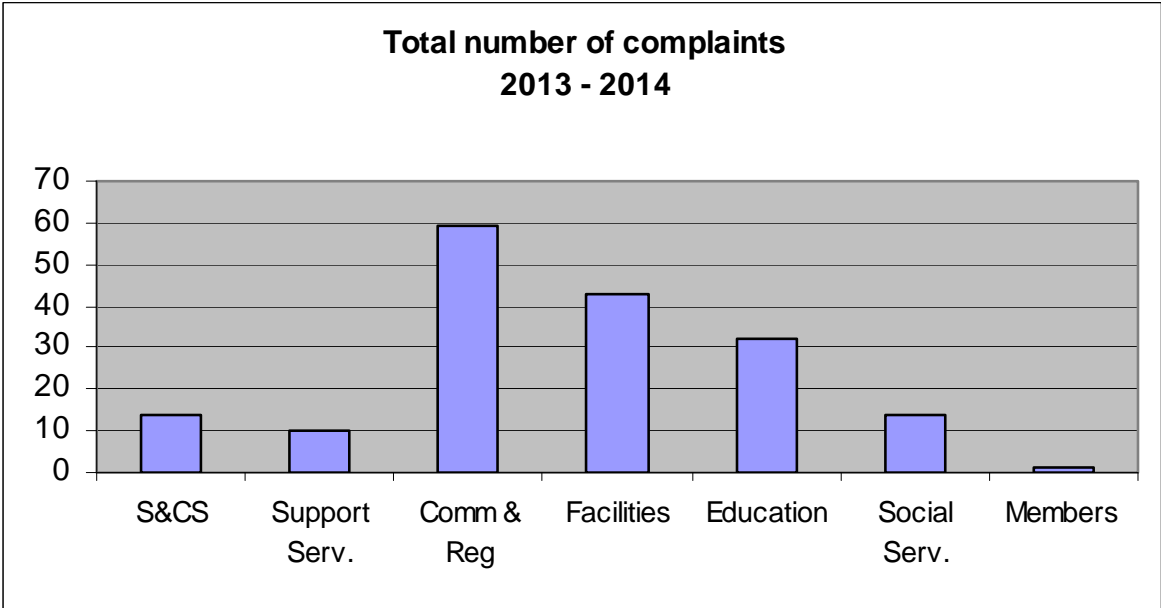
Report to Resources and Audit Committee

Date of Meeting: 19th June 2014

Subject: Employee Survey 2013/14

Report by: Strategy and Performance Manager

1.0 Purpose

1.1. This paper provides an overview of the results from the Council's most recent Employee Survey. Results are provided at corporate level, with service level results included in service Annual Reports and Business Plans.

2.0 Recommendations

2.1. It is recommended that Committee notes the report, commenting and challenging as appropriate.

2.2. It is recommended that Committee notes that further work will be undertaken to continually improve the employee survey following feedback from staff.

3.0 Considerations

3.1. The Council undertook its annual Employee Survey between 25th November 2013 and 17th January 2014. The survey seeks employee perceptions across a range of measures, the majority of which are aligned with the Council's People Strategy. As was the case in previous years, an electronic version of the Survey was available via CONNECT, with hard copy forms distributed to staff without access to email or CONNECT. Hard copies and ballot boxes were also provided within each of the main Council locations, including Kelliebank and Forthbank sites.

3.2. The response rate declined significantly to 20% compared to the 30% achieved last year. A recent people benchmarking exercise identified 35% as a comparable benchmark with other Local Authorities. A range of promotion methods were utilised including posters, banners, regular messages on CONNECT, Grapevine, ECCO message reminders, team meetings and the provision of hard copy forms. Approximately one third of the responses (174) were submitted as hard copy forms. Response rates for individual Services were as follows:

	2012	2013
Social Services	37.6%	15.4%
Education	16.5%	12.8%
Strategy & Customer Services	40.4%	24.5%
Support Services	69.9%	38.1%
Community & Regulatory	51%	54.8%
Facilities Management	15.2%	10.3%
Housing & Community Safety	- -	27.6%

3.3. The low response rate is disappointing however a number of wider factors may have contributed to the decline. The timing of the survey overlapped with the staff budget consultation, and consultation on proposed changes to staff terms and conditions. The office moves to Kilncraigs also meant a period of significant upheaval for staff, with several teams undergoing their moves during the response period for the survey.

3.4. To allow progress to be assessed the same question set has been used for the past three surveys. The only changes for 2013 were the inclusion of two additional questions relating to the Council's climate change and sustainability objectives. The appendices to this report detail the findings at Council and service level.

3.5. Overall the results at a Council level are broadly consistent, with some areas of decline balanced with others improving. Two particular areas that have experienced changes of note are 'Overall Satisfaction' (questions 1 to 6), which saw a marked decline compared to last year, and Learning and Development (questions 17 to 21) which saw a notable improvement. In the case of Learning and Development, recent developments that may have contributed to the improvement include the centralisation of the corporate training budget resulting in a more equitable and strategically managed allocation of training spend across the Council, and improvements to the Council's e-learning system. Though there remains considerable room for improvement, focus on the PRD process, has resulted in almost 70% of staff across the organisation reporting that they had participated in the PRD process, an improvement of 8% on the previous year.

3.6. We are considering the results of the survey, as well as our overall approach to communicating and engaging with staff, through the Making Our Organisation Stronger workstream of Making Clackmannanshire Better. This workstream is reviewing the organisation's entire approach to employee engagement, including working with Trade Unions and employees to identify better ways in which the organisation can communicate, support and seek the views of its staff.

3.7. A more open approach to reporting the results is taking place this year based on staff feedback. Previously only Council level results were reported to staff in Grapevine. This year the full results, broken down to service level will be

reported via a special edition of Grapevine, on CONNECT and via team cascade / meetings.

4.0   Conclusions

4.1.   The 2013 Employee Survey shows mixed performance across our range of people perception measures.   The low response rate is disappointing, however efforts are being made, at service level in business plans, through MCB, and more specifically actions within the People Strategy, to address areas for improvement based on staff feedback, and means by which we can more effectively gather the views and perceptions of our staff.

5.0   Sustainability Implications

5.1.   There are no direct sustainability implications arising from this report.

6.0   Resource Implications

6.1.   *Financial Details*

6.2.   There are no financial implications arising from this report.

6.3.   *Staffing*

6.4.   There are no direct staffing implications arising from this report.

7.0   Exempt Reports

7.1.   Is this report exempt?   Yes ☐ (please detail the reasons for exemption below)   No ☑

8.0   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	☐
Our communities are more cohesive and inclusive	☐
People are better skilled, trained and ready for learning and employment	☐
Our communities are safer	☐
Vulnerable people and families are supported	☐
Substance misuse and its effects are reduced	☐
Health is improving and health inequalities are reducing	☐
The environment is protected and enhanced for all	☐
The Council is effective, efficient and recognised for excellence	☑

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

People Strategy
Communications and Marketing Strategy

9.0   Equalities Impact

9.1   Have you undertaken the required equalities impact assessment to ensure that no groups are adversely affected by the recommendations?
Yes ☐   No ☑ N/A

10.0   Legality

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

11.0   Appendices

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

Appendix A: Detailed Survey Results

12.0   Background Papers

12.1   Have you used other documents to compile your report? (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)
Yes ☐ (please list the documents below) No ☑

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Cherie Jarvie	Strategy and Performance Manager.	

Approved by

NAME	DESIGNATION	SIGNATURE
Stuart Crickmar	Head of Strategy and Customer Services	
Nikki Bridle	Director of Finance and Corporate Services	

Appendix 1: Corporate Results of the 2013 Employee Survey - proportion (**%**) of strongly agree/agree responses: 2010 – 2013

Statement	2010	2011	2012	2013	Change 2012-13	Bench-mark
In general, I am satisfied with my job	59.6	65.2	67.7	58.8	-8.9	71.8
In general, I am satisfied with my terms and conditions	49.9	54.4	60.2	51.5	-8.7	
I am proud to work for the Council	23.3	45.4	49.8	47.4	-2.4	
I intend to continue working for the Council for the foreseeable future	n/a	67.6	71.9	62.9	-9	
I feel that the Council is an equal opportunities employer	61.9	64.9	70.3	62.5	-7.8	
I feel that the Council is an environmentally conscious employer	n/a	n/a	n/a	58.9	New	
I have the right materials, information and support I need to do my work	47.9	58.4	56.4	52.2	-4.2	
I have the right skills to do my job	89.5	89.5	89.7	90.8	1.1	
I can meet the conflicting demands on my time at work	67.7	74.0	71.6	66.7	-4.9	
I know what is expected of me at work	78.3	79.9	77.6	75.1	-2.5	
I am aware of the Council's corporate priorities and how I contribute to these	n/a	n/a	57.6	57.1	-0.5	
I am aware of the Council's sustainability and climate change objectives, and how i contribute to these	n/a	n/a	n/a	40.5	New	
I am clear about how I contribute to my service aims and objectives	72.9	74.5	70.2	67.2	-3	80.5
I receive regular, useful feedback on my performance from my line manager	50.7	53.2	51.4	54.2	2.8	
I feel that I am treated fairly by my line manager	75.9	70.4	71.2	71.6	0.4	
My senior managers demonstrate strong and consistent leadership skills	48.2	46.4	40.7	41.3	0.6	
I have a Performance Review and Development (PRD) meeting with my line manager at least once a year	63.1	66.0	60.8	68.7	7.9	
In the past 12 months, I have had opportunities to learn and develop	56.9	55.8	56.3	62.4	6.1	62.8
My training, learning and development has helped me to do my job better	57.5	54.5	53.3	58.5	5.2	53.5
I feel that everyone in my team has fair and equal access to the development they need to do their job	51.8	49.8	48.7	49.8	1.1	
SENIOR MANAGERS ONLY - I feel that I have received an appropriate level of leadership coaching	53.7	39.2	38.6	44.9	6.3	
I regularly receive recognition or praise for doing good work	33.5	43.8	42.2	43.7	1.5	58.2
I feel that my job is important	77.8	81.9	82.2	81.2	-1.1	
I feel that my working environment is safe	72.7	76.7	77.1	74.6	-2.5	
I get health and safety information which is relevant to me and my work (e.g. fire evacuation procedures, risk assessment, health and safety policies)	69.7	72.8	76.0	73.3	-2.7	
The Council provides good support to help me balance work and home responsibilities	43.4	47.1	44.9	44	-0.9	
I am encouraged to make suggestions to improve the service and/or make it more efficient	56.3	58.2	54.3	57	2.7	66.9
I am regularly allowed to make decisions within the scope of my role	68.3	69.8	69.4	70.5	1.1	
I have contributed to my teams future plans	56.9	61.0	57.4	64.9	7.5	59.2
Statement	2010	2011	2012	2013	Change 2012-13	Bench-mark
At work my opinions seem to count	45.4	54.2	53.5	52.5	-1	
I feel that the level and timing of communication across the Council is good	11.5	22.1	23.0	23.2	0.2	

I feel that communication across my service/team is good	36.2	47.2	44.8	46.3	1.5	55.2
I get all the information I need to do my job	42.5	50.2	49.5	49.2	-0.3	
I get the information I need in a way that suits me (e.g. from your manager, team meetings, cascade briefings etc)	48.7	52.3	51.3	52.7	1.4	
I feel that communication between staff and senior management is effective	28.5	33.8	30.0	32.9	2.9	
There are effective ways to feedback my views to management within my service	46.1	42.5	40.0	41.7	1.7	
I read the staff magazine 'the grapevine' and find it useful	33.1	40.7	38.8	37.7	-1.1	
I am encouraged by my line manager to provide excellent customer services	80.0	73.3	71.3	75	3.7	
I believe that I have the skills, materials and information I need to provide excellent customer service	73.3	76.0	74.0	72.8	-1.2	
Response Rate	18	21	30	20	-10	35

CLACKMANNANSHIRE COUNCIL

Report to Resource and Audit Committee

Date of Meeting: 19 June 2014

Subject: Community Development Fund

Report by: Depute Chief Executive

1.0   Purpose

1.1.   This report sets out details of the application process in respect of the new capital grant scheme, the Community Development Fund, introduced as part of the 2014/15 Budget approval by Council.

2.0   Recommendations

2.1.   The Committee is asked to endorse the application process as set out in this report.

3.0   Considerations

3.1   In February 2014, Council approved the establishment of a new £200k capital Grant Fund for community improvements as part of Making Clackmannanshire Better. The funding aims to incentivise communities to work with the Council to improve the physical environment and community facilities. In particular, the Council is seeking to incentivise organisations to assist in meeting the ambitions set out within MCB of more integrated, accessible services within communities.

3.2   At the Council meeting on 15th May the following the following core principles were approved to underpin the disbursement of funds:

- applications will be considered from legally constituted not for profit organisations with responsibility for the maintenance and operation of halls, other buildings and facilities and /or associated land on behalf of, and for the use by, local communities

- the building, land or facility must be owned by the applicant organisation, be subject to a lease of satisfactory duration e.g. 20 years, or have security of tenure

- the project , if required, must have obtained all appropriate planning or listed building consent prior to application

- applicant organisations must provide copies of the previous two years financial accounts

- the proposed expenditure must meet the definition of qualifying capital expenditure, for instance expenditure on building fabric.

- the applicant organisation should provide a minimum of two quotes, addressed to the organisation applying for funding

- retrospective funding applications will not be considered

The maximum grant available will be 60% of the estimated total cost, up to a maximum of £10,000.

3.3   The report to Council also indicated that the Capital Investment Group would prepare the detailed Guidance notes and application template and submit them to this meeting of the Resources and Audit Committee for endorsement, prior to opening the application process in July.

3.4   The process is a simple application bid process, similar to that previously adopted in respect of the Environmental Improvement Fund. Eligibility is tested by reference to the principles set out at paragraph 3.2. Appendices A, B and C respectively, set out the Information for Applicants, Standard Conditions of Grant and the Community Development Fund Application Form.

3.5   Applications can be made from 30 June 2014 and forms can be accessed via Clacksweb.   Completed   forms   should   be   submitted   to CapitalInvestmentGroup@clacks.gov.uk or by post. A response to all bids will be given within four weeks of receipt of the application to inform applicants whether bids have been successful.

3.6   The CIG will oversee the administration of the bid process and the outcome will be reported to the Enterprise and Environment Committee following the assessment process.

4.0   Sustainability Implications

4.1.   There are no sustainability implications associated with this report

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

5.5. There are no staffing implications associated with this report.

6.0 Exempt Reports

6.1. Is this report exempt?   Yes ☐ (please detail the reasons for exemption below)   No ☑

7.0 Declarations

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

(1) **Our Priorities**

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

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

None

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?
Yes ☐   No ☐   N/A

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 ☐   N/A

10.0 Appendices

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

A   Information for Applicants

B   Standard Conditions of Grant

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C   Application Form

11.0 Background Papers

11.1   Have you used other documents to compile your report? (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)

Yes ☑ (please list the documents below)   No ☐

Budget Strategy Update Report 15 May 2014

Housing Grants, Construction and Regeneration Act 1996

Environmental Improvement Fund application process

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
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Liz Shaw	Accountancy Manager	

Approved by

NAME	DESIGNATION	SIGNATURE
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Elaine McPherson	Chief Executive	▉▉▉▉▉▉▉▉

Clackmannanshire Council Community Development Fund 2014-15

Information for Applicants

In the budget for 2014-15 Clackmannanshire Council agreed to allocate £200,000 for a 'Community Development Fund' that will be available to incentivise communities in Clackmannanshire to work with the Council by undertaking projects that improve the physical environment and facilities for these communities.

The Council are now inviting applications to this Fund for projects that can be started within the current financial year and completed within twelve months of starting.

What kind of projects will the Council fund?

Projects should assist in meeting the ambitions set out in Making Clackmannanshire Better and/or more integrated accessible services for local communities.

The Council can approve capital expenditure aligned to the provisions set out in Section 126 of the Housing Grants, Construction and Regeneration Act1996, which relates to **capital expenditure** incurred in connection with activities which contribute to the regeneration or development of an area.

Activities which contribute to the regeneration or development of an area include, in particular:-

- securing that land and buildings are brought into effective use

- contributing to, or encouraging economic development

- creating an attractive and safe environment

- preventing crime or reducing the fear of crime

- providing or improving housing or social and recreational facilities, for the purpose of encouraging people to live or work in the area or of benefiting people who live there

- providing or improving training, educational facilities or health services for local people

- providing employment for local people

- assisting local people to make use of opportunities for education , training or employment

- benefiting local people who have special needs because of disability or because of there sex or the racial group to which they belong.

There are strict criteria prescribed in terms of what the Council can approve and therefore the following criteria must be met prior to grants being approved.

- Applications will only be considered from legally constituted not for profit organisations with responsibility for the maintenance and operation of halls, other buildings and facilities and or associated land on behalf of , and for the use by local communities.

- Any building or land facility must be owned by the applicant organisation, be subject to a lease of satisfactory duration e.g. 20 years, or have security of tenure

- The project mush have obtained all required planning, building, or other statutory consent prior to submission of the application

- The Applicant organisation must provide copies of the previous two years financial accounts

- the proposed expenditure must meet the definition of qualifying capital expenditure, for instance expenditure on building fabric

- The application organisation should provide a minimum of two quotes, addressed to the organisation applying for funding

In addition, all projects should:

- be driven by the needs and aspirations of the community;

- be located within Clackmannanshire

- be unlikely to be able to proceed without this fund.

- identify contingency measures to ensure that should projects fail in the short, medium or long term any assets are returned to the Community Development Fund to enable support for similar projects in the future.

Who can apply?

Any constituted community, voluntary or not-for-profit organisation, or a partnership of organisations, working with or for the benefit of residents in Clackmannanshire can apply for the fund.

How much money can I apply for?

You can apply for 60% of the total Project Cost up to a maximum of £10,000 including any VAT that you need to pay.

Do I need to have any match funding?

You will require to have secured 40% of the total Project Cost but it is not essential that this is cash funding and may be of value in kind. In kind contributions may count towards funding, at the current Awards for All / Scottish National Heritage rates of up to Unskilled £50 per day, Skilled £150 per day, Professional £350 per day.

Deadlines for applications

The deadline for applications is noon on Friday 29th August. We will notify applicants of the outcome of their application by the end of November.

How do I apply?

Please apply by completing our application form and sending it to Capital Investment Group@clacks.gov.uk or by post to Community Development Fund 2014 -15, c/o Clackmannanshire Council, Kilncraigs, Greenside Street, Alloa, FK10 1EB.

Project applications must be accompanied by all appropriate enclosures or associated paperwork. This includes things like your group constitution, insurance documents, proof of bank accounts, annual audited accounts, designs and pricing/costing of the job, letters of permission from the land owner and all other appropriate statutory consents. Please provide copies rather than originals, although we reserve the right to request to see originals.

You are welcome to include supplementary information in support of your application such as photographs of the project area and letters of support.

How will my application be assessed?

Your application will be scored on points by a panel of staff against a set of criteria agreed by the Council as set out in the Project Scoring Form, which you are encouraged to consider when preparing your application. You are welcome to discuss your project with the staff administering the scheme, who may nominate a case officer with expertise relevant to your project, but decisions by the panel are final. Contact details for the grants team are provided at the end of this information sheet.

How will the grant be paid?

If your application is successful 75% of the grant will be paid in advance of the project starting. The remainder of the grant will be payable once:

(a) the project is successfully completed.

(b) a short report has been provided detailing how the funding has been spent.

If the project is not successfully completed funds may be reclaimed.

What about VAT?

Please note that it is the applicant's responsibility and not the Council's to take VAT into account when preparing costings and claiming payment. The Council will not increase grants in order to cover VAT not identified in the application.

Who do I contact for further information?

You are welcome to discuss your project with the staff administering the scheme who may put you in touch with a case officer with expertise relevant to your project. In the first instance, please contact the Community Development Fund Team on 01259 450 000 or email us at Capital Investment Group@clacks.gov.uk

Clackmannanshire Council

Community Development Fund 2014 - 15
STANDARD CONDITIONS OF GRANT

1. Before commencing any work the applicant must obtain and furnish Clackmannanshire Council with confirmation of, all necessary statutory consents, including where appropriate that of the planning, building standards or roads authority.

2. Before commencing any work the applicant must obtain and furnish Clackmannanshire Council with confirmation of the consent of any other person or body with an interest in the project or site of the project.

3. Unless otherwise agreed in writing by Clackmannanshire Council no grant will be paid for any work that has commenced, or equipment purchased prior to the receipt of the applicant's acceptance of the offer of grant made by Clackmannanshire Council.

4. No grant shall be payable by Clackmannanshire Council in respect of any costs additional to the eligible costs of the project, as stated in the offer of grant, unless the approval of an increase in grant has been secured in writing from Clackmannanshire Council.

5. If the final eligible costs are lower than the original costs supplied in the application then Clackmannanshire Council reserve the right to reduce the grant contribution pro-rata.

6. Unless specified otherwise in the offer of grant, 75% of the grant will be payable by Clackmannanshire Council in advance of the project, with the remainder payable by Clackmannanshire Council only after the project has been completed.

7. Unless otherwise agreed in writing by Clackmannanshire Council all projects must be completed by 30 June 2015

8. Evidence of costs incurred must accompany the claim for final grant payment.

9. The offer of grant is made on the understanding that in the course of making the application, the applicant will have disclosed to Clackmannanshire Council any financial contributions received or expected to for the same purpose. If any such contributions have not been disclosed, Clackmannanshire Council reserve the right to vary, cancel or withdraw the offer of grant.

10. Where the project is part funded by other bodies or organisations the applicant shall provide Clackmannanshire Council with satisfactory evidence that a formal offer of such funding has been accepted.

11. Unless otherwise agreed in writing by Clackmannanshire Council the project shall conform to the plans or the specifications or any other particulars submitted to Clackmannanshire Council. Clackmannanshire Council will send a representative to inspect the project to ensure that it is fully completed in accordance with the said plans or specifications before the final payment of the grant is made. If an inspection is carried out after the final payment has been made and the scheme has not been completed as specified, the grant may be repayable in accordance with condition 14.

12. The applicant shall be responsible for restoring or replacing any facilities or resources which may be lost or damaged through fire, theft, accident, storm or malicious damage and shall take out and keep in force suitable insurance cover obtained from a reputable bank or insurance company.

13. The grant is conditional on the applicant completing the project.

14. The applicant shall be bound to repay Clackmannanshire Council in full or part as the Council sees fit the grant awarded in the event of the following:-
   • Breach of terms and conditions of this offer of grant

- Any written information supplied to Clackmannanshire Council by or on behalf of the application is found to be false or misleading in any material respect whether such written information is provide prior to or after the execution of this offer.

15. Where the amount or any part of it is repayable to Clackmannanshire Council in the terms of conditions 11 & 14 above then:-
    - The amount repayable shall be the total amount of grant paid or part thereof
    - Repayment shall be due immediately

    - Interest shall be payable on the amount of grant payable at the prevailing base lending rate from the date on which repayment is due, until it is made.

16. The applicant shall indemnify Clackmannanshire Council against any actions, claims, demands, costs, expenses or losses incurred by or made against Clackmannanshire Council which arises out of, or in connection with:-
    - The payment of the grant or in consequences of the payment of the grant by Clackmannanshire Council.

    - Any facilities, services or other things created or provided using the grant.

17. Any person authorised by Clackmannanshire Council on its own behalf shall be entitled at all reasonable times to inspect the project for the purpose of ascertaining that the terms and conditions of the grant are being fully complied with.

18. The grant contribution by Clackmannanshire Council Community Development Fund 2014-15 towards the project should be acknowledged in all publicity surrounding the project, or any other reports compiled in connection with the project.

19. Clackmannanshire Council reserve the right to publicise full details of any grant offered including name of recipient, project details and grant offered.

Clackmannanshire Council Community Development Fund 2014 - 15

Application Form

Section 1:Applicant details

1. Name of organisation

2. What type of organisation are you?

Voluntary or community organisation		Third sector	
Social enterprise		Statutory body	
Registered charity		Community Council	
Partnership		Other	

3. Name and address of main contact

Title		Email	
Name		Telephone	
Address		Postcode	

4. Main objectives of your organisation

5. List any halls, other buildings and facilities and/or associated land which you maintain and operate on behalf of or for the use of local communities

6. Does your organisation have a bank or building society account?   Yes/No

(If no, please see Information for Applicants under 'Who can apply')

Name of bank or building society into which we would pay the grant	
Your account name (the organisation name on your statements)	
Account Number	
Sort Code	
Building society roll number (if appropriate)	

Section 2: Project details

7. **Project title**

8.**Project location** – Address, OS grid reference or geographic area

9. **Ownership of the Project Property**

(a) Do you own the Project Property?   YES/NO*

If YES, please attach details of your ownership and confirm that there is no restriction in the title preventing or restricting the implementation of the Project.

(b) If NO, please provide:-

(i)   Name and address of the landowner:
          Name
          Address

(ii) Details of your right to occupy and use the Project Property (e.g. 25 year lease until 2039)

9. **Owner's Permission**

Do you have permission from the owner to carry out the Project?   YES/NO/NOT APPLICABLE*

(Please provide a letter of agreement)

10. Project Description. (Please continue on a separate sheet if necessary - maximum of 500 words)

11. Additional information that you are supplying in support of your application:

Maps		Drawings		Photographs	
Diagrams		Report		Letters of Support	
Other					

12. What do you hope to achieve by your Project?

13. Project outputs (e.g. number of volunteers involved, length of path upgraded, number of trees planted)

14. Please tell us how your project will improve the physical environment and/or the community facilities in your local community area and contribute to the regeneration or development of that local community area

15. How do you know that your project is supported by the local community? What community engagement have you carried out?

16. How do you know that there is a need for this project? (Evidence might include meetings/ petitions, local concerns or tackling a local issue)

17. Who do you expect to benefit from this project?

Section 3: Project finances

18. Project costs

Element of project	Cost
Total cost of project	
Amount requested from Community Development Fund (60% of Project cost up to maximum £10,000, including any VAT payable)	

19. How did you work out these costs? (Please provide any quotes or estimates) Please identify in kind contributions. Volunteer time can be costed at up to Unskilled £50 per day, Skilled £150 per day, Professional £350 per day

20. Is your organisation VAT registered   YES/NO

   If yes do you intend to reclaim the VAT   YES/NO

Please note that you must make clear how much VAT is payable on the project costs. The Council will not make extra funds available to cover VAT not identified in the application, and if applications do not make clear if VAT applies or not, they will be marked down

21. Have you or will you be approaching any other bodies for funding this project?

Name of organisation	Amount requested	Amount agreed	Confirmed

<u>Section 4:Implementation</u>

22. Consents: *note you are required to ensure that all appropriate permissions have been obtained and regulations adhered to.*

Type of license	Required?	In place?	Reference Number	Date of Consent
Planning permission				
Buildings Warrant				
Tree felling licence				
Controlled Activities Regulations (CAR) licence				
Other				

Is your project a condition of planning or a statutory obligation?

23. Anticipated start date

N.B.   Retrospective applications will not be considered

24. Anticipated completion date

25. How will the project be implemented?

26. If you will be using volunteers does your organisation have insurance ?   YES/NO

27. How will the project be maintained after completion? (please specify both costs and methods)
Please note that the project must not result in increased maintenance costs to the Council

28. How will you assess the impact of your project? How will you know when you have achieved your aims?

29. What consents or approvals are required to carry out your project? Are these consents or approvals already in place?

Section 5: Declaration

31. I certify that the information contained within this proposal form is correct and that the project will be carried out as described.

Name

Position within organisation

Signature

Date

Please return completed application forms to:

Capital Investment Group@clacks.gov.uk   or   Community Development Fund 2014-15
Clackmannanshire Council
Kilncraigs
Greenside Street
Alloa
FK10 1EB

CLACKMANNANSHIRE COUNCIL

Report to Resources and Audit Committee

Date of Meeting: 19 June 2014

Subject: Internal Audit and Fraud Progress Report

Report by: Internal Audit and Fraud Team Leader

1.0   Purpose

1.1.   This report provides an update on work completed from the Internal Audit and Fraud Annual Plan 2014/15, which was recommended to full Council for approval by the Resources and Audit Committee on 11 March 2014, in accordance with the Financial Regulations. We are also providing reports issued from the 2013/14 Annual Plan.

1.2.   The report also provides an update on the progress of implementation of recommendations by Officers from previous Internal Audit Reports.

2.0   Recommendations

2.1.   The Committee is asked to note, comment on and challenge the report and progress made on the Internal Audit and Fraud Annual Plan 2014/15.

3.0   Considerations

Progress Against 2014/15 Plan

3.1.   Progress on completion of the Assurance element of the Annual Plan 2014/15, is summarised in the table below, with more detail being provided in **Appendix A.**

Status of Audits		%
To be Commenced	14	82%
Onsite/On going	3	18%
Draft Report Issued	0	0%
Final Report Issued	0	0%
Total	17	100%

3.2. To provide members with more information on progress of the plans we have provided terms of reference for audits that are currently ongoing or are due to start in the near future and have been agreed. These are provided at **Appendix B** and cover the following reviews;

- Health and Safety

- Housing Allocation Policy.

Final Reports- Assurance

3.3. The following reports from the 2013/14 plan are provided for:-

- Review of Savings and Efficiencies- Overtime (**Appendix C)**

- Devolved School Management **(Appendix D)**

- ICT Asset Management **(Appendix E)**.

Fraud

3.4. The Internal Audit and Fraud Team continues to investigate benefit fraud having received over 131 referrals with over 92 investigations commenced up to the end of the financial year. In that time investigations have identified over £131,365 of over payments with over 42 sanctions issued.

Progress of Follow Up

3.5. Within Action Plans from previous Internal Audit Reports, there were 36 recommendations arising from 12 reports which were due for implementation by 19 June 2014. This covers all previous reports where there is at least one recommendation to be implemented. Of these, 7 recommendations have been implemented, 28 are in progress and 1 is no longer applicable. Recommendations are considered no longer applicable if they cover issues that have either been superseded by other events and are therefore dropped or have been carried forward in other reviews.

3.6. The progress made by Officers on these recommendations is summarised in **Appendix F** and where not sufficiently implemented, progress to date and revised completion dates have been agreed.

Conclusion

3.7. Work on the 2014/15 Internal Audit and Fraud Plan is at early stages with fieldwork now commenced on three reviews. Further progress has been made on implementing and addressing recommendations from previous reports.

3.8. Members are asked to note the report and progress made.

4.0 Sustainability Implications

4.1. There are no sustainability implications.

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.   No ☑

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

6.0   Exempt Reports

6.1.   Is this report exempt?   Yes ☐ (please detail the reasons for exemption below) 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   ☐
Our communities are more cohesive and inclusive   ☐
People are better skilled, trained and ready for learning and employment ☐
Our communities are safer   ☐
Vulnerable people and families are supported   ☐
Substance misuse and its effects are reduced   ☐
Health is improving and health inequalities are reducing   ☐
The environment is protected and enhanced for all   ☐
The Council is effective, efficient and recognised for excellence   ☑

(2)   Council Policies (Please detail)

Financial Regulations.

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?
Yes ☐   No ☑

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 A - Progress on 2014/15 Internal Audit and Fraud Annual Plan

Appendix B - Terms of Reference

Appendix C - Review of Savings and Efficiencies- Overtime

Appendix D - Devolved School Management

Appendix E - ICT Asset Management

Appendix F - Progress Of Follow Up Of Internal Audit Reports

11.0 Background Papers

11.1 Have you used other documents to compile your report? (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)
Yes (please list the documents below)   No ☑

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Iain Burns	Internal Audit and Fraud Team Leader	226231

Approved by

NAME	DESIGNATION	SIGNATURE
Julie Burnett	Senior Support Services Manager	
Nikki Bridle	Director Finance & Corporate Services	

Audit	Audit Weeks	Annual Plan	Service	Progress
Governance				
Annual Assurance Report	8	2014-15	Corporate	To Be Commenced
Assurance				
Absence Management	6	2014-15	Corporate and Governance	Ongoing
Health and Safety	6	2014-15	Corporate and Governance	Ongoing
Community Planning	5	2014-15	Corporate & Strategy and Customer Services	To Be Commenced
Social Housing Charter	5	2014-15	Services To Communities- Housing and Community Safety	To Be Commenced
Housing Allocations Policy	6	2014-15	Services To Communities- Housing and Community Safety	Ongoing
Social Work Joint Review	3	2014-15	Social Services	To Be Commenced
Procurement	5	2014-15	Finance and Corporate Services	To Be Commenced
Education Joint Review	3	2014-15	Education	To Be Commenced
Adult Care- Commissioning of Care	4	2014-15	Social Services	To Be Commenced
Information Governance	3	2014-15	Corporate	To Be Commenced
External Funding Arrangements including ALEOs	4	2014-15	Corporate and across selected services	To Be Commenced
Housing Benefit and Council Tax Reduction Scheme	6	2014-15	Revenues and Payments.	To Be Commenced
Budget Management and Monitoring	5	2014-15	Corporate & Accountancy	To Be Commenced
Treasury Management	4	2014-15	Accountancy	To Be Commenced
General Ledger	6	2014-15	Accountancy	To Be Commenced
Change Management	6	2014-15	Corporate	To Be Commenced

Audit	Audit Weeks	Annual Plan	Service	Progress
ICT Asset Management Plan and IT Contract Management.	6	2014-15	Corporate & IT	To Be Commenced
Fraud				
Fraud Risk Assessment / Prevention	6	2014-15	All Services	To Be Commenced
Fraud Detection	48	2014-15	Internal Audit and Fraud	Ongoing
Review Fraud and Whistleblowing policies	2	2014-15	Corporate	To Be Commenced
National Fraud Initiative	6	2014-15	All Services submitting data	To Be Commenced
Data matching	4	2014-15	All Services	Ongoing
Fraud Awareness and Training	5	2014-15	Corporate and all services	Ongoing
Other				
Follow Up	4	2014-15	All Services	Ongoing

INTERNAL AUDIT TERMS OF REFERENCE

SERVICE: Corporate & Governance

AUDIT AREA: Health & Safety

AUDIT YEAR: 2014/2015

INTRODUCTION AND SCOPE

Clackmannanshire Council Health and Safety Policy Statement outlines that 'It is the policy of Clackmannanshire Council to ensure, so far as is reasonably practicable, the health, safety and welfare of its employees and the health and safety of other persons who may be affected by its activities. Clackmannanshire Council will take the necessary steps to ensure that statutory duties are met at all times. These duties are laid out in the Health & Safety at Work etc. Act 1974 and relevant subordinate regulations'.

A new Health and Safety (H&S) Management System has been proposed that is designed to improve performance in H&S. To facilitate preparation for the new system this review will consider arrangements at service level to provide opinion on any potential action required. This will be done by means of a questionnaire with some targeted visits.

The overall aim is to provide information on the level of implementation and deployment of statutory Health and Safety requirements and internal policies and procedures. This will be used to provide assurance of current practices and also to facilitate the implementation of the new Health and Safety system designed to streamline existing procedures and ease the burden on Managers. The scope of this review is to confirm that the expected key controls for H&S systems are in place and operating effectively.

RISKS

The following risks could prevent the achievement of the objectives of H&S systems, or result from the non-achievement of the objectives, and have been identified as within scope for this audit;

- Services not complying with statutory requirements / Council Health and Safety Policy or Guidance.

- Arrangements do not support managers taking responsibility for H&S.

- There is inadequate information available to properly implement new H&S System.

- H&S resources are not (or not perceived to be) available at local level.

AUDIT OBJECTIVE: Our audit work will be designed to evaluate whether appropriate systems are in place and operating effectively to mitigate the risks identified above.

INTERNAL AUDIT TERMS OF REFERENCE

SERVICE: Housing

AUDIT AREA: Housing Allocation Policy

AUDIT YEAR: 2014/2015

INTRODUCTION AND SCOPE

Clackmannanshire Council currently owns and manages around 4950 properties of various sizes and types. At any one time the demand far exceeds the supply of available properties. Given the difference between the supply of and demand for Council houses, the Council has recently introduced a revised Housing Allocations Policy. It has been developed to take account of the different circumstances and housing needs of Council Housing applicants and to prioritise according to these needs, while increasing the opportunities and choice for current and prospective tenants to ensure best use is made of Council Housing Stock. The policy has been aligned to Council local priorities and complies with legislative requirements and follows good practice guidelines issued by the Scottish Government.

The scope of our audit will be to review the implementation of the new Housing Allocations Policy

RISKS

The following risks could prevent the achievement of the objectives of the Housing Allocations Policy, or result from the non-achievement of the objectives, and have been identified as within scope for this audit;

- The revised Housing Allocations Policy does not comply with legislative requirements and good practice guidelines.

- The different circumstances and housing needs of applicants are not assessed and treated consistently and fairly in line with the requirements of the policy.

- Increased opportunities and choice for current and prospective tenants is not achieved.

- Effective and appropriate use is not made of the Council's available housing stock.

- Appropriate arrangements are not in place to monitor the implementation of the policy resulting in its aims and objectives not being achieved.

AUDIT OBJECTIVE: Our audit work will be designed to evaluate whether appropriate systems are in place and operating effectively to mitigate the risks identified above.

SAVINGS AND EFFICIENCIES - OVERTIME **APPENDIX C**

1.   INTRODUCTION

1.1   This report details the findings of the Internal Audit review of Savings and Efficiencies - Overtime.   The review forms part of the Internal Audit and Fraud Plan for 2013/14, which was recommended to full Council for approval by the Resources and Audit Committee on 2 May 2013.

1.2   Clackmannanshire Council, in common with all public sector organisations, faces continuing challenging financial targets.   The Council needs to identify just over £7million of savings for 2014/15. A number of initiatives and efficiencies have already been identified.

2.   SCOPE AND OBJECTIVES

2.1   The Director's Group have identified overtime payments as an area that requires scrutiny of current procedures.   This includes considering opportunities for efficiencies and identification of processes, including authorisation, where more robust guidelines may be required.   This review considered these areas.

2.2   Internal Audit, in conjunction with the Management Accountancy Team Leader, identified the key risks relating to the audit. In our opinion there is a reasonable control environment operating in relation to overtime payments and the proposed arrangements for their management going forward. We can provide overall **reasonable** assurance that risks are being adequately mitigated against.

Key Risk	Assurance Assessment
Inaccurate reporting leads to ineffective monitoring of overtime levels.	Reasonable
Poor authorisation controls lead to a lack of effective challenge.	Reasonable
Inconsistent application of controls through lack of formal documented procedures.	Reasonable

3.   FINDINGS

3.1   We can provide reasonable assurance that reporting of overtime leads to effective monitoring of overtime levels. Up to this point in time monitoring of overtime levels appears to have been based mainly on local records. Information retrieved from financial systems was not always accurate primarily as a result of miscoding between services. However the introduction of the new payroll and HR system, ITrent, offers significant enhancement opportunities for improved reporting capabilities and these should be used to better monitor and challenge overtime spend.

3.2   As part of our review we tested the accuracy of ITrent reports produced and previously provided to The Directors Group. To do this we requested a report with the same parameters (but a longer time period to facilitate other testing) from 01/04/2013 to 31/12/2013 and used IDEA data mining software to interrogate the information in the i-Trent report. IDEA testing identified that in the initial overtime report payments for additional hours for employees with more than one job were being allocated to all the employee's jobs. A number of examples were found of one additional payment for one job recorded as three payments in the report. We traced a number of these duplications to payroll records to confirm that only one payment had actually been made and that duplication was caused by how these were subsequently fed into ITrent. Other duplicate records were due to work carried out by Human Resources on structures, which had doubled up information in reports if staff were moved in the new iTrent system in the middle of the month.

3.3   Using these findings we were able to narrow down reporting requirements with ITrent project staff and appropriately interrogate the system to get an accurate report. We tested a number of records back to source documents to confirm the accuracy. We were also able to verify that a number of individual values where high rates of overtime appeared to have been paid were in fact not necessarily a true reflection. The duplication identified partly explains some of these figures. Also the report summarises job types and not individuals therefore line items frequently refer to a number of employees banded together.

3.4   Once we had the final accurate ITrent Report we reconciled this to a financial ledger report of all overtime payments for the same period. This reconciliation arrived at a difference of £2,233 which in itself is not a material difference. However on undertaking a more detail reconciliation between service and sub-service totals there were greater differences. We had been alerted by Accountancy that there may be coding errors between the basic pay ledger sub code, the additional pay ledger sub code and the overtime ledger sub code. An example of this is some additional hours at basic pay for permanent staff at one specific team have been coded to the sub code for basic pay, 1060 rather than the overtime code, 1063. As at the end of December 2013, the iTrent overtime report has £17,333 recorded for the team whereas the ledger reports show £10,683, a difference of £6,650.

3.5   We can provide reasonable assurance that authorisation controls lead to effective challenge. Testing provided assurance that most Services are using the standard overtime form to record overtime, with this form required to be signed by a senior officer who is an authorised signatory for overtime.   There are two areas with Soft FM Service that use spreadsheets to record overtime and there is a lack of documentary evidence of authorisation on these however supporting records provide a degree of assurance. It was identified also that some officers authorising overtime were not designated authorised signatories for overtime payments.

3.6   Good practice was found with the authorisation of Janitors where a specific Janitors Payment Claim is used. This is signed by the Headteacher of the school for overtime covering school lets with a member of FM authorising other overtime for community/service let, overtime for sickness cover, callout and overtime allowing Property Maintenance access.

3.7   Analysis of the Overtime Report using IDEA demonstrated that Roads employees had the highest overtime payments with most accounted for by time and half payments.   This was substantiated from the results of testing using IDEA on the top five employees highest payments, analysis of time and half overtime and the testing carried out on the sample of employees used to confirm accuracy of ITrent report. We were advised that overtime payments within roads are dictated

by extra work from emergencies such as snow, flooding, capital roads projects, work for other internal services (schools and housing in particular) and external rechargeable work.

3.8　　Across other services reasons for requiring overtime included problems with absenteeism, historical agreements in place with some staff receiving contracted overtime payments and small pools of relief workers available (so incurring time and a half rates). There is also a significant amount of overtime work carried out to ensure that statutory requirements are met. For example Street sweepers for weekend working to keep streets and public open spaces clean. A high amount of additional payments were found to be worked by staff at Social Services establishments including Menstrie House, Ludgate House and Resource Centres. 24-hour cover is required for residential and respite care. There is also a regulatory requirement for the staffing level and skill mix to be adequate to meet the assessed and recorded needs of Service Users at all Social Services establishments.

3.9　　At a service level there is an acknowledgement that overtime use needs to be challenged however there is also widespread assertion that overtime is necessary to meet policy and statutory requirements. We witnessed areas where solutions have been identified, for example the Unit Manager at the Woodside Unit in Clackmannan has appointed four new full time members of staff to reduce overtime and relief staff.

3.16　　We can provide reasonable assurance that there is a consistent applications of controls however there is a lack of formal documented procedures in place. The standard overtime form is in use in most services and these requirements do provide an element of consistency.

3.17　　In carrying out the review we considered what a basic set of overtime authorisation principles would look like. We reviewed available documentation from a sample of other local authorities and from considering the approaches being taken that we observed. We have forwarded our findings to management for consideration.

3.18　　The contents of this report have been discussed with relevant officers to confirm factual accuracy. The co-operation and assistance we received during the course of our audit is gratefully acknowledged.

SAVINGS AND EFFICIENCIES - OVERTIME   **APPENDIX C**

I. **RECOMMENDATIONS**

4.1   A summary of the recommendations raised from this audit is included in a Management Action Plan. Management comments, the date for implementation and Responsible Officer have been reflected within the Action Plan.

4.2   The Management Action Plan contains the following priority of recommendations.

Priority Assessments	Number
Priority 1	-
Priority 2	2
Priority 3	5
Priority 4	-

MANAGEMENT ACTION PLAN

Ref	Finding	Risk	Priority	Agreed Management Action	Responsible Officer	Target Date
5.1	The reporting capabilities of ITrent are still to be fully realised.	Poor definition of reports leads to inaccurate or incomplete reporting.	2	Training in Business Objects reporting tool has now been provided to Project Team, HR, Payroll, Finance and IT staff. Reporting requirements for accurately monitoring overtime activity will be identified and determined to provide standard report.	HR/Payroll System Project Support Officer Management Accountancy Team Leader HR/Payroll System Project Support Officer	Implemented June 2014
5.2	There is a lack of standardised overtime reports produced across the organisation.	Monitoring of overtime is ineffective or not carried out at the appropriate level.	3	Standard report will be made available via iTrent to all relevant managers so that monitoring is consistent across the organisation.	HR/Payroll System Project Support Officer	June 2014
5.3	Overtime is being miscoded to the financial ledgers.	Areas of concern are not identified at an early enough stage to put mitigation in place.	3	Overtime will be properly defined and this and procedures for correctly coding overtime will be included in documented procedures.	Management Accountancy Team Leader	June 2014
5.4	Not all documentation used to record and approve overtime has appropriate evidence of authorisation.	Appropriate challenge not in place.	3	Guidance will highlight need to ensure appropriate authorisation is in place. iTrent is being developed so that authorisation will become an electronic process so that authorisation will be built into the process and be fully auditable.	Management Accountancy Team Leader HR/Payroll System Project Support Officer	June 2014 December 2014

Ref	Finding	Risk	Priority	Agreed Management Action	Responsible Officer	Target Date
5.5	Approvers are not always authorised signatories.	Appropriate challenge not in place.	3	Approvers to be reviewed and signatory database updated as required. Once authorisation is carried out through iTrent, approvers can be cross checked to authorised signatory database on a regular basis to ensure ongoing compliance.	Revenues and Payments Manager. HR/Payroll System Project Support Officer	June 2014 December 2014
5.6	There is limited evidence that reasons for use of overtime have been challenged at a corporate level.	Reasons are not properly tested or alternative arrangements are not fully explored.	2	Overtime detail will be included in existing iTrent reports provided to CMT. Detail will then be subject to review and challenge at CMT meetings to ensure that principles are being adhered to and applied. All staff will be made aware that monitoring is taking place and that they may be subject to challenge.	HR/Payroll System Project Support Officer Director of Finance and Corporate Services	June 2014
5.7	There are no documented corporate overtime procedures in place.	Inconsistent application of controls.	3	Procedures and principles will be documented and made available to all staff. CMT will endorse and monitor adherence to procedures.	Management Accountancy Team Leader Director of Finance and Corporate Services.	June 2014

DEVOLVED SCHOOL MANAGEMENT APPENDIX D

1. INTRODUCTION

1.1 This report details the findings of the Internal Audit review of Devolved School Management. The review forms part of the Internal Audit and Fraud Plan for 2013/14, which was recommended to full Council for approval by the Resources and Audit Committee on 2 May 2013.

1.2 Devolved School Management (DSM) delegates to school level a substantial measure of control over resources and spending. DSM Guidelines are issued by the Scottish Government and aim to empower Head Teachers to meet local needs. The DSM Guidelines are supported by a self evaluation toolkit, which is intended to enable Councils to assess the 'fitness for purpose' of local DSM schemes. This review used the evaluation toolkit to assess the Clackmannanshire Council DSM scheme to provide assurance on its 'fitness for purpose'. Under the Standards in Scotland's Schools etc Act 2000, it is now a statutory requirement for a Local Authority to operate a devolved school management scheme in its educational establishments.

1.3 The total revenue budget for 2013/14 for Clackmannanshire Education Services was £33,924,530 of which £22,850,380 was for DSM.

2. SCOPE AND OBJECTIVES

2.1 The scope of the audit was to review and evaluate the high level controls around how the Council administers and manages Devolved School Management.

2.2 Internal Audit, in conjunction with Education senior management, identified the key risks relating to the audit. In our opinion there is a robust control environment operating in relation to Devolved School Management. We can provide overall **significant** assurance that risks are being adequately mitigated.

Key Risk	Assurance Assessment
Decision making is not at the appropriate point leading to a lack of empowerment.	Significant
DSM framework does not facilitate appropriate partnership working.	Significant
Lack of accountability and responsibility inhibits effective management of resources at local level.	Significant
Funding carry forward arrangements impact on local flexibility.	Significant

3.   FINDINGS

3.1   We can provide significant assurance that decision making is at the appropriate point leading to empowerment. The Council passes control of a significant proportion of their education budgets to Head Teachers of secondary and primary schools or Heads of early years establishments through a local DSM scheme, which sets out spending requirements. However staffing requirements are set by legislation which account for most of the budget available meaning that in effect there is not actually a great deal of flexibility offered to Headteachers. Where there is genuine flexibility around the budget the decision making is being carried out at the appropriate level.

3.2   We interviewed a sample of Headteachers and found that decisions on resource use are based on actions that will best contribute to the educational outcomes of pupils. Staff are generally aware of their role in financial management however there has been limited training in recent times on DSM and financial management. Some Head Teachers are relying heavily on School Administrators to keep track of expenditure and advise them of how much budget is available.

3.3   The Scottish Government published, in 2012, a revised set of Devolved School Management Guidelines for councils to use in determining their own guidelines. The current DSM scheme for Clackmannanshire Council was updated prior to the Scottish Government guidance and is therefore based on earlier 2006 guidelines. The Education Business Manager and the Finance Accountant covering Education are aware that the Council's scheme needs to be updated.

3.4   We can also provide significant assurance that the DSM framework facilitates appropriate partnership working. Staff and parent councils are consulted on budgetary matters. Actions within School Improvement Plans require to be funded out the DSM budget and so are informed by local priorities. There has also been some pooling of resources, for example around lab technicians.

3.5   We can provide significant assurance that there are suitable levels of accountability and responsibility to facilitate effective management of resources at all levels. All Head Teachers interviewed stated that while their is limited flexibility with the DSM budget there is a budget to spend on Supplies and Services.   This includes IT equipment, cleaning and hygiene materials, telecommunications, classroom materials, furniture purchase, staff travel, postages, and purchase of equipment. Elements of these budgets are broken down to departmental level within the schools.

3.6   Finally we can also provide significant assurance that funding carry forward arrangements are not impacting on local flexibility. Head Teachers considered that the calculation of the DSM budget, based on school rolls and the carry forward rules work well. Head Teachers are able to use carry forward funding to save towards long term bigger spend items, e.g. purchasing equipment to assist with the delivery of the curriculum.

3.7   The contents of this report have been discussed with relevant officers to confirm factual accuracy. The co-operation and assistance we received during the course of our audit is gratefully acknowledged.

4. RECOMMENDATIONS

4.1 A summary of the recommendations raised from this audit is included in a Management Action Plan. Management comments, the date for implementation and Responsible Officer have been reflected within the Action Plan.

4.2 The Management Action Plan contains the following priority of recommendations.

Priority Assessments	Number
Priority 1	-
Priority 2	-
Priority 3	2
Priority 4	-

MANAGEMENT ACTION PLAN

Ref	Finding	Risk	Priority	Agreed Management Action	Responsible Officer	Target Date
5.1	There has been little training on DSM and financial management offered recently.	Management of DSM budgets is not as effective as it could be.	3	Training to be provided to headteachers during school session 2014/15	Education Business Support Manager	31 December 2014
5.2	Current Clackmannanshire DSM guidelines are based on previous national version.	Developments to approach may be based on out of date guidance.	3	Guidelines to be updated	Education Business Support Manager	31 December 2014

3. FINDINGS

3.1 We can provide reasonable that the ICT assets owned or leased by the Council are being accurately and completely recorded. The Council currently owns or leases a vast array and type of ICT assets. A number of ad hoc systems are currently used to log and record these assets. Audit testing found inconsistencies and variability across the existing systems in the completeness, types and level of asset information being recorded. While these disparate systems themselves do not provide the Council with a complete picture of the ICT assets it owns or leases, there is traceability provided by unique supplier serial numbers attached to each device. The new ICT Asset Management System will provide a more complete picture. There is however no periodic verification of assets or reconciliation taking place between the ICT asset records held by Council Services and those held by IT.

3.2 The introduction of the Council's ICT 2012-17 Strategy and the 2013-17 ICT Asset Management Plan (ICTAMP) provide a framework for managing ICT assets in the future. A cornerstone of the ICTAMP is the introduction of a new ICT asset management system. The system comprises two pieces of complimentary software. GLPI (Gestionnaire libre de parc informatique- Free Management of Computer Equipment) is the database element, while OCS Inventory NG (Open Computer and Software Inventory Next Generation) is a monitoring and tracking tool which logs ICT hardware asset and software use and provides information and data updates to GLPI. In combination, it is expected that they will provide an integrated and centralised record of all Council ICT assets, improving the quality and accuracy of information and data available.

3.3 GLPI will be populated using the OCS software. This was originally planned to be completed during 2013/14 however other priorities have meant that this has not yet been completed. There is no update timetable in place yet for completion of the exercise. A lack of asset verification mentioned above raises the risk that GLPI could be populated with incomplete information. These delays will also impact on the ongoing implementation of the ICT Asset Management Plan as a whole.

3.4 All ICT asset procurement is administered centrally by the Council's IT Service through their helpdesk. Established requisition and authorisation processes are in place for ICT Asset purchases, with each step of the procurement process, from initial request to delivery and receipt of the asset, being clearly documented. IT is responsible for preparing an asset for its operational deployment.

3.5 For the disposal of ICT assets, contractual arrangements are in operation with appropriately accredited contractors for the collection and destruction of ICT equipment. Contractors provide the Council with Certificates of Destruction summarising the quantities and different types of equipment destroyed. However we were unable to reconcile disposal documentation to ICT asset registers to verify types of assets and quantities recorded as being destroyed. We identified a number of instances where IT service have recorded assets as being destroyed in itemised record sheets however these assets remain on the asset register. In addition we found examples where the quantity of destroyed assets recorded in Certificate of Destruction does not tally with the quantity recorded in the associated itemised record sheet.

3.6 We can provide reasonable assurance that the information and data for internal and external requirements is available. Fundamental to the achievement of the priorities and objectives set out within the ICTAMP is the provision and access to good quality and reliable information. Neither GLPI nor OCS is yet at the operational deployment stage where they contain either the volume or detail of information to adequately meet internal and external requirements. However, we can place reliance on the recent series of structural and procedural steps taken to put in place to address these issues. The steps include a revised ICT financial management process which centralises all corporate ICT budgets and spend within the IT Service. The IT Service is also aligning the Council's ICT capacity and configuration management plans with financial plans and correlating and cataloguing a central register of the Council's software contracts and IT licences.

3.7 No links currently exist between IT asset records and the Council's Corporate Fixed Asset Register System. Finance have started to contact Council Services about developing a standardised

method of notifying changes to ICT assets. IT will feed into this process if and when they are approached.

3.8   We can provide reasonable assurance that the new ICT asset management systems possess the existing and future capabilities to enable the Council to successfully achieve and deliver its ICTAMP objectives. While there is no documented options appraisal demonstrating how the GLPI and OCS systems were identified as having the capabilities required, there is adequate evidence that significant professional experience has been used to arrive at the decision. There is however a minor reputational risk around IT not wholly following their own procedures.   The operational effectiveness of OCS is restricted at present as its software agent is not able to be installed onto Wyse Terminals. IT Service have identified suitable mitigating action to address this. However the lack of a clear implementation and development timetable setting out how the systems will be developed reduces the level of assurance we are currently able to provide.

3.9   The contents of this report have been discussed with relevant officers to confirm factual accuracy. The co-operation and assistance we received during the course of our audit is gratefully acknowledged.

4. **RECOMMENDATIONS**

4.1 A summary of the recommendations raised from this audit is included in a Management Action Plan. Management comments, the date for implementation and Responsible Officer have been reflected within the Action Plan.

4.2 The Management Action Plan contains the following priority of recommendations.

Priority Assessments	Number
Priority 1	-
Priority 2	-
Priority 3	4
Priority 4	1

MANAGEMENT ACTION PLAN

Ref	Finding	Risk	Priority	Agreed Management Action	Responsible Officer	Target Date
5.1	There is no timetable in place for the completion of the implementation of the new asset management system..	There is slippage in implementation of new ICT asset management systems.	3	Will be written in to 2014/15 business plan and monitored through this.	IT Team Leader	30 June 2014
5.2	Limited systems or processes are in place to periodically verify or reconcile the records of ICT Assets held by Council Services with those held by IT.	ICT Asset records are not complete and current, reducing the ability to effectively plan and manage future ICT demand and need.	3	Standard verification process will be put in place and rolled out to services.	IT Team Leader	30 September 2014
5.3	Documented procedures for the treatment of asset disposals are out of date and some IT disposal records are inaccurate.	Inconsistency in administrating and recording of disposal of ICT assets leading to inaccurate and incomplete records being maintained.	3	Documented procedures will be reviewed and updated. Processes will be updated to address inaccuracies.	IT Team Leader	30 September 2014
5.4	There is a lack of linkage between IT asset records and Corporate Fixed asset systems.	Incorrect values stated in accounts or inaccurate levels of depreciation being charged.	3	Discussion with Finance will take place to identify issues and identify appropriate course of action.	IT Manager	30 September 2014
5.5	Options appraisal demonstrating how the GLPI and OCS systems were identified as having the functionality and capabilities required was not documented.	Decisions taken cannot be fully evidenced.	4	File note to be created to outline process taken to reach decision.	IT Manager	30 November 2014

Report Title	Priority				Number of Recommendations	Recommendations			
	1	2	3	4		Implemented	In Progress	Not Applicable Now	Implementation on Target? (*- New Dates Agreed)
Roads Management - Roads Costing System	-	-	1	-	1	-	-	1(a)	Y
Payroll and HR		1	3	1	5	-	5	-	Y*
Adult Care - Commissioning of Care and Corporate Appointees	2	2	2	-	6	-	6	-	Y*
Data Protection - Corporate	-	2	-	-	2	-	2	-	Y*
Risk Management Arrangements	-	1	1	-	2	-	2	-	Y*
Non Domestic Rates Income	-	1	-	1	2	-	2	-	Y*
Income Collection & Cash Receipting	-	-	2	-	2	-	2	-	Y*
Purchase Orders to Payment of Suppliers	-	1	1	-	2	-	2	-	Y*
Council Tax	-	1	5	-	6	6	-	-	Y
Purchase Cards	-	1	-	-	1	-	1	-	Y*
Information Governance	1	3	1	-	5	-	5	-	Y*
Schools PPP/PFI Contract Monitoring	-	1	1	-	2	1	1	-	Y*
TOTAL	**3**	**14**	**17**	**2**	**36**	**7**	**28**	**1**	

(a) - Superseded by other events

(a) - Superseded by other events

Report to Resource & Audit Committee

Date of Meeting: 19 June 2014

Subject: Resource & Governance Business Plan 2014/15

Report by: Senior Support Services Manager

1.0   Purpose

1.1.   This report presents the Resources & Governance Business Plan for 2014/15 to the Resource & Audit Committee for consideration and approval.

2.0   Recommendations

2.1.   The Committee is asked to consider the content of the Resources & Governance Business Plan **(Appendix A)** for 2014/15 and comment on or challenge the content.

2.2.   It is recommended that Committee approve the Performance Measures for scrutiny purposes over the next 12 months.

3.0   Considerations

3.1.   The Resources & Governance Business Plan sets out the objectives and aims of the Support Services Management Team. It identifies how the service objectives contribute to the *Making Clackmannanshire Better* programme and other corporate strategies.

3.2.   The Business Plan summarises the services operating within Support Services and includes service aims and objectives, the management structure, financial information and identified issues to be taken into account.

3.3.   The Business Plan sets out in section three how the service continues to align its service delivery with the principles of good governance.

3.4.   A suite of KPIs is included at section four of the Business Plan. These have been amended and developed based on customer feedback and consultation with service teams. A number of the KPIs are statutory and some are reported on a corporate basis.

3.5.   There are no new KPIs proposed for 2014/15. Those introduced in 2013/14 will continue to be reported with the 2013/14 data forming a baseline to identify trends and improved or deteriorating performance. Performance against some of the Welfare reform KPIs has informed service planning for

2014/15. Regular reports of performance to the Resource & Audit Committee will ensure that members are kept informed of performance in all areas of the service.

The introduction of improved and more accurate Management Information available through the new HR and Payroll system has been used to inform KPIs relating to absence and turnover during 2013/14. As the new system matures, this management Information will be further refined to ensure the use of real time data as a intelligence source for all services.

Key actions for the service are included within this section and are detailed after the KPIs.

3.6. The final section of the Business Plan contains the service Risk Register. This was reviewed by the Service Management Team in preparation for the compilation of the Business Plan. Risks are scored according to the Council's risk matrix and reviewed at the monthly Service management team meeting. Input is also received through service and operational team meetings New risks can be added throughout the year and the service has an escalation route in place to the Council Management Team for occasions when an identified risk is deemed to require a corporate view and assessment.

4.0 Sustainability Implications

4.1. There are no sustainability implications associated with this report.

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

5.5. There are no staffing implications associated with this report.

6.0 Exempt Reports

6.1. Is this report exempt? Yes ☐ (please detail the reasons for exemption below) 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	☐
Our communities are more cohesive and inclusive	☐
People are better skilled, trained and ready for learning and employment	☐
Our communities are safer	☐
Vulnerable people and families are supported	☑
Substance misuse and its effects are reduced	☐
Health is improving and health inequalities are reducing	☐
The environment is protected and enhanced for all	☐
The Council is effective, efficient and recognised for excellence	☑

(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?

Yes ☐   No ☐   N/A

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 A - Resources & Governance Business Plan 2013/14

11.0   Background Papers

11.1   Have you used other documents to compile your report? (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)

Yes ☑ (please list the documents below)   No ☐
Corporate Plan 2013 - 2017
Single Outcome Agreement (SOA)

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Julie Burnett	Senior Support Services Manager	2022

Approved by

NAME	DESIGNATION	SIGNATURE
Julie Burnett	Senior Support Services Manager	█████████

| Nikki Bridle | Director of Finance & Corporate Services | ███████████████ |

Resources and Governance

Business Plan 2014 - 15

Making Clackmannanshire Better

Version	**1.0**
Status	**Final DRAFT**
Date	**4-6-14**

1   SERVICE OVERVIEW

1.1   SERVICE MISSION / PURPOSE & OBJECTIVES

Finance & Corporate Services Vision

To achieve excellence in the delivery of corporate, support and customer services, recognised for our first class people, first class customer service and first class results.

Finance & Corporate Services Guiding Principles

- Continuous Improvement
- Customer Service Excellence
- Value our people
- Effective governance and financial stewardship
- Transparency
- Sustainability
- Equality

Values and Behaviours

The Resources and Governance service share the Council's values:

Commitment, Trust and Partnership
Openness and Accountability
Respect and Dignity
Equality, Fairness and Inclusion

The Resources and Governance Service core functions include:

- Accountancy (budget management and financial accounting, creditors)
- Governance (Human Resource Management, Payroll, Legal Services, Health & Safety, Democracy, Procurement, Internal Audit & Fraud)
- Information Technology
- Revenues and payments until such time as service portfolios are reconfigured
- Asset Management including "soft" FM services (exact date of change to be agreed)

Our vision is to ensure that our financial and human resources, our systems and processes are aligned to the strategic aims of the organisation to facilitate the delivery of the Council's corporate priorities in a legally compliant, cost efficient and effective way.

Our mission is to provide high quality, professional, value added proactive advice and support to enable senior officers, managers, elected members and staff in the delivery of their strategic and operational objectives.
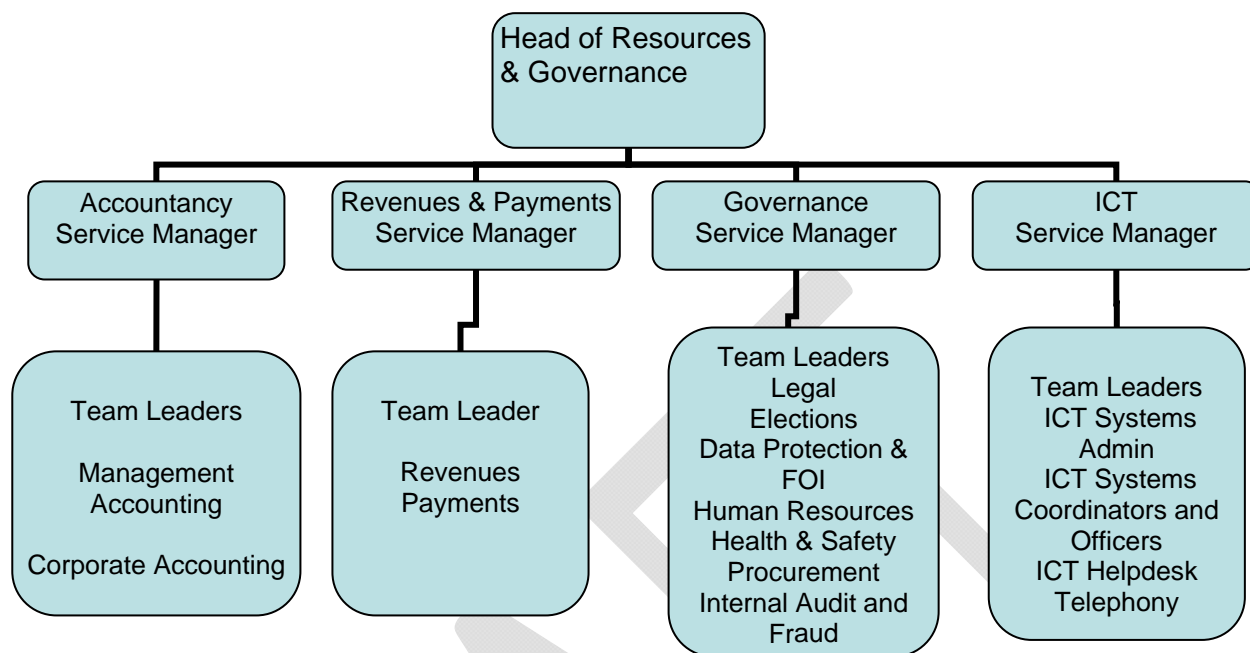
Our priorities are

- Good governance and financial stewardship
- The provision of professional advice and support to other services
- Corporate capacity building that supports the aims and objectives of the Council
- The strategic management and use of Council assets, maintaining assets to provide an excellent service to the public.

Service Objectives

In order to achieve this we will:-

- promote and implement good financial, technological and governance practices within the organisation
- provide high quality professional support services to officers and elected members to enable them to deliver their business objectives in an effective and cost efficient manner
- provide strategic financial and human resource management advice that will inform and shape future service delivery and ensure that the Council's workforce is aligned to achieving its corporate objectives
- provide proactive, professional and customer focussed Resources and Governance services
- continuously improve and support our staff in their professional and personal development to provide excellent customer service
- maintain and manage the Council's assets to the benefit of the public and local communities and businesses.

1.2 SERVICE STRUCTURE (as at 31.3.14)

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                    ┌─────────────────────┐
                    │  Head of Resources  │
                    │    & Governance     │
                    └──────────┬──────────┘
        ┌──────────────┬───────┴───────┬──────────────┐
┌───────┴───────┐┌─────┴────────┐┌─────┴──────┐┌───────┴──────┐
│  Accountancy  ││ Revenues &   ││ Governance ││     ICT      │
│    Service    ││  Payments    ││  Service   ││   Service    │
│    Manager    ││   Service    ││  Manager   ││   Manager    │
│               ││   Manager    ││            ││              │
└───────┬───────┘└─────┬────────┘└─────┬──────┘└───────┬──────┘
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| Team Leaders

Management Accounting

Corporate Accounting | Team Leader

Revenues
Payments | Team Leaders
Legal
Elections
Data Protection & FOI
Human Resources
Health & Safety
Procurement
Internal Audit and Fraud | Team Leaders
ICT Systems Admin
ICT Systems Coordinators and Officers
ICT Helpdesk
Telephony |

1.3 BUDGET

REVENUE BUDGET	£000
Employee related expenditure	5,705,637
Transport related expenditure	16,070
Supplies and Services	665,410
Third Party Payments	968,270
Income	(809)
Total Budget	**6,546**

CAPITAL BUDGET	£000
ICT Strategy	1,012,522
Digital Broadband	200,000
Welfare Reform implementation	100,000
Replacement financial system*	0
Itrent	31,515
Total**	**1,344,037**

* Capital allocated for 2015/16
** Includes carry forward from 2013/14 of £400k

NB: Depending on changes in how services are configured and allocated to different portfolios, the budget shown above is subject to change.

2 KEY ISSUES FOR THE SERVICE

Work carried out to identify these issues includes:

- Review of support services business plan 2013/14
- Review of support services risk register 2013/14
- Business planning review session held in September 2013
- Business planning forward plan session held in January 2014
- Feedback from customers throughout the organisation
- Feedback from local communities and external customers
- CSE re-assessment outcome in November 2013
- The rationalisation of the Council's estate and the move to one location
- Analysis of key actions from Support Services Governance Improvement Plan
- Results from the 2012/13 and 2013/14 staff survey
- Finance & Corporate Services business planning session

Identified issues:

Corporate

- Providing appropriate and effective professional support to facilitate continued service restructuring, service redesign and the introduction of different ways of working across the Council's services.

- Financial pressures resulting from reducing funding from central government for the next four years. The delivery of both service and corporate savings as agreed through the budget challenge process and set out in the 2014/15 budget.

- Achieving operational excellence making best use of the services' Governance Improvement plan, Clackmannanshire Improvement Model (CIM) and the feedback from the CSE assessment. Agreeing how to align different processes and develop one service improvement plan.

- The implementation of various aspects of Welfare Reform in 2014/15 and beyond, in particular the introduction of Universal Credit. Final arrangements for the local provision of the Scottish Welfare Fund are yet to be agreed. Welfare Reform could impact adversely on service delivery as a result of new systems and processes. There are also financial implications of the requirement to deliver additional duties and services within limited and reducing funding allocations.

- Shared services - the provision of appropriate support service infrastructure to facilitate joint working arrangements with Stirling Council in relation to our shared Education and Social Work Services. The consideration of options for the joint provision of services in the future including more opportunities for joint working with partner organisations.

- A corporate overview of Data Protection, information management, FOI requests and how to resource and manage required changes, some of which are legislative.

- Increased demand on legal and financial services as a result of different service initiatives such as compulsory purchase, a forecast increase in the number of childcare cases, procurement initiatives and the potential for debt recovery requirements to increase. Mitigation includes changes in structure to support and react to changes as they are presented plus additional, targeted resource.

- The impact of the Referendum vote

- The introduction and support of new ways of working in the context of a reducing workforce and financial settlements The impact of the planned integration of Health and Social Care on the elements of Corporate Resources and Governance that support those teams, both in the work required up to April 2015 and the potential reduction in support required after that date.

Making Clackmannanshire Better

Supporting and helping to deliver the Councils business transformation programme, *Making Clackmannanshire Better* (MCB) through:

- Leading on workstream 5, Making our Organisation Stronger through the implementation of the People Strategy Action Plan and delivery of the Job Families project.

- Delivering and supporting changes in structure and working practices that align with the Target Operating Models.

- Supporting the delivery of Workstream 4, Making Best use of our Assets through the Capital Investment Group and Resource and Governance Asset Management Plans.

Project

- The delivery of in excess of 60 Resources and Governance projects, including systems replacement, implementation of new systems; people and finance matters and aspects of Welfare Reform, that have the potential to impact on service delivery or corporate objectives.

- Involvement in the delivery of a range of corporate projects with expertise being called upon to support and advise project teams as required.

- The relocation of our own services to Kilncraigs. Supporting our own teams to change practice, work more flexibly and move to new Ways of Working

Employment / People

- The implications of moving to a 35 hour week in the future. The reduction could result in reduced response times and potentially a reduced level of service. Consider ways in which cover can be maintained despite the reduction in

contracted hours. Manage customer expectations regarding changes in service delivery.

- The second stage of the integrated HR & payroll project continues and will provide self service for managers and employees in 2014/15. This will require further development and training for HR & Payroll teams as well as for customers and service users.

Technology

- Review and revision of business continuity plans (particularly ICT) as a result of the move to one building.

- Public Sector Network (PSN) compliance was achieved in 2013 but Government requirements are likely to become more complex and onerous over the course of the next two to three year.

Resources & Governance Service specific

- The requirement to identify opportunities for reducing expenditure and staffing levels when the opportunity is presented whilst maintaining required levels of support to Council services.

- How to improve communications with all Resources and Governance staff to ensure the service teams are aware of service and Council direction and decisions. To ensure that each employee understands how they contribute to the achievement of Council and community objectives.

- The impact of changes related to the Single Fraud Integrated Service (SFIS) and the transfer of some of this work to DWP.

- Making the necessary resources available to support improved community safety through the Local Community Planning Group

A continuous and planned cycle of review, monitoring and evaluation of planning and performance will assist with the management of the service issues outlined above. SMT meeting, FCS meetings, the corporate governance panel and service team meetings will provide the forum for these activities.

3 APPROACHES

Our approach to service delivery is aligned with the key elements of the Governance Strategy namely:-

1   effective leadership and positive organisational culture
2   positive relationships with internal and external stakeholders
3   robust and effective risk management
4   appropriate and effective internal controls
5   sound business planning and robust performance management

6   external compliance and accountability
7   good information management
8   effective monitoring and review

A review of the 2013/14 business plan has resulted in the development of a two to three year action plan as part of the 2014/15 business plan. This reflects the reliance and involvement that the Resources and Governance teams have in supporting the delivery of plans and projects that are managed and led by other services. Timescales are outwith the control of the service and some projects are complex and will take time to be delivered.

3.1 Leadership and culture

At an organisational level we shall provide the professional and technical advice and support to our Elected Members and senior managers to enable them to be effective in their leadership role. We shall ensure that the governance arrangements around the Council's decision making processes are effective and aligned to the business needs of the organisation.

We will provide leadership on corporate issues through the review, development and implementation of strategies relating to Governance, ICT, People and Information Management, Financial Management, Asset Management and related Government initiatives such as Welfare Reform.

At Service Level we shall continue to develop the leadership skills of our service, team and line managers to enable them to ensure that they and their staff demonstrate the behaviours necessary to promote a positive organisational culture based on innovation, mutual trust and respect

3.2 Customer and Stakeholder engagement

The Resources and Governance service is committed to achieving and maintaining the highest standards of customer service in respect of all of our stakeholders and customers, both internal and external as evidenced by our Customer Service Excellence re-accreditation. Effective, proactive engagement with our customers and partners enables us to identify their needs and we recognise the importance of constructive customer feedback, whether that be positive or negative, in shaping service provision and improving service delivery.

We recognise that we need to have different mechanisms in place for engagement and feedback depending upon the subject matter. These include:-

- the formal process of presentation, challenge and approval of matters (such as the Service Business Plan and performance reports) at Council and Committees

- publication of information and feedback via Clacks Web and the intranet (Connect)

- annual customer satisfaction survey for the whole service

- internal and external customer satisfaction surveys by the different services

- consultation via the Senior Management Forum and Trade Unions

- attendance at service team meetings to present Management Information reports and offer advice and support to services as required.

- short term focus groups

- one to one meetings

- Engagement with customers through community hubs, community meetings and public information sessions.

All feedback will be considered and where we need to make improvements these will be built into our business, operational and individual PRD plans as required.

We recognise that good communication is an integral element of effective information management. As a service we shall be consistent and clear in our communications with staff and stakeholders.

We will use a variety of tools and mechanisms to ensure that our staff and stakeholders receive the information that they need to make decisions and achieve their aims and objectives. These will include;-

- verbal communication through regular service / team/ 1-1 meetings
- written communication in the form of briefings /memos/guidance notes
- written communication in electronic form via email
- the use of the Council's electronic information system and Clacks Web
- engagement with members of the public through attendance at community events and forum and through the Welfare Reform Working Group
- direct engagement with customers through face to face meetings (Revenues team)

We appreciate that effective communication is a two way process and we shall ensure that staff and stakeholders are given appropriate and adequate opportunities to provide feedback.

3.3 Risk Management

It is essential that Services within the organisation adopt a consistent approach to risk management. We shall assess risk at an organisational, service, team and individual level as appropriate. Through training and development, staff will be encouraged to take a proactive approach to risk management. They will be equipped with the knowledge and confidence to identify and manage beneficial and tolerable risks with a clear escalation process in place from service teams to the Service Management Team.

We will embed Risk Management as a core component of our approach to service delivery and will apply professional standards and practices and deploy appropriate tools and systems to ensure that risks are captured and managed effectively.

The service Risk Register will be reviewed at the monthly Service Management Team meetings. Changes to existing risks and the identification of new risks will be considered with escalation procedures to CMT in place for identified risks that have a wider, corporate impact.

More formal review of the Service Risk Register will take place twice a year at the extended Resource & Governance team meeting and at the annual business planning session.

3.4 Internal Control

We shall ensure that our internal controls in relation to the management of our financial, human, technological and information resources are adequate and effective and appropriately deployed within all services.
We shall review, and audit our control systems, processes, policies and procedures on a regular planned basis to ensure that they are fit for purpose and aligned to organisational objectives and our external compliance accountabilities.

We will refer to relevant internal and external Audit reports to identify gaps or failings and opportunities for improvement. Improvement plans will be developed and shared with customers.

Challenge relating to the service's internal controls and processes is received through the Annual Governance Panel. This provides additional scrutiny and the opportunity to identify areas for improvement.

3.5 Planning and Performance Management

The Resources and Governance business plan will identify our service business objectives which will then determine individual service objectives. These in turn shall shape the respective team operational plans which should then be clearly linked to each individual employee's PRD process.

During 2014/15 we are aiming to involve those responsible for performance in each service to input performance data into the corporate system. This will provide accurate and timely performance management information. Performance reports will be considered at service management team meetings and action taken where required to improve performance.

We recognise that a linked PRD process is key to supporting and developing staff to achieve the business objectives of the organisation. To ensure that personal development is aligned to business needs, the outcomes of PRDs will be collated to identify those with skills, knowledge and ability that would benefit the organisation from personal development. This will inform future workforce planning across the organisation and align resource and development with corporate priorities.

Performance will be measured at every level. Current indicators will be reviewed on a regular basis to ensure that they are relevant, meaningful and aligned to improving outcomes.

We recognise the true value of our staff and are committed to ensuring that they are equipped with the knowledge, skills and experience to play their particular part in delivering high quality services to our customers.

To ensure this, we will use the Personal Review & Development Process (PRD) to provide our staff with clarity as to their particular roles, responsibilities and accountabilities and to identify any development or training needs required to enable them to deliver to the best of their ability. It is a priority of the Service to ensure that each member of staff has an individual PRD meeting annually and that they have regular team and 1-1 meetings with their line managers throughout the year.

We have a commitment to improve communication at all levels of our services and have tried a number of methods to improve communications over the past twelve months. Teams throughout Resources and Governance have been involved in planning the allocation of work and resources during 2013/4. This will be further refined during 2014/15.

The Resources and Audit Committee provides scrutiny and challenge of Resources and Governance performance on a quarterly basis. A range of KPIs are reported to this Committee and Committee members are invited to challenge performance and results.

3.6 Compliance and Accountability

We shall align our internal control systems to enable us to demonstrate compliance with external requirements in terms of inspection, audit and review. We shall liaise and work in partnership with the relevant external agencies including our external auditors and government bodies to review practice and identify areas for improvement.

The Resource & Governance service is responsible for the delivery of the Internal Audit and Fraud annual plan and resulting reports. We will take a corporate view of any identified weaknesses in terms of internal control and work with services to make improvements as necessary.

3.7 Information Management

We value information as a corporate asset. We will align our systems, resources and processes to ensure that we can produce good quality information and make it available to those who need it, when they need it. We shall share information effectively to achieve the best possible outcomes within the legal framework.

Using the Council's approved Information Strategy as the basis for change, we shall engage with our stakeholders and provide advice, systems and support to improve information management within the organisation.

3.8 Monitoring and Review

Resources and Governance will deliver these functions through:

Knowing how well our systems are performing and proactively monitoring and adapting our systems in response to developing needs.

Monitoring progress against published Strategies and Plans
Using software tools to manage and monitor progress in project delivery

Making better use of Covalent to monitor progress against KPIs

We will engage with internal and external audit regimes to ensure areas of risk, non-compliance or poor practice are identified and actions put in place to mitigate, reduce or eradicate the risk.

The Service Management Team will monitor and manage all aspects of performance, including risk management through service, team and one-to-one meetings. We shall seek to make better use of the Covalent system as a reporting and management tool to gather a wider range of quality performance information to provide greater transparency and visibility of our service performance to key stakeholders.

4   DELIVERY PLAN

Making Clackmannanshire Better

Resources and Governance Business Plan 2014-15

The Council is effective, efficient and recognised for excellence; Vulnerable people and families are supported

1 Resources & Governance KPIs

Covalent Code	KPI	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Target	Lead
ACC ACC 011	Percentage of service financial reports produced to monthly deadlines	N/A	N/A	100%	100%	Liz Shaw
ACC B01 SUS	Performance against phased budgeted spend - Support Services	N/A	92.8%	98.3%	100.0%	Julie Burnett
GOV CNQ SUS	Percentage of Support Services Councillor Enquiries dealt with within timescale	100.0%	89.5%	87.7%	100.0%	Julie Burnett
GOV FOI SUS	Percentage of Support Services Freedom of Information requests dealt with within timescale	96.20%	98.10%	97.20%	100.00%	Julie Burnett
GOV HAS 003	Percentage of managers who have reviewed their Health and Safety Risk Assessment in the last 12 months	50.0%	75.0%	N/A	100.0%	Julie Burnett
GOV SAB SUS	Support Service sickness absence levels	3.47%	6.61%	4.67%	3.25%	Julie Burnett
ITS CUS 001	Percentage of customers satisfied with ICT services	97.0%	97.0%	98.2%	98.0%	John Munro
ITS ITS 001	Percentage of users who can access the Council network remotely	15.0%	20.0%	20.3%	40.0%	John Munro
ITS ITS 002	Percentage of available hours lost on ICT systems due to unplanned incidents	0.060%	0.050%	0.035%	0.050%	John Munro
RAP AUD 001	Percentage of Internal Audit plan completed	N/A	100%	100%	100%	Iain Burns
RAP CRD 001	Payment of suppliers within agreed timescales (30 days)	86.0%	82.9%	84.1%	92.0%	Susan Mackay
RAP CTA 001	Council Tax Collected Within Year	95.20%	95.30%	94.73%	96.00%	Susan Mackay
RAP CTA 007	NDR in year collection rate	96.80%	98.00%	97.66%	98.00%	Susan Mackay
RAP CTA 011	Sundry debt in year collection	83.73%	83.62%	73.15%	90.00%	Susan Mackay

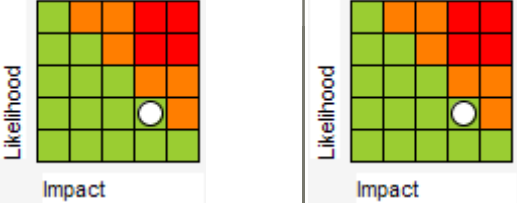| Covalent Code	KPI	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Target	Lead
RAP CTA 014	Current rent as % of net debt	5.26%	5.45%	6.58%	6.00%	Susan Mackay
RAP CTA 019	Debt collection rates > 90 days	42.24%	39.30%	37.01%	35.00%	Susan Mackay
RAP CTA 020	Number days taken on average to process new benefits claims	26	32	47	23	Susan Mackay
RAP CTA 021	Number of days taken on average to process changes to benefits claims	8	9	15	8	Susan Mackay
RAP CTA 022	Percentage of applications to Local Social Fund processed within 2 days (Crisis grants)	N/A	N/A	100.00%	100.00%	Susan Mackay
RAP CTA 023	Percentage of applications to Local Social Fund processed within 28 days (Community Care grants)	N/A	N/A	100.00%	100.00%	Susan Mackay
RAP PAY 001	Accuracy of payroll information	99.71%	99.60%	99.88%	99.90%	Lisa Simpson
RAP PAY 002	Percentage of payroll queries resolved within 2 days	N/A	N/A	98.0%	98.0%	Lisa Simpson
SUS CUS 001	Percentage of customers very or fairly satisfied with the overall service they received	N/A	86.60%	64.00%	90.00%	Julie Burnett
SUS CUS 002	Percentage of customers very or fairly satisfied with the way the service handled any problems	N/A	84.50%	70.00%	90.00%	Julie Burnett
SUS CUS 003	Percentage of customers very or fairly satisfied with the quality of information they received	N/A	86.00%	62.00%	90.00%	Julie Burnett
SUS CUS 004	Number of formal complaints received for Support Services	6	3	0	4	Julie Burnett
SUS PPL 003	Number of Support Services staff recorded as having completed a PRD	N/A	67.0%	88.4%	100.0%	Julie Burnett
SUS SUS 002	Percentage of Support Services projects completed on time	N/A	82%	89%	95%	Julie Burnett
SUS SUS 003	Percentage of Support Services projects proceeding within agreed timescales	N/A	92.00%	82.00%	90.00%	Julie Burnett
SUS SUS 013	Percentage of statutory returns submitted within deadlines (RTI, HMRC, NDR, CTR, DHP, VAT, LFR, Pobe, Capital Returns)	N/A	N/A	95%	100%	Julie Burnett

2 Corporate KPIs

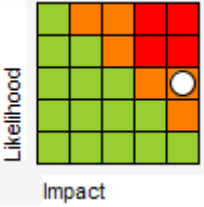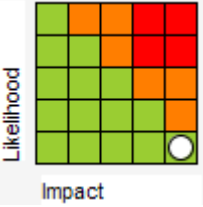| Covalent Code	KPI	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Target	Lead
ACC ACC 009	Ratio of capital financing costs to the net revenue stream for General Fund	7.93%	7.75%		7.90%	Liz Shaw
ACC ACC 010	Ratio of capital financing costs to the net revenue stream for Housing Revenue Account	20.63%	18.50%	18.50%	18.50%	Liz Shaw
ACC B01 COU	Performance against phased budgeted spend - Council	N/A	N/A		100.0%	Liz Shaw
ACC FNR COU	Target level of uncommitted financial reserves is achieved. (£3.6m)	£3,760k	£6,300k		£3,500k	Liz Shaw
GOV FOI COU	Percentage of Council Freedom of Information requests dealt with within timescale	97.4%	98.3%	96.0%	100.0%	Lisa Simpson
GOV HAS 003	Percentage of managers who have reviewed their Health and Safety Risk Assessment in the last 12 months	50.0%	75.0%	N/A	100.0%	Julie Burnett
GOV PRC 001	Percentage score in procurement capability assessment	31.0%	31.0%	37.0%	40.0%	Julie Burnett
GOV SAB 01c	Average Days Sickness Absence (Teachers)	6.9 days	15.7 days	5.7 days	8.0 days	Lisa Simpson
GOV SAB 01d	Average Days Sickness Absence (Other Local Government)	7.9 days	21.1 days	7.9 days	7.0 days	Lisa Simpson
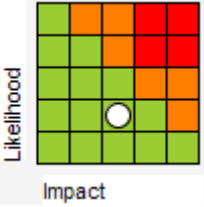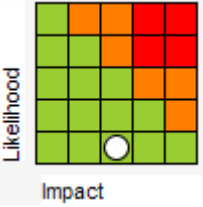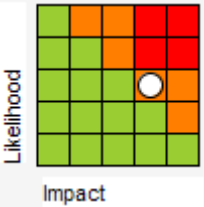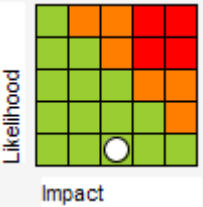
3 Actions

Covalent Code	ACTION	Impact	By When	Lead
ACC ACC 001	Complete review of financial regulations and make proposals for amendments and change	Council financial processes and transactions comply with legislative requirements and are fit for the Council's purpose	30-Sep-2014	Susan Mackay; Liz Shaw
GOV GOV 001	Implement relevant actions derived from revised People Strategy	The Council develops the workforce it needs to deliver services and functions in the future. Links with *Making Clackmannanshire Better*. (MBC)	31-Mar-2016	Lisa Simpson
GOV GOV 002	Complete the job families project (single status) (Phase 1)	Rationalisation of the number of job types across the Council's services. Delivers consistency and resolves the issues resulting from implementing the Living Wage. Links with *Making Clackmannanshire Better*. (MBC)	31-Mar-2016	Lisa Simpson
GOV GOV 003	Deliver phase 2 of the HR / Payroll project. Identify opportunities for efficiencies and more effective working practices.	Implementation of phase 2 will include H&S and L&D modules, making best use of new system and delivering efficiencies across the organisation.	30-Jun-2014	Susan Mackay; Lisa Simpson
ITS ITS 001	Support the implementation of the SWIFT case management system for social services (childcare) (Phase 1)	Childcare team able to access and work on same system as colleagues in Stirling	31-Mar-2015	Derek Barr; John Munro
RAG RAG 001	Support the changes to enable new ways of working	Provides employees with the technology required to carry out their work through more opportunities for remote access and flexible working practices.	31-Mar-2015	John Munro; Liz Shaw; Lisa Simpson
RAG RAG 002	Investigate how communication processes could be improved across Resources and Governance teams and take action to make improvements	A consistent approach to communication such as emails, team meetings and the sharing of information. Employees will develop an improved understanding of future plans and what is happening across the Council. Employees will be better informed and invited to provide constructive feedback. Feedback loops to be developed to confirm actions taken as a result of feedback.	31-Mar-2015	Julie Burnett
RAG RAG 003	Consider every opportunity to manage the contraction of numbers of employees through the provision of advice and support to other services. Ensure the same principles are applied to Resources and Governance opportunities - consider service redesign and different delivery methods.	Enables further savings to be made that contribute to the overall requirement savings target of £25m over four years.	31-Mar-2015	Chris Alliston

Covalent Code	ACTION	Impact	By When	Lead
RAG RAG 004	Develop existing team Leaders and Service managers to realise their potential to lead teams through the challenges facing the Council in the next four years. Each service to develop a succession plan and put in place a development plan that will support it. Build capacity of existing teams and individuals through identifying gaps in knowledge and skills and identifying appropriate training or learning required.	The services build in capacity and provide career progression for teams and individuals. Gaps in skills and knowledge are bridged resulting in more motivated teams and driving out further efficiencies.	31-Oct-2014	John Munro; Liz Shaw; Lisa Simpson
RAG RAG 005	Deliver actions and projects required to support the outcomes of the Making Clackmannanshire Better Programme. Particular focus on Workstream 5, making the Organisation Stronger.	The Council's transformation programme is delivered with improved outcomes for Clackmannanshire communities and efficiencies are generated leading to further savings.	31-Mar-2015	John Munro; Liz Shaw; Lisa Simpson

Resources & Governance Risk Register 2014/15

RISK	RAG RAG 001	Lack of corporate compliance with processes for legal, financial, technological and HR input into significant projects.	Status	✅	Current Rating	8	Target Rating	8
Managed By	Julie Burnett; John Munro; Liz Shaw; Lisa Simpson							
Potential Effect	Council suffers reputational or financial loss and/or is unable to maximise best value as project outcome. Service has to change approach or objective to ensure corporate or legislative compliance. Dissatisfied customer.							
Related Actions					**Internal Controls**	Governance Panel		
						Governance Improvement Plans		
						Governance & Audit Processes		

RISK	RAG RAG 002	Services not aware of or not applying appropriate Council governance framework and strategy in practice.	Status	⚠️	Current Rating	15	Target Rating	10
Managed By	John Munro; Liz Shaw; Lisa Simpson							
Potential Effect	Council suffers reputational or financial loss and/or is unable to maximise best value.							
Related Actions					**Internal Controls**	Governance Panel		
						Governance Improvement Plans		
						Governance & Audit Processes		

RISK	RAG RAG 003	Support service professional and technical guidance and advice is not followed.	Status	⚠️	Current Rating	15	Target Rating	5
Managed By	Julie Burnett							
Potential Effect	Risk to council and corporate management team of increased financial commitment, poor practice and reputational damage. Negative publicity or potential to overspend. Reactive actions required to fix problems - resource is diverted from planned work.							
Related Actions					**Internal Controls**			

RISK	RAG RAG 004	No single information point that provides a complete view of corporate projects and corporate asset management plans. Require complete understanding of Business Transformation Process that will provide future direction for Council	Status	✅	Current Rating	6	Target Rating	3
Managed By	Julie Burnett							
Potential Effect	Unable to provide effective and relevant advice when required. Unable to shape support services to ensure effective and efficient use of resources to support achievement of vision.							
Related Actions					**Internal Controls**	Making Clackmannanshire Better Programme		

RISK	RAG RAG 005	Failure or unavailability of secure ICT systems.	Status	⚠️	Current Rating	12	Target Rating	3
Managed By	John Munro							
Potential Effect	Impact on other services / remainder of Council / public							
Related Actions					**Internal Controls**	Information & Communication Technology Strategy		
						Business Continuity Plans		

RISK	RAG RAG 006	Rising stress levels across wider support services teams and other services	Status	✓	Current Rating	9	Target Rating	3
Managed By	Julie Burnett; John Munro; Liz Shaw; Lisa Simpson							
Potential Effect	Impact on teams, Managers and individuals is increased workloads leading to incidents of stress in some employees. Impact on service delivery - reduced level of service, increase in workload for remaining employees.							
Related Actions					**Internal Controls**	Health & Safety Management System		
						Maximising Attendance & Employee Wellbeing Policy		

RISK	RAG RAG 007	Financial loss through system or process failure	Status	✓	Current Rating	8	Target Rating	4
Managed By	Susan Mackay; Liz Shaw							
Potential Effect	Unable to mitigate the risk of unrecovered income (debt); expenditure controls are ineffective due to lack of time, resource, external factors or system failure							
Related Actions					**Internal Controls**	Financial Regulations		
						Governance & Audit Processes		

RISK	RAG RAG 008	Number of Resources and Governance and Corporate projects requiring input from one or more Resources and Governance teams	Status	⚠	Current Rating	12	Target Rating	4
Managed By	Julie Burnett							
Potential Effect	Resource is diverted to projects resulting in fall in quality or delays in "business as usual"							
Related Actions					**Internal Controls**	Business Planning Process		

CLACKMANNANSHIRE COUNCIL	THIS PAPER RELATES TO ITEM 11
Report to Resources & Audit Committee	**ON THE AGENDA**

Date of Meeting: 19 June 2014

Subject: Strategy & Customer Services Business Plan 2014/15

Report by: Head of Strategy & Customer Services

1.0   Purpose

1.1.   This report presents the Strategy & Customer Services Business Plan for 2014/15 to Resource & Audit Committee for consideration.

2.0   Recommendations

2.1.   It is recommended that Committee notes the report, commenting and challenging as appropriate.

2.2.   It is recommended that Committee approve the Performance Measures for scrutiny purposes over the next 12 months.

3.0   Considerations

3.1.   The Business Plan sets out the objectives and aims of the service (see Appendix A). It is aligned with Making Clackmannanshire Better and the Single Outcome Agreement.

3.2.   The Business Plan has been developed using a wide range of sources, for example, customer insight, staff feedback, performance results and self assessment, including a governance self assessment validated through peer review.

3.3.   Its format follows corporate guidance and good practice, and is set out in 4 distinct sections: service overview, key issues, approaches and delivery plan. The delivery plan contains detail of the actions we will take to improve performance, the performance measure we will use to gauge progress against stated outcomes, and the risks we believe, should they materialise, may affect our ability to deliver services and intended performance outcomes.

3.4.   This year's Business Plan recognises the budget challenges and wider opportunities arising from the Making Clackmannanshire Better change programme, including the need to reduce/re-align resources to priority areas.

3.5.   Once finalised, the Business Plan will be available all to stakeholders through Clacksweb. It has been translated into operational plans for the 3 main business units within Strategy and Customer Services, and in turn into team

plans. These will form the basis for staff PRDs, ensuring that staff objectives and learning and development plans are firmly based in a shared vision and priority outcomes.

3.6. The Business Plan will be delivered within the budget approved for Strategy & Customer Services at the Special Council meeting on 21 February 2014. As such, there are no direct financial implications arising from this report.

4.0 Conclusions

4.1. The Business Plan sets out the objectives and aims of Strategy & Customer Services for the year 2014/15. It will be translated into individual objectives and learning plans through the PRD process, so that all staff are working towards the delivery of the Council's stated priority outcomes within Making Clackmannanshire Better.

5.0 Sustainability Implications

5.1. There are no direct sustainability implications associated with this report.

6.0 Resource Implications

6.1. Financial Details

6.2. 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 ☑

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

6.4. Staffing

6.5. There are no direct staffing implications associated with this report.

7.0 Exempt Reports

7.1. Is this report exempt? Yes ☐ (please detail the reasons for exemption below) No ☑

8.0 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	☐
Our communities are more cohesive and inclusive	☐
People are better skilled, trained and ready for learning and employment	☐
Our communities are safer	☐
Vulnerable people and families are supported	☑

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Substance misuse and its effects are reduced ☐

Health is improving and health inequalities are reducing ☐

The environment is protected and enhanced for all ☐

The Council is effective, efficient and recognised for excellence ☑

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

9.0   Equalities Impact

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

10.0   Legality

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

11.0   Appendices

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

Appendix A - Strategy & Customer Services Business Plan 2014/15

12.0   Background Papers

12.1   Have you used other documents to compile your report? (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)
Yes ☑ (please list the documents below) No ☐
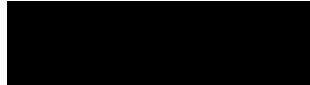
Corporate Plan 2013 - 2017 and Single Outcome Agreement (SOA)

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Stuart Crickmar	Head of Strategy & Customer Services	2127

Approved by

NAME	DESIGNATION	SIGNATURE
Stuart Crickmar	Head of Strategy & Customer Services	██████████
Nikki Bridle	Director of Finance & Corporate Services	██████████

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Strategy & Customer Services

Business Plan 2014-15

Making Clackmannanshire Better

Version	1.0
Status	Draft
Date	22-05-14

1	**SERVICE OVERVIEW**
1.1	**SERVICE MISSION / PURPOSE & OBJECTIVES**

Purpose

Strategy and Customer Services has a broad remit which is both strategic and operational and corporate and service-specific.

Its main objectives are to:

- support the strategic positioning of the Council by:
  - developing and supporting effective strategic partnerships through the mechanism of community planning;
  - promoting strategic policy cohesion within the Council;
  - enhancing the strategic capacity of the Council.

- enhance corporate performance and service delivery by:
  - providing effective internal services including business support, communications, research, performance and strategy development.

- deliver excellent services in local communities by:
  - providing effective external customer services through a range of access points including libraries, local offices, registrars, contact centre and Clacksweb;
  - providing opportunities for community learning and development;
  - co-ordinating the organisation's response to major incidents and emergencies.

Vision & Guiding Principles

As part of Finance & Corporate Services, working together with colleagues in Support Services, our vision is:

to achieve excellence in the delivery of corporate, support and customer services and be recognised for our first class people, first class customer service and first class results.

To achieve our Vision, our **Guiding Principles** are:

- Continuous improvement
- Customer service excellence
- Value our people
- Effective governance and stewardship
- Transparency
- Sustainability
- Equality

Values & Behaviours

As a service we share the Council's **CORE values**, those being:

Commitment, Trust and Partnership
Openness and Accountability
Respect and Dignity
Equity, Fairness and Inclusion

We are committed to the following **Behaviours:**

- Openness and integrity
- Focus on quality
- Confidence and "can do"
- Team work
- Listening
- Responsibility & accountability
- Supportive leadership

1.2 SERVICE STRUCTURE
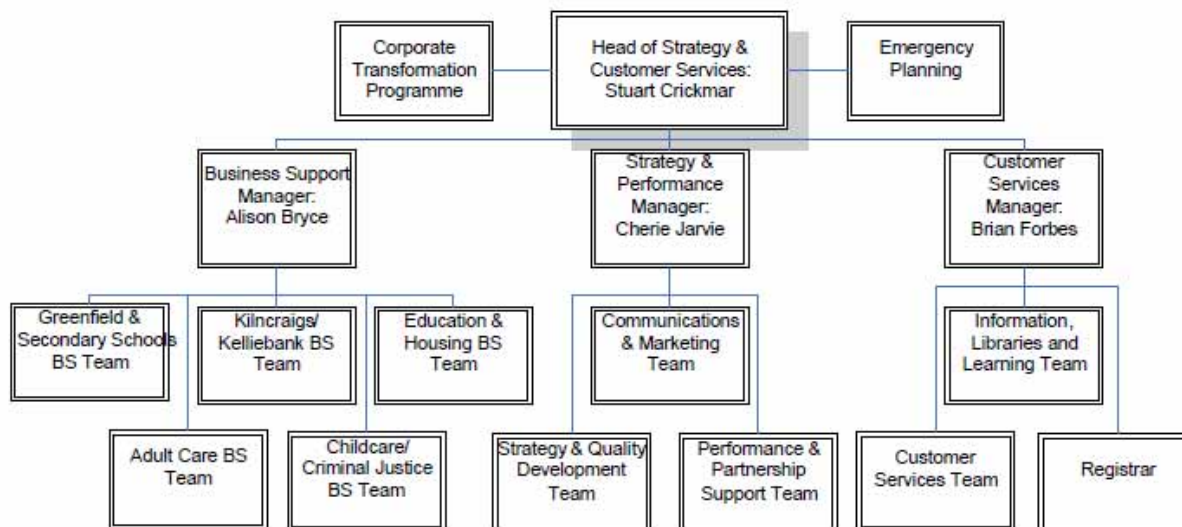
1.3 BUDGET

REVENUE BUDGET		CAPITAL BUDGET	
Total Budget	£6,578,040	Total	NONE

2   KEY ISSUES FOR THE SERVICE

In reaching these key issues, the following have been considered:

- Governance Statement;
- CIM and CSE improvement planning;
- corporate policies & strategies, particularly those we have responsibility for;
- corporate and service risk register;
- staff feedback including results from the staff survey;
- feedback from customers and results from our customer surveys;
- feedback from communities, partners and other stakeholders;
- performance Results from previous Business Plan.

Our key issues for 2014/15 reflect the challenges and opportunities of Clackmannanshire Council as a whole.

- The public sector reform agenda is significant and quickening in pace and scope; from health & social care integration, local integrated service delivery and joint resourcing, to reform of criminal justice, community empowerment and 3rd sector commissioning, the demands on our organisational support resources are substantial. Within a context of necessary managed contraction of services and reducing operating costs, the importance of good service workforce planning and prioritisation will be essential to ensure that we have enough of the right people with the right skills working on the right things. At present we have some areas where increased demands are creating significant pressures, whilst there are less essential discretionary services that we need to withdraw from in a managed way that minimises impact on customers and stakeholders

- In the same vein, as an organisational development and support service, we need to develop organisational workforce planning arrangements over the coming year that will enable managed contraction within context of Making Clackmannanshire Better;

- Our governance self assessment highlights the need for further improvements in the deployment and dissemination of agreed policies and procedures for staff with specific attention to Equality and Diversity policies.

- Similarly, whilst significant efforts have been made in recent years, within a context of significant change, the need for sound approaches to staff communication and learning and development continue to be a high priority.

- Change brings uncertainty and risk, therefore business continuity and risk management arrangements for the service and the Council, particularly in light of recent moves to Kilncraigs will remain a key priority;

- Improvements in major project and programme management and risk arrangements, particularly associated with capital investment and corporate transformation also come into clear focus for us over the coming year;

The challenges facing the Council and Strategy and Customer Services in 2014/15 are tougher than ever; we know that the pace of change will quicken substantially in the

coming few years, with the need for radical transformation of service delivery against a backdrop of contracting budgets and increasing demands.

These challenges will require us all to be adaptive, flexible and open-minded. We will need to adopt new approaches, attitudes and behaviours to how we work, with a particular focus on clarity of priorities, workforce planning and staff resilience, combined with more integrated and jointly resourced working with our partners and communities.

Key activities that inform our delivery plan as further outlined as follows:

1. **Making Clackmannanshire Better & Public Sector Reform:**

Making Clackmannanshire Better:

- MCB programme management and development of target operating models
- Support range of consultations on budget and MCB change programmes
- Workstream 1: Making it Happen - Tullibody Pilot
  - Implementing Test of Change on Integrated Transactional Services
  - Implementing Test of Change on Integrated Family and Community-based Services
  - Implementing Test of Change on Integrated Preventative and Early Intervention Service for Vulnerable People and Families.
- Workstream 4: Making Best Use of Assets and Resources:
  - Develop Community Asset Management Strategies (CAMS)
  - Manage savings related to voluntary organisations
  - Develop Corporate Customer Services Strategy
  - Implement Information, Library & Learning Strategy Action Plan
  - Implement transition into new Speirs Centre
- Workstream 5: Making our Organisation Stronger/Developing our People:
  - Implement approved People Strategy Action Plan
  - Implement Communications Strategy Action Plan

Public Sector Reform:

- Support Community Planning Reform & efficient business of the Clackmannanshire Alliance & sub-committees, including implementation of key changes such as the duties arising from the Community Empowerment and Renewal Bill and Future Models for Community Justice in Scotland.
- Develop a Joint Resourcing Plan to support delivery of the ambitions of the Single Outcome Agreement 2013/23.
- Implement the Community Wellbeing Partnership Team (CWPT) programme, providing strategic oversight of integrated public services; including early years, working age, older peoples services and local community planning, which encompasses key community safety priorities such as countering potential terrorism and serous organised crime activity in Clackmannanshire.
- Support the development of 3rd sector commissioning strategy to support public sector redesigns.
- Refresh Single Outcome Agreement in 2014 to reflect developments in Community Planning to ensure it remains fit for purpose within a rapidly evolving environment..

We need to ensure that all corporate approaches for which we have responsibility as a service are fully defined/aligned with best practice, are supported by development programmes, are systematically deployed to appropriate staff, and are regularly evaluated, ensuring that all key risks are addressed.

2. **Delivering a sustainable budget and a managed contraction of service:**

- Implement approved budget savings proposals
- Implement Business Support model review recommendations
- Conduct review of current Strategy and Performance business model/service structures to achieve financial savings and better support organisational change priorities
- Conduct review of Customer Services to achieve financial savings
- Manage transition of reduced funding to voluntary organisations

3. **Programme of Civic Duties and Democracy**

- Support the Provost to deliver a programme of civic events in 2014/15
- Support the delivery of the Commonwealth Games and Legacy 2014 activities including Queen's Baton Relay (QBR)
- Provide support for elections/referendum in 2014 and 2015

4. **Continuous Improvement & Governance**

- Service Governance and Performance - Investors in People, Data Protection, Equality and Diversity, Health and Safety, Financial Regulation and Contract Standing Orders, Customer Service Excellence, and priority improvement actions identified from Clackmannanshire Improvement Model (CIM)/Annual Governance Statement (AGS) self-assessments

3 APPROACHES

3.1 CUSTOMER/STAKEHOLDER ENGAGEMENT

Our aim is to consistently achieve the very highest standards of customer service for all our stakeholders. We will continue to build upon the Customer Service Excellence quality standard, which we have held for the last 3 years.

We will continue to strive to be the best we can with the resources available and maintain our reputation as a service aiming to continually improve, whilst simultaneously recognising the need to reduce service costs and the potential impact this may have on service levels.

We will continue to develop and implement our annual improvement action plan in line with key priority themes. Performance will be routinely monitored and reported through our service performance reports, both internally and externally.

Our service will continues its key role in developing community engagement for Clackmannanshire Council and Clackmannanshire Alliance. We continue to manage the Clacks 1000 citizens panel and provide liaison with community councils and other community groups in Clackmannanshire. We will continue to work with Alliance partners on Public Sector Reform issues, helping ensure a more integrated approach to the delivery of local public services, both at a strategic and operational level.

Customers, staff and the wider community will continue to be consulted on any changes arising from the Making Clackmannanshire Better programme.

3.2 SUPPORTING AND DEVELOPING STAFF

Making Our Organisation Stronger and Developing Our People are key themes of MCB. Our service approach to People Development is aligned with corporate management approaches, consistent with the Council's People Strategy and the Investors in People (IIP) quality standard.

We aim to ensure all staff receive a PRD on an annual basis, supplemented with regular 121s, with the PRD forming the core of the agenda for these meetings. 92% of respondents in the latest staff survey indicated they had held a PRD meeting with their line manager at least once a year. We aim to achieve 100% for all staff (excluding those not available due to, for example, long term sick leave).

A competency framework has been introduced into 121s and this, together with PRD arrangements, will continue to be systematically deployed - building on the significant progressed made in the last 12 months. Learning and development will continue to be

evaluated through discussion during the PRD process and, following PRDs, team and service learning and development plans will continue to be developed and agreed by the management team.

Over the last few years we have placed significant emphasis on improving and deploying our approaches to supporting and developing our staff. In comparing the staff survey results between 2012 and 2013, there were positive improvements in 27 out of the 36 performance measures, with a negative impact in only 9 measures.

We will not rest on our laurels but continue to strive for continuous improvement in everything we do. We will continue to seek out ways of improving communication with staff, develop our approaches to demonstrating strong and consistent leadership skills, provide further training opportunities for staff, and actively recognise staff for doing a good job. More generally, we will continue to work closely with staff across the service to identify their ongoing needs and develop a better understanding of what approaches are helping them deliver better services, and where further improvements would benefit staff and customers.

Strategy & Customer Services form part of the wider Finance & Corporate Services (FCS) management team. The FCS management team meets every two months, with a focus on strategic and forward planning and organisational development. This includes an extensive programme of staff engagement to ensure that all our staff have ownership of a shared vision. As reported above, approaches adopted during last year have had a positive impact in many areas, and this is an area we will continue to develop this year.

The Strategy & Customer Services management team meetings and operational/team meetings, with core agendas, are held monthly, focussing mainly on team administrative issues and corporate and service communication. Corporate/directorate cascade briefings are discussed. The 2013/14 staff survey indicated an improvement from the previous year in the % of staff who felt communication within the service is good. However there is still some way to go and this will be an area for continued focus over the coming year, particularly as we recognise the importance of regular, effective communication during a time of change and uncertainty.

We will continue to ensure other staff support mechanisms are deployed, including back-to work interviews following periods of staff absence, and corporate induction processes when a new member of staff joins the team, or where someone takes up a new or different role.

Health and Safety risk assessments are being maintained. These will be reviewed and communicated to staff regularly. Up to date workplace assessments will be in place for all staff, as will fire awareness and health and safety awareness development.

We need to continually review Disaster Recovery Plans (DRPs) in our three main service areas. Over the coming year, our focus will be on continuing to embed operational risk and performance management and deploying approaches aimed at improving knowledge transfer and increasing scope for further innovation.

The service reviews and updates its operational and team plans annually in line with the business plan. This includes KPIs and operational plan actions and a risk register. These are reviewed at the management team.

The following diagram illustrates our planning and delivery, and reporting and accountability framework. It sets out the performance focus at each level within the service. Each management team has a core agenda, and terms of reference agreed by the Finance & Corporate Services management team.

PLANNING & DELIVERY			REPORTING & ACCOUNTABILITY
Strategic –focus forward looking, visioning, scanning horizon, collaborative working, team building, strategic risks and opportunities	Finance & Corporate Services Mgt Meetings	Meets Bi-monthly	Annual Review Report to CMT Business Plan Development
Tactical – focus delivery of business plan, tactical risks and opportunities	Service Management Meetings	Meets Monthly	1/4ly Progress Report to CMT from Covalent based on Business Plan
Operational – focus delivery of operational plan, programme and operational risks and opportunities	Operational Management Meetings	Meets Monthly	Monthly Exceptions Report to Service Mgt Team from Covalent based on Operational Plan
Delivery – focus delivery of team and project monitoring, project risks and opportunities	Team Meetings	Meets Monthly	Monthly Exceptions Report to Operational Mgt Team from Covalent based on Team Plan

COMMUNICATION & ENGAGEMENT

Responsibility for operational and team plans is assigned to managers and team leaders through the PRD process and monitored monthly on an exceptions basis.

We endeavour to ensure that major programmes and projects within the operational and team plans have detailed project plans, with supporting risks and issues logs as appropriate.

We have continued to develop our use of the Covalent system during 2013/14, providing greater transparency and visibility of our service performance to key stakeholders. Over this year we will ensure standard reporting at all levels is systematically deployed.

We continue to develop a balanced set of performance measures to tell us how well we are performing, and where we need to improve. We will continue to develop a series of meaningful operational measures that drive operational improvements.

As part of our Public Performance Reporting framework, we will publish our service Annual Report for 2013/14, following consideration at Resources & Audit Committee in June 2014.

4 SERVICE LINKS TO CORPORATE PRIORITY OUTCOMES

Of the 9 priority outcomes, Strategy and Customer Services is primarily focused on the following:

• Our communities are more cohesive and inclusive; and

• The Council is effective, efficient and recognised for excellence.

5 DELIVERY PLAN

Making Clackmannanshire Better

Strategy & Customer Services Business Plan 2014-15

PRIORITY OUTCOME 2 - OUR COMMUNITIES ARE MORE COHESIVE AND INCLUSIVE

2.1 Community Results

Covalent Code	KPI	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Target	Lead
SAP CL1 006	Local residents who feel Clackmannanshire has strong sense of community	47%	54%	70%	75%	Cherie Jarvie
SAP CL1 007	Local residents who feel that they should be consulted more on how local services are delivered	53%	52%	46%	40%	Cherie Jarvie
SAP CL1 027	Local residents who state that they feel public agencies work well together in Clackmannanshire	30%	32%	42%	45%	Cherie Jarvie
SAP CL1 030	Overall satisfaction with opportunities for participating in local decision making	23%	26%	34%	40%	Cherie Jarvie

2.2 Community Actions

Covalent Code	ACTION	Impact	By When	Lead
SCS BUS 001	Support the Provost to plan & deliver a programme of civic events in 2014/15	Increase in strong sense of community	31-Mar-2015	Alison Bryce
SCS SAP 006	Provide support for elections and referendum in 2014/15	Increased efficiency	31-Dec-2014	Alison Bryce
SCS SAP 011	Support consultations on major policy priorities: • budget process • corporate strategies • MCB initiatives	Improved service delivery and efficiencies. Increase in community satisfaction	Budget by 31-Dec-2014 Others by 31-Mar-2015	Cherie Jarvie

Covalent Code	ACTION	Impact	By When	Lead
SCS SCS 001	Support delivery of Commonwealth Games and Legacy 2014 activities including Queen's Baton Relay	Increase strong sense of community	31-Dec-2014	Stuart Crickmar
SCS SCS 002	MCB Workstream 1 Making it Happen - Tullibody Pilot • Take the lead on Test of Change for Integrated Transactional Services • Support Test of Change on Integrated Family and Community-based Services • Support Test of Change on Integrated Preventative and Early Intervention Service for Vulnerable People and Families.	Improved service delivery and efficiencies. Increase in community satisfaction. More integrated local public services	31-Dec-2014	Stuart Crickmar

PRIORITY OUTCOME 9 - THE COUNCIL IS EFFECTIVE, EFFICIENT AND RECOGNISED FOR EXCELLENCE

9.1 Customer Results

Covalent Code	KPI	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Target	Lead
BUS BUS 002	Customer satisfaction with overall experience of Business Support	94.1%	94.1%	85.2%	95%	Alison Bryce
CUS CAP 001	Satisfaction with overall experience of Community Access Points	100.0%	97.8%	97.6%	100%	Brian Forbes
CUS CTC 003	Satisfaction with overall experience of the Contact Centre	90.0%	87.0%	90.4%	92%	Brian Forbes
CUS REG 001	Customer satisfaction with overall experience of the Registrars Service	100.0%	97.1%	100.0%	100%	Brian Forbes
SAP SAP 001	Customer satisfaction with overall experience of Strategy & Performance	82.3%	85.0%	85.0%	90%	Cherie Jarvie
SAP SAP 002	Satisfaction with Strategy & Performance: Consultation and Information	n/a	n/a	100%	100%	Cherie Jarvie
SAP SAP 003	Satisfaction with Strategy & Performance: Communications services	94.95%	92.41%	94.82%	96%	Cherie Jarvie
CUS C01 SCS	Number of formal complaints received about service	4	9	14	9	Stuart Crickmar
CUS C02 SCS	% of formal complaints dealt within timescale	-	-	92.9%	100%	Stuart Crickmar
CUS C03 SCS	% of formal complaints upheld/partially upheld	-	-	64.3%	50%	Stuart Crickmar
GOV FOI SCS	% of FOI requests dealt within timescale - S&CS	-	-	85.7%	100%	Stuart Crickmar
BUS CNQ SCS	% of Councillor enquiries dealt within timescale - S&CS	-	-	69.2%	100%	Stuart Crickmar
BUS MPQ SCS	% of MPs/MSPs enquiries dealt within timescale - S&CS	-	-	53.8%	100%	Stuart Crickmar

9.2 People Results

Covalent Code	KPI	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Target	Lead
SAP S01 SCS	Staff survey - Strategy & Customer Services staff - I am satisfied with my job	69.2%	75.0%	68.8%	75%	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie
SAP S14 SCS	Staff survey - Strategy & Customer Services staff - My senior managers demonstrate strong and consistent leadership skills	44.2%	37.9%	54.8%	65%	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie
SAP S15 SCS	Staff survey - Strategy & Customer Services staff - I have a Performance Review & Development meeting at least once a year	74.4%	76.9%	92.1%	100%	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie
SAP S30 SCS	Staff survey - Strategy & Customer Services staff - I feel that communication across my service/team is good	43.6%	45.1%	51.6%	60%	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie
SAP S31 SCS	Staff survey - Strategy & Customer Services staff - I get all the information I need to do my job	48.7%	46.5%	50.0%	60%	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie
SAP S34 SCS	Staff survey - Strategy & Customer Services staff - There are ways to feedback my views to management within my service	44.9%	37.6%	43.8%	60%	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie
SAP S40 SCS	Staff survey - Strategy & Customer Services staff - Survey response rate	32.6%	40.4%	24.5%	50%	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie
GOV AB1 SCS	Average Days Sickness Absence (Strategy & Customer Services)	n/a	n/a	9.1 days	7.0 days	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie

9.3 Key Performance Results

Covalent Code	KPI	2011/12	2012/13	2013/14	2014/15	Lead
		Value	Value	Value	Target	
CUS LIB 005	% of population who regularly use the library (i.e. borrow books)	16.0%	12.1%	12.1%	15%	Brian Forbes
SAP CL1 032	% of residents who agree that Clackmannanshire Council meets or exceeds expectations in communicating with them	25.0%	28.0%	38.0%	50%	Cherie Jarvie; Karen Payton
SAP CL1 033	% of residents who are satisfied with the information that the Council provides on performance	26.0%	29.0%	39.0%	45%	Cherie Jarvie
SAP CSE COU	% of Council services with full CSE accreditation	17%	67%	67%	83%	Cherie Jarvie
SAP S18 ALL	Staff survey - All staff - I feel I have fair and equal access to development	50.0%	48.7%	49.8%	60%	Stuart Crickmar
SAP S19 ALL	Staff survey - All staff - Senior Managers (received an appropriate level of leadership coaching)	39.0%	38.6%	44.9%	90%	Stuart Crickmar
SAP S29 SCS	Staff survey - Strategy & Customer Services staff - The level and timing of communication across the Council is good	23.1%	27.5%	29.7%	35%	Stuart Crickmar; Cherie Jarvie
SAP S35 ALL	Staff survey - All staff - I read the staff magazine 'The Grapevine' and find it useful	41.0%	38.8%	37.7%	45%	Stuart Crickmar

9.4 Financial Results

Covalent Code	KPI	2011/12	2012/13	2013/14	2014/15	Lead
		Value	Value	Value	Target	
SCS SCS BUD	Budget savings	n/a	n/a	£272.83k	£310k	Alison Bryce; Brian Forbes; Cherie Jarvie

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CUSTOMERS

Covalent Code			ACTION	Impact	By When	Lead
			Open newly refurbished Speirs Centre facility including modern library, registrars and local and family history service (local history: Speirs, Patons & Kilncraigs reception)	Improved customer satisfaction Increased usage	30 Sep-2014	Brian Forbes
			Working with colleagues in Education, support the development of a Gaelic Language Plan	Statutory compliance Improved customer satisfaction	30 Sep 2014	Cherie Jarvie Brian Forbes
			Ensure Strategy & Customer Services Year 1 actions relating to Gaelic Language Plan are implemented	Statutory compliance Improved customer satisfaction	31 Mar 2014	Cherie Jarvie Brian Forbes
			Strategy & Customer Services will demonstrate that it continues to build on the CSE quality standard	Improved customer satisfaction	31-Mar-2015	Stuart Crickmar
			Achieve reaccreditation CSE standard	Improved customer satisfaction	30-Jul-2014	Stuart Crickmar

PEOPLE

Covalent Code			ACTION	Impact	By When	Lead
			Strategy & Customer Services will demonstrate that it is operating to the IIP quality standard	Improved SCS staff satisfaction More SCS staff say communications is good More SCS staff say they receive a PRD and regular, useful feedback from their manager	31-Mar-2015	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie
			Develop, with staff involvement, clear service L&D priorities linked to objectives, risk and opportunities	Improved SCS staff satisfaction More SCS staff say communications is good	30-Aug-2014	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie
			Sample assess 10% PRDs to ensure all are done and high standards are maintained	Improved SCS staff satisfaction More SCS staff say communications is good More SCS staff say they receive a PRD and regular, useful feedback from their manager	30-Aug-2014	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie
			Develop a service workforce plan that will support the service's priorities, including managed contraction over the next 5 years	Improved SCS staff satisfaction More SCS staff say communications is good	31-Dec-2014	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie

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RESOURCES

Covalent Code	ACTION	Impact	By When	Lead
SCS BUS 002	Implement Business Support model recommendations and achieve a managed contraction of services.	Increased efficiency Reductions in operating costs Demonstrate Best Value	30-Jun-2014	Alison Bryce
SCS CUS 003	Conduct review of Customer Services to achieve savings and reflect managed contraction of council services.	Increased efficiency Reductions in operating costs Demonstrate Best Value	30-Jun-2014	Brian Forbes
SCS SAP 007	Conduct review of current Strategy and Performance business model/structures to achieve savings and reflect managed contraction of council services	Increased efficiency Reductions in operating costs Demonstrate Best Value	30-Jun-2014	Cherie Jarvie
SCS SCS 027	Implement approved budgetary reductions for 2014/15	Reductions in operating costs	31-Mar-2015	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie

Covalent Code	ACTION	Impact	By When	Lead
	Ensure that Strategy & Customer Services operates to very highest standards of Governance	Improved staff satisfaction Improved governance	31-Mar-2015	Brian Forbes
	Review service records management, data protection & FOI systems & improve staff awareness & development	Improved staff satisfaction Improved governance	31-Oct-2014	Brian Forbes
	Review service equality & diversity systems and improve staff awareness & development	Improved staff satisfaction Improved governance	31-Dec-2014	Brian Forbes
	Review service systems for dissemination of policies and procedures to staff improve staff awareness & development	Improved staff satisfaction Improved governance	31-Mar-2015	Brian Forbes
	Review systems and staff awareness of Finance Regulations, CSO & delegated responsibility	Improved staff satisfaction Improved governance	31-Mar-2015	Brian Forbes

9.6 Key Performance Actions - Outcomes

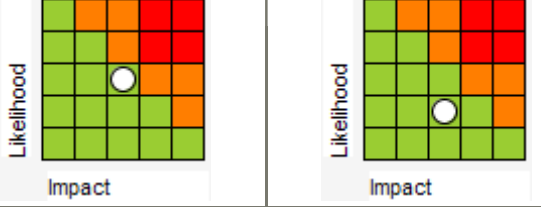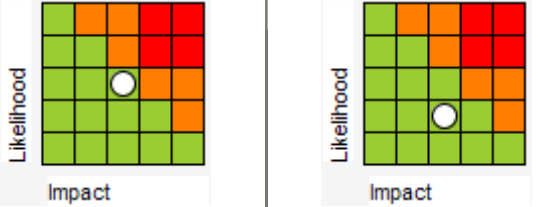| Covalent Code	ACTION	Impact	By When	Lead
SCS SAP 001	Support Public Service Reform & efficient business of the Alliance through implementation of agreed delivery plans	Increase in strong sense of community Reducing inequalities Improved service delivery Improved integration	31-Mar-2015	Stuart Crickmar Cherie Jarvie
SCS SAP 002	Secure agreement on joint resourcing plans for the Alliance	Increased efficiency Reductions in operating costs Improved service delivery Improved integration	31-Mar-2015	Cherie Jarvie
SCS SAP 003	Through Community Wellbeing Partnership Team develop a 3rd sector commissioning strategy that supports delivery of the SOA whilst enabling a sustainable 3rd sector in Clackmannanshire	Increase in strong sense of community Increased efficiency Reductions in operating costs Improved service delivery Improved integration	31-Mar-2015	Stuart Crickmar
SCS SAP 005	Refresh Single Outcome Agreement	Increase in strong sense of community	30-Sep-2014	Cherie Jarvie
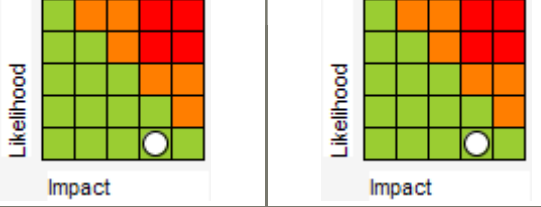
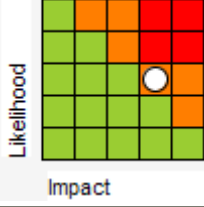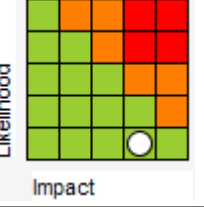| Covalent Code	ACTION	Impact	By When	Lead
	Develop a revised Corporate Customer service Strategy	Improved customer satisfaction Increased efficiency	31-Oct-2014	Brian Forbes
	Implement People Strategy actions in support of MCB programme	Improved organisational efficiency Increased staff satisfaction Improved governance	31-Mar-2015	Cherie Jarvie
	Develop an organisational Workforce Plan in support of the MCB programme	Improved organisational efficiency Increased staff satisfaction	31 -Dec-2014	Cherie Jarvie
	Implement Communications & Marketing Strategy actions in support of the MCB programme	Improved reputation externally Improved citizen satisfaction - Clacks 1000 More staff say that communication across the council is good	31-Mar-2015	Cherie Jarvie

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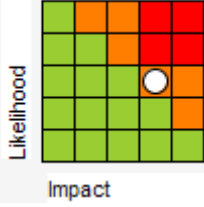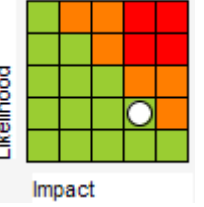
Covalent Code			ACTION	Impact	By When	Lead
			Implement Information, Library & Learning Strategy actions in support of MCB programme	Improved customer satisfaction Increased efficiency	31-Mar-15	Brian Forbes
			Review and effectively deploy organizational approaches	Improved governance Improved reputation internally and externally	31-Mar-2015	Cherie Jarvie
			Risk management	Improved governance Improved reputation internally and externally	31-Dec-2014	Cherie Jarvie
			Programme & Project Management	Improved governance Improved reputation internally and externally	31-Oct-2014	Stuart Crickmar
			Management Information	Improved governance Improved reputation internally and externally	31-Mar-2015	Cherie Jarvie
			Implement CIM improvement framework	All services achieving CSE Council maintains and builds on EFQM 'Recognised for Excellence' accreditation status	31-Mar-2014	Cherie Jarvie
			Support SCS, CRS, Support Services to retain CSE	All services achieving CSE	31-Mar-2014	Cherie Jarvie
			Deliver the CIM self assessment programme	Council maintains and builds on EFQM 'Recognised for Excellence' accreditation status	31-Mar-2015	Cherie Jarvie
SCS SAP 023			Report annual reviews of:	Improved governance Improved reputation internally and externally	31-Dec-2013	Cherie Jarvie
	SCS SAP 023 1		SOA	Improved governance Improved reputation internally and externally	31-Dec-2013	Cherie Jarvie
	SCS SAP 023 2		Corporate Plan	Improved governance Improved reputation internally and externally	31-Dec-2013	Cherie Jarvie
	SCS SAP 023 3		SPI Direction	Improved governance Improved reputation internally and externally	30-Sep-2013	Cherie Jarvie
SCS SCS 023			Scrutiny Improvement	Improved governance	31-Mar-2014	Stuart Crickmar
	SCS SCS 023 1		Implement plan approved Feb 2014	Improved governance	31-Mar-2015	Stuart Crickmar
	SCS SCS 023 3		Undertake risk-based assessment with R&A Committee	Improved governance	31-Dec-2014	Stuart Crickmar
SCS SCS 024			Provide Programme Support to the Council's	Improved service delivery and efficiencies.	31-Mar-2014	Stuart Crickmar

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Covalent Code	ACTION	Impact	By When	Lead
	transformation programme	Increase in community satisfaction.		
SCS SCS 025	Gain council approval and Implement the revised Corporate Asset Management Strategy to support Making Clackmannanshire Better	Effective governance Improved efficiency	31-Oct-2014	Stuart Crickmar

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Risk Register 2014-15

RISK	FCS SCS 016	Extended failure to be able to communicate with customers/undertake transactions for customers	Status	✓	Current Rating	8	Target Rating	4
Managed By	Brian Forbes							
Potential Effect	Reputational damage; Customer dissatisfaction; financial loss							
Related Actions	SCS SCS 003	MCB Workstream 4 Making Best Use of Assets and Resources: - Develop CAMSs - Manage savings related to voluntary organisations - Develop Corporate Customer Services Strategy - Implement Information, Library & Learning Strategy	**Internal Controls**				Business Continuity Plans	

RISK	FCS SCS 021	Corporate governance requirements not adhered to	Status	⚠	Current Rating	12	Target Rating	8
Managed By	Alison Bryce; Brian Forbes; Cherie Jarvie							
Potential Effect	Reputational damage; loss of confidence, legal action							
Related Actions	SCS SCS 021	Continue to ensure Strategy & Customer Services operates to very highest standards of Governance and implements improvement actions from Annual Governance Statement (AGS).	**Internal Controls**				Governance Strategy Staff induction and development	

RISK	FCS SCS 023	Community engagement/communications failures	Status	✅	Current Rating	9	Target Rating	6
Managed By	Cherie Jarvie							
Potential Effect	Breakdown in trust Lack of buy-in Decisions not aligned with community aspiration Reputational damage Loss of confidence							
Related Actions	SCS SAP 011	Support range of consultations on budget and MCB programmes			Internal Controls		Community Engagement Process	
							Single Outcome Agreement	

RISK	FCS SCS 025	Failures of communication with staff	Status	✅	Current Rating	9	Target Rating	6
Managed By	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie							
Potential Effect	Loss of morale Loss of efficiency							
Related Actions	SCS SCS 019	Ensure effective communication with staff during changes in service operating models, structures and ways of working.			Internal Controls		Communications Strategy	

RISK	SCS SCS 001	Failure to meet required budget savings	Status	✅	Current Rating	4	Target Rating	4
Managed By	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie							
Potential Effect	Financial loss; Reputational damage							
Related Actions	SCS SCS 027	Implement budget saving proposals			Internal Controls		Budget Challenge & Financial Monitoring	

RISK	SCS SCS 002	Making Clackmannanshire Better objectives are not met	Status	✅	Current Rating	12	Target Rating	4
Managed By	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie							
Potential Effect	Financial loss; Reputational damage; Customer dissatisfaction							

	SCS SAP 009	MCB Workstream 5: Making our Organisation Stronger/Developing our people: - Implement approved People Strategy - Implement Communications Strategy Action Plan			**Internal Controls**		Making Clackmannanshire Better Programme
	SCS SAP 010	MCB programme management & development of target operating models - support communication of vision					
Related Actions	SCS SCS 002	MCB Workstream 1 Making it Happen - Tullibody Pilot					
	SCS SCS 003	MCB Workstream 4 Making Best Use of Assets and Resources: - Develop CAMSs - Manage savings related to voluntary organisations - Develop Corporate Customer Services Strategy - Implement Information, Library & Learning Strategy					

RISK	SCS SCS 003	Loss of key skills, knowledge or capacity due to contraction of service and staff base	Status	⚠️	Current Rating	12	Target Rating	8
Managed By	Alison Bryce; Stuart Crickmar; Brian Forbes; Cherie Jarvie							
Potential Effect	Decline in service provision; tasks not delivered; decline in staff moral; customer dissatisfaction							
Related Actions	SCS SAP 009	MCB Workstream 5: Making our Organisation Stronger/Developing our people: - Implement approved People Strategy - Implement Communications Strategy Action Plan	**Internal Controls**				Workforce Planning Process

RISK	SCS SCS 004	Failure to ensure effective partnership working to support Community Planning	Status	✓	Current Rating	12	Target Rating	6

Managed By	Cherie Jarvie				
Potential Effect	SOA objectives not met Breakdown in trust and reputational damage Loss of confidence Lack of joined up services and budget savings not met				

	SCS SAP 001	Support Community Planning Reform & efficient business of the Alliance & sub-committees		Community Engagement Process
Related Actions	SCS SAP 002	Develop joint resourcing plan	Internal Controls	Single Outcome Agreement
	SCS SAP 003	Implement the Community Wellbeing Partnership Team programme - community engagement/development needs reviewed within this context		