



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

SCRUTINY COMMITTEE

THURSDAY 8th APRIL 2010

Committee start time: 9.30 am

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

All meetings of the Council, Committees and Sub-Committees are open to the press and public except where the press and public are excluded because of the nature of the business. However, unless there has been prior agreement, neither can make comment on any issue during the meeting or attempt to take part in the discussion.

For further information please contact Chief Executive's Service, Clackmannanshire Council, Greenfield, Alloa, FK10 2AD

(Tel 01259 452106) (Fax 01259 452230) (chiefexecutiveservice@clacks.gov.uk) (www.clacksweb.org.uk)

Date	Time
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SCRUTINY COMMITTEE

The Scrutiny Committee, subject to Council's approved policies, has responsibility for:

- Evaluating the effectiveness of the Council in terms of tackling Corporate Priorities through 6-monthly and year end monitoring reports.
 - Reviewing the collective Business Plans on an annual basis, evaluating priority areas and targets and to making recommendations to Council in advance of their approval.
 - Considering internal and external audit reports and pursuing issues of continuing or significant concern.
 - Reviewing and monitoring the Council's performance as a Best Value Council, including the consideration of Best Value and other performance reports.
 - Monitoring follow-up work in order to ensure that areas in need of improvement are addressed.
 - Highlighting good performance and exceptional achievement.
 - Agreeing an annual Scrutiny Plan (subject to the approval of the Council) to include the detail of the performance management framework and requirements for Service reports.
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30 March 2010

A MEETING of the SCRUTINY COMMITTEE will be held within the Council Chamber, Greenfield, Alloa, FK10 2AD on THURSDAY 8th APRIL 2010 at 9.30 am.

**ELAINE MCPHERSON
Head of Strategy and Customer Services**

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2. Declaration of Interests	--
<p>Elected Members are reminded of their obligation to declare any financial or non-financial interest which they may have in any item on this agenda in accordance with the Councillors' Code of Conduct. A Declaration of Interest form should be completed and passed to the Committee Officer.</p>	
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COMMITTEE MEMBERSHIP – SCRUTINY COMMITTEE

Councillors		Wards	
Councillor Donald Balsillie (Convener)	2	Clackmannanshire North	SNP
Councillor Gary Womersley (Vice Convener)	3	Clackmannanshire Central	SNP
Councillor John S Biggam	2	Clackmannanshire North	SLD
Councillor Alastair Campbell	5	Clackmannanshire East	CON
Councillor Mark English	4	Clackmannanshire South	SNP
Councillor Harry McLaren	5	Clackmannanshire East	LAB
Provost Derek Stewart	3	Clackmannanshire Central	LAB
Vacancy			

CLACKMANNANSHIRE COUNCIL

**MINUTE OF MEETING of the SCRUTINY COMMITTEE held within the Council Chamber,
Greenfield, Alloa, on THURSDAY 25 FEBRUARY 2010 at 9.30 am.**

PRESENT

Councillor Donald Balsillie (Convener)
Councillor Gary Womersley (Vice Convener)
Councillor John Biggam
Councillor Mark English
Councillor Harry McLaren
Provost Derek Stewart

IN ATTENDANCE

Grahame Blair, Director of Services to People
Peter Broadfoot, Head of Administration and Legal Services
Garry Dallas, Director of Development and Environmental Services
Jim Goodall, Head of Education and Community Services
Aileen Littlejohn, Business Support Manager (Clerk to the Committee)
Susan MacKay, Finance Manager
Mac West, Roads and Transportation Manager

SC(10)226 APOLOGIES AND SUBSTITUTIONS

Apologies for absence were received from Councillor Alastair Campbell.

SC(10)227 DECLARATIONS OF INTEREST

None

SC(10)228 MINUTE OF MEETING HELD ON 21 JANUARY 2010

A minute of the Scrutiny Committee Meeting held on 21 January 2010 was submitted for approval by the Committee.

Motion

To approve the minute as a correct record of proceedings.

Moved by Provost Derek Stewart. Seconded by Councillor Harry McLaren.

Decision

The Committee agreed to approve the minute of the meeting held on 21 January 2010 as a correct record of proceedings.

The minute of the meeting was signed by the Convener.

SC(10)229 SCRUTINY COMMITTEE ACTION PLAN

A list of ongoing actions from the Scrutiny Committee meetings was submitted for information. The Committee agreed to note the following actions:

SID 2211: Questions to Portfolio Holders (Minute of Meeting held on 22 October 2009)

That the discussion paper is currently with CEO in draft format. Once approved, the draft report will be submitted to the Scrutiny Committee Focus Group for consideration before being presented to the full Committee. Portfolio Holders and Shadow Portfolio Holders to be consulted on the proposals.

SID 2182: End of Year Balanced Scorecard 2009/10

That feedback on effectiveness and presentation of measures to enable the effective scrutiny of performance will be considered by the Scrutiny Committee Focus Group following the conclusion of the Scrutiny Committee of 25 February 2010. Action completed.

SID 2212: Freedom of Information Update

That a paper was available to the Scrutiny Committee of 25 February 2010. Six monthly update reports to be included in the Scrutiny Committee Timetable. Action completed.

SC(10)230 DRAFT TIMETABLE FOR REPORTS TO SCRUTINY COMMITTEE

A draft timetable for reports to the Scrutiny Committee to January 2011 was submitted for approval. The timetable will form part of the Annual Scrutiny Plan which is subject to approval by the Council.

Motion

That Committee approves the draft time table for reports to the Scrutiny Committee to January 2011, subject to the following additions:

- Meeting: 20May 2010 - report on Roads and Street Lighting.

At a date to be confirmed by officers, the following reports to be included:

- Outcome of the legal discussions on the Kitchen Contract.
- Telecare
- Council's Financial Position - external consultant reports

Moved by Councillor Gary Womersley. Seconded by Councillor John Biggam.

Decision

The Committee agreed unanimously to approve the draft timetable for reports to the Scrutiny Committee subject to the addition of the reports detailed above.

Action

Chief Executive

SC(10)231 INTERNAL AUDIT ANNUAL PLAN 2010-11

A report presenting the Internal Audit Annual Plan for 2010-11 was submitted for approval, as required by the Internal Audit Charter appended to the Financial Regulations. The Committee noted that in undertaking the Annual Plan, Internal Audit will be able to form and provide an objective opinion on the Council's control environment.

Motion

That Committee approves the Internal Audit Annual Plan 2010-11.

Moved by Councillor Gary Womersley. Seconded by Councillor Derek Stewart

Decision

The Committee agreed unanimously to approve the Internal Audit Annual Plan 2010-11

Action

Chief Executive

SC(10)232 INTERNAL AUDIT PROGRESS REPORT - 31 DECEMBER 2009

A report providing a quarterly update on the progress of the Internal Audit Annual Plan, as approved by the Scrutiny Committee on 9th April 2009, in accordance with the Financial Regulations, was submitted for information.

The report also provided a quarterly update on the progress of implementation of recommendations by officers from previous Internal Audit reports.

Motion

That Committee notes the information set out in the report and progress made to 31 December 2009, subject to the proposal moved by Councillor John Biggam and seconded by Councillor Donald Balsillie, that future Audit Reports, once these are signed off by the respective parties, be made available on the members' portal area of Clacksweb.

Decision

The Committee agreed unanimously to note the information set out in the report and progress made to 31 December 2009 and agreed that future Audit Reports, once these are signed off by the respective parties, be made available on the members' portal area of Clacksweb.

Action

Chief Executive

SC(10)233 FREEDOM OF INFORMATION - PERFORMANCE UPDATE

A report which presented an overview of the numbers of requests received under the Freedom of Information (Scotland) Act 2002 across all services of the Council during the second half of 2009 was submitted for information.

The report provided management information on the volume of enquiries, the source of these enquiries and the performance of the Council in responding to the enquiries received.

Councillor Biggam pointed out an error in paragraph 4.10 of the report where reference is made to five reviews; this should read eight reviews.

Motion

That Committee notes the information set out in the report.

Moved by Councillor Gary Womersley. Seconded by Provost Derek Stewart.

Decision

The Committee agreed unanimously to note the information set out in the report.

ENDS 11.00 am

Ongoing Actions from Scrutiny Committee

Executive Review Dates: 17/01/09 1/10/09 31/03/10

Service with Overall Responsibility: Chief Executive's Services

Subject

Source Date: SID: 2182
21/05/2009 END OF YEAR BALANCED
Review Date: SCORECARD 2009/10
31/12/2009

Requested by
Councillor

Councillor Name:

Recommendation

Annually review balanced scorecard targets taking advice from the Business Improvement Team. These targets must be signed off by the Scrutiny Committee.

Action required

As recommendation

Progress

Officer attending April 2010 Focus Group.

Member of Staff with overall responsibility:
Angela Leitch

To be actioned by:
Elaine McPherson

Service:
Corporate Development Services

Source Date:

03/12/2009 SID: 2211
MINUTE OF MEETING HELD ON 22
OCTOBER 2009

Review Date:

31/03/2010

Requested by
Councillor

Councillor Name:

Agree a formal protocol for questions to portfolio holders.

Discussion paper currently with CEO in draft format. Once approved, the draft report will be submitted to the Scrutiny Committee Focus Group for consideration before being presented to Scrutiny Committee. Portfolio Holders and Shadow Portfolio Holders will be consulted on the proposals.

Member of Staff with overall responsibility:
Angela Leitch

To be actioned by:
Elaine McPherson

Service:
Chief Executive's Services

Source Date:

21/01/2010 SID: 2224
GENERAL FUND REVENUE BUDGET
MONITORING 2009/10

Review Date:

30/06/2010

Requested by
Councillor

Councillor Name:

Director of Development and Environmental Services to report to committee on forward planning in relation to non-domestic rates valuations with particular emphasis on the new secondary schools.

That the Director of Development and Environmental Services reports back to committee on forward planning in relation to non-domestic rates valuations with particular emphasis on the new secondary schools

Member of Staff with overall responsibility:
Angela Leitch

To be actioned by:
Garry Dallas

Service:
Development and Environmental Services

THIS PAPER RELATES TO
ITEM 4
ON THE AGENDA

SID: 2228
DRAFT TIMETABLE FOR REPORTS TO SCRUTINY COMMITTEE

Source Date: 25/02/2010
Review Date: 30/04/2010

Requested by Councillor
Councillor Name:

To approve draft timetable to January 2010 with the inclusion of the following reports:
 Roads and Street Lighting (20 May 2010); Outcome of Legal discussions on Kitchen Contract, Telecare and Council's Financial Position - External consultant reports (at a date identified by officers)

To include additional reports in timetable

Council April 2010.

Member of Staff with overall responsibility:
 Angela Leitch

To be actioned by:
 Aileen Littlejohn

Service:
 Chief Executive's Services

SID: 2230
INTERNAL AUDIT PROGRESS REPORT - 31 DECEMBER 2009

Source Date: 25/02/2010
Review Date: 31/08/2010

Requested by Councillor
Councillor Name:

To note progress.

Future audit reports to be made available to members on the members' portal once the reports have been signed off by the respective parties involved.

Arrangements in Hand to update portal.

Member of Staff with overall responsibility:
 Angela Leitch

To be actioned by:
 Susan MacKay

Service:
 Chief Executive's Services

SID: 2223
AUDIT REPORT FOR YEAR ENDED 2008/09

Source Date: 21/01/2010
Review Date: 30/06/2010

Requested by Councillor
Councillor Name:

Management report to be submitted to the Scrutiny Committee of 20th May 2010 which addresses specific points from the External Audit Report iro budgetary controls, National Fraud Initiative and policy implementation.

Submit management report to Scrutiny Committee of 20th May 2010.

Member of Staff with overall responsibility:
 Angela Leitch

To be actioned by:
 Angela Leitch

Service:
 Chief Executive's Services

Service with Overall Responsibility: Corporate Development Services

Recommendation
 Management report to be submitted to the Scrutiny Committee of 20th May 2010 which addresses specific points from the External Audit Report iro budgetary controls, National Fraud Initiative and policy implementation.

Action required
 Submit management report to Scrutiny Committee of 20th May 2010.

Progress

- General Fund Housing (£511k)

3.3. Residential Placements

The anticipated overspend is associated with children being educated by other councils, education being provided at specialist schools or those who are being accommodated in Secure Units. This area was overspent by £1.030m last financial year. The budget this year was increased by £466k. Since the last report, two children have left and two have been placed in residential care and one child has transferred to a secure unit. As a result the current forecast expenditure this year will be £68k greater than last year in respect of residential placements. The Service is making positive plans to move some of these young people out of these placements, where appropriate.

3.4. Education and Community Services

The main area of overspend relates to non-domestic rates valuations received in respect of our three new secondary schools. This has resulted in the spend on rates being £280k in excess of budget allowance. Whilst these valuations are now the subject of appeals to the Assessor, it remains prudent to assume for budget forecasting that these may not be successful.

3.5. Social Services

The Social Services overspend is attributed to external foster care costs which exceed budget provision by £315k. The Service has recently appointed a social worker to recruit and train our own foster carers. There are 4 or 5 potential carers currently going through this training who should be ready to accept placements by start of the new financial year. With the cost of external foster care around four times more expensive than our own carers, the saving per child transferred from external to internal care would be £30k.

3.6 Interest on Revenue Balances

With interest rates remaining at low levels throughout the year, the sum earned by the Council on its Revenue Balances is significantly less than originally budgeted, resulting in a shortfall in income of £140k.

3.7 General Revenue Grant

In February the Scottish Government issued a revised circular which consolidated known redeterminations of general revenue funding for 2009/10. As a result, the Councils funding from this source is £273k greater than budgeted and an improvement of £58k on figure previously reported.

3.8 Unearmarked Reserves

The Council's unearmarked reserves at the start of the year stood at £1.002m. The current years budget includes a contribution of £1m to balances. The present forecast net projected outturn within General Revenue Budgets would result in the Council unearmarked reserve standing at £2.053m by the year-

end. This would bring the Council closer to the minimum level recommended in the approved Finance strategy.

4.0 Sustainability Implications

4.1 Not applicable to monitoring reports

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*

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 2008 - 2011** (Please double click on the check box)

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

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

8.0 Equalities Impact

8.1 Have you undertaken the required equalities impact assessment to ensure that no groups are adversely affected by the recommendations?
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 The following appendix is attached to this report:

Appendix 1: General Fund 2009/10 - summary and service breakdown of expenditure.

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

1 Council's Revenue budget 2009/10 to 2011/12 (Report to the Special Council on 10th March 2009).

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Martin Dunsmore	Accounting & Budgeting Manager	01259 452041

Approved by

NAME	DESIGNATION	SIGNATURE
Susan Mackay	Finance Manager	
Angela Leitch	Chief Executive	

General Fund 2009/10

Appendix 1

	Revised Estimate 2009/10 £000	Budget to 31/01/2010 £000	Actual to 31/01/2010 £000	Projected Outturn 2009/10 £000	Variance from Estimate £000	Projected Outturn Nov £000	Projected Outturn Aug £000
SERVICE							
Chief Executive Service	2,986	2,409	2,078	2,827	(159)	2,878	2,871
Corporate Development Services	6,492	5,386	5,212	6,338	(154)	6,300	6,376
	<u>9,478</u>	<u>7,795</u>	<u>7,290</u>	<u>9,165</u>	<u>(313)</u>	<u>9,178</u>	<u>9,247</u>
Less: Allocated to non-General Fund Services	(1,413)			(1,366)	47	(1,369)	(1,383)
	<u>8,065</u>	<u>7,795</u>	<u>7,290</u>	<u>7,799</u>	<u>(266)</u>	<u>7,809</u>	<u>7,864</u>
Residential Placements	3,257	2,398	3,261	3,895	638	3,873	3,903
Education and Community Services	47,670	38,880	38,422	48,058	388	47,924	47,376
Social Services	21,199	17,523	17,526	21,357	158	21,458	21,350
General Fund Housing	4,150	3,537	2,545	3,639	(511)	3,591	3,723
Development and Environmental Services	12,412	9,490	9,498	12,305	(107)	12,207	12,378
Single Status	800	0	0	800	0	800	800
Miscellaneous Services	16	13	(49)	(35)	(51)	26	26
Service Expenditure	<u>97,569</u>	<u>79,636</u>	<u>78,493</u>	<u>97,818</u>	<u>249</u>	<u>97,688</u>	<u>97,420</u>
Add Requisitions from Joint Boards							
Central Scotland Police	4,380	3,650	3,650	4,380	0	4,380	4,380
Central Scotland Fire	3,204	2,670	2,670	3,204	0	3,204	3,204
Central Scotland Valuation	419	349	349	419	0	419	419
	<u>105,572</u>	<u>86,305</u>	<u>85,162</u>	<u>105,821</u>	<u>249</u>	<u>105,691</u>	<u>105,423</u>
Add/(Deduct)							
Interest on Revenue Balances	(260)	0	0	(120)	140	(119)	(110)
Contribution from Trading operations	(250)	0	0	(228)	22	(220)	(207)
Loan Charges	8,001	0	0	8,083	82	8,104	8,110
Contribution to Bad Debt Provision	100	0	0	100	0	100	100
Contribution to Balances	1,000	0	0	1,000	0	1,000	1,000
Sum raised for Secondary Schools PPP	420	0	0	420	0	420	420
Replacement of Schools Fund financing of PPP	559	0	0	559	0	559	559
	<u>115,142</u>	<u>86,305</u>	<u>85,162</u>	<u>115,635</u>	<u>493</u>	<u>115,535</u>	<u>115,295</u>
SOURCES OF FUNDING							
General Revenue Funding	93,338	68,129	68,129	93,611	273	93,553	92,854
Council Tax	21,353	16,691	16,754	21,434	81	21,447	21,396
Earmarked reserve 08/09 (Devolved Mgt Reserve)	487	487	487	487	0	487	487
Earmarked reserve 08/09 (Zero Waste Fund)	154	154	154	154	0	154	154
	<u>115,332</u>	<u>85,461</u>	<u>85,524</u>	<u>115,686</u>	<u>354</u>	<u>115,641</u>	<u>114,891</u>
Projected (Surplus) / Shortfall	<u>(190)</u>	<u>844</u>	<u>(362)</u>	<u>(51)</u>	<u>139</u>	<u>(106)</u>	<u>404</u>

CEO Services

Service Divisions

Chief Executive
Strategic Policy
Admin and Legal

NET Expenditure

Revised Estimate 2009/10 £000	Budget to 31/01/2010 £000	Actual to 31/01/2010 £000	Projected Outturn 2009/10 £000	Variance from Estimate £000	Projected Outturn Nov £000	Projected Outturn Aug £000
260	183	173	201	(59)	238	255
1,187	907	666	1,099	(88)	1,132	1,150
1,539	1,319	1,239	1,527	(12)	1,508	1,466
2,986	2,409	2,078	2,827	(159)	2,878	2,871

Corporate Development Services

	Revised Estimate 2009/10 £000	Budget to 31/01/2010 £000	Actual to 31/01/2010 £000	Projected Outturn 2009/10 £000	Variance from Estimate £000	Projected Outturn Nov £000	Projected Outturn Aug £000
Service Divisions							
Finance	1,944	1,504	1,569	1,935	(9)	1,900	1,979
Council Offices	566	501	492	629	63	616	621
Human Resources	787	670	652	758	(29)	763	740
Corporate Development	118	99	43	44	(74)	44	67
BIT's	3,077	2,612	2,456	2,972	(105)	2,977	2,969
NET Expenditure	6,492	5,386	5,212	6,338	(154)	6,300	6,376

Residential Placements

	Revised Estimate 2009/10 £000	Budget to 31/01/2010 £000	Actual to 31/01/2010 £000	Projected Outturn 2009/10 £000	Variance from Estimate £000	Projected Outturn Nov £000	Projected Outturn Aug £000
Service Divisions							
Residential Placements	2,665	2,038	2,907	3,308	643	3,290	3,312
Support Services & Management	45	38	37	44	(1)	44	44
Changing Childrens Services	547	322	317	543	(4)	539	547
NET Expenditure	3,257	2,398	3,261	3,895	638	3,873	3,903

Education and Community Services

	Revised			Projected	Variance	Projected	Projected
	Estimate	Budget to	Actual to	Outturn	from	Outturn	Outturn
	2009/10	31/01/2010	31/01/2010	2009/10	Estimate	Nov	Aug
	£000	£000	£000	£000	£000	£000	£000
Service Divisions							
Service Management	1,401	1,239	1,179	1,380	(21)	1,386	1,387
Pre Fives	4,402	3,547	3,099	4,296	(106)	4,302	4,259
Primary Education	16,583	14,123	13,567	16,094	(489)	16,095	16,400
Secondary Education	17,499	12,769	13,349	18,045	546	18,135	17,445
Special Education	3,750	3,157	3,092	3,744	(6)	3,746	3,872
Psychological Services	356	345	304	325	(31)	323	337
School Crossing Patrols	101	86	75	89	(12)	89	92
Adult & Continuing Education	785	709	648	781	(4)	769	774
Community Services	522	442	463	546	24	529	496
Leisure Services Management	169	151	160	187	18	198	148
Sport & Leisure	1,015	1,251	1,492	1,413	398	1,212	1,050
Cultural, Heritage & The Arts	253	268	232	251	(2)	265	262
Library Services	674	598	557	680	6	666	674
Other Leisure Services	158	193	205	227	69	207	178
Entertainments	2	2	0	0	(2)	2	2
NET Expenditure	47,670	38,880	38,422	48,058	388	47,924	47,376

Social Services

	Revised Estimate 2009/10 £000	Budget to 31/01/2010 £000	Actual to 31/01/2010 £000	Projected Outturn 2009/10 £000	Variance from Estimate £000	Projected Outturn Nov £000	Projected Outturn Aug £000
Service Divisions							
Operational Support	1,112	830	897	1,102	(10)	1,087	1,088
Child Care	5,038	4,262	4,620	5,506	468	5,486	5,342
Criminal Justice Service	0	184	232	24	24	(3)	0
Adult Care	15,049	12,247	11,777	14,725	(324)	14,888	14,920
NET Expenditure	21,199	17,523	17,526	21,357	158	21,458	21,350

General Fund Housing

	Revised Estimate 2009/10 £000	Budget to 31/01/2010 £000	Actual to 31/01/2010 £000	Projected Outturn 2009/10 £000	Variance from Estimate £000	Projected Outturn Nov £000	Projected Outturn Aug £000
Service Divisions							
Strategic Housing Costs	769	652	591	735	(34)	736	751
Supporting People	1,893	1,577	1,546	1,932	39	1,930	1,781
Local Housing Strategy	5	4	0	0	(5)	0	0
Homeless & Specialised Accommodation	137	186	(472)	(208)	(345)	(208)	(113)
Homeless Strategy	572	478	255	495	(77)	497	575
PSHG	0	48	(285)	0	0	0	0
Housing Loans	(1)	(1)	(1)	(1)	0	0	0
Housing Benefits	309	258	635	230	(79)	180	159
Welfare Services	466	335	277	456	(10)	456	570
Housing Grants	0	0	(1)	0	0	0	0
NET Expenditure	4,150	3,537	2,545	3,639	(511)	3,591	3,723

Development and Environmental Services

	Revised Estimate 2009/10 £000	Budget to 31/01/2010 £000	Actual to 31/01/2010 £000	Projected Outturn 2009/10 £000	Variance from Estimate £000	Projected Outturn Nov £000	Projected Outturn Aug £000
Service Divisions							
Management Unit	(57)	(426)	(574)	(221)	(164)	(198)	(168)
Out of Hours	(34)	(27)	(21)	(25)	9	(31)	(36)
Facilities Management	272	145	212	363	91	365	343
Asset Management	(71)	190	704	(42)	29	(41)	(73)
Environmental Health	773	644	640	737	(36)	740	722
Trading Standards	166	129	130	166	0	167	166
Fleet Services	(34)	110	(11)	(112)	(78)	(61)	(54)
Catering Services	(29)	(7)	(114)	(83)	(54)	(71)	(56)
Cleaning Services	(29)	(11)	29	(6)	21	(4)	(9)
Waste Management	3,944	2,913	2,692	3,705	(239)	3,708	3,805
Roads and Transportation	3,347	2,696	2,780	3,543	196	3,328	3,348
Land Services and Burial Grounds	2,428	2,087	1,932	2,404	(24)	2,420	2,400
Public Conveniences	240	144	144	234	(6)	233	236
Security	(8)	(6)	(2)	(4)	4	(3)	(2)
Planning and Building Standards	240	204	288	339	99	335	409
Development Planning and Sustainability	1,140	600	604	1,154	14	1,164	1,191
Economic Services	124	105	165	155	31	156	156
NET Expenditure	12,412	9,490	9,498	12,305	(107)	12,207	12,378

Report to SCRUTINY COMMITTEE

Date of Meeting: 8th APRIL 2010

Subject: Housing Revenue Account 2009/10 Budget Monitoring

Report by: Finance Manager

1.0 Purpose

- 1.1. This paper reports on the projected out-turn of the Housing Revenue Account for the financial year 2009/10, based on the financial position at 31st January 2010.
- 1.2. The projected position at the year-end is that there will be a net contribution to reserves in the year of £425k, which is an increase of £165k compared to the budgeted position of £260k, before any reserves are transferred to the capital programme.
- 1.3. The main reasons for this are an underspend of £375,000 in Supervision and Management mainly due to Employee Costs. This underspend is compensated for by a predicted overspend of £300,000 in Repairs and Maintenance. This compares favourably with the projection of a contribution of £65k presented to the Committee's January meeting.

2.0 Recommendations

- 2.1. It is recommended that the Committee note the contents of this report.

3.0 Considerations

Repairs & Maintenance

- 3.1. *Repairs & Maintenance* expenditure is projected to be £300k over budget at the year-end, an £119k improvement on the projection given to the Committee in January.
- 3.2. The projected over-spend is still mostly on *General Maintenance*, though there is a decrease on the previous projection. It is assumed that any surpluses due to the HRA from PCU will be off-set against the over-spend on *General Maintenance*.

3.3. The projection for costs on *Void Houses* is below budget.

Supervision & Management

- 3.4. *Supervision and Management* costs overall are projected to be £375k below budget and £99k below the projection given to the January meeting of the Scrutiny Committee.
- 3.5. As explained in the last report, the reduction in anticipated expenditure is largely due to reduced expenditure on staffing costs, the projection of which is slightly further reduced since November figures.
- 3.6. The main reason for the change in projections since the last report is in *Professional Fees*. It is now anticipated that costs for the stock condition survey will come from the capital budget, but this expenditure may not be incurred until 2010/11.

Capital Financing Costs

- 3.7. *Capital Financing Costs* are projected to be £73k above budget, £10k higher than projected in the last report. The change from budget is mostly due to an increase in projected interest payments, but also includes £24k of impairment on the Doors Programme, which was previously included in capital expenditure.

Other Expenses

- 3.8. *Other Expenses* are projected to be £167k below budget. The change since the last report, which projected them as being close to budget, is due to a reduction in anticipated provision for bad debts.

Income

- 3.9. Rental Income is projected to be close to budget.

Reserves

- 3.10. The accumulated draft reserve at the end of 2008/09 is £6.051m. The projected surplus would increase reserves to £6,476m at the end of 2009/10. The budget report to Council anticipated that the contribution now required to help fund the capital programme would be close to £2.560m, together with additional borrowing, to compensate for the fall in Council house sales. This would reduce reserves to around £3.916m at the end of 2009/10. The exact contribution will not be decided until after the year-end, when the final figures for revenue and capital expenditure are known.

4.0 Sustainability Implications

4.1. N/A

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

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 2008 - 2011** (Please double click on the check box)

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

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

8.0 Equalities Impact

8.1 Have you undertaken the required equalities impact assessment to ensure that no groups are adversely affected by the recommendations?
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 1 : HRA period 8

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
Marion Marsden	Accountant	452040

Approved by

NAME	DESIGNATION	SIGNATURE
Susan MacKay	Finance Manager	
Angela Leitch	Chief Executive	

HOUSING REVENUE ACCOUNT**SUMMARY + PROJECTIONS**

	Budget 2009/10	Budget to 31/01/2010	Expenditure to 31 January 2010	Projections	Variance projected outcome to original budget
	£	£	£	£	£
REPAIRS AND MAINTENANCE					
Private Contractors(incl internal Land Services & Roads Services)	250,000	208,325	287,657	345,047	95,047
Void Houses	985,000	820,801	702,138	900,000	(85,000)
General Maintenance	2,005,047	1,670,805	1,703,609	2,270,000	264,953
Cyclical Maintenance	746,877	622,373	478,112	746,877	0
Gas Contract	340,000	283,322	268,226	340,000	0
O/T Minor Adaptations	0	0	21,683	25,000	25,000
	4,326,924	3,605,626	3,461,425	4,626,924	300,000
SUPERVISION AND MANAGEMENT					
Net Expenditure	4,341,923	2,685,893	2,267,778	3,967,271	(374,652)
CAPITAL FINANCING COSTS					
Principal Repayments	1,527,164	0	0	1,506,579	(20,585)
Interest Payments	1,723,409	0	0	1,795,073	71,664
Loans Fund Expenses	29,282	0	0	26,772	(2,510)
Capital From Current Revenue Impairments	0	0	0	0	0
	0	0	0	24,000	24,000
	3,279,855	0	0	3,352,424	72,569
OTHER EXPENSES					
Insurance	256,846	256,846	220,263	220,263	(36,583)
Stair Lighting	15,000	12,500	5,686	8,000	(7,000)
Void Rent Loss - Houses	132,000	183,326	122,775	157,330	25,330
Void Rent Loss - Lock-Ups	88,000	0	76,809	92,171	4,171
Grounds Maintenance	61,106	50,920	50,430	61,106	0
Garden Aid Scheme	100,508	83,753	98,306	100,508	0
Special Uplifts	125,701	104,747	71,027	125,701	0
Pest Control	12,500	10,416	8,591	12,500	0
Contributions to Bad Debts	300,000	0	0	150,000	(150,000)
Miscellaneous Expenses	3,000	2,500	0	2,000	(1,000)
Council Tax Empty Properties	5,000	0	2,682	3,000	(2,000)
	1,099,661	705,008	656,569	932,579	(167,082)
TOTAL EXPENDITURE	13,048,363	6,996,527	6,385,772	12,879,198	(169,165)
INCOME					
Rents	(13,228,100)	(11,023,417)	(10,960,168)	(13,228,100)	0
Other Income	(43,625)	(36,353)	(40,683)	(42,000)	1,625
Interest on Revenue Balances	(36,443)	0	0	(34,351)	2,092
	(13,308,168)	(11,059,770)	(11,000,851)	(13,304,451)	3,717
NET EXPENDITURE	(259,805)	(4,063,243)	(4,615,079)	(425,253)	(165,448)

**SUPERVISION AND MANAGEMENT
SUMMARY + PROJECTIONS**

As per ledger	Budget 2009/10	Budget to 31/01/2010	Expenditure to 31 January 2010	Projections for 2009/10	Variance projected outcome to original budget
	£	£	£	£	£
EXPENDITURE					
Employee Costs	2,744,295	2,320,029	1,975,244	2,394,828	(349,467)
Premises Related Expenditure	23,699	22,560	29,769	31,696	7,997
Transport Related Expenditure	62,869	52,858	46,322	57,686	(5,183)
Supplies and Services	95,511	79,590	67,332	100,787	5,276
Administration	82,308	70,284	58,911	72,269	(10,039)
Computer Charges	138,582	115,480	58,229	80,000	(58,582)
Third Party Payments	216,097	180,074	150,607	208,325	(7,772)
Transfer Payments	0	0	0	40	40
Support Services	1,161,957	0	0	1,161,957	0
					0
TOTAL EXPENDITURE	4,525,318	2,840,875	2,386,414	4,107,588	(417,730)
TOTAL INCOME	(183,395)	(154,982)	(118,636)	(140,317)	43,078
NET EXPENDITURE	4,341,923	2,685,893	2,267,778	3,967,271	(374,652)

CLACKMANNANSHIRE COUNCIL

Report to: Scrutiny Committee

Date: 8th April 2010

**Subject: General Services Capital Programme 2009/10 to 2014/15:
Monitoring Report.**

Report By: Finance Manager

1.0 PURPOSE

- 1.1. This is the third financial monitoring report for the General Services Capital Programme this financial year and presents the latest anticipated out-turn for this year based on current review with project managers.
- 1.2. This is an update report highlighting variances from the November position that was reported to the Scrutiny Committee at their previous meeting.
- 1.3. Following a major review of the Council's priorities, the Council approved a 5 year capital programme in February 2010. At the same time as addressing the Council priorities, the five year programme meets the financial strategy to minimise additional new borrowings to deliver the programme at an affordable level under the current difficult economic conditions.

2.0 RECOMMENDATIONS

- 2.1. It is recommended that the Committee note the contents of this update report.

3.0 CONSIDERATIONS

- 3.1. The net capital expenditure (Council Borrowing) of 10,424k for 2009/10 was approved by the Council in March 2009. Following transfers of budgets from the finalisation of previous year's accounts and other capital grant adjustments, a revised budget for 2009/10 with a net borrowing amount of £13,316k was reported to the Scrutiny Committee.
- 3.2. The most recent out-turn projections show that the net capital expenditure (Council Borrowing) for 2009/10 is expected to be £6,272k, a reduction of £7,044k compared to the revised budget of £13,316k. Appendix 1 summarises overall variances from the revised budget for 2009/10 and shows the budgets approved for 5 years to 2014/15.

- 3.3. The main variances for 2009/10 which contributed to the reduction in borrowing comprises:
- Carry forward of £2,166k to 2010/11 in addition to the £1,736k which were reported to the Council in March 2010. The total carry forwards being £3,902k. Paragraph 3.4 below highlights the additional carry forwards since the previous report.
 - Savings of £4,349k were achieved mainly following the revision of the capital plan as part of the five year programme referred to in 1.3 above. Paragraph 3.5 below lists additional savings according to the current review which will help in reducing the borrowing.
- 3.4. Projects amounting to £3,902k will be required to be carried forward to 2010/11. Members were informed of the reasons for the carry forwards for the majority of these projects in the previous report. According to the current out-turn review, the following additional carry forwards were identified since the previous report:
- £115k for Demolition of Lornshill Academy and construction of car park, bus stand, green pitches, running track & flood lighting. (Project 103). The main phase is scheduled for July & completion by end of 2010. The project is proceeding satisfactorily. The carry forward includes retention.
 - £142k for Demolition of Alloa & Alva Schools (project 162). Current work is in relation to identifying & removing asbestos, with the main demolition to be carried out in 2010/11 which requires a carry forward of £142k to 2010/11. A further £110k has been approved for 2010/11 in the 5 year programme.
 - £370k for Vehicle Replacement (project 63), as a result of services having reassessed their needs and extended leases of current vehicles for another year. However, these will need to be replaced next year and the budget is carried forward for this purpose.
 - £150k for Cemetery Strategy. Budget is earmarked for Alva & Dollar cemetery extensions. There have been access problems at Dollar and hence the delay in this project. £150k will be carried forward to 2010/11 to proceed next year pending resolution. The Alva cemetery extension is progressing well, despite additional works in connection with flooding.
 - £204k for School Fund (project 9) & School Alarm Systems (project 8). Slippage mainly due to extended consultation exercises in some areas and, to some extent, contractor performance and restricted timescale to fit in with school holidays.
- 3.5. Savings of £4,349k were achieved mainly following the revision of the capital plan as part of the five year programme, which addressed the Council priorities and reduced borrowings to deliver an affordable programme. The savings were detailed in the previous report. The current review highlighted the following additional savings:

- £408k for Contaminated Land/ Alva Gas Works (Project 49). In addition to the savings of £50k reported previously, the latest review shows that there will now be a further capital saving of £358k, as this expenditure is considered to be revenue expenditure, which will now be funded by set aside receipts within revenue. Only £21k will be capital expenditure on land owned by the Council.
 - £100k for Clackmannanshire's Outdoor activity Centre. This project was deleted as part of the Council's 5 year capital programme.
- 3.6. No additional overspends were identified since the last review. The total projected overspends of £415k were detailed in the previous report.
- 3.7. Paragraph 3.5 identified savings as part of the 5 year plan. In the same exercise, the Council retained budgets totalling £943k to complete ongoing projects, the main projects being:
- £200k for School Fund. Projects have been identified which can be brought forward to facilitate current needs within schools. This will also assist with requirement of the Scottish Government to bring forward expenditure to match the 'accelerated' grants, which would otherwise be lost.
 - £250k for provision of alternate accommodation for Adult Care, which was completed in December 2009.
 - £217k for B9140 Realignment of Bends is expected to be completed this year and the budget earmarked for related project in 2011/12 will need to be brought forward to facilitate this.
 - £225k for Street Lighting. The project is not weather depended and was brought forward to match 'accelerated' grants.
 - £50k for Forthbank Waste Recycling project is expected to be spent this year in respect of minor excavation. This is to be funded by bringing forward budget of £50k from 2010/11 as part of the 5 year capital programme.
- 3.8. Explanations for all savings, overspends and carry forwards are provided in Appendix 2, including brief project updates.
- 3.9. The current difficult economic conditions necessitated a significant review of the Council's capital programme. The savings identified and incorporated in the current year and the approved 5 year plan, will reduce capital borrowing and borrowing costs to affordable levels. At the same time it delivers a substantial programme which addresses the Council priorities.

4.0 SUSTAINABILITY IMPLICATIONS

- 4.1. Not applicable to monitoring reports

5.0 RESOURCE IMPLICATIONS

5.1. Financial Details:

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

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

5.4. Staffing: There are no direct implications to staffing arising from this report .

6.0 EXEMPT REPORTS

Is this report exempt? **Yes** (please detail the reasons for exemption below) **No**

7.0 DECLARATIONS

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

(1) **Our Priorities 2008-2011**

- 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 In adopting the recommendations contained in this report, the Council is acting within its legal powers. **YES** **NO**

10.0 APPENDICES

The following appendices are is attached to this report:

Appendix 1: General Services Capital Programme 2009/10 to 2014/15: Current out-turn

Appendix 2: Projected Status Detail 2009/10 to 2014/15

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

- 1 General Services Capital Programme 2008/09 to 2010/11: Monitoring Report (Report to the Scrutiny Committee of 21st January 2010).
- 2 5 Year General Services Capital Programme 2010/11 to 2014/15 (Report to the Special Council on 11th February 2010).

Author(s)

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Approved By

NAME	DESIGNATION	SIGNATURE
Susan MacKay	Finance Manager	
Angela Leitch	Chief Executive	

General Services Capital 2009/10 to 2014/15

The table below summarises the financial position for 2009/10 and the 5 years to 2014/15

	2009/10 £'000	2010/11 £'000	2011/12 £'000	2012/13 £'000	2013/14 £'000	2014/15 £'000
Net Borrowing Budget Approved by Special Council March 2009 for 2009/10	10,424					
Adjustments at year ended 31st March 2009	3,691					
Transfer of Budgets from 08/09 to 09/10 finalisation of 08/09 accounts	(761)					
Accelerated General Grant	(38)					
Additional / Adjustment to General Grant						
As per Scrutiny Committee Report of October 2009	13,316					
New 5 year Capital Programme introduced for 2010/11 to 14/15 and adjustments for 09/10	943					
Budgets carried forward to 2010/11 - included in the 5 yr plan	(1,736)	1,736				
Approved by Council in February 2010		6,956	6,369	5,864	3,508	3,058
Current Out-turn Review						
Additional Carry forwards identified in current review	(2,166)	2,166				
Underspends /Savings identified	(4,500)					
Overspends identified	415					
Out turn as per current report	6,272	9,122	6,369	5,864	3,508	3,058

Service / Project Name	2009/10 Budget after all transfers		Actual for 10 Months to 31st January 2010		09/10 Out-turn reported as at February 2010		PROJECT UPDATE NOTES as at February 2010		Revised 2010/11 budget after transfers	Budget for 2012/13	Budget for 2013/14	Budget for 2014/15
	Revised Budget (Council Contribution)	Total Expenditure Gross	Total Income	Borrowing (Council Contribution) Net	Total Expenditure Total	Total Income	Borrowing (Council Contribution) Net					
	£	£	£	£	£	£	£		£	£	£	£
EDUCATION												
4 DDA Compliance	0	5,404.00		5,404.00	0		0	Any spend on DDA Compliance this year is related to Primary & Nursery School, and will be funded from that budget.				
8 School Building Alarm Systems	328,000	219,886.00		219,886.00	264,000		264,000	Continuation of the programme which is proceeding well despite slight slippage due to contractor performance and restricted timescale to fit in with school holidays. £6K will be carried forward to 2010/11.				
9 School Fund	665,700	535,293.00		535,293.00	725,700		725,700	The Schools Fund budget & Primary & Nursery School (project 17) budget are amalgamated. With the exception of £140k, the budget will be spent by year end. A further expenditure of about £200k is accelerated from 2010/11 into the current year to assist with the requirement of Scottish Government to match the accelerated General Capital Grant.				
17 3-12 School Development (Primary & Nursery)	500,000	9,002.00		9,002.00	482,000		482,000	See note on project 9 above	750,000	750,000	750,000	750,000
Vending Machines in Schools	0	8,750.00		8,750.00	9,000		9,000	Unbudgeted expenditure. May be met from School Fund (Project 17) budget				
Reconfiguration of Council Services & Property Assets in Thornhill	0	0.00		0.00	1,000		1,000	This project was deleted as part of the Council's 5 year capital programme. Only professional fees for initial work is expected to be charged.				
135 Schools Security	0	0.00		0.00			0	This project was deleted as part of the Council's 5 year capital programme. Only professional fees for initial work is expected to be charged.				
156 Contribution to PPP project	2,775,000			0.00			0	This contribution to the PPP project is now being funded from unapplied capital receipts carried forward from 2008/09. There will be a saving of £2,775k as this budget will not be required.				
164 Ground Investigation Redwell P.F	0	16,358.00		16,358.00	18,000		18,000	The 3-12 review highlighted an urgent need to improve St John's primary school. A preliminary ground investigation has been completed and a report submitted. Various options for the development of the school are currently under consideration. The expenditure in the current year will be met from the Primary & Nursery Development budget (project 17).				
SCHOOLS PPP												
ICT Hardware Replacement in Sec Schools & New IT Installation in Schools	0	177,224.00		177,224.00	178,000		178,000	Expenditure to be funded from White Board budget (project 104)				
103 Demolition of Lornhill Academy & Construct Car Parking & Football Pitch & Running Track	1,510,000	825,638.00		825,638.00	1,265,000		1,265,000	The budgets of this project & Running Track (project 92) have now been combined as they are intrinsically linked under a single contract. The total cost is expected to be £1,522k which is £12k in excess of the combined budget of £1,510k and includes car park, bus stand, grass pitches, running track and flood lighting. Application for funding has been submitted for Historic Scotland and application for Sports Scotland funding will be made next year. The main phase is scheduled for July & completion by end of 2010. Project is proceeding satisfactorily, and £257k will be carried forward to 2010/11.	142,000			
104 Purchase of White Boards for new schools	283,000			0.00	0		0	Implementation of white boards concluded satisfactorily. Part of the spend is shown in ICT Hardware project (project 65). £88k will be carried forward to 2010/11 to complete the programme.				
157 Land Acquisition Alva Acad - PPP	0	3,500.00	(7,675.00)	(4,175.00)	4,000		4,000	Retention. Project complete				
COMMUNITY & LEISURE												
10 Tulligarth Sports Resurfacing - requirement of Lottery funding	40,000			0.00	50,000		50,000	The £40k originally identified as fund for replacement of carpet will now be used to upgrade the pitches at Cornhill Academy prior to transfer to Arney, who will be responsible for maintaining the pitches. An additional c£10k required for this project is to come from education.				
16 Leisure Bowl	0	5,460.00		5,460.00	6,000		6,000	Retention				
88 Development of Community Facilities in Alva	953,000	60,368.00		60,368.00	100,000		100,000	Project is being redesigned prompted by the latest consultation and will be re-phased over the next two to three years. The project involves development of library & CAP offices, games hall and changing facilities for the swimming pool. The total cost of the project is expected to be about £4.8m, funded partly by grants from Energy Efficiency, EU Funds & Lottery Funding. Currently it is not expected that any additional Council contribution will be required other than the approved amounts. Only professional fees of about £100k are expected to be incurred in the current year with the balance being carried forward to 2010/11.	850,000		53,000	
89 Cochrane Hall Alva Refurbishment & Upgrading	494,000			0.00	50,000		50,000	Only fees are expected to be incurred this year with the balance of £444k being transferred to next year. The tender will go out in 2010/11. The slippage is as a result of extended consultation in connection with Johnstone Centre.				
91 Clackmannanshire's Outdoor Activity Centre	100,000			0.00	0		0	This project was deleted as part of the Council's 5 year capital programme.				
101 Dumyat Centre Menstrine-Alt & Ext	0	13,847.00	(20,000.00)	(6,353.00)	60,000	(60,000)	0	The total project cost is expected to be about £200k and is to be funded entirely from £75 money. If, however, the funding is less than £200k, the project manager has advised that the proposed development will be revised to fit the funding available. Initial delays resulting from uncertainty of realising £75 money from developer. Further delay caused as a result of extended consultation with the community and developer.				
SOCIAL SERVICES												
21 Joint FV/NHS/ Adult Care Premises Occupation Menstrine Old Peoples Home	30,000	11,098.00		11,098.00	12,000		12,000	Project is now complete, staff moved in & clients attending. Balance of expenditure is minor IT hardware and relocations. A saving of £78k has been achieved from alternative IT resolution.				
		105.00		105.00				Minor retention				

Service / Project Name	2009/10 Budget after all transfers			Actual for 10 Months to 31st January 2010			2009/10 Budget after all transfers			2010/11 Budget after transfers			2011/12 Budget after transfers			2012/13 Budget			2013/14 Budget			2014/15 Budget							
	Revised Budget (Council Contribution)	Total Expenditure Gross	Borrowing (Council Contribution) Net	Total Expenditure Total	Income	Borrowing (Council Contribution) Net	Revised Budget (Council Contribution)	Total Expenditure Total	Income	Borrowing (Council Contribution) Net	Revised 2010/11 budget after transfers	Revised 2011/12 budget after transfers	Budget for 2012/13	Budget for 2013/14	Budget for 2014/15	Revised Budget (Council Contribution)	Total Expenditure Gross	Borrowing (Council Contribution) Net	Total Expenditure Total	Income	Borrowing (Council Contribution) Net	Revised 2010/11 budget after transfers	Revised 2011/12 budget after transfers	Budget for 2012/13	Budget for 2013/14	Budget for 2014/15			
																											£	£	£
General Services Capital Programme 2009/10 to 2014/15																													
130 Wethersburgh Travelling Peoples site	0	1057,993.00	(68,000.00)	84,000.00	(64,000.00)	0	84,000.00	(64,000.00)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
131 Alcoa centre (Day & Adult Care) move to Alternative Accommodation	0	93,084.00	(20,000.00)	295,000.00	(20,000.00)	275,000.00	295,000.00	(20,000.00)	275,000.00	380,000.00	380,000.00	380,000.00	380,000.00	380,000.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
167 Halescarth Youth Care	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
ROADS & TRANSPORTATION																													
26 Accident Prevention	226,000.00	143,466.00	(35,000.00)	226,000.00	(35,000.00)	191,000.00	226,000.00	(35,000.00)	191,000.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
27 Alcoa Town centre	65,000.00	79,866.00	(2,990.00)	76,000.00	76,000.00	76,000.00	76,000.00	76,000.00	76,000.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tullibody By-Pass	0	1,258.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
30 B9140 Realignment of Bands (Collylands to Glenochil - West)	426,000.00	534,746.00	0	643,000.00	643,000.00	643,000.00	643,000.00	643,000.00	643,000.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
B9140 Realignment of Bands (Collylands to Fishcross/Maggies Wood - East)	0	112.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31 Bridge Strengthening	76,000.00	6,370.00	0	76,000.00	76,000.00	76,000.00	76,000.00	76,000.00	76,000.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32 Flood Prevention	80,000.00	29,582.00	(1,347.00)	80,000.00	80,000.00	80,000.00	80,000.00	80,000.00	80,000.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35 Road & Footway Improvements (SRMCS), including town centres	740,000.00	123,442.00	0	740,000.00	740,000.00	740,000.00	740,000.00	740,000.00	740,000.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
36 Cycling, Walking, Safer Streets (CHSS)	0	39,626.00	(759.00)	86,000.00	(66,000.00)	0	86,000.00	(66,000.00)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
37 Street Lighting	267,000.00	135,503.00	0	482,000.00	482,000.00	482,000.00	482,000.00	482,000.00	482,000.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
38 Inspecting Rail to Alcoa	0	1,693,590.00	(1,693,520.00)	70,000.00	70,000.00	0	70,000.00	70,000.00	70,000.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
41 Traffic Management	100,000.00	64,265.00	0	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
43 SESTRAN Public Transport & Walking	141,000.00	430.00	0	141,000.00	141,000.00	141,000.00	141,000.00	141,000.00	141,000.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
93 Improvement	0	148.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
106 Shillingleith Roundabout	26,000.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
107 A906/B908 Halpark, Sauchie	72,000.00	37,593.00	0	72,000.00	72,000.00	72,000.00	72,000.00	72,000.00	72,000.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
125 Gateways & Roundabouts	0	0	(4,000.00)	0	(4,000.00)	(4,000.00)	0	(4,000.00)	(4,000.00)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
141 Cambus Rail Hall	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

PROJECT UPDATE NOTES as at February 2010

This is phase 2 of developing Wethersburgh Travelling peoples site. £25k is match funded from Homelessness budget and the balance funded by Scottish Government support grant.

Compulsory move of Child Care and Adult Care staff from A.L.L.O.A. Centre Hawkhill to Millar Court Mill Street. Land Services Menstrie & Marchside Court. Sauchie which was successfully achieved by end of December 2009. Although the tenders were higher amount than expected, the project was reassessed to reduce costs. Final costs are expected to be £295k, which is £45k more than the budget. The additional costs will be funded by a combination of private contribution of £20k (already received) and £25k from the budget in project 159 within Property Services.

On target to spend full Budget, with the exception of the £35k contribution Developer which will be carried forward to 2010/11.

The project is now complete. A small overspend of £8k over the budget is expected as retentions are paid. The project was linked with Shillingleith to Town Hall relocated road crossing.

Project complete. Retentions.

Total expenditure this year is expected to be £543k. The excess of £217k over the budget will be funded by bringing forward the amount allocated to Fishcross budget (Project 31) from 2011/12. Scottish Committee were advised of this additional cost in previous reports.

As stated above (project 30), a budget of £217k is transferred from this project to project 30 to meet the commitments of this project. Project 31 was earmarked to commence in 2011/12. However, it was identified as a potential saving, but a budget of £500k has been provided in 2014/15 in the 5 year capital programme.

The budget is earmarked entirely for Strengthening to Bridge on C101 Tullibody to Menstrie Road. The expectation was to achieve full spend this year. However, inspections have revealed works which will require tendering and likely to be incur additional costs. Unspent balance will be carried forward to 2010/11 and further updated will be given in next report regarding additional costs following the tender exercise.

The budget is earmarked for walk work in the Hillfolds area and will be spent this year.

Project consists of various roads & footway improvement projects throughout the County. In addition to the £740k this year, it was planned to bring forward some works from 2010/11 to assist with the requirement of Scottish Government to match the accelerated General Capital Grant. However, the adverse weather conditions have severely restricted the scope and extension of the works which could be carried out. It is now unlikely that the "accelerated" element will be achieved. The total expenditure is likely to be about £600k with the balance carried forward to 2010/11. The position will be continued to be monitored to the end of the year with a view to achieving the maximum result effectively & efficiently.

In addition to the £267k this year, it was planned to bring forward works from 2010/11 amounting to about £225k. Whilst the "accelerated" element of the project has been spent, the latest position is that the contractor has been delayed getting to site as a result of adverse weather problems in other contracts. The balance of the budget will be carried forward to 2010/11 but the position is closely monitored to the end of the year with a view to achieving the maximum result effectively & efficiently.

Although the project is complete & operational, some additional expenditure is expected this year, including retention. The project is funded by grants primarily from Transport Scotland. A further increase in the grant was approved recently in order to meet this additional expenditure.

Various planned traffic calming projects are under way and the budget will be fully utilised

Initially the project included developing loading bays in Alva and National Cycle routes in Cambus & Dalry. Due to the adverse weather conditions, the loading bays project has had to be cancelled due to excessive costs. It is proposed that the budget is carried forward for Menstrie cycle route.

Project is completed. Expenditure is outstanding for minor professional fees.

Proposals related to roundabout on New College site. Initial investigation showed that current proposal is not feasible. Budget will not be required. Future proposals will be funded from capital receipts from sale of A.L.L.O.A. (Hawkhill) Centre.

Project proceeding satisfactorily and will be completed by the year end.

Small credit from promotion income carried over from last year, to be utilised for general capital in current year.

This project was deleted as part of the Council's 5 year capital programme.

Service / Project Name	2009/10 Budget after all transfers		Actual for 10 Months to 31st January 2010		09/10 Out-turn reported as at February 2010		Revised 2010/11 budget after transfers	Revised 2011/12 budget after transfers	Budget for 2012/13	Budget for 2013/14	Budget for 2014/15
	Revised Budget (Council Contribution)	Borrowing (Council Contribution) Net	Total Expenditure Gross	Total Income	Total Expenditure Total	Income					
	£	£	£	£	£	£	£	£	£	£	£
General Services Capital Programme 2009/10 to 2014/15											
148 Clackmannan Road Phase 2	50,000	0.00					0	0	0	0	0
149 Flood Prevention Scheme - Tillicoultry (Elisoun Drive)	50,000	29,790.00	29,790.00		50,000		50,000	1,400,000	50,000	50,000	0
151 Other Regional Transport Projects	335,000	29,183.00	29,183.00		30,000		0	150,000	0	0	0
160 Bridge into Clackmannanshire	0	(363,817.00)	(363,817.00)		(363,000)		0	0	0	0	0
168 A91 East of Tillicoultry								0	0	400,000	400,000
ENVIRONMENTAL											
47 Beck Devon Landfill Gas Collection & Treatment Project	0	7,630.00	7,630.00		0		0	0	0	0	0
49 Contaminated Land / Alva Gas Works	429,000	278,158.00	278,158.00		21,000		53,000	53,000	53,000	53,000	53,000
54 Forthbank Waste Recycling Project & Accommodation Remediation	0	917.00	917.00		50,000		200,000	200,000	9,000	0	0
57 Wheeled/Liter Bins / Strategic Waste Fund	201,000	539,483.00	539,483.00		560,000		58,000	30,000	30,000	30,000	30,000
Wheeled Disp Bins & Containers		13,908.00	13,908.00								
POLICY & IMPLEMENTATION											
55 Clackmannan Tollbooth	65,000	0.00					0	0	0	0	0
56 National Cycle Route	62,000	0.00					0	0	0	0	0
58 Landscape Partnership - conservative Ochills / Hillfoots	155,000	2,500.00	2,500.00		40,000		0	0	0	0	0
59 Core Path network for Access	38,000	0.00			38,000		0	0	0	0	0
68 Development Opportunities	100,000	0.00					0	0	0	0	0
73 Pavilions Business Park Phase 2	30,000	0.00			0		0	0	0	0	0
110 Alcoa Town Centre Regeneration: Spairs Centre	757,000	500.00	500.00		10,000		1,732,000	1,185,000	0	0	0
114 Line Tree Walk Phase 2	222,000	11,217.00	11,217.00		39,000		0	0	0	0	0
116 New Alcoa Infrastructure	0	0.00			7,000		0	0	0	0	0
140 Shillinghill to the Town Hall - Relocated Road Crossing	285,000	284,708.00	284,708.00		285,000		0	0	0	0	0

PROJECT UPDATE NOTES as at February 2010

The budget will be utilised for Alcoa East Gateway Clacks Road (project 153) with which it is linked. This phase of the project is currently in progress and expected to be completed by year end.

These funds are predominantly earmarked for the provision of Real Time information on public transport. This is a multi million project covering the south east of Scotland and is being led by SESTRAN. The timing of expenditure is generally out with the Council's control. The total cost of the project is £3.0 million. This budget is committed this year for the investigation of the extension of rail services east into Fife and over the Forth Bridge to Edinburgh. This is being jointly funded by SESTRAN and Fife with the £30,000 being our share. The balance of the budget is carried forward and spread over the next 3 to 4 years.

The credit is ERDF grant received in previous year. It is mostly earmarked to fund the claw back on the Kinbraigs ERDF (shown in project 301) following the change in the use of the building

The site treatment & gas collection is the last phase of the original £2.8m project. This phase involves a complex arrangement with SEPA, with a regulatory regime. No solution in place as yet but the 2010/11 budget will be required as this is a committed project. The 2010/11 budget of £400k was reduced by £48k overspend in 2008/09 in Black Devon Landfill project.

The Contaminated Land budget (£232k) & the Alva Gas Works project (£197k) have been combined. Of the original budget of £240k for the Alva Gas works, which was approved by Council in June 2008, £43 was spent last year, leaving a balance of £197k. Of the total budget of £429k, a saving of £50k was reported previously. Latest review shows that there will now be a capital saving of £358k, as this expenditure is considered to be revenue expenditure. Only £21k will be capital expenditure on land owned by the Council.

The budgets for Waste Recycling and Accommodation Remediation are combined. Now that the new waste collection arrangements have been successfully rolled out, the redevelopment of Forthbank site, including adding a building for sorting recycled items, is under way. £50k is expected to be spent this year. In respect of minor excavation, this is to be funded by bringing forward budget of £50k from 2010/11 as part of the 5 year capital programme.

The current review shows the excess spend is £37k greater than previously reported amount of £378k over budget. As reported, this is in respect of introduction of new wheeled bin system. The Strategic Waste Fund budget of £59k (project 155) will be used to part fund this project, leaving a net overspend of £359k. Additional Zero Waste Fund has been announced by the Scottish Government which may be used to fund this overspend.

This project was deleted as part of the Council's 5 year capital programme.

The project is linked with SUSTRANS. Due to continued negotiation of access issues with private landowner, the budget will be carried forward to 2010/11.

Briefing parameters still being resolved. £40k will be spent this year on fees. The balance of the budget is carried forward to 2010/11.

The budget is expected to be spent this year as orders have already been placed. Any unspent balance will be carried forward

Budget committed as contribution to ERDF clawback re Kinbraigs

This budget is not required. All contributions to CSBP have been made re development of this project. This will be a saving of £30k in 2009/10

Options on redevelopment of Spairs Centre continue to be considered following a recent report to the Council but yet to be concluded. In March 2009, the Scottish Government announced substantial funding to be made available for town regeneration in key areas of Scotland, in the light of that funding, the Council has established a working group to explore the possibility of submitting detailed proposals and take them forward in the context of the issues raised in that report. Further assessments following another report to the Council in December 2009, has revised schemes and new proposals introduced. New target programme is in the process of being finalised. Expenditure on fees only expected to be incurred in 2009/10, with balance carried forward to future years.

The project is now complete, with the retention amount of £83k outstanding. This will be carried forward to 2010/11. A saving of £100k was already reported in previous report.

The project is now complete. Retention of £7k is expected to be paid this year.

The relocation of the road crossing is complete. Final payment, including retention will be paid this year. The expected saving of £8k reported previously is now not expected to be realised.

Service / Project Name	2009/10 Budget after all transfers		Actual for 10 Months to 31st January 2010		09/10 Out-turn reported as at February 2010		Borrowing (Council Contribution) Net	Revised 2010/11 budget after transfers	Revised 2011/12 budget after transfers	Budget for 2012/13	Budget for 2013/14	Budget for 2014/15
	Total Expenditure Gross	Total Income	Total Expenditure Total	Total Income	Total Expenditure Total	Total Income						
	£	£	£	£	£	£						
General Services Capital Programme 2009/10 to 2014/15												
147 Mixed Leisure Route Upgrading	10,000	0.00	10,000	0.00	10,000	0.00	10,000	0	0	0	0	0
148 Mixed Leisure Route Upgrading - Fibrecross and Tillicoultry to facilitate active travel.								0	0	0	0	0
149 This project is part of a bigger project to enhance further the A907 corridor as the main entry to the Town from the East. The project was to be funded entirely from retrospective ERDF grant of £550k, of which only £435k was claimed, the balance being cross referenced with Kinross's clawback provision (see project 138). Therefore the balance of the expenditure of £115k will now be financed from project 148, Clackmannan Road Phase 2 (£50k) and project 138 (£65k). The expenditure in the current year is retention and roundabout art sculptures. The project is now complete.	138,952.00	139,952.00	138,952.00	139,952.00	138,000	138,000	138,000	0	0	0	0	0
150 In August 2009, the Scottish Government announced the Town Centre Regeneration Fund and offered the Council a grant of £2m. Works are currently under way for the development of main streets in Alloa and together with the provision of Arts facilities in the town centre. Work is on programme with 4 street completed and 3 to be completed by year end. The High Street will be completed in April/May 2010. A report on the progress will be submitted to the Council. The project is entirely funded by the grant, a large proportion which has already been received.	686,883.00	(494,766.00)	2,000,000	(2,000,000.00)	2,000,000	(2,000,000.00)	0	0	0	0	0	0
PROPERTY SERVICES												
60 Asbestos Removal	15,000	0.00	15,000	0.00	15,000	0.00	15,000	25,000	25,000	25,000	25,000	25,000
62 DDA - DAE Properties	20,000	10,000.00	10,000.00	10,000.00	20,000	20,000	20,000	10,000	10,000	0	0	0
70 Kinross Mill 1936 Envelops	106,000	25,200.00	25,200.00	(1,675.00)	106,000	106,000	106,000	0	0	0	0	0
71 Kinross Mill 1904 Development of 3rd & 4th Floors	101,000	58,777.00	58,777.00	58,777.00	51,000	51,000	51,000	50,000	50,000	0	0	0
72 Kinross Mill 1904 Development of 3rd & 4th Floors	4,000	0.00	4,000	0.00	4,000	4,000	4,000	200,000	200,000	150,000	150,000	0
134 Extension and refurbishment of CLICK (Glebe Hall)	120,000	390,000.00	390,000.00	390,000.00	400,000	400,000	400,000	0	0	0	0	0
159 Marshall Health Centre	75,000	0.00	0	0.00	0	0	0	0	0	0	0	0
162 Demolition of Alba and Alba Schools	509,000	235,179.00	235,179.00	235,179.00	367,000	367,000	367,000	110,000	110,000	0	0	0
163 Site enhancements	700,000	0.00	0	0.00	0	0	0	0	0	0	0	0
170 Clackmannan Primary School Cladding								600,000	600,000	2,550,000	2,000,000	250,000
171 Craigbank Primary Redevelopment								0	0	0	0	400,000
172 Dalmore Centre								0	0	0	0	500,000
173 Semi Secure Children's Unit Conversion								100,000	100,000	0	0	0
174 Public Convenience Replacement								165,000	165,000	0	0	0
175 Voltage Optimisation								34,000	34,000	0	0	0
176 Strategic Land Acquisition - Alba West								0	0	0	0	0
CORPORATE DEVELOPMENT												
64 Efficient Government/Customer First Developments	176,000	130,824.00	130,824.00	(170,000)	346,000	176,000	176,000	100,000	100,000	0	0	0
65 IT Services	463,000	(140,000)	341,677.00	341,677.00	463,000	463,000	463,000	252,000	277,000	327,000	235,000	235,000
66 Finance Services - General Ledger system	53,000	670.00	670.00	670.00	53,000	53,000	53,000	50,000	50,000	0	0	0
76 DDA & Asbestos Removal - Corporate Development Services	17,000	0.00	17,000	0.00	17,000	17,000	17,000	0	0	0	0	0

Service / Project Name	2009/10 Budget after all transfers		Actual for 10 Months to 31st January 2010		09/10 Out-turn reported as at February 2010		PROJECT UPDATE NOTES as at February 2010	Revised 2010/11 budget after transfers	Revised 2011/12 budget after transfers	Budget for 2012/13	Budget for 2013/14	Budget for 2014/15	
	Revised Budget (Council Contribution)	Borrowing (Council Contribution) Net	Total Expenditure Gross	Total Income	Total Expenditure Total	Income							Borrowing (Council Contribution) Net
	£	£	£	£	£	£							£
General Services Capital Programme 2009/10 to 2014/15							PROJECT UPDATE NOTES as at February 2010						
82 Council Office Improvements	55,000		42,556.00		55,000	55,000	Project includes alterations to CEO areas, Greenfield Café and associated works. Any underspend will be carried forward to 2010/11.	0	0	0	0	0	
83 Greenfield Driveway & Parking	47,000		0.00		0.00	0.00	Work is now complete. The budget which was carried forward from previous year will not be required, resulting in a saving of £47k.	0	0	0	0	0	
CHIEF EXECUTIVE													
75 CCTV	109,000		0.00		99,000	99,000	Budget is required for replacement of existing cameras which have reached end of their lifespan. A draft business plan is in the process of being drawn up following - A saving of £10k is expected on existing budget.	30,000	0	0	0	0	
152 Capital Contribution to the Police Board	225,000		188,914.00		225,000	225,000		225,000	0	0	0	0	
LAND SERVICES & CEMETERY													
48 Cemeteries Strategy	247,000		54,617.00		97,000	97,000	Budget is earmarked for Alva & Dollar cemetery extensions. There have been access problems through private land and the option for the Council to develop access road were not approved, hence the delay in this project. £150k will be carried forward to 2010/11 to proceed next year pending resolution of access problems. The Alva cemetery extension is progressing well, despite additional works in connection with flooding.	226,000	237,000	172,000	20,000	20,000	
50 Parks, Play Areas & Open Spaces	180,000		66,732.00		180,000	180,000	Projects progressing well. They include new Play facilities at Coatsnaughton and fencing at Menstrie Public Park. Work has started on Fishcross play area.	50,000	50,000	50,000	50,000	50,000	
VEHICLES													
63 Vehicle Replacement Programme	951,000		432,736.00	(6,410.00)	581,000	581,000	There is expected to be an underspend of £370k as services have reassessed their needs and extended lifespan of current vehicles for another year. However, these will need to be replaced next year and the budget is carried forward for this purpose.	1,155,300	960,000	800,000	600,000	600,000	
PROPERTY DISPOSALS													
36 Investment Business Centre	0		64.00		0	0	Final conclusion of missives has been delayed slightly. Proceeds will be ring fenced for Schools PPP provision.	0	0	0	0	0	
77 North Castle Street - Alva	0		86.00		0	0	Currently of the market due to funding issues facing prospective buyers. Eventual proceeds will be ring fenced for Schools PPP provision.	0	0	0	0	0	
77 Sale of Alva/Ava Secondary S	0		0.00		0	0	Alva site sale has been postponed for time being. There is interest from Housing for part of the site for new build. A bid has been received for Alva site, but missives have been suspended to at least 2010/11. Proceeds will be ring fenced for Schools PPP provision.	0	0	0	0	0	
77 A.L.L.O.A. Centre (Hawkhill) Sale	0		230.00		(230,000)	(230,000)	Sale to College has been approved. Missives have been completed and sale concluded. Of the receipts of £575k, £230k of the proceeds is expected to be used to contribute to costs of relocating CJS to Glebe Hall of which £100k has been approved by the Council (see project 134). A further £250k of the proceeds has been approved by the Council to be used for off-site works at the Hawkhill site. The balance of the proceeds will be ring fenced for Schools PPP provision.	0	0	0	0	0	
77 Land Sale Broad Street, Alva	0		(3,525.00)		(3,525.00)	(3,525.00)	Proceeds from sale of 56 Broad Street, which will be utilised for general allocation	0	0	0	0	0	
77 Sale 2 plots Swinburn Dr. Sauchie	0		2,064.00	(70,000.00)	(67,936.00)	(67,936.00)	Missives have been completed and sale concluded. Proceeds will be ring fenced for Schools PPP provision.	0	0	0	0	0	
77 Car Park at Checkmannan Road	0		106.00	(9,894.00)	(9,894.00)	(9,894.00)	Missives have been completed and sale concluded. Proceeds will be ring fenced for Schools PPP provision.	0	0	0	0	0	
77 Scour Hill Site in Sauchie	0		100.00		(147,000)	(147,000)	Proposal to demolish building prior to sale.	0	0	0	0	0	
77 Unallocated Capital Receipts (NET OF EXPENSES)	0		2,686.00	(150,004.00)	(147,318.00)	(147,318.00)	Unallocated receipts will be used to fund capital expenditure in current year's programme.	0	0	0	0	0	
GRANTS													
138 ERDF Grant Programme 2007-13 Match Funding for various projects	197,000		0.00		0	0	This is a carry forward of budget which is cross referenced with Kinraigs clawback provision. The balance of the clawback was paid this year (see project 301). £89k of the budget is utilised for Alva East Gateway (project 153) and the balance is used to off set Kinraigs clawback.	0	0	0	0	0	
300 General Capital Grant	(3,724,000)		(3,103,330.00)		(3,724,000)	(3,724,000)	The original General Capital Grant issued by Scottish Government was £2,925k. This was increased by £761k being accelerated grant from 2010/11 & £38k for Zero Waste. The Scottish Government accelerated the grant to enable Local Authorities to stimulate the economy in the recessionary period. Councils were asked to identify projects that could be brought forward (see projects 9, 17, 35 & 37). The accelerated grant would be lost if the Councils did not use it in the current year.	(2,000,000)	(2,000,000)	(2,000,000)	(2,000,000)	(2,000,000)	
301 ERDF Grants General Additional Transfers from 2009/10 to 2010/11	0		504,777.00		506,000	506,000	Payment of £506k is in respect of clawback of ERDF grants on the Kinraigs project following change of use of the building. This is financed as follows: Project 68 Economic Development of Eastern Cuckmannanshire (£100k); Project 138 ERDF match funding budget (£147k) and Project 160 Bridge into Cuckmannanshire grant (£258k)	2,166,000	0	0	0	0	

Service / Project Name	2009/10 Budget after all transfers		Actual for 10 Months to 31st January 2010		09/10 Out-turn reported as at February 2010		Revised 2010/11 budget after transfers	Revised 2011/12 budget after transfers	Budget for 2012/13	Budget for 2013/14	Budget for 2014/15	
	Revised Budget (Council Contribution)	£	Total Expenditure Gross	Total Income	Total Expenditure Total	Total Income						Borrowing (Council Contribution) Net
General Services Capital Programme 2009/10 to 2014/15												
	13,315,700		9,492,670.00	(6,656,956.00)	13,197,700.00	#####	6,271,200	9,122,300	5,864,000	3,506,000	3,058,000	
Total Capital Programme												

PROJECT UPDATE NOTES as at February 2010

Report to Scrutiny Committee

Date of Meeting: 8th April 2010

Subject: Housing Capital Programme 2009/10 to 2014/15: Monitoring Report

Report by: Finance Manager

1.0 Purpose

- 1.1. This paper reports on the projected out-turn of the Housing Capital Programme for the financial year 2009/10 and a summary of budgets for 2010/11 and 2014/15, based on the current review of the programme.
- 1.2. This is an update report detailing variations from budgets approved by Council in March 2009, including carry forward of unspent budgets from 2008/09 which were reported previously. The report also details anticipated savings and overspends in specific budgets in the current year following the latest review of the programme and highlights any variances.
- 1.3. The final review in the run up to the year end indicates that the Service has made considerable progress in the last few months in its objective to deliver the SHQS and 'Clackmannanshire Standard', despite considerable procurement issues.

2.0 Recommendations

- 2.1. It is recommended that the Committee note the contents of this report.

3.0 Considerations

- 3.1. As noted in the previous report, the approved budgeted gross expenditure for 2009/10 was increased from £7,014k to £7,944k as a result of the carry forward of £930k from 2008/09. In February 2010, the Council also approved the proposed five year budget for 2010/11 to 2014/15.
- 3.2. According to the current outturn projections, the gross expenditure is expected to reduce to £4,371k which is a further reduction of £1,251k from the out-turn reported previously of £5,622k.
- 3.3. The latest projected gross expenditure outturn of £4,371k is a reduction of £3,573k compared to the budget and these are summarised in 3.4 below. The variance of £3,573k is made up of committed budgets of £3,120k to be

carried forward to 2010/11, and savings of £453k which the Service is also proposing to carry forward to next year.

3.4. Summary of Variances from the budget:

Kitchens & Bathrooms: Underspend £2,775k of which £2,441k is committed and will be carried forward to 2010/11 and a saving of £334k. Projected committed underspend is due to ongoing procurement issues which the Council and the Scrutiny Committee have been advised of in previous reports. The Court judgement in December was appealed by the Contractor and has been upheld by the Court. The Service is unable to proceed until the expiry of the counter-appeal period. The savings of £334k is as a result of lower than expected tender on one of the contracts.

Structural Works: Projected to show an underspend of £118k due to receipts of insurance payments. Also, there has been a slight reduction in the number of asbestos tests required this year under one of the contracts. Underspend will be carried forward for projects which were back programmed due to immediate Health & Safety Insurance Work

Demolitions: The underspend of £136k will be carried forward to next year. The work is delayed as Scottish Government consent to transfer the land, following which the service can proceed with demolitions, has not been received yet.

Feasibility Work: The latest draft position shows an underspend of £110k. The budget is earmarked for Standard Delivery Plan which is Stock Condition Survey. The Stock Condition Survey is 4 weeks behind schedule due to procurement delays. Only £15k will be spent this year. The balance will be carried forward to 2010/11.

Central Heating: The projected underspend is expected to be £217k, which is higher than the position reported previously (£135k) to the Scrutiny Committee. £89k of this is attributed to a late start to a project as a result of procurement issues. The remaining £128k of the underspend is savings due to lower than anticipated tender costs. The underspend would have been greater but additional houses were brought forward under another project to utilise slippage and maximise production of that contract.

Roofs: An underspend of £95k of which £23k is savings from lower than expected tender, and £72k underspend is in relation common roof upgrading work. As previously reported, finance is not available to fund enforcement action on private owners to participate in common roof upgrading work. There is no funding available from other sources.

Where possible, the Service has sought to bring forward planned works to offset savings and carry forwards.

3.5. The current review indicates that the sale of Council houses will be slightly better than the position reported previously. The Service anticipates net receipts of £859k from sale of between 19-20 houses. While this is a considerable improvement from the expected sale of £451k reported previously, it is still some £446k short of the budgeted figure. This reflects

the continued adverse economic conditions which has affected Council house sales this year. In addition to this, the Service expects to receive £78k from sale of other Housing asset. Taking into consideration these receipts, the net expenditure for the year is projected to be £3,422k.

- 3.6. Last year the Service utilised the Housing Revenue reserve to fund part of the 2008/09 capital expenditure. It is anticipated that the reserve will be used again this year to help fund the capital programme.
- 3.7. As part of the five year proposed capital plan approved by the Council in February, to the gross expenditure budget of £5,437.6k for 2010/11 was added the then anticipated carry forward from 2009/10 of £2,332k. This report has highlighted that following the current review, the carry forward from 2009/10 to 2010/11 is now expected to be £3,573k. The proposed gross expenditure budget for 2010/11 is therefore expected to be £9,010k.
- 3.8. The borrowing for 2009/10 will be reduced but effectively carried forward to 2010/11. Taking the two years together, there will not be an overall increase in the borrowing
- 3.9. Brief details of reasons for savings, overspends, transfers and project updates are provided in Appendix 1.

4.0 Sustainability Implications

- 4.1. Not applicable to monitoring reports

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

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 2008 - 2011** (Please double click on the check box)

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

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

8.0 Equalities Impact

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

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 The following appendix is attached to this report:

Appendix 1: Housing Capital Programme 2009/10 to 2014/15: Position as at February 2010.

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

- 1 Housing Capital Account 2009/10 to 2011/12: Monitoring Report
(Report to Scrutiny Committee meeting on 21 January 2010).
- 2 Housing Revenue Budget 2010/11 and Capital Programme 2010/16
(Report to Special meeting of Council on 11 February 2010).

Author(s)

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Approved by

NAME	DESIGNATION	SIGNATURE
Susan MacKay	Finance Manager	
Angela Leitch	Chief Executive	

Housing Capital Programme 2009/10 to 2014/15	Revised Budget, inc of	To 28th February 2010			Projected Out-turn as at Feb (Mar HPIBF mtg)	Variance of February out turn with Budget	2010/11 Proposed Budget (exc carry forwards from 09/10)	2011/12 Proposed Budget	2012/13 Proposed Budget	2013/14 Proposed Budget	2014/15 Proposed Budget	Project Status as at February 2010 (March HPIBF meeting)
		Total Expend	Income	Net Expend								
	£	£	£	£	£	£	£	£	£	£	£	
SCOTTISH HOUSING QUALITY STANDARD TACKLING SERIOUS DISREPAIR PRIMARY BUILDING ELEMENTS												
Structural Works	205,000	194,482.00	(1,62,522.00)	31,970.00	87,000	(118,000)	150,000	150,000	150,000	85,000	85,000	Scottish Housing Quality Standard - Free from serious disrepair and modern facilities: Work has been essential Health and Safety works for removal of asbestos materials to be carried out prior to and in conjunction with other SHQS enhancement programmes, e.g. Fire Damage, Structural Failure. Previously reported underspend of £145k to Scrutiny Committee. is now reduced to £118k mainly due to earlier return than anticipated tender for Contract 2306. However, since the contract started late it will not be completed this year. The underspend of £118k would have been further reduced had it not been for reduction in the number of asbestos tests required this year under contract 2102. This is due to the delays in the kitchen/bathroom contract which is required as preparatory works under contract 2102. Underspend to be carried forward for projects which were back programmed due to immediate Health & Safety Insurance Work.
SECONDARY BUILDING ELEMENTS												
Damp/Rot	30,000	6,155.00	0.00	6,155.00	30,000	0	25,000	25,000	25,000	21,000	21,000	The latest draft position shows that the budget will be required as damp/rot is identified. This is essential Health and Safety works to remove damp/rot and ensure the long term use of the assets and meet legislative requirements.
Roofs / Rainwater / External Walls	407,000	283,215.00	0.00	293,215.00	312,000	(85,000)	525,000	325,000	175,000	175,000	505,000	The latest draft position projects an underspend of £95k. This is made up of £23k savings in contract 2272A (as a result of final account coming in lower). The balance of £72k underspend is in relation to contract 2201. As previously reported, finance is not available to fund enforcement action on private owners to participate in common roof upgrading work. There is no funding available from other sources. Unlikely to be resolved this financial year. The underspend will be carried forward.
External Door, etc	0	1,151.00	0.00	1,151.00	0	0	0	0	0	0	0	The latest draft position shows External Doors costs of £27k are to be transferred to Revenue as impairment costs, following external auditor's comments in the previous year. The CFCR will be reduced correspondingly to compensate for the impairment charge to revenue. There will therefore be a nil impact on both the bottom line revenue balance and borrowing.
ENERGY EFFICIENCY												
Efficient Central Heating	1,025,000	485,012.00	0.00	485,012.00	808,000	(217,000)	555,000	573,300	573,300	845,000	827,000	The latest draft position shows a projected savings of £217k, which is higher than the position reported previously (£135k) to the Scrutiny Committee. A combination of a late start to project 2303A (09/10 Central Heating Phase 1) and lower than anticipated tender costs has resulted in this increased underspend. To utilise the slippage, additional houses were brought forward under project 2179 (Central Heating Term Contract) maximising production of that contract.
Thermal Insulation	0	2,543.00	0.00	2,543.00	3,000	3,000	0	0	0	0	0	The latest draft position shows all projects in Thermal Insulation are complete. Spend attributed to delays in receiving Consultants fees. Overspend will be met from underspend in other projects
MODERN FACILITIES & SERVICES												

Housing Capital Programme 2009/10 to 2014/15	Revised Budget, inc of	To 28th February 2010			Projected Out-turn as at Feb (Mar HPSF mtg)	Variance of February out turn with Budget	2010/11 Proposed Budget (exc carry forwards from 09/10)	2011/12 Proposed Budget	2012/13 Proposed Budget	2013/14 Proposed Budget	2014/15 Proposed Budget	Project Status as at February 2010 (March HPSF meeting)
		Total Expend	Income	Net Expend								
	£	£	£	£	£	£	£	£	£	£	£	
Kitchen Renewal	3,695,000	1,254,885.00	0.00	1,254,885.00	1,474,000	(2,219,000)	232,000	269,000	269,000	269,000	269,000	The latest draft position shows an underspend committed budget of £2,221k. This is an increase of approximately £921k from the position previously reported to the Scrutiny Committee. Projected underspend is due to ongoing procurement issues on Contract 2286A (2009/10 Kitchen & Bathroom Phase 1) and an increase in the number of tenant refusals under 2226B (Phase 2). The Court judgement in December was appealed by the Contractor and has been considered by the court and upheld. Service has now to wait until the expiry of the counter-appeal period before they could proceed. In any case, the unsent budget is committed expenditure and will be carried forward to next year. It is expected that there will be no further expenditure in this financial year with the earliest forecasted expenditure expected in summer 2010.
6	1,103,000	193,911.00	0.00	193,911.00	549,000	(554,000)	2,245,000	3,021,850	1,198,700	1,457,000	144,300	The latest draft position shows an unsent committed expenditure of £220k due to procurement delays (explained above) and further £334k savings due to lower than anticipated tender. The unsent committed expenditure of £220k is lower than the previously reported figure of £255k. This is as a result on one contractor still working on site, enabling three more houses per week to be completed. Also, it reflects increased rates for architects fees & additional works requested by Housing Operations. The work is progressing well. Consideration was given to bringing forward works from 2010/11 in Contract 2301A (09/10 Bathroom Replacement Phase 1) to utilise the savings. However, further analysis indicated that it would be better use of available resources to utilise these savings in future contracts.
6	457,000	361,920.00	0.00	361,920.00	506,000	49,000	446,000	474,000	376,000	376,000	376,000	The latest draft position shows an overspend of £18k in Contract 2259A (additional works were identified during inspection which were not anticipated), £5k as a result of increased fees and £15k overspend in voids budget. This represents a slight increase from the position reported previously. The overspend was expected to be covered by carry forward from the previous year. However, that was not possible because of overspend in Voids Budget in 08/09. The slight saving received through procurement has been affected by a further overspend in Voids Budget 09/10.
6	111,000	52,353.00	(1,709.00)	50,644.00	50,000	(62,000)	150,000	100,000	50,000	100,000	100,000	The latest draft position shows an underspend of £52k. This represents an increase of £32k underspend from the previous report. This is due to delays putting together a brief for the digital switchover contract. £13k underspend is due to slippage of projects as a result of Contractors not responding to requests to commence work. The underspend may be carried forward to 2010/11.
6	110,000	55,686.00	0.00	55,686.00	66,000	(44,000)	50,000	50,000	50,000	50,000	50,000	The latest draft position shows no change from the previous report, which is an underspend of £44k. This is due to delays in finalising transfer of Hillcrest Drive. Budget to be carried forward to 10/11.
6												The latest draft position shows no change from previous report, showing an underspend of £33k less than budgeted figure. This is because of minor adaptation cost, which is to be transferred to revenue

Housing Capital Programme 2009/10 to 2014/15	Revised Budget, inc of	To 28th February 2010			Projected Out-turn as at Feb (Mar HPPF mtg)	Variance of February out turn with Budget	2010/11 Proposed Budget (exc carry forwards from 09/10)	2011/12 Proposed Budget	2012/13 Proposed Budget	2013/14 Proposed Budget	2014/15 Proposed Budget	Project Status as at February 2010 (March HPPF meeting)
		Total Expend	Income	Net Expend								
Disabled Adaptations	395,000	279,307.00	(2,300.00)	277,007.00	325,000	(33,000)	200,000	200,000	200,000	200,000	200,000	
Area Improvements	62,000	49,464.00	0.00	49,464.00	52,000	(10,000)	100,000	150,000	0	0	0	The latest draft position shows an underspend of £10k. This represents an increase of £10k from previous report due to slippage of projects as a result of contractors not responding to commence work. The underspend may be carried forward to 2010/11.
Water Supply Pipe Replacement	108,000	13,725.00	0.00	13,725.00	60,000	(48,000)	50,000	50,000	50,000	0	0	Draft position shows an unspent committed expenditure of £48k. Procurement position with Scottish Water has now been clarified and an exception report has been submitted. This process has caused the delay. The unspent budget will be carried forward as part of the contract.
Demolitions	138,000	2,059.00	0.00	2,059.00	2,000	(136,000)	150,000	150,000	0	0	0	The latest draft position shows an underspend of £136k. As reported previously, Service currently waiting on Scottish Government consent to transfer the land, following which the service can proceed with demolition of 5 & 6 Burnside Crescent. Had expected to go ahead this year but since we have not received consent yet it is unlikely that this will go not ahead. Budget will be carried forward to 2010/11.
Feasibility Work	125,000	0.00	0.00	0.00	15,000	(110,000)	30,000	20,000	20,000	20,000	20,000	The latest draft position shows an underspend of £110k. It was anticipated that the total budget of £125k would be used for Standard Delivery Plan which is Stock Condition Survey and Stock Revaluation. However, Stock Revaluation is to be charged to revenue. The Stock Condition Survey is 4 weeks behind schedule due to procurement delays. Only £15k will be spent this year. The balance will be carried forward to 2010/11.
Council New Build Housing (Transforming Communities)	0	0.00	0.00	0.00	0	0	260,000	1,221,000	50,000	0	0	
Windows	0	0.00	0.00	0.00	0	0	0	0	0	71,000	180,000	
Other Costs	10,000	15,598.00	0.00	15,598.00	23,000	13,000	265,000	265,000	0	0	0	The latest draft position shows an underspend of £13k, (an increase of £3k from the previous report). This is due to additional development work in Investment Programme Database and an two roofing contracts where the contractor is in receivership. Allowance has been made for outstanding sums due to them.
TOTAL CAPITAL EXPENDITURE	794,000	3,281,456.00	(1,66,522.00)	3,114,934.00	4,371,000	(8,573,000)	5,437,600	7,044,150	3,187,000	3,669,000	2,777,300	
SALE OF COUNCIL PROPERTY												
Sale of Council Houses	(1,305,120)	3,195.00	(734,881.00)	(731,686.00)	446,120	(659,000)	(600,600)	(629,000)	(814,300)	(798,400)	(761,200)	House Sales continue to be poor due to current market conditions. Up to end of February 2010, 19 houses were sold. The latest draft position shows a further 3 transactions could settle this financial year totalling £ 879k, less £20k expenses with net receipts of £859k for the year. Average sale price is £39,958k per unit. In addition receipts from sale of shops & land of £52k has been realised. An vacant shop sale is expected to be settled by the end of year with an additional £13k.
Sale of Council Shops		30,000	(60,000.00)	(49,970.00)	(63,000)	(63,000)						
Sale of HRA Land		0.00	(9,732.00)	(9,732.00)	(15,000)	(15,000)						
Mortgage Rescue/Shared Ownership		7,219.00		7,219.00	8,000	8,000						
Mortgage Rescue / Shared Ownership												
GRANTS												
NET EXPENDITURE	6,638,880	3,291,900.00	(961,135.00)	2,330,765.00	3,442,000	(8,196,880)	4,637,000	6,215,150	2,372,700	2,871,200	1,996,100	

Report to Scrutiny Committee

Date of Meeting: 8 April 2010

Subject: Shared Risk Assessment for the Audit & Inspection of Council Services

Report by: Head of Strategy and Customer Services

1.0 Purpose

- 1.1. To advise Scrutiny Committee of Audit Scotland's new approach for planning and co-ordinating the programme of audit and inspection over the next three years.

2.0 Recommendations

- 2.1. Scrutiny Committee is asked to consider and comment on the approach to developing the Shared Risk Assessment for the Council.

3.0 Considerations

- 3.1. In 2006 the Minister for Public Service Reform and Finance commissioned an independent review of inspection, regulation, audit and complaints handling for public services in Scotland. The resulting document, the Crerar Report, recommended that a new, more proportionate scrutiny system should be adopted.
- 3.2. Audit Scotland was asked by the Scottish Government to lead on the response to the Crerar Report, a result of which is Shared Risk Assessment (SRA). An SRA is essentially a joint scrutiny work plan developed by external bodies that inspect, regulate and audit council services. These bodies include Audit Scotland, the Social Work Inspection Agency, Her Majesty's Inspectorate of Education, the Care Commission and the Scottish Housing Regulator, and are collectively known as the Local Area Network.
- 3.3. The aim of the SRA is to improve information sharing and ensure that scrutiny activity is proportionate in terms of frequency, intensity and scope, and is based on perceived risk.
- 3.4. An important factor in the SRA is the extent to which a council has in place arrangements for evaluating their own services and organisation and for managing performance. The main audit and inspection bodies have advised that those councils found to have robust self evaluation approaches and

performance management systems are more likely to receive a lighter touch in terms of scrutiny arrangements. With audits and inspections often consuming significant resources that could otherwise be used for the delivery and improvement of front line services, the benefits of reduced external scrutiny are obvious. This emphasises the importance of the service self-assessments that form the core of the Clacks Improvement Model.

- 3.5. Clackmannanshire's SRA is currently underway. The Council has been asked to provide the Local Area Network with a range of information to help inform the assessment. In addition, the Chief Executive met with the Local Area Network on the 2 February 2010 to discuss challenges and our improvement agenda. Early feedback has been positive.
- 3.6. The output of the SRA will be an Assurance and Improvement Plan that will set out the risks identified, and explain how and when these are to be reviewed by the inspection and audit agencies that make up the Local Area Network. This should be available by the end of April 2010, at which point a further update will be provided to Scrutiny Committee.
- 3.7. There are no financial implications arising from the recommendation in this report.

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 - no implications.

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 2008 - 2011** (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". None

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)

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Approved by

NAME	DESIGNATION	SIGNATURE
Elaine McPherson	Head of Strategy and Customer Services	
Angela Leitch	Chief Executive	

Report to Scrutiny Committee

Date of Meeting: 8 April 2010

Subject: Business Plans 2010/11

Report by: Head of Strategy and Customer Services

1.0 Purpose

- 1.1. The purpose of this report is to update Scrutiny Committee on progress made with Business Plans for the year 2010/11.

2.0 Recommendations

- 2.1. Committee is asked to consider progress made with business plans that services have developed for the year commencing 1 April 2010.

3.0 Considerations

- 3.1. The purpose of business plans is for managers to set the overall aims and objectives for their services and to develop a plan to achieve them. Business plans provide an important link between corporate priority outcomes and the practical actions that services need to take to improve services for our customers.
- 3.2. All services have prepared business plans for 2010/11. These have been placed in Group Rooms for Elected Members to consider.
- 3.3. Given the Council restructure, business plans have been developed in a period of transition between the old and the new structure. The plans developed to date will be consolidated around the six new services as they take shape. A further report will be brought to Scrutiny Committee when that process is complete.
- 3.4. In the meantime, the next step for service managers is to translate and communicate business plan objectives to teams, and in turn individual staff through our Performance Review and Development (PRD) approach. A key element of the PRD process involves the development of learning & development plans to support staff in the achievement of their objectives.
- 3.5. There are no direct financial implications arising from this report.

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 - there are no direct staff 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 2008 - 2011** (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".

None

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
Stuart Crickmar	Business Improvement Manager	2127

Approved by

NAME	DESIGNATION	SIGNATURE
Elaine McPherson	Head of Strategy and Customer Services	
Angela Leitch	Chief Executive	

Report to Scrutiny Committee

Date of Meeting: 8th April 2010

Subject: Street Lighting Performance Indicator

Report by: Director of Services to Communities

1.0 Purpose

- 1.1. Following a noticeable variation in the Statutory Performance Indicator (SPI) for "Percentage of Street Lighting Repairs completed within 7 Days", between 2006/07 and 2007/08, the Scrutiny Committee has requested an explanation for the drop in performance.

2.0 Recommendations

- 2.1. The Committee is asked to note the explanation given in section 3.0, below.

3.0 Considerations

- 3.1. The percentage of street lighting repairs carried out within 7 days in 2007/08 was 81.0% compared with 91.4% in 2006/07.
- 3.2. The number of faults reported in 2007/08 was 1970 compared to 1754 reported in 2006/07. This is an increase of 12.3%. This in itself should not lead to a significant reduction in performance. However, during 2007/08 the number of trained staff available to carry out street lighting repairs was reduced for a significant time leading to a period where there was a slight backlog of repairs. The contractor caught up with repairs by the end of the year, but the method of calculating the SPI does not account for catching up.
- 3.3. The level of performance was restored to 91.7% in 2008/09. The Scottish average for 2008/09 was 91.3%. The performance to the end of the second quarter in 2009/10 is 92.5%, indicating that the level of performance appears to have stabilised.

4.0 Sustainability Implications

- 4.1. N/A

5.0 Resource Implications

5.1. *Financial Details*

5.2. N/A

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

5.4. *Staffing*

5.5. As long as staffing levels can be maintained within our in-house Contractor's workforce, then performance levels should be maintained & improved.

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 2008 - 2011** (Please double click on the check box)

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

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

8.0 Equalities Impact

8.1 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 None

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

SPI returns to Audit Scotland

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Charles Norman	Team Leader, Roads and Street Lighting	2590

Approved by

NAME	DESIGNATION	SIGNATURE
Garry Dallas	Director of Services to Communities	

Report to Scrutiny Committee

Date of Meeting: 8 April 2009

Subject: 2010 Rating Revaluation

Report by: Head of Property Services

1.0 Purpose

- 1.1. The five yearly (Quinquennial) revaluation of Scottish Non Domestic Properties comes into effect on 1st April 2010. This report sets out the procedures which will be employed by the Council in scrutinising, lodging and progressing appeals as appropriate.

2.0 Recommendations

- 2.1. It is recommended that the Scrutiny Committee notes the proposals for dealing with appeals following receipt of the Assessor's Valuation notices with effect from 1st April 2010.

3.0 Considerations

- 3.1. The initial assessment of new 2010 sample provisional rateable values for non domestic properties within the Council's portfolio indicates substantial planned increases by Scottish Assessors particularly for educational establishments.
- 3.2. Appendix I sets out extracts with percentage increases for sample properties including the new Academies at Alloa, Lornhill and Alva. These three properties alone exhibit an average increase of 57%. The figures vary greatly with a 36.% increase for Alloa Town Hall but only 9.6% for Greenfield.
- 3.3. The actual amount falling to be paid by the Council is only partially attributable to valuations. The rate in the pound and the Government block grant being key contributors to the process. Finance department have therefore been consulted and information concerning future budget projections is noted below.

Financial Implications

- 3.4. An early estimate of the possible rates liability for Clackmannanshire Council was obtained from the Assessor last year. This was used as an estimate for the rates budget provision of 2010/11 financial year.

- 3.5. The budget was prepared on the basis of the Council having an overall Rateable Value liability of £5,950,440 with 100% empty relief and 50% empty charge being applied to relevant properties and supplement for larger properties set at £29,000.
- 3.6. The latest estimate received from the Assessor indicates a reduction in liability to £5,834,540 with the supplement being set at £35,000. This indicates a small budgetary saving.
- 3.7. The final rating liability will be established shortly however on the basis of the information provided to date Finance are confident that the budget fully provides for the Council's rates liability for the financial year 2010/11.

Considerations (Continued)

- 3.8. Following the receipt of Valuation Notices in April the Council has a period of six months within which to lodge appeals in respect of those Valuation Roll entries with which it is dissatisfied.
- 3.9. These notices will be screened by Property Asset Management to identify those properties which exhibit disproportionately high values and the best prospects of appeals success.
- 3.10. Because of the anticipated volume of appeals and the specialist nature of the valuation process it is proposed to invite tender bids from private sector firms. The selected firm will be appointed to act on behalf of the Council in an agency capacity.
- 3.11. Following this appointment Property Asset Management will coordinate all subsequent activity and liaise with agents until progressed to a satisfactory conclusion.

4.0 Sustainability Implications

- 4.1. It should be noted that the values agreed with the Assessor in 2010 will persist until 2015.

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. Tendering and coordination of the agency appointment and subsequent monitoring will involve three members of property asset management team two on an intermittent basis.

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 2008 - 2011** (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 I - Sample Extracts from Provisional List of Net Annual Values *
2010

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
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Approved by

NAME	DESIGNATION	SIGNATURE
Gordon Stewart	Head of Property Services	
Garry Dallas	Director of Services to Communities	

Appendix I

Sample Extracts from Provisional List of Net Annual Values * 2010

Property	2005 NAV	2010 NAV	%age
Alloa Academy	£375,000	£600,000	60% Increase
Alva Academy	£414,000	£660,000	59.4% Increase
Lornshill Academy	£415,000	£615,000	48% Increase
Alloa Town Hall	£39,500	£54,000	36.7% Increase
Coalsnaughton Primary	£15,150	£27,000	78.22% Increase
St Johns Primary	£41,000	£63,000	53.66% Increase
Menstrie House	£46,500	£64,500	38.71 % Increase
Institution Place	£29,000	£38,250	31.90% Increase
Leisure Bowl	£207,000	£272,500	31.64% Increase
Abercromby place	£46,500	£61,000	31.18% Increase
Drysdale Street	£32,500	£38,500	18.46% Increase
Lime Tree House	£197,000	£217,000	10% Increase
Greenfield	£125,000	£137,000	9.6% Increase
Forthbank	£25,000	£25,250	1% Increase
Kelliebank	109,000	100,000	8.2% Decrease

*Note. Net Annual Value Equates to Rateable Value.

Report to Scrutiny Committee

Date of Meeting: 8th April 2010

Subject: Annual Update of Corporate Parenting Action Plan

Report by: Head Of Social Policy

1.0 Purpose

- 1.1. This report updates the Council on the progress of the Corporate Parenting Strategy which was approved by Council in June 2009. As well as presenting the strategy, a commitment was given to provide an update of progress to the Council on an annual basis

2.0 Recommendations

- 2.1. It is recommended that the Council note the progress made to date by services and partners, whilst ensuring that identified gaps become the focus of action in the next year.

3.0 Considerations

- 3.1. Successful Corporate Parenting depends upon having clear strategic leadership with elected members, and senior officers to the Council having a key role to play in ensuring that the outcomes and life chances of Looked After children and young people are maximised.
- 3.2. Being a good corporate parent means:
- Accepting responsibility for all children in the Council's care;
 - Keep meeting the needs of Look After Children and Young People as a high priority
 - Seek the same outcomes, any good parent would want for their own child.
- 3.3. There are four national expectations of local authorities and their partners in fulfilling their corporate parenting role, these are as follows. That the local authority will:
- Have an overarching plan for the Looked After children and young people, covering all of the services and support they can expect to receive,

- Ensure that the views of children in council care are taken account of,
 - Provide training and support, for those who have to act as the collective Corporate Parent;
 - Identify and share best practice in Corporate Parenting throughout the council area.
- 3.4. Clackmannanshire has a Corporate Parenting Strategy approved by Council and partners. A Champion, Councillor Sam Ovens, has been appointed and is active in the multi-agency Steering Group that drives forward this agenda.
 - 3.5. Recent inspections by external agencies such as the Social Work Inspection Agency, and Care Commission, has commented on the improvement in the service to Looked After and Accommodated young people in terms of assessment, planning and implementation of plans.
 - 3.6. Young people are involved in a consultation and development initiative called 'Meet The Bosses' where local authority agencies have made commitments to work towards identified areas of improvement such as employment, education, and housing.
 - 3.7. Further activity is however required around universal services provided by Community Learning and Development, and Sports Development. Discussions are ongoing in the hope of setting up referral processes and activities that target and include Looked After and Accommodated Young People. We know that a significant number of Looked After Young People are most likely to miss out on opportunities related to leisure, recreation and sport.
 - 3.8. In terms of Through and After Care the re-structuring of the Child Care Service in Social Work has included the creation of a specialist post which will dedicate its resources to the completion of pathway plans for care leavers and supporting them as they make the transition to adulthood.
 - 3.9. In terms of the responsibility for the local authority to take account of the views of our corporate children a great deal of work is ongoing in conjunction with colleagues in Educational Psychology in piloting on line information gathering. Results from this work will be available later in the year.
 - 3.10. Great efforts are also being made to increase the number of foster carers in Clackmannanshire and reduce reliance on external agency carers. There is now a dedicated post exclusively deployed to recruit new carers. By June we hope to have registered three new sets of carers increasing our potential placements by up to 6 children. Young People will therefore be given a greater potential to remain in their locality if received into care.
 - 3.11. A great deal of work is also being done by Housing Services to develop protocols for care leavers. In the last week a joint protocol has been agreed which will effectively remove young people from having to use Homelessness processes and procedures to obtain accommodation. In addition it agrees the principle that no care leaver will be left roofless while the local authority retains statutory duties in relation to the welfare of care leavers.

- 3.12. The attached report Appendix 1 details in full progress against the agreed action plan.
- 3.13. Summary - Good progress has been made towards improving the outcomes for young people in public care, although further work is required to ensure a consistent approach across all Council services.

4.0 Sustainability Implications

- 4.1. The successful implementation of the Corporate Parent Strategy will make a valuable contribution to the sustainability of the communities of Clackmannanshire as young people are our most valuable resource for the future.
- 4.2. Providing better outcomes for the Looked After population will allow them the potential to contribute more to the material, ecological and moral fabric of our communities through offering a real stake in the future development of their community.

5.0 Resource Implications

5.1. Financial Details

- 5.2. There are no additional financial requirements in relation to the implementation of the Corporate Parenting Strategy. It requires all local authority services and key partners to work collaboratively and to prioritise the needs of the Looked After population to improve their outcomes in the areas of their lives where improvement is most needed.
- 5.3. 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 ✓

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

5.5. Staffing

- 5.6. There are no additional staffing requirements.

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 2008 - 2011** (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 1 - Corporate Parenting Strategy - Progress Report Mar 2010

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)

Sustainability Check List
 Corporate Parenting Strategy 2009-2012*(copies available in group rooms and on members' portal)*

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Jim Burke	Senior Manager Child Care Social Services	01259 225140

Approved by

NAME	DESIGNATION	SIGNATURE
Deirdre Cilliers	Head of Social Policy	
Grahame Blair	Director, Services to People	

CORPORATE PARENTING STRATEGY - PROGRESS REPORT MAR 2010

1. Priority: The inclusion of a commitment to Corporate Parenting.				
Target	Timescale	Contact	Progress	
Establish the role of the Corporate Parent and ensure that all staff and elected members are working in the best interests of Looked After young people and care leavers.	March 2009		Strategy approved - launch and stakeholder event to be discussed.	
Appoint a Children's Champion	Nov 2008		Champion appointed.	
Establish a Corporate Parenting working group for Looked After children.	January 2009	Jim Burke	Steering group established.	
Evaluation of the action plan will be reported annually to Scrutiny Committee	March 2010	Jim Burke	February update will form the basis of annual report.	
All children are reviewed within appropriate timescales with young people encouraged to participate as fully as possible in their reviews.	Ongoing	Dominic Gillen/ Graham Devlin	See additional information for statistical analysis.	
2. Priority: The significant change in assessment and planning systems as part of the implementation of "Getting It Right For Every Child", and we need to ensure that the views of children and families are better taken account of in the new processes.				
HMIE/Care Commission. SWIA report that the care and welfare of young people are appropriate, stable and of good quality.	October 2010	Jim Burke	SWIA follow up inspection ¹ has seen improvement. Good report on Residential Unit by Care Commission, also Fostering & Adoption inspections of Care Commission. http://clacksweb/council/ssperformance/	

¹ See rear of document for details

	Ongoing consultation to identify barriers and gaps in services.	Ongoing	Kaye Smith	Work is ongoing through a consultation process called 'Meet The Bosses' (Jul09, Nov09, June10) and issues raised have formed an agenda of action. Work is ongoing around, Housing, Employment, Education, Social Workers. See additional information for feedback on recent Meet The Bosses.
	Increase the involvement of young people from vulnerable and disadvantaged groups in the full range of sporting and other activities available to young people as a whole. ²	2010	Maïjorie MacFarlane/ Ron Carthy	Although Community Learning & Development are working to contact and engage hard to reach young people in activities. ³ There is little evidence that Looked After young people have been targeted or are involved in this work. Sports Development have proposed a meeting with partners to look at this issue, and consider how Looked After young people can benefit from tailored sporting activities or are supported to access mainstream programmes.
2. Priority: The significant change in assessment and planning systems as part of the implementation of "Getting It Right For Every Child", and we need to ensure that the views of children and families are better taken account of in the new processes.				
	Target	Timescale	Contact	Progress
	Commitment to the establishment from existing resources of a dedicated Throughcare Aftercare Social Worker.	October 2009	Jim Burke	Child Care service has appointed a dedicated full time Social Worker to the TCAC team. Pathway plans were sitting at 42% (which is the same as the national average) it is intended that following the appointment, this will reach 100% by the end of June 2010.

² Improving the Education of Looked After Children: A Guide for Local Authorities and Service Providers <http://clacksweb/document/meeting/196/289/2791.pdf>

³ See comments at rear of document.

	<p>A consultation exercise will be undertaken by Council Psychological Services with Looked After and accommodated young people.</p>	2010	Alison Russell	<p>As part of the Councils corporate parenting action plan the Service has been tasked with gathering the views of LAC young people. An on line survey has been developed for use with 10-16 year olds. This has been piloted with 2 young people and adaptations made to the survey following feedback. Computer assisted interviews will be used with younger children and those with ASN.</p> <p>Data gathering is planned to take place from April onwards and results of the survey available by August 2010.</p>
	<p>Establish protocols between all parties to ensure Looked After children and care leavers are visible and provided support at the appropriate time, particularly at points of transition e.g. leaving school/care, moving from primary to secondary etc.</p>	October 2010	Kaye Smith/ Yvonne Wright	<p>Work ongoing around raising awareness with LAAC young people to identify LAAC teachers and establish links and contacts.</p> <p>The Psychological Service, together with designated officers in schools, is working to establish procedures in schools for identification, reviewing and monitoring the needs of LAC pupils. (Following the revision of the ASL act, Local Authorities are required to make arrangements to ensure that the Additional Support Needs of LAC children are identified and action taken to meet the needs identified.)</p> <p>The Psychological Service is also developing, together with Child Care services and the Reporter to the Children's Panel, new procedures to try to ensure that all children and young people who are currently LAC/LAAC are made known to the service in order that psychologists can be involved, where agreed and appropriate, in relevant decision making.</p> <p>A LAAC Education Group has recently been established and will include representatives from Secondary School Support, Transition, Educational Psychology, Child Care and service users.</p>
	<p>75% of all children over the age of 8 should be encouraged to complete a 'Having Your Say' form for Childcare reviews that expresses the young persons feeling and views about their support from the local authority and partners.</p>	March 2010	Child Care Reviewing Officers	<p>Discussion ongoing with reviewing officers to collate this information and imbed it into formal performance monitoring process within Child Care.</p>
	Target	Timescale	Contact	Progress

	The views of Looked After young people and care leavers are heard and listened to, and when decisions are made their views are taken into account.	August 2009	Child Care Reviewing Officers	Discussion ongoing with reviewing officers to collate this information and imbed it into formal performance monitoring process within Child Care.
3. Priority: A major focus on reducing the number of children placed out-with the authority				
	100% of children who leave care and are eligible for aftercare support will have a pathway plan.	October 2009	Kaye Smith	See 2.4 for further details.
	Children have a maximum of 2 moves within a year of becoming accommodated.	Ongoing	Joan Lyle	Balanced Scorecard monitoring this target - below target.
	5% Reduction in foster placements out with Clackmannanshire	March 2010	Ilene Easdon Hynds	Child Care service has recruited a worker for the fostering and adoption team whose aim is to recruit new carers and reduce the number of children in private agency placements.
4. Priority: A commitment to providing full time educational provision for all Looked After children				
	Continue to take action to improve young people's attainments. Including monitoring and tracking of attendance, behaviour and progress being made by all pupils. Paying particular attention to boys and young people who are vulnerable and at risk of failure so that appropriate interventions can be planned and implemented to reduce such risk.	2010	Yvonne Wright	See 2.7
	schools have in place strategies to ensure that Looked After young people are not disproportionately represented in poor attendance, exclusions, bullying and underachievement.	2010	Yvonne Wright	See 2.7
	Continue to work to reduce the numbers of young people between the ages of 16 and 19 and school leavers who are not in education, employment or training. . ⁴	2010	Craig Bendoris	The steady progress already reported within this agenda during the last few years in terms of more young people moving into positive post-school destinations will be difficult to sustain this year given the present national

⁴ Improving the Education of Looked After Children: A Guide for Local Authorities and Service Providers <http://clacksweb/document/meeting/196/289/2791.pdf>

					economic downturn and the much reduced availability of employment opportunities for school leavers and young people generally.
	Target	Timescale	Contact	Progress	
	Continue to operate to the guidance in the Core Tasks for Designated Managers document published in 2008. (New responsibilities launched at seminar in Clacks in Feb 09).	Ongoing	Yvonne Wright	See 2.7	
	5. Priority: Greater and improved housing support for care leavers, including dedicated provision.				
	Explore closer working arrangements between Housing and Child Care and implement recommendations.	November 2009	Kenny Hutton	Work ongoing between Housing and Child Care to improve access to Housing. Draft protocol agreed and under discussion. Procedures drafted to be discussed. See 5.6 and 5.7 below.	
	Review Action For children Path management arrangements to ensure child care representation.	August 2009.	Kenny Hutton	Working group agreed and project brief also agreed. Full project plan and implementation plan under discussion.	
	Dedicated accommodation for two care leavers being provided from September 2009	September 2009	Kenny Hutton	Project in place and being monitored.	
	Review and report on projected accommodation needs of care leavers.	November 2009	Kenny Hutton	Report was submitted to Housing SMT by Operations Manager (lettings) Aug 09. Housing then redrafted a procedure for managing letting of accommodation for Child Protection cases. Report also submitted and approved Feb 10 by Housing SMT.	
	Set up specialist accommodation project to meet identified needs.	2011	Kenny Hutton	Small group established to look at service specification.	
	Child care needs will be incorporated into local Housing strategy.	July 2010.	Kenny Hutton	Housing Needs and Demand Assessment draft circulated and consultation/issues stage due to start Spring 10.	
	Homeless policy amended and awaiting ratification by Council. Allocations policy review to begin in Nov 2009.	April 2010.	Kenny Hutton	Policy implemented/ homologated.	

	Young people leaving care are able to access suitable accommodation without recourse to homelessness services. Put in place agreed effective joint working arrangements with clear procedures and effective resolution mechanisms.	November 2009.	Kenny Hutton	Protocol and procedures being developed between Housing and Child Care around young people leaving care. Child Care cases in allocations will be dealt with as special cases Band 1 with named officer in Housing responsible. (Francine Abercrombie)
	Staff working in housing services understand their additional responsibilities to looked after young people and care leavers. Frontline staff already undergone training organised by child care on child protection. To be rolled out to all staff.	December 2009	Kenny Hutton	Management level meeting required possibly joint Housing/Childcare one off meeting to agree principles. Initial Service Manager meeting required.
6. Priority: Enhanced support into employment and training, including opportunities within the Council				
	Ensure that Looked After young people and care leavers are recognised as a priority within employment programmes and initiatives such as Clacks Works.	Ongoing.	Jane Adamson/ Wilson Lees	Employment opportunities within the Council are being explored specifically for Care Leavers, as well as other paid employment around the utilisation of skills to provide support to other LAAC such as befriending and advocacy. Work ongoing with 'Who Cares' to develop these initiatives.
	Care leaver careers destinations will be reported annually and appropriate year on year targets set.	March 2009	Craig Bendoris	No information provided
7. Priority: A dedicated health screening and planning process for all Looked After young people.				
	Target	Timescale	Contact	Progress
	All Looked After and accommodated young people will have their health needs identified and an individual health plan agreed including registration with General Practitioner. This will be undertaken by the Well Chosen service within Health. ⁵	Ongoing April 2010	Kathy Pickles	Core Objective 2 of the Well Chosen Service states "Ongoing monitoring of database with aim to improving statistical information gathered relating to provision of health assessments, medical issues identified and implemented..... to ascertain levels of health needs, and service provision to meet need"

⁵ This relates to the implementation of Action 15 of the Looked After Children And Young People: We Can And Must Do Better report. Other recommendations include the nomination of a NHS Board Director with corporate responsibility for looked after children and young people and care leavers by June 2009. Identification of all Looked After children and young people

				Bi-annual update reports produced - see rear of document for September details.
	Engage with all young people as they move out of the Looked After system and into independence to make sure they are engaged with the specialist Through care health services to meet their changing needs.	July 2009	Gail Robertson	The LAAC & Young Persons Health team are due to have their objectives reviewed in March 2010 by the Strategic Planning Group. An aim of which is hoped to be the continued aim of securing sustained funding for the Forth Valley Throughcare Aftercare Public Health Nurse post. Current funding stream is due to end 31 st July 2010. Clackmannanshire part funding of post is 0.2 WTE
	Engage with all young people as they move out of the Looked After system and into independence to make sure they are engaged with the specialist Through care health services to meet their changing needs.	July 2009	Gail Robertson	The LAAC & Young Persons Health Team continues to improve access to mainstream health for current and prospective care leavers. Promotion of integrated and partnership working with young people and partners is central to providing effective intervention or support for health needs. All contact with clients is voluntary. Clients eligible for Local Authority Throughcare Aftercare support are able to be referred . Referrals are taken predominantly for specific need, which can include crisis intervention, however engagement with a holistic health assessment is always aimed for, this may take more than one contact. On all occasions once relationship established, and initial reason for referral addressed, clients are encouraged to look at their health needs holistically Access has been established to a variety of NHS and voluntary services to support health needs, including fast track access:- NHS Forth Valley Sexual Health Services, Core Child & Adolescent Mental Health Services, Dental care for both emergency and non-emergency assessment, Adult Mental Health Services, Substance misuse services.

Additional Information

1.4 Childcare Social Work Statistical Analysis Contact - Graham Devlin

and care leavers in their NHS area by 31/07/09 including those looked after at home and those placed from outwith HB areas. A mental health assessment to ever Looked After child and young person by 2015. Performance of general and mental health assessments to be reported annually to Scottish Government.

- Of the 228 LAAC cases, 83% were reviewed within statutory timescale for 09/10.
- 71% of the children looked after and accommodated aged 8 and over, attended their last review.
- Views of all of the above children were obtained in other ways;
 - Submission of their "Having Your Say" LAAC report.
 - Personal discussion with the Reviewing Officer prior to or after the review date.
 - Representative of their choice.

2.2 Childcare - Consultation

"MEET THE BOSSES" 24TH JULY 2009 GEAN HOUSE

In Attendance: Dale Cunningham (Woodside), Gemma Mullen (Woodside), Natalie Barker (Woodside), Roxanne McGovern (Throughcare & Aftercare), William Neill (Throughcare & Aftercare), Ashley Barker (Foster Care), Jimmy Macrae (Throughcare & Aftercare), Jordan Miller (Foster Care), Angela Leitch, Grahame Blair, Deirdrie Cilliers, Sam Ovens, Jim Burke, Kaye Smith and Finlay Robertson.

Issues Raised by Young People

Housing

- All of the young people expressed anxiety about where they would live when they are old enough to live independently
 - All of the young people talked about needing more supported independent living flats and that these should be designated for Care Leavers.
 - Not being placed in homeless accommodation was important and two young people expressed fears about this accommodation "being full of folk taking drugs"
 - One young person felt it important that residential staff or foster carers could stay over at their flat initially.
 - All felt they needed help with cooking, cleaning and budgeting
 - All felt they should be offered housing in "good" or "nice" areas and expressed anxiety that this would not be the case.
 - Two young people would like to remain in their current placement until they were 18 years of age but on a shared care basis with their birth families.
- Employment
- All felt the Council should offer work experience or apprenticeships that could lead to permanent jobs.

- One young person felt that "care leavers" should be given paid jobs to support young people "coming into care"
- All felt the Council should do more to help young people get jobs and to create more supported work placements within the Council itself

Education

- Only two people knew who the designated LAC Senior Teacher was in their school
- Four of the young people said no teacher had attended their recent Child Care Reviews
- All felt they were well informed about issues in relation to health, sex, drugs and alcohol by the school
- Three young people felt "encouraged to do well" by teachers
- One young person stated that teachers "can't wait to get rid of you"
- None of the young people felt teachers had high expectations for their future careers
- No young person felt bullied or discriminated against at school

Health

- All young people knew who the LAC Nurse was (Kathy Pickles)
- Four young people felt foster carers and residential workers looked after them well when they were ill
- Four stated they liked G.P.s to ask how they were "getting on in care". They felt this showed the G.P.s cared about them. The other young people were indifferent.

Social Work

- All the young people felt social workers do not listen to their views
- All felt they had too many changes of social workers
- All felt social workers either did not respond to their telephone calls or took too long to do so
- All felt they had too many placement moves
- Two young people felt false allegations were made about their biological family that they had not been told the truth about why they were taken away from their families.

At the end of the event the young people were asked "What is The Most Important Thing You Would Like To See Happen"? There were 3 responses:

- "More social workers listening more"
- "A six month course with the Council then a job
- "Social workers getting us to explain about care to new young people and get paid like a job for doing this"

It was agreed at the end of the event that "The Bosses" would report back on progress on these issues later in the year, possibly during the October school holiday week.

Kaye Smith, Team Manager, Woodside/Throughcare & Aftercare Service

2.3 SPORTS DEVELOPMENT

1. with funding from the Clackmannanshire Community Safety Partnership I designed a summer activities programme called ZEST, this provided a 35 day programme of physical activity throughout the school summer holidays for 3 to 18 year olds. ZEST provided 100s of hours of activity of which much was FREE. An interim report has gone to CSP as their funding specifically targeted 10 to 18 year olds.
2. the community wardens and the police helped to promote the activities to groups and young people they met in the street. ZEST was promoted in local press, websites, booklet and leaflet format, at school assemblies and secondary schools. I took the ZEST booklet to a meeting with Jim Burke and Mary Lewis who informed her net work of social workers about it .

Notable results are;

- Over 10,000 attended the free swimming,
- over 1,000 attended the late night leagues
- 31 young leaders delivered 560 hours of volunteering
- new activities such as Parkour were offered
- the poorest uptake was for the free girls only sessions
- the Friday night badminton leagues have continued and numbers are increasing
- overall many 1,000s of hours of participation took place, final report being collated

3. an activity club has been set up for obese girls

4. a TOPs activity resource is available from the Youth Sport Trust with a new approach to accessing and engaging young people who do not participate in physical activity, sports development has 2 trained tutors ready to set up 12 groups. This resource will be presented at the headteachers meeting of 24th November 2009. One of the target groups for this resource is looked after children.
5. the Active ASN has been rejuvenated;a physical activity programme is delivered for the Extended ASN in Alloa Academy and in Lochies school, a **detailed 09/10 plan is attached for local, regional and national events**, the Council hosted a civic reception for the Special Olympics team of 61 athletes of which a third were from Clackmannanshire. The event held at Leicester took place in August 2009 and the team returned with an impressive haul of medals; 32 gold, 23 silver, 19 bronze.

the primary PE teachers are trained in inclusion and ensure pupils with additional support needs are an integral part of the PE lesson which is delivered in every primary school. Pupils with additional support needs are included in the mainstream events programme for primary schools.

Clackmannanshire Council is a funding partner in the regional sports partnership, sportcentral - this has ensured the formation of pathways for specific sports for young people with ASN. Four new ASN members have joined Alloa Swimming Club.
6. the Cashback projects are delivered in conjunction with the Police, CLD and the Community Wardens, football and rugby have been taken to hotspots around Clackmannanshire at the request of the community wardens, an externally funded rugby coach is targeting S1 and S2 pupils to get more boys into the two local clubs, this has increased the number of players at this age group, within the 10 to 18 year age group there are over 150 boys and girls playing regular rugby and know of several on the autistic spectrum and in the looked after category.
7. the Active Schools co-ordinator along with the primary PE / headteacher of the primary schools specifically target certain pupils to get them involved in an after school activity by funding or encouraging attendance. All special, primary and secondary schools in Clackmannanshire have breakfast, lunch and after school clubs for physical activity and sport.
8. the funding of the PHIZ project based in Park Primary School is slowly winding down it has specific targeted aims to ensure pupils in the looked after and ASN categories are involved in the school's programme of activities and events. This school has won the School Sports Challenge Award several years in a row. There is an excellent uptake of Park PS pupils in all the CPSSA activities.

Community Learning & Development

Detached youth work specifically targets vulnerable young people 'Detached youth work happens on young peoples own territory, anywhere they meet up: which could be the streets, bus shelters, parks etc, it therefore is entirely voluntary on the part of the young people who can decide to engage or not with the youth workers'. Detached Youth Work is a method and process of establishing contact, building relationships and engaging with young people, who for whatever reasons, are not utilising existing services and opportunities which are available to them. This approach may necessitate prioritising contact with the more marginalised and vulnerable young people within the community, with the view to either: supporting them to access and utilise existing services and opportunities, or support them to establish new services and provisions which are appropriate to their needs and aspirations or **undertake project work which addresses a specific need or issue**. Detached youth work is therefore often a community development and empowerment process which encourages young people to play a positive and constructive role within their own community.

This is currently happening within CLD and evidence can be given for instance the 'Bucky Busters' a group of young people who have issues around alcohol have been working towards a silver youth achievement award. another group the 'Peak' group, young men with substance misuse and other issues are preparing to go to Bulgaria to help disadvantaged communities. There is also a lot of signposting vulnerable young people to areas within sports development some may have taken this up but there are no ways of recording this

SWIA Performance Inspection - Recommendation 14

http://www.swia.gov.uk/swia/files/Clackmannanshire_Performance_Inspection_Follow%20up_Report_December_2009.pdf

Clackmannanshire Council should put in place a corporate parenting strategy, which sets out corporate responsibilities throughout the council towards looked after children. This strategy should lead to improving outcomes for looked after children and in increasing the number and quality of foster care placements.

The child care service had made a commitment to increase resources within the fostering and adoption service and had recently increased the staffing numbers of the team. They recruited a full time member of staff whose remit was to focus primarily on the recruitment of new foster carers. Staff sickness had had some impact on their initial progress whilst the team manager and senior had worked hard to try to take things forward.

Social Services had set up a foster care consultative group in recognition of the need to better support and consult with foster carers.

Front line staff confirmed that it was too early to be able to evidence whether the implementation of the strategy was improving outcomes for looked after children. However we were told that there had been a capping in the numbers of young people requiring residential placements.

We found that Social Services had made substantial progress in implementing this recommendation.

LAAC & YP Health Team - Update Figures Clackmannanshire

Referrals for newly accommodated children 1st April 2009 – 30th September 2009

Age of child	Under 5 years	5-11	12-15
Number	15	7	4

All newly accommodated children should be notified to LAAC & YP Health Team within two days of being removed from home.

Notification period	Number	%
0-2 days	4	16%
3-5 days	7	26%
6-10 days	2	8%
11 + days	13	50%

LAAC & YP Team aim to offer each young person Health Assessment within one month of referral to inform care plan.

H/A offered	Number of days
6-10 days	1
11-15 days	6
16-21 days	6
Over 21 days	12
* No H/A offered	1

*** On one occasion, the young person was placed in secure Unit Outwith Forth Valley and received H/A at placement.**

Report to Scrutiny Committee

Date of Meeting: 8th April 2010

Subject: Care Commission Inspection Reports of Foster Care Services, Adoption Services and Residential Services in Clackmannanshire Council, Social Services

Report by: Head of Social Policy

1.0 Purpose

- 1.1. The purpose of this report is to update the Scrutiny Committee on the outcome of recent Care Commission inspections of Clackmannanshire's Fostering and Adoption Service which took place in September 2009 and was published in November 2009.
- 1.2. In addition the Care Commission recently undertook an unannounced inspection of Woodside Residential unit for young people which was completed on the first of February 2010. Their report has recently been sent to Clackmannanshire Council but as yet has not been published on the Care Commission web site. The results of this Inspection are also available for the Scrutiny Committee.
- 1.3. Copies of the written inspection reports are attached as appendices to this report.

2.0 Recommendations

- 2.1. The unannounced inspection of the Woodside Residential Unit for young people took place on the 1st of February 2010. This unit has established a remarkable sequence of inspection outcomes with all aspects of the inspection evaluated at Excellent on their last announced inspection in December 2008.
- 2.2. The results of the unannounced inspection have again been evaluated at Excellent for both Quality of Care and Support and Quality of Staffing. These being the two areas covered by the unannounced inspection.
- 2.3. Care Commission Inspections can and usually do provide the service inspected with a number of Requirements and Recommendations. The Requirements are action points which require to be addressed and resolved before the next inspection. Recommendations are exactly that, practice Recommendations which may help in the improvement of an inspected service but which are not mandatory action points.

- 2.4. There were no Requirements or Recommendations for Woodside Residential Unit. The narrative summary of the Report indicates that Woodside has many strengths. It highlights its ability to sustain long term placements for young people with diverse needs, where a return to family is not possible.
- 2.5. There is also comment on the detailed attention given to daily communication, with the voice of the young people given priority. The inspection report also indicated that it looked forward to the introduction of a new supervision and appraisal policy in the unit and the extension of the operation of the unit to include, within its registration, services for care leavers in partnership with the Housing Service.
- 2.6. The inspection report also mentioned the ongoing support to the study buddies scheme which has improved the educational outcomes for the young people in the unit.
- 2.7. With regard to the Foster Care Service's inspection, the Care Commission evaluated the following three areas, a) Quality of Care and Support (Good), b) Quality of Staffing (Good) and c) Quality of Management and Leadership (Adequate).
- 2.8. The Care Commission observed that the line managers supported the staff team very well in their roles. It also observed that the service needed to continue to support individual staff as necessary to develop a team approach. Overall it concluded that managers within Clackmannanshire council had worked hard to develop a structure to support and guide staff in developing the service.
- 2.9. It is important to recognise that these evaluations are a significant improvement on the previous inspection report of November 2008 which had evaluated the same three areas as weak.
- 2.10. With regard to the Adoption Service's inspection, the Care Commission evaluated the following three areas, a) Quality of Care and Support (Good), b) Quality of Staffing (Good) and c) Quality of Management and Leadership (Adequate).
- 2.11. The Care Commission observed that the managers had a good overview of the service delivery. Again they encouraged the further development of a team approach and complimented the managers for working hard to develop structures to support staff and producing relevant policies and procedures to guide them.
- 2.12. Again it is important to remember that these evaluations are an improvement on the previous inspection report of November 2008 which had evaluated the same three areas as weak, adequate and weak.

3.0 Considerations

- 3.1. The Woodside Residential Unit is an area of excellent practice which continues to support vulnerable young people and constantly seeks to improve its service. It is now broadening its base to support other young people who have left the unit and are in council supported accommodation. It is hoped that these developments will continue apace in the coming year.

3.2. The Fostering and Adoption Service have gone through serious challenges in terms of the recruitment and retention of both staff and foster carers during 2006 to 2008. However due to the hard work of all staff over the last 18 months and the targeted investment of new resources by the Head of Social Work the service has improved significantly. The action plan for the improvement of the service agreed with the Care Commission after the last inspection has been much reduced in scope reflecting the progress made by the service. There remains one requirement for the Fostering Service which requires the service to produce a written agreement between the service and the carers. This is being implemented in due course. There are no outstanding requirements for the Adoption Service.

4.0 Sustainability Implications

4.1. None.

5.0 Resource Implications

5.1. *Financial Details*- No financial implications.

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*

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 2008 - 2011** (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".

1. Care Commission Inspection Report Foster Care Services
2. Care Commission Inspection Report Adoption Services
3. Care Commission Inspection Report Residential Services

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)

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Approved by

NAME	DESIGNATION	SIGNATURE
Deirdre Cilliers	Head of Social Policy	
Grahame Blair	Director, Services to People	

Inspection report

Clackmannanshire Fostering Service Fostering Service

Child Care Services
Lime Tree House
Castle Street
Alloa
FK10 1EX
01259 225000

Inspected by: (Care Commission officer)	Mary Soutar
Type of inspection:	Announced
Inspection completed on:	28 September 2009

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Service provided by:
Clackmannanshire Council

Service provider number:
SP2003002713

Care service number:
CS2004084406

Contact details for the Care Commission officer who inspected this service:

Mary Soutar
Telephone 01786 406363
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Easy read summary of this inspection report

We grade all the Quality Statements for a service at each inspection. Each grade describes how well we think the service is doing based on what we inspected.

We can choose from six grades:



We gave the service these grades

Quality of Care and Support  **4** Good

Quality of Staffing  **4** Good

Quality of Management and Leadership  **3** Adequate

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

What the service does well

The line managers supported the staff team very well in their roles. They had a good overview of the service delivery.

What the service could do better

The service needs to continue to support individual staff as necessary whilst being mindful of the need to develop a team approach through meetings and development days.

What the service has done since the last inspection

The service had developed draft policies to guide the practice of staff. They had improved communication and increased opportunities for consultation with people who use the service

Conclusion

Managers within Clackmannanshire Council Fostering service have worked hard to develop a structure to support and guide staff in developing the service. Policies and procedures have been developed and a range of training and information materials have been purchased to support both staff and Foster Carers .

Who did this inspection

Lead Care Commission Officer

Mary Soutar

Other Care Commission Officers

Lynne Nimmo

Lay Assessor

N/A

Please read all of this report so that you can understand the full findings of this inspection.

About the Care Commission

We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: www.carecommission.com. Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

About the National Care Standards

The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: www.scotland.gov.uk

You can get printed copies free from:

Blackwells Bookshop
53-62 South Bridge Edinburgh
EH1 1YS
Telephone: 0131 662 8283
Email: Edinburgh@blackwells.co.uk

What is inspection?

Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

Recommendations, requirements and complaints

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a requirement or recommendation.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

How we decided what to inspect

Why we have different levels of inspection

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

How we decide the level of inspection

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

What is grading?

We grade each service under Quality Themes which for most services are:

- **Quality of Care and support:** how the service meets the needs of each individual in its care
- **Quality of environment:** the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of staffing:** the quality of the care staff, including their qualifications and training
- **Quality of management and leadership:** how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:



We do not give one overall grade.

How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

About the service we inspected

Clackmannanshire Council Fostering Service provides a fostering and family placement service for children and young people aged from birth to eighteen years and their families, who are assessed to be in need of this service. As well as short break and respite care arrangements, there are also permanent care arrangements made for children who are unable to return to their birth families and therefore need an alternative family to care for them until they reach adulthood.

The Agency recruits and supports carer families to provide a fostering service to a range of children throughout the area.

The service is based within Lime Tree House, Castle Street, Alloa, FK10 1EX. The service has in the past operated a 'three council approach' to recruitment, assessment and matching for fostering and adoption services, alongside Stirling and Falkirk Councils.

The service was registered on 23 November 2005 under Part 2 of the Regulation of Care (Scotland) Act 2001.

The stated aims and objectives included the following:

"... to ensure that all children and young people, who require one, have access to a foster care placement that is appropriate to their needs and takes into account their religious persuasion, racial origin, cultural and linguistic background ...".

At the time of inspection the service supported 18 foster care families registered to provide long term, short term care and/or respite care.

There were three children in long term (permanent) placements, 41 children in long term (temporary) placements and 4 children were receiving respite care. There were no children in short break placements. 20 children were in foster placements outwith Clackmannanshire Council.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support	4 - Good
Quality of Staffing	4 - Good
Quality of Management and Leadership	3 - Adequate

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

You can use the "Care services" area of our website (www.carecommission.com) to find the most up-to-date grades for this service.

How we inspected this service

What level of inspection did we make this service

In this service we carried out a high intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

What activities did we undertake during the inspection

This report was written following an announced inspection that took place between 9 and 18 September 2009. Feedback was given to the service on Monday 28 September. The inspection was carried out by Lynne Nimmo and Mary Soutar, Care Commission Officers.

During this inspection we gathered evidence from a variety of sources, including the relevant sections of policies, procedures, records and other documents including:

- Personal plans of people who use the service.
- Foster Carers Consultative Committee minutes.
- Foster Carer Reviews.
- Staff and Foster Carer Training Programme.
- Team meeting minutes.
- Evidence from the service's most recent Self Assessment.

Discussions with various people including:

- The management team.
- Supervising Social Workers.
- Individual Foster Carers
- Childrens Rights Officer
- Foster Carer Support Group
- Foster Carer Consultative Committee

Inspection Focus Areas (IFAs)

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2009/10 we will focus on:

- Meaningful activity for all adult services
- How care services assess the health of people with learning disabilities
- Involving parents for children's services

- Medication for looked after children for residential accommodation for children
- How care services make sure they have safe recruitment procedures for staff for all services except childminders.

You can find out more about these from our website www.carecommission.com.

Fire safety issues

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: www.infoscotland.com/firelaw

Has the service had to take any actions as a result of or since our last inspection?

Children/young people should be provided with appropriate information on how to make a complaint. This should include the role of the Care Commission in respect of complaint.

This is in order to comply with: SSI 2002/114 as amended Regulation 25(5) (6) Complaints procedures.

In making this requirement the following National Care Standard was taken into account - National Care Standards: Foster Care and Family Placement, Standard 1 - Informing and Deciding.

Timescale for implementation: 12 weeks from the publication of this report.

Action taken on the Requirement

The service have developed an information pack for children and young people which includes information on how to make a complaint.

The requirement is:

Met

Any changes in registered numbers must be referred back to the panel, or in an emergency situation to the Agency Decision Maker.

This is in order to comply with: The Fostering of Children (Scotland) Regulations 1996 regulation 7 (2)

Timescale for implementation: Ongoing.

Action taken on the Requirement

Appropriate systems have been developed.

The requirement is:

Met

Unannounced visits to carers must be undertaken on an annual basis and recorded. This is in order to comply with the Fostering of Children (Scotland) Regulations 1996 regulation 8.

Timescale for implementation: Within 12 weeks of receipt of this report and on an ongoing basis.

Action taken on the Requirement

Unannounced visits were being carried out regularly and recorded.

The requirement is:

Met

Copies of all placement agreements must be retained in case records.

This is in order to comply with: The Fostering of Children (Scotland) Regulations 1996 regulation 18 (4)

Timescale for implementation: Within 1 month of receipt of this report and on an ongoing basis.

Action taken on the Requirement

Placement agreements were available within a sample of files checked.

The requirement is:

Met

The service must review the registration of Foster Carers at intervals of not more than one year.

This is in order to comply with The Fostering of Children (Scotland) Regulations 1996 regulation 10(1).

Timescale for implementation: Within 4 months of receipt of this report and on an ongoing basis.

Action taken on the Requirement

The registration of all carers had been reviewed and an annual programme developed.

The requirement is:

Met

The service must ensure that the views of placing Social Workers are obtained prior to the Foster Carer review panel.

This is in order to comply with The Fostering of Children (Scotland) Regulations 1996 regulation 10(2).

Timescale for implementation: Ongoing.

Action taken on the Requirement

A senior manager had written to Area Teams reminding them of their responsibilities in relation to these reports. This had resulted in a much improved response rate.

The requirement is:

Met

Risks relating to individual children and situations must be clearly recorded with guidance as to how they should be managed within a fostering setting. This should be developed in a format which can be regularly updated.

This is in order to comply with the Foster of Children (Scotland) Regulations 1996 regulation 8 Schedule 2.

Action taken on the Requirement

A new format had been developed with guidance for staff. This new format was being used by staff.

The requirement is:

Met

Where the local authority make arrangements with a voluntary organisation in respect of a child for whom they are responsible, they must enter into a written agreement.

This is in order to comply with The Fostering of Children (Scotland) Regulations 1996 regulation 16 (2).

Timescale for implementation: Ongoing.

Action taken on the Requirement

The Local Authority Contracts Officer was working on a standard format however this was ongoing.

The requirement is:

Not Met

Actions Taken on Recommendations Outstanding

There were 14 recommendations included in the last report, four of which remain outstanding. Three of the outstanding recommendations have been included within the body of this report. The remaining recommendation outstanding is as follows:

The service should ensure Foster Carers are provided with clear guidance in respect of alterations to their homes and help which may be available.

National Care Standards: Foster Care and Family Placement Services, Standard 2.

This recommendation is therefore included within this report.

The annual return

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care Act (Scotland) 2001, Section 25(1). These forms must be returned to us between 6 January and 28 February 2009.

Annual Return Received

Yes - Electronic

Comments on Self Assessment

We received a fully completed self assessment document from the service provider. We were satisfied with the way the provider had completed this and with the relevant information they had given us for each of the headings that we grade them under.

The service provider identified what they did well and highlighted some planned areas for development.

Taking the views of people using the care service into account

Limited feedback was obtained from children due to their age, however where possible, their thoughts and opinions have been included in the body of this report.

Taking carers' views into account

Foster Carers who participated in the inspection were clear that communication within the service had improved. Most were confident they now had a voice within the service although a few stated they were yet to be convinced. Although some carers stated they were less inclined to contact another worker if their Supervising Social Worker was absent, they were confident they could always contact the managers.

All carers were clear regarding the line management structure and stated they would have no hesitation in contacting either team managers or senior managers if they had any concerns.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service Strengths

Foster Carers experienced a service which supported participation in a number of ways. They had good opportunities to make their views known through support groups, Foster Carers Consultative Committee and support and supervision sessions.

Interviews confirmed most Foster Carers felt they had a voice within the service and were listened to by staff and managers. They were consulted in the development and review of policies and procedures and the new Foster Carer Agreement.

Relationships with Supervising Social Workers were generally described as very positive. However carers recognised that where their Supervising Social Worker was absent they were less inclined to phone another worker although they would have no hesitation in phoning a member of the management team.

There were opportunities for carers to share good practice and contribute to service development through the Consultative Committee. This group had been re-established in the past year. It supported discussion with senior managers regarding a range of policy development, practice and finance issues. Membership of this group also included a Social Worker from a Children and Families team. Minutes from the group were distributed to all carers ensuring they were informed of discussions and agreements reached.

The Foster Carers support group offered further opportunities for carers to share information and good practice and was felt to be useful for both new and well established carers. The support groups also offered a range of training opportunities. Carers confirmed they contributed to the development of the training programme which ensured it reflected their needs.

Following consultation some carers had expressed an interest in accessing training to allow them to co-facilitate the preparation sessions for new applicants. One carer had completed this training and additional carers planned to attend the next course. Carers viewed this as a positive step in recognising their role as members of the team.

Foster Carers who participated in the inspection expressed their satisfaction with the changes to the review process. They confirmed this provided them with an opportunity to express their views on the support provided and identify any outstanding training and development needs. A useful range of forms had been developed to inform the review process. This included forms to support birth parents, children of Foster Carers and children in foster care to feedback on the service.

A system had been developed to ensure the Agency Decision Maker approves the decision to ask any carer to operate outwith their registration. This is also supported by an early return to panel for a variation where appropriate.

Children and young people were also provided with the opportunity to express their views on the care and support they receive through the child care review process and the Children's Rights Officer. Children who took part in the inspection identified either their Foster Carer or their Social Worker as the people they would talk to if they had a problem.

Areas for Improvement

Although opportunities were being developed to support Foster carers, children and young people to influence the development of the service, there was no guiding strategy or policy in respect of participation. This is an outstanding recommendation from the last inspection.

The service planned to develop a group for children and young people of Foster Carers. This is in recognition of the important part they play in the success of placements and would provide a forum for discussing any concerns or issues which may arise.

While the re-establishment of the Consultative Committee is a positive move forward, it is suggested consideration be given to widening the membership of the group to include representatives from health and education. This would support the service in ensuring the health and education of children and young people are considered.

A range of relevant information was available for children and young people moving in to foster care placements. However there was no evidence to indicate the profiles developed by carers had been shared with children moving on a planned basis.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

1

Recommendations

1.

The service should develop a participation strategy which recognises the role of service users in the ongoing development of the service.
National Care Standards. Foster Care and Family Placement Services Standard 13.3.

Statement 3

We ensure that service user's health and wellbeing needs are met.

Service Strengths

Discussion with staff, and Foster Carers and examination of documentation evidenced that the service was operating at a good level.

Foster Carers confirmed that the assessment and approval process ensured any health needs were fully addressed prior to approval. Records confirmed that the health status of Foster Carers was monitored annually. Managers maintained an overview to ensure assessments were comprehensive and considered the applicants abilities to meet the needs of children.

The fostering service had access to a specialist nurse whose role was to ensure that the health needs of Looked After and Accommodated Children (LAAC) were documented and addressed. Records demonstrated that health issues were systematically discussed at reviews. Foster Carers were conscientious in ensuring children attended appointments with GP's, hospitals, opticians and dentists. Where children required additional support efforts were made to identify an appropriate resource through the relevant agency such as Child and Adolescent Mental Health Services (CAMHS). Some Foster Carers had been supported to access specialist training to enable them to better support individual children in their care.

Children in foster care were encouraged to access a range of physical activities and leisure pursuits and this was monitored through reviews. To further support the health and wellbeing of children the LAAC nurse provided advice, guidance and training on healthy eating and lifestyles to both carers and young people.

Foster Carers confirmed they had received guidance and further training was planned on 'safe caring'. Carers had either completed or were in the process of developing safe care policies for their households.

Recognising good practice guidance and following advice from their medical advisor, the service had consulted with carers prior to introducing a policy stating no child under five years would be placed with carers who smoke.

The Foster Carer handbook contained a range of guidance and procedures to support carers. This included confidentiality, complaints and allegations against carers. Staff and carers were involved in consultation regarding policies and procedures being drafted or updated. The Foster Carers handbook was in the process of being updated.

Areas for Improvement

During a support and development group carers were offered advice and guidance on the importance of hand washing. It is suggested the service obtain copies of Keep it Clean and Healthy and Looking After You and Your Baby. These documents provide useful guidance on the control of infection within a home environment and can be obtained from pat@cole-hartford.fsnet.co.uk .

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 5

We respond to service users' care and support needs using person centered values.

Service Strengths

Following consideration of the evidence sampled and feedback from Foster Carers and staff, the service was determined to be operating at a very good level.

The service had developed a range of policies and procedures governing assessment, appeals and advertising.

Applicants were provided with useful information about the assessment and registration process through the council's website and an applicant's pack.

Foster Carers confirmed that the handbook provided them with a good level of information about the policies and procedures of the service and what the service expected of them. To assist Supervising Social Workers in their regular support and supervision with Foster carers a new recording format had been developed.

Day to day placement agreements were completed in all cases considered as part of the inspection and these provided basic information about a child's needs. They highlighted specific health issues or educational support needs and agreed contact arrangements between the child and family members.

Case records indicated health and safety risk assessments were carried out on the carer's family home on an annual basis. A new format and guidance in relation to risk assessment had been introduced to support staff to consider all relevant issues prior to placing any child.

It was generally felt that despite the limited number of carers available, in the majority of cases children's needs were matched with carer's skills. In recognition of the limited foster care places available within the service an additional member of staff had been recruited to focus specifically on recruitment.

Foster Carers had access to 24 hour support through the Emergency Duty Team however new carers welcomed the opportunity to contact another carer for support via the informal buddy system.

Previous concerns regarding sharing information when children moved into a respite placement had been addressed. A system had been developed within which the Supervising Social Worker played a lead role in the co-ordination and sharing of information.

There was evidence of both Foster Carers and the Children's Rights Officer being good advocates for children.

Areas for Improvement

Although managers and staff were clear regarding practice within the service there was no written code of practice in relation to advertising.

The service published information on fees however a few carers remained unclear regarding additional expenses which could be claimed.

The fostering panel included a range of professionally qualified and experienced staff however efforts to recruit a foster carer and someone with experience of being in foster care had not yet come to fruition.

It was recognised there had been a significant improvement in the regularity of children's Social Workers completing reports for annual Foster Carer reviews. However managers should monitor the situation to ensure this continues.

The agreement between the Local Authority and Foster Carers had been revised. This had been followed by extensive consultation with all relevant parties including Foster Carers. However, during this period some new carers had been approved but had not signed written agreements with the council.

Grade awarded for this statement

5 - Very Good

Number of Requirements

1

Number of Recommendations

2

Requirements

1.

The Local Authority must enter into a written agreement with all foster carers. This is in order to comply with The Fostering of Children (Scotland) Regulations 1996 regulation 8.

Timescale for implementation: Within 1 month of receipt of this report.

Recommendations

1.
The service should develop a policy clearly stating their position on using children/young people in advertising.
National Care Standards: Foster Care and Family Placement Services, Standard 1. 3.

2.
Membership of the fostering panel should be expanded to include people with experience of providing or receiving foster care.
National Care Standards: foster care and family placement services, Standard 12.1.

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths

Following consideration of the evidence sampled and feedback from adopters and staff, the service was determined to be operating at a good level.

Within the service there were good relationships between Foster Carers and staff. One carer stated their Supervising Social Workers made them feel like a valued 'member of the team' whilst another said her Supervising Social Worker was a 'breath of fresh air!' Carers stated they were now kept fully informed of the availability of staff.

Foster Carers were able to provide feedback about the support they received from specific workers during their annual review. They also recognised they had an avenue to voice their opinion through the Foster Carers Consultative Committee. One carer had attended a Fostering Network Leaders course enabling her to work closely with members of the team in co-facilitating preparation training for new applicants. Carers were confident they could speak with a member of the management team or senior managers at any time should they have concerns or issues.

Within the 'Having your Say' document children and young people could have their views about staff and carers heard. Systems were also in place to enable panel members to provide feedback on the quality of reports and assessments presented to them.

Areas for Improvement

Although questionnaires had been developed to gather carers views, this information should be collated, evaluated and an action plan produced to inform the development of the service.

As previously highlighted an additional worker has been recruited to the team. Their initial remit is to recruit Foster Carers. After this they will undertake all other elements of the Supervising Social Worker role.

As reported on in Quality Theme 1, Statement 1 the service has still to develop a participation strategy.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 2

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Service Strengths

An audit of the service's safer recruitment policies and procedures had been carried out by the Care Commission.

Overall, the audit evidenced very good performance on staff recruitment procedures across the organisation.

The audited files consistently evidenced that application forms were completed, all files held job profiles and the majority of files had copies of the council aims and objectives. Overall, the organisation followed their comprehensive recruitment policy and further procedure documents were in place to support the policy.

The organisation made use of their occupational health service to determine applicants' fitness for the post.

Relevant Disclosure Scotland checks were completed by all applicants before starting work with the council. The council had been audited by Disclosure Scotland and the report confirmed that the council was compliant in most areas of the Code of Practice with a range of recommendations made to meet full compliance. The council have completed a review of their recruitment policy and procedures in line with the recommendations made and a draft policy is ready for council approval.

The organisation policy and person specification form used at the recruitment panel and interview stage identified posts where qualifications were either required or desirable.

The service had developed an induction procedure which included both the council and service specific information.

Areas for Improvement

This audit highlighted a small percentage of files where gaps were identified, for example;

One file had no evidence that a Disclosure Scotland Check had been carried out. A further check on the council data base confirmed that this had not been done.

The audit highlighted inconsistency in checking required qualifications at point of interview.

Seven files had no evidence of following the council panel and recruitment guidance of viewing and confirming qualifications where candidates had declared qualifications in support of their application.

Discussions with the council HR Team Leader identified that their most recent recruitment checklist should identify these gaps. After examining some of the completed checklists, the CCOs advised the HR Team Leader that there continued to be inconsistent completion of these and further work needed to be done to ensure that the Council had a clear and consistent audit trail which supported their new draft Recruitment and Disclosure Scotland policies and procedures.

The HR Team Leader confirmed at the feedback stage that they intend to improve their performance on quality control by introducing a systematic audit check of recruitment files on an ongoing basis in the near future. The findings of this audit support this area of improvement identified by the Council.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

1

Safer Recruitment - Inspection Focus Area (IFA) outcome

The requirements and/or recommendations below reflect our view of the providers performance in meeting its legal responsibilities when recruiting staff and its compliance with best practice. This is as a result of an audit of the providers recruitment files.

Recommendation

1.

It is recommended that the provider develops a system, as planned, which monitors and supports their current recruitment policies and procedures to ensure these are being consistently applied and that there is a robust evidence trail of these safe recruitment practices.

In making this recommendation reference has been made to Scottish Social Services Council Code of Practice 1.1 to 1.5

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service Strengths

Discussion with staff and evidence sampled confirmed the service to be operating at a good level.

Policies and procedures including recruitment, whistle blowing and child protection were in place to guide staff practice.

Managers were experienced, knowledgeable and supportive to all staff. They shared examples of good practice and ensured staff had access to a wide range of guidance. Through regular supervision with staff, managers maintained an overview of the work of the team. The frequency of supervision was arranged to support individual staff needs and within this forum any issues were addressed.

Managers also worked with other agencies such as Fostering Network, British Association for Adoption and Fostering and other Local Authorities to develop and share practice.

Staff had accessed training required to support them in their role. A record of this was maintained. A draft workforce development strategy had been developed for the service.

Foster Carers generally felt more confident that the service would assist them to access specific training to support their professional development.

Areas for Improvement

Although the management team had developed a range of policies, procedures and paperwork to support staff it was evidenced that in some instances staff had not introduced this into practice. Some staff appeared reluctant to follow instructions or use good practice examples to assist with their own development. Staff need to take responsibility to develop their own practice.

Planned team meetings which were a forum to discuss business and practice issues were often cancelled due to staff availability. The level of management support required by the team had impacted on available time. As a result staff development days had not taken place. This had therefore limited the opportunities for the team to consider the aims, objectives and development of the service. This has to be addressed to allow the ongoing development of the fostering service.

Although it was noted communication had improved this was an ongoing challenge for the service. They should consider attending meeting with the Children and Family teams and sharing information on roles and responsibilities.

A training officer was in place who would oversee staff training. It would be helpful if a staff development strategy was compiled for the service which would inform the annual training plan. This should contain information on team and individual training needs. It was evidenced that some training had been paid for, but dates for the delivery for this were not in place. This should be arranged as topics such as permanency training would be beneficial to staff and is an outstanding recommendation from the last inspection.

The draft induction programme should be finalised and incorporated into practice as soon as possible. It would be beneficial to have a record of the induction programme undertaken by staff. This should include information on staff knowledge and understanding of policies, procedures and training attended.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

2

Recommendations

1.
Training planned should be scheduled to take place as soon as possible as staff would benefit from accessing this.
National Care Standards: Foster Care and Family Placement Services 13.2

2.
All new staff should complete the induction programme outlined within the new service policy.
National Care Standards: Foster Care and Family Placement Services 13.2

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 3 - Adequate

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service Strengths

Having sampled the evidence provided, the service was assessed to be operating at an adequate level in relation to this statement.

Service users generally experienced a service which supported participation in the variety of ways previously highlighted.

Policies and procedures had been drafted to assist staff in their day to day practice. The Council had proposed a restructuring within the organisation that included the Fostering and Adoption team.

Areas for Improvement

As previously acknowledged the management were developing the variety of ways in which service users could be involved in the service. However, this was still at an early stage and information needed to collated and evaluated and used to inform the development of the service.

The service still had further work to do to involve service users in completing the self assessment form for the service.

Grade awarded for this statement

3 - Adequate

Number of Requirements

0

Number of Recommendations

0

Statement 2

We involve our workforce in determining the direction and future objectives of the service.

Service Strengths

Following sampling of the evidence provided relating to this statement it was determined that staff influence in the determining the direction of the service was adequate.

Staff had recently been consulted in relation to the restructuring of the service.

Training for team members had been planned and it was identified that the training officer would now have a role in planning future training. Any particularly good pieces of work were shared within the team to promote good practice.

Staff were very well supported by managers who offered regular support and guidance. They also had access to good practice publications. Staff and managers undertook joint working with other agencies to develop the service.

Areas for Improvement

Although opportunities were provided for staff to influence the direction of the service, it was evident that some members of the team were not at the stage of being able to effectively influence the development of the service. For example the development days were not able, as yet, to be used for meaningful consultation with staff due to limited knowledge or experience. However, it should also be acknowledged that staff absences have had a negative impact on the team working together, sharing practice and discussing practice issues.

It was recognised that time needs to be given to discussing the policies and procedures drafted and for practice issues to be discussed and good practice shared. Staff need to be receptive to sharing good practice ideas and implementing them into their practice to improve and develop the service.

It would be helpful to have a training matrix for the service that provides an overview of staff skills and training. It was identified that although some training had been purchased dates for the delivery of this had not been agreed. Training dates should be identified as a priority.

Grade awarded for this statement

3 - Adequate

Number of Requirements

0

Number of Recommendations

0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service Strengths

It was determined that the service was operating at an adequate level in respect of quality assurance.

Managers were developing systems to involve Foster Carers and their families in providing feedback as previously highlighted within this report.

The service had developed an action plan in response to the last Care Commission inspection. They also participated in the follow up inspection carried out by the Social Work Inspection Agency.

A permanence planning group had been introduced and met regularly to ensure information on children and placements was regularly updated and monitored.

Areas for Improvement

The manager planned to produce six monthly reports on the work of the fostering service, identifying key issues and ongoing developments.

There were outstanding recommendations from the last inspection in regard to quality assurance that the service need to address. This related to the formulation of an annual development plan and the development and implementation of a range of quality assurance systems.

Grade awarded for this statement

3 - Adequate

Number of Requirements

0

Number of Recommendations

2

Recommendations

1.

An annual development plan for the service needs to be developed in consultation with staff and service users.

Foster care and Family Placement Services Standard 13.7

2.

The service needs to further develop and implement quality assurance systems which recognise the importance of consultation with all stakeholders.
Foster care and Family Placement Services Standard 13.3

Other Information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

N/A

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Commission re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

Summary of Grades

Quality of Care and Support - 4 - Good	
Statement 1	4 - Good
Statement 3	4 - Good
Statement 5	5 - Very Good
Quality of Staffing - 4 - Good	
Statement 1	4 - Good
Statement 2	5 - Very Good
Statement 3	4 - Good
Quality of Management and Leadership - 3 - Adequate	
Statement 1	3 - Adequate
Statement 2	3 - Adequate
Statement 4	3 - Adequate

Inspection and Grading History

Date	Type	Gradings
18 Nov 2008	Announced	Care and support 2 - Weak Staffing 2 - Weak Management and Leadership 2 - Weak

Terms we use in our report and what they mean

Action Plan - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

Best practice statements/guidelines - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

Care Service - A service that provides care and is registered with us.

Complaints - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

Enforcement - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

Disclosure Scotland- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

Participation - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

Personal Plan - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

How you can use this report

Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

People who use care services, their relatives and carers

We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.

The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

Reader Information

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Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànanan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

هه بایتسد سیم روزابز رگید روا رولکش رگید رپ شرازگ تعاشا هی

ਬੈਨੜੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

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Improving care in Scotland

Inspection report

Clackmannanshire Adoption Service Adoption Service

Child Care Services
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FK10 1EX
01259 225000

Inspected by: (Care Commission officer)	Lynne Nimmo
Type of inspection:	Announced
Inspection completed on:	28 September 2009

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Service provided by:
Clackmannanshire Council

Service provider number:
SP2003002713

Care service number:
CS2004083967

Contact details for the Care Commission officer who inspected this service:

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Easy read summary of this inspection report

We grade all the Quality Statements for a service at each inspection. Each grade describes how well we think the service is doing based on what we inspected.

We can choose from six grades:



We gave the service these grades

Quality of Care and Support  **4** Good

Quality of Staffing  **4** Good

Quality of Management and Leadership  **3** Adequate

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

What the service does well

The line managers supported the staff team very well in their roles. They had a good overview of the service delivery.

What the service could do better

The service needs to continue to support individual staff as necessary whilst being mindful of the need to develop a team approach through meetings and development days

What the service has done since the last inspection

The service had developed draft policies to guide the practice of staff. They had improved communication and increased opportunities for consultation with people who use the service

Conclusion

Managers within Clackmannanshire Council Adoption Service have have worked hard to develop a structure to support and guide staff in developing the service. Policies and procedures to guide practice have been developed, training and information materials has been purchased for staff.

Who did this inspection

Lead Care Commission Officer

Lynne Nimmo

Other Care Commission Officers

Mary Soutar

Lay Assessor

N/A

Please read all of this report so that you can understand the full findings of this inspection.

About the Care Commission

We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: www.carecommission.com. Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

About the National Care Standards

The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: www.scotland.gov.uk

You can get printed copies free from:

Blackwells Bookshop
53-62 South Bridge Edinburgh
EH1 1YS
Telephone: 0131 662 8283
Email: Edinburgh@blackwells.co.uk

What is inspection?

Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

Recommendations, requirements and complaints

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a requirement or recommendation.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

How we decided what to inspect

Why we have different levels of inspection

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

How we decide the level of inspection

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

What is grading?

We grade each service under Quality Themes which for most services are:

- **Quality of Care and support:** how the service meets the needs of each individual in its care
- **Quality of environment:** the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of staffing:** the quality of the care staff, including their qualifications and training
- **Quality of management and leadership:** how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:



We do not give one overall grade.

How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

About the service we inspected

Clackmannanshire Council Adoption Service provides an Adoption Agency for children and young people aged from 0 to 16 years, who are assessed as in need of this service and who live or have a connection with Clackmannanshire. The agency is registered to recruit and support adoptive families.

The service was registered on 23 November 2005.

Since the last inspection the managers have worked hard to develop the service and support staff within their roles.

The stated aims and objectives of the service were:

- To meet the needs of children who, for a variety of reasons, cannot live with their own families.
- To work in partnership with prospective adopters.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support	4 - Good
Quality of Staffing	4 - Good
Quality of Management and Leadership	3 - Adequate

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

You can use the "Care services" area of our website (www.carecommission.com) to find the most up-to-date grades for this service.

How we inspected this service

What level of inspection did we make this service

In this service we carried out a high intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

What activities did we undertake during the inspection

This report was written following an announced inspection that took place between 9 and 18 September 2009. Feedback was given to the service on Monday 28 September. The inspection was carried out by Mary Soutar and Lynne Nimmo, Care Commission Officers.

During this inspection we gathered evidence from a variety of sources, including the relevant sections of policies, procedures, records and other documents including:

- Personal plans of people who use the service.
- Questionnaires completed by applicants.
- Team meeting minutes.
- Evidence from the service's most recent Self Assessment.

Discussions with various people including:

- The management team.
- Supervising Social Workers.
- Adoptive parents.
- Children's Social Workers.

Inspection Focus Areas (IFAs)

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2009/10 we will focus on:

- Meaningful activity for all adult services
- How care services assess the health of people with learning disabilities
- Involving parents for children's services
- Medication for looked after children for residential accommodation for children
- How care services make sure they have safe recruitment procedures for staff for all services except childminders.

You can find out more about these from our website www.carecommission.com.

Fire safety issues

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: www.infoscotland.com/firelaw

Has the service had to take any actions as a result of or since our last inspection?

Information provided to applicants must include details of the complaints procedure and the role of the Care Commission in respect of complaints against registered services.

This is in order to comply with: SSI 2002/114 Regulation 25 (5)(6) and the Adoption Agencies (Scotland) Regulations 1996 Regulation 4.

Timescale: Within 4 weeks of receipt of this report.

Action taken on the Requirement

Leaflets in relation to complaints and the role of the Care Commission are now included within information packs. Leaflets were also given out retrospectively to people who were going through the assessment process.

The requirement is:

Met

The service must develop policy and procedures to encompass the aspects of practice outlined within National Care Standards adoption agencies: Dealing with Your Application.

Standard 20.1, 20.2, 20.3. including a written explanation where application is not accepted and procedures for reconsideration of this. Also, information about other agencies who may be able to consider applicants.

This is in order to comply with: The Adoption Agencies (Scotland) Regulations 1996

Regulation 4.

Timescale: Within 3 months of receipt of this report.

Action taken on the Requirement

Draft procedures had been developed that included all the required information in relation to the application process. This requirement will continue as the policy had not been finalised and incorporated into practice.

The requirement is:

Not Met

Agency staff should ensure 'life story' work is undertaken with children who have been adopted.

This is in order to comply with: The Adoption (Scotland) Act 1978 Regulation 1. (2)(bb)

Timescale: Ongoing.

Action taken on the Requirement

Although training had been purchased it had not been delivered to staff. Therefore, this requirement will continue.

The requirement is:

Not Met

Records should clearly evidence how and when children's views had been taken into account.

This is in order to comply with: The Adoption (Scotland) Act 1978 Regulation 6(1)(b)

Timescale: Ongoing

Action taken on the Requirement

It was evident within care plans that systems had been developed to obtain children's views.

The requirement is:

Met

Prior to placing siblings an attachment assessment must be undertaken.

This is in order to comply with the Adoption Agencies (Scotland) Regulations 1996 Regulation 11(6)

Timescale: Ongoing

Action taken on the Requirement

The service had purchased the British Adoption And Fostering Together or Apart assessments which was to be introduced into practice.

The requirement is:

Not Met

The Agency is to provide written information on post adoption support to adoptive families. This should include information regarding Birth Records Counselling and Access to Records.

This is in order to comply with: S 1 The Adoption (Scotland) Act 1978 underpinned

Para 219 Regulations and Guidance vol 3.
Timescale: Ongoing

Action taken on the Requirement

Although training had been purchased it had not been delivered to staff. Therefore, this requirement will continue.

The requirement is:

Not Met

Written reasons for not approving prospective adoptive parents must be given to them along with written information about procedures for appealing this decision.

This is in order to comply with: The Adoption Agencies (Scotland) Regulations 1996 regulation 12 (3)(d).

Timescale: Ongoing

Action taken on the Requirement

A pro forma has been developed by the service that would be used to inform prospective adopters in writing should their application be unsuccessful.

The requirement is:

Met

The annual return

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care Act (Scotland) 2001, Section 25(1). These forms must be returned to us between 6 January and 28 February 2009.

Annual Return Received

Yes - Electronic

Comments on Self Assessment

We received a fully completed Self Assessment document from the service provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each of the headings that we grade them under.

The service provider identified what they thought they did well, some areas for development and any changes they planned.

Taking the views of people using the care service into account

At this inspection the children were too young to give their views.

Taking carers' views into account

People who had been approved as adopters were complimentary of the service. They found staff to be approachable and supportive. They were able to build up good working relationships with them. They stated that they felt able to give their views and were listened to by staff. Adopters knew the line management structure in place.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service Strengths

Following consideration of a sample of the evidence provided and feedback from Adopters, children and staff, the service was determined to be operating at a good level.

Approved adopters confirmed that they had a range of ways in which they could have their say on the quality of service being provided. This included questionnaires at various stages in the process and discussion with staff and management. In response to feedback adopters felt that communication within the service had improved and they were kept well informed about changes that affected them.

Adopters reported that they had experienced a comprehensive assessment programme which they found beneficial. This included a preparation course with input from people who had been approved as adopters and people who had been adopted, child psychologists and paediatrician. They found these sessions well balanced and well presented. Adopters confirmed they had been approached to participate in a working group to produce a handbook for adopters.

Throughout the assessment process applicants reported that Supervising Social Workers were very supportive and always responded to any queries. This support was increased at key points in the process such as when applicants were going to Panel. They also knew who line managers were, their role in supporting Supervising Social Workers and how to contact them. Applicants were kept up to date about the progress of their application.

Children were consulted in an age appropriate way in relation to adoption. Within reports, Social Workers detailed why adoption was in the child's best interests. Information was recorded in relation to recommendations for adoption/permanency. It was also evident that birth parents were involved in the process and their views taken into account. They were invited to attend meetings, panels and reviews.

The service provided post adoption support for anyone affected by adoption. Additional support was available through the Group for Adopted People (GAP) and Post Adoption Central Support (PACS).

Areas for Improvement

The Council still had to develop a participation strategy for the service detailing how adopters and adoptees can influence the ongoing development of the service. See Recommendation 1.

Although approved adopters confirmed they had been approached to be part of the working group to develop a handbook they were still waiting for a date for this. This should be progressed soon so that they do not lose people's interest.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

1

Recommendations

1.

The service should develop a participation strategy which recognises the role of service users in the ongoing development of the service.

This is in order to comply with National Care Standards: Adoption Agencies Standard 32.5 & 32.8. Providing a Good Quality Service.

Statement 3

We ensure that service user's health and wellbeing needs are met.

Service Strengths

Discussion with staff, approved adopters and examination of documentation evidenced that the service was operating at a good level.

Prospective adopters were subject to a thorough assessment with regard to their suitability as adopters. Part of this assessment included medical checks being undertaken on prospective adopters. Managers oversaw this process to ensure that high standards were implemented by staff when gathering information. In one file examined the Panel commented on the high standard of the report submitted.

A full health assessment was undertaken on children placed for adoption. It was evident where referrals had been made to other agencies such as paediatrician, speech therapist and educational psychologist. Records indicated that children's health needs were supported pre and post adoption. Adopters confirmed that they were given ample up to date information in relation to children they had been matched with. They confirmed they had access to the medical advisor to discuss any issues or concerns. One adoptive family also had the opportunity to meet staff from the Education Department to discuss the child's development and future needs.

Adopters felt that health issues were covered well during the preparation sessions. If there were any particular issues, Supervising Social Workers were good at signposting them to appropriate literature. Adopters spoken with felt that decisions made by the service in relation to children had been correct. It was acknowledged that the thorough assessment and exploration carried out in relation to children's individual needs assisted in the matching process. Adopters had the opportunity to meet with birth families and were well informed about the possible contact, whether directly or indirectly, with them post adoption.

All adopters had been given a copy of the Framework Standards and Children's Charter.

Areas for Improvement

Some adopters found the abbreviations used at reviews confusing and would have found a bibliography of them useful.

The managers were to continue working with Falkirk and Stirling Councils to develop post adoption support.

It should be ensured that when adopters request information from the Council's legal department a response is made within a reasonable period of time.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 5

We respond to service users' care and support needs using person centered values.

Service Strengths

Following consideration of the evidence sampled and feedback from adopters and staff, the service was determined to be operating at a very good level.

The service had developed a range of policies and procedures governing assessment, appeals and advertising.

Information was provided to people interested in becoming Adopters through the council website and information leaflets. Systems were in place to log and track applications. Adopters spoken with described positive experiences in regard to the initial assessment. This was then followed by a thorough assessment of prospective adopters. Potential adopters found the preparation sessions informative, well presented and well balanced. The input from adopters and people who had been adopted was seen as invaluable.

Applicants reported that they were well supported throughout the process. Supervising Social Workers kept appointments, explained the procedures and took time so applicants were clear about the process and where they were in it. It was established that staff, on occasion, were very good at supporting families out with office hours, particularly at key points of the assessment process. Reports were presented to panel within the required 12 weeks.

Where it had been identified adoption was in children's best interests, there was evidence of the assessments undertaken in relation to their individual needs. It was clear that external/independent agencies had been approached for their views in regard to children's needs and what was in their best interest. Parent's views on permanence were sought.

Permanence planning meetings were now in place. This allowed the service to have an overview and monitor the progress of all children who had been identified as needing alternative permanent care. Managers maintained an overview of workers caseload to monitor the progress in assessments.

During the matching process children's needs could be further explored. When prospective adopters had questions in relation to children, meetings were arranged with other professionals involved to assist them in the decision making. Adopters reported that linking meetings and planned moves for children were well organised.

People who had been adopted had received a quality service in respect of tracing their birth family. They stated that staff had been informative, sensitive, realistic and genuine in relation to the search and kept them up to date about the progress of the research.

Areas for Improvement

It was identified that some Form E's had not been completed as quickly as expected. This should continue to be closely monitored so that assessments are completed within a reasonable time.

The following information relates to outstanding requirements from the last inspection. It was identified that life story work had still not been addressed or carried out by staff. The service had purchased BAAF Together or Apart to use in assessments when placing siblings, but still had to be fully implemented into practice. See Requirements 1 and 2.

Grade awarded for this statement

4 - Good

Number of Requirements

2

Number of Recommendations

0

Requirements

1.

Agency staff should ensure 'life story' work is undertaken with children who have been adopted.

This is in order to comply with: The Adoption (Scotland) Act 1978

Regulation 1 (2)(bb)

Timescale: Ongoing

2.

Prior to placing siblings an attachment assessment must be undertaken.

This is in order to comply with the Adoption Agencies (Scotland)

Regulations 1996 Regulation 11(6) Timescale: Ongoing

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths

Following consideration of the evidence sampled and feedback from adopters and staff, the service was determined to be operating at a good level.

Within the service there were good relationships between potential and approved adopters and staff. Adoptive parents and prospective adopters confirmed they were now kept fully informed of the availability of staff.

Applicants described staff as 'Approachable, supportive, brilliant and superb'.

Questionnaires had been developed to allow adopters to feedback on the assessment process and the post adoption support provided. Adopters were also invited to participate in developing a new handbook for new applicants.

Within the 'Having your Say' document, children and young people could have their views about staff and carers heard. Feedback regarding Supervising Social Workers was positive and applicants felt supported throughout the assessment process.

Since the last inspection additional staff had been recruited and a team was now in place.

Systems were in place to enable panel members to provide feedback on the quality of reports and assessments.

Areas for Improvement

The workshops planned for developing a hand book for adopters should be facilitated.

Although questionnaires had been developed to gather adopters views, this information now needs to be collated, evaluated and an action plan produced which should then inform the development of the service.

An additional worker has been recruited to the team. Their initial remit is to recruit Foster Carers. After this they will undertake all other elements of the Supervising Social Worker role.

As reported on in Quality Theme 1, Statement 1, the service has still to develop a participation strategy.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 2

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Service Strengths

An audit of the service's safer recruitment policies and procedures has been carried out by the Care Commission.

Overall, the audit evidenced very good performance on staff recruitment procedures across the organisation.

The audited files consistently evidenced that application forms were completed, all files held job profiles and the majority of files had copies of the council aims and objectives. Overall, the organisation followed their comprehensive recruitment policy and further procedure documents were in place to support the policy.

The organisation made use of their occupational health service to determine applicants' fitness for the post.

Relevant Disclosure Scotland checks were completed by all applicants before starting work with the council. The council had been audited by Disclosure Scotland and the report confirmed that the council was compliant in most areas of the Code of Practice with a range of recommendations made to meet full compliance. The council have completed a review of their recruitment policy and procedures in line with the recommendations made and a draft policy is ready for council approval.

The organisation policy and person specification form used at the recruitment panel and interview stage identified posts where qualifications were either required or desirable.

An induction procedure had been developed for all staff designations.

Areas for Improvement

This audit highlighted a small percentage of files where gaps were identified, for example;

One file had no evidence that a Disclosure Scotland Check had been carried out. A further check on the council data base confirmed that this had not been done.

The audit highlighted inconsistency in checking required qualifications at point of interview. Seven files had no evidence of following the council panel and recruitment guidance of viewing and confirming qualifications where candidates had declared qualifications in support of their application.

Discussions with the council HR Team Leader identified that their most recent recruitment checklist should identify these gaps. After examining some of the completed checklists, the CCOs advised the HR Team Leader that there continued to be inconsistent completion of these and further work needed to be done, to ensure that the Council had a clear and consistent audit trail, which supported their new draft Recruitment and Disclosure Scotland policies and procedures.

The HR Team Leader confirmed at the feedback stage that they intend to improve their performance on quality control by introducing a systematic audit check of recruitment files on an ongoing basis in the near future. The findings of this audit support this area of improvement identified by the Council.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

1

Safer Recruitment - Inspection Focus Area (IFA) outcome

The requirements and/or recommendations below reflect our view of the providers performance in meeting its legal responsibilities when recruiting staff and its compliance with best practice. This is as a result of an audit of the providers recruitment files.

Recommendation

1.

It is recommended that the provider develops a system, as planned, which monitors and supports their current recruitment policies and procedures to ensure these are being consistently applied and that there is a robust evidence trail of these safe recruitment practices.

In making this recommendation reference has been made to Scottish Social Services Council Code of Practice 1.1 to 1.5.

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service Strengths

Discussion with staff and evidence sampled confirmed the service to be operating at a good level.

Policies and procedures that included recruitment, whistle blowing and child protection were in place to guide staff practice.

Managers were experienced, knowledgeable and supportive to all staff. They shared examples of good practice with staff and ensured they had access to a range of good practice guidance. Through regular supervision with staff, managers maintained an overview of the work of the team. The frequency of supervision was arranged to support individual staff needs. Within this forum any issues were addressed.

Managers also worked with other agencies such as BAAF and other Local Authorities to develop and share practice. For example the three Local Authorities were considering how they could jointly provide post adoption support.

Staff had accessed training required to support them in their role. A record of this was maintained. A draft workforce development strategy had been developed for the service.

Areas for Improvement

Although the management team had developed a range of policies, procedures and paperwork to support staff it was evidenced that staff had not introduced this into practice. Some staff appeared reluctant to follow instructions or use good practice examples to assist with their own development. Staff need to take responsibility to develop their own practice.

Planned team meetings which were a forum to discuss business and practice issues were often cancelled due to staff availability. Due to the level of management support that the team had needed, there had also been no staff development days arranged. This had therefore limited the opportunities for the team to consider the aims, objectives and development of the service. This has to be addressed so that managers have more time to consider the development of the service.

Although it was noted communication had improved this was an ongoing challenge for the service. They should consider attending meeting with the Children and Family teams and sharing information on roles and responsibilities.

A training officer was in who would oversee staff training. It would be helpful if a staff development strategy was compiled for the service which would inform the annual training plan. This should contain information on team and individual training needs. It was evidenced that training had been paid for, but dates for the delivery for this were not in place. This should be arranged as topics such as permanency training would be beneficial to staff and is an outstanding recommendation from the last inspection.

The draft induction programme should be finalised and incorporated into practice as soon as possible. It would be beneficial to have a record of the induction programme undertaken by staff. This should include information on staff knowledge and understanding of policies, procedures and training attended.

See Recommendations 1 and 2.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

2

Recommendations

1.

Training planned should be scheduled to take place as soon as staff would benefit from accessing this.

This is in order to comply with National Care Standards: Adoption Agencies standard 32.2; providing a good quality service.

2.

All new staff should have an induction following the new policy in place.

This is in order to comply with National Care Standards: Adoption Agencies standard 32.2; providing a good quality service.

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 3 - Adequate

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service Strengths

Having sampled the evidence provided, the service was assessed to be operating at an adequate level in relation to this statement.

Service users generally experienced a service which supported participation in the variety of ways previously highlighted.

Policies and procedures had been drafted to assist staff in their day to day practice. The Council had proposed a restructuring within the organisation that included the Fostering and Adoption team.

Areas for Improvement

As previously acknowledged the management had produced and developed ways in which service users could be involved in the service. However, this was still at an early stage and information needed to collated and evaluated and used to inform the development of the service.

The service still had further work to do to involve service users in completing the self assessment form for the service.

Grade awarded for this statement

3 - Adequate

Number of Requirements

0

Number of Recommendations

0

Statement 2

We involve our workforce in determining the direction and future objectives of the service.

Service Strengths

Following sampling of the evidence provided relating to this statement it was determined that staff adequately influenced the direction of the service.

Staff had recently been consulted in relation to the restructuring of the service.

Training for team members had been planned and it was identified that the training officer would now have a role in planning future training. Any good pieces of work were shared within the team to promote good practice.

Staff were very well supported by managers who offered regular support and guidance. They also had access to good practice publications. Staff and managers undertook joint working with other agencies to develop the service. For example, in post adoption support.

Areas for Improvement

Although opportunities were provided for staff to influence the direction of the service, it was evident that at this time staff experience and absence had limited their contributions to effectively influence the service. It was recognised that time needs to be allocated to the development of the team. This could be achieved by finalising the new policies and procedures and sharing these with staff. Time also needs to be given to discussing and sharing practice issues. Staff have to take responsibility for ensuring they are receptive to sharing good practice ideas and implementing them into their practice to improve and develop the service.

Grade awarded for this statement

3 - Adequate

Number of Requirements

0

Number of Recommendations

1

Recommendations

1.

The draft policy developed to assist staff with completing assessments should be shared with them to assist their practice.

This is in order to comply with National Care Standards: Adoption Agencies Standard 22. Being assessed.

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service Strengths

It was determined that the service was operating at an adequate level in respect of quality assurance.

The service had developed an action plan in response to the last Care Commission inspection. They also participated in the follow up inspection carried out by the Social Work Inspection Agency.

The service had develop questionnaires for approved adopters who had children placed with them so they were able to give their views about the assessment, linking and matching processes.

A permanence planning group had been introduced and met regularly to ensure information on children and placements was regularly updated and monitored.

Areas for Improvement

There are outstanding recommendations from the last inspection in regard to quality assurance that the service need to address. A development plan for the service should be compiled. Quality Assurance systems still need to be set up and fully implemented. See Recommendations 1 and 2.

Grade awarded for this statement

3 - Adequate

Number of Requirements

0

Number of Recommendations

2

Recommendations

1.

A development plan for the service needs to be formulated in consultation with staff and service users.

This is in order to comply with Adoption Agencies standard 32.8; Providing good quality service.

2.

The service needs to further develop and implement quality assurance systems which recognises the importance of consultation with all stakeholders.

This is in order to comply with Adoption Agencies standard 32.8; Providing good quality service.

Other Information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

N/A

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Commission re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

Summary of Grades

Quality of Care and Support - 4 - Good	
Statement 1	4 - Good
Statement 3	4 - Good
Statement 5	4 - Good
Quality of Staffing - 4 - Good	
Statement 1	4 - Good
Statement 2	5 - Very Good
Statement 3	4 - Good
Quality of Management and Leadership - 3 - Adequate	
Statement 1	3 - Adequate
Statement 2	3 - Adequate
Statement 4	3 - Adequate

Inspection and Grading History

Date	Type	Gradings
18 Nov 2008	Announced	Care and support 2 - Weak Staffing 3 - Adequate Management and Leadership 2 - Weak

Terms we use in our report and what they mean

Action Plan - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

Best practice statements/guidelines - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

Care Service - A service that provides care and is registered with us.

Complaints - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

Enforcement - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

Disclosure Scotland- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

Participation - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

Personal Plan - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

How you can use this report

Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

People who use care services, their relatives and carers

We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.

The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

Reader Information

This inspection report is published by the Care Commission. It is for use by the general public. You can get more copies of this report and others by downloading it from our website www.carecommission.com or by telephoning 0845 603 0890.

Translations and alternative formats

This publication is available in other formats and other languages on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànanan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

هه بايتسد سيم رونابز رگيد روا رولکش رگيد رپ شرازگ تعاشا هه

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

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Telephone: 0845 603 0890

Email: enquiries@carecommission.com

Web: www.carecommission.com

Improving care in Scotland

Inspection report

Woodside Childrens Unit Care Home Service Children and Young People

18-20 Woodside Terrace
Clackmannan
FK10 4HU
01259 213401

Inspected by: (Care Commission officer)	Tony Clarke
Type of inspection:	Unannounced
Inspection completed on:	1 February 2010

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Service provided by:
Clackmannanshire Council

Service provider number:
SP2003002713

Care service number:
CS2003011578

Contact details for the Care Commission officer who inspected this service:

Tony Clarke
Telephone 01786 406363
Email enquiries@carecommission.com

Easy read summary of this inspection report

We grade all the Quality Statements for a service at each inspection. Each grade describes how well we think the service is doing based on what we inspected.

We can choose from six grades:



We gave the service these grades

Quality of Care and Support	6	Excellent
Quality of Environment		N/A
Quality of Staffing	6	Excellent
Quality of Management and Leadership		N/A

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

What the service does well

The service has many strengths.

It has shown that it can sustain long-term placements for young people with diverse needs, where a return to family is not possible. This has provides a stable life for the young people in as domestic a setting as possible. They are able to draw up and pursue their school and social goals with consistent support and guidance.

There is detailed attention given to daily communication, with the voice of the young people given priority. Care plans are changed on a daily basis if needed. The basics of care are daily reviewed such as food, clothing, the living environment, conduct, and work with carers. This structure is welcomed by the young people and they take part in the processes.

Staff are given authority to deal with daily issues, leading to greater confidence and consistency in the work. The staff and manager emphasised the contribution of the young people to the quality of the service, crediting them with good work and the progress they make.

What the service could do better

A new supervision and appraisal policy was being introduced.

Staff were being helped to give presentations at outside meetings, and to visit other services to observe practice.

The service was being extended to a nearby supported flat for those young people who were approaching independence with ongoing support. This variation in the registration was being processed at the time of the inspection.

What the service has done since the last inspection

The service has recently obtained Council funding and support for the ongoing study buddies scheme. This has been set up with a local private school, whereby the pupils come and help the young people individually with their homework.

More furniture for the bedrooms and living areas has been replaced, and the choice of young people was observed in this.

Staff were helped to reflect on and to improve their practice. This brought about better communication, and the greater involvement of staff in developing the service.

Two new young people have come to stay, and were helped to settle in

quickly and to resume or continue their school attendance. Young people have moved on in a planned and positive way, with ongoing support and contact.

Conclusion

Overall the service has made progress through an ethos of being fair yet firm, with committed empathy for the young people. A person-centred approach has taken the service through the challenges it faced. This has also helped to sustain the gradings of "excellent " achieved in previous inspections.

Who did this inspection

Lead Care Commission Officer

Tony Clarke

Other Care Commission Officers

Lay Assessor

Not used.

Please read all of this report so that you can understand the full findings of this inspection.

About the Care Commission

We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: www.carecommission.com. Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

About the National Care Standards

The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: www.scotland.gov.uk

You can get printed copies free from:

Blackwells Bookshop
53-62 South Bridge Edinburgh
EH1 1YS
Telephone: 0131 662 8283
Email: Edinburgh@blackwells.co.uk

What is inspection?

Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

Recommendations, requirements and complaints

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a requirement or recommendation.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

How we decided what to inspect

Why we have different levels of inspection

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

How we decide the level of inspection

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

What is grading?

We grade each service under Quality Themes which for most services are:

- **Quality of Care and support:** how the service meets the needs of each individual in its care
- **Quality of environment:** the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of staffing:** the quality of the care staff, including their qualifications and training
- **Quality of management and leadership:** how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:



We do not give one overall grade.

How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

About the service we inspected

This service was managed by Clackmannanshire Council, and provided domestic scale and individualised support to five young people between the ages of twelve and sixteen in two attached terrace houses in a small town in Clackmannanshire.

The aims included providing an environment which promoted feelings of safety and which respected and valued all who lived and worked at Woodside.

Clearly planned long term care was aimed for, to allow work toward identified outcomes and the achievement of the young people's aspirations.

The service was first registered on 1 April 2002 and was last inspected on 5 December 2008.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support	6 - Excellent
Quality of Environment	N/A
Quality of Staffing	6 - Excellent
Quality of Management and Leadership	N/A

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

You can use the "Care services" area of our website (www.carecommission.com) to find the most up-to-date grades for this service.

How we inspected this service

What level of inspection did we make this service

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What activities did we undertake during the inspection

The inspection was unannounced, and consisted of two visits to the service. These were on 20 January 2010, from 9.30 to 4 pm and 1 February 4 pm to 7pm.

Documents looked at included

Care plans
Reviews
Minutes of staff meetings
Minutes of young person's meetings
Medication records
Communication book
Daily handover meeting records
Training strategy
Supervision and appraisal records.

On 20 January we talked with two of the young people, with four residential care officers, with the manager and the housekeeper. The Training officer and a through care social worker were visiting and we met with them also. We took part in the daily handover meeting at 10 am, where the new staff coming on shift were brought up to date on the previous 24 hours by staff going off duty.

On the evening of 1 February we met with four of the five young people at a house meeting which we attended by their invitation.

Inspection Focus Areas (IFAs)

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2009/10 we will focus on:

- Meaningful activity for all adult services
- How care services assess the health of people with learning disabilities
- Involving parents for children's services
- Medication for looked after children for residential accommodation for children

- How care services make sure they have safe recruitment procedures for staff for all services except childminders.

You can find out more about these from our website www.carecommission.com.

Fire safety issues

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: www.infoscotland.com/firelaw

The annual return

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care Act (Scotland) 2001, Section 25(1). These forms must be returned to us between 6 January and 28 February 2009.

Annual Return Received

No

Comments on Self Assessment

The previous self assessment was a useful guide in assessing the development of the service.

Taking the views of people using the care service into account

One person said that 'Woodside was number one!'. Specific discussions showed that young people were very happy with the food, cooking opportunities, with the environment and with how they were treated by staff. They clearly felt involved in how things were organised on a day to day basis.

Taking carers' views into account

The views of carers had been considered during the previous inspection, and there was no new information available.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 6 - Excellent

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service Strengths

The strengths identified in previous reports were maintained. These included a house meeting which was convened and recorded by the young people themselves, with clear links to the business of the weekly staff meeting.

Several issues raised by the young people had been agreed. The number of power points in each bedroom were to be increased, the layout of the living area was agreed, and young people took part in buying new chairs and soft furnishing. Advocacy is directly available to the young people if needed through regular visits of the Who Cares? representative and access to a Children's Rights Officer. Who Cares? now takes a more active role by meeting regularly with the young people.

Young people were also supported to have an input into the policy of the Council, at regular 'Meet the Bosses' events. These enabled young people who are looked after to give feedback and to have a say in planning care services. Most recently, the Council had promised the group to improve housing opportunities for young people, and there had been more young people from foster care coming along. It is a credit to Woodside to have started this event and to continue to support its work.

Young people wrote their own daily case records, and these were the basis of the daily handover to staff coming on shift.

Young people had taken part in the away day for staff. This had been followed up by notices in user friendly and visual layout about the current goals for the service. Young people still routinely helped to select new staff. They had been actively involved in drawing up and revising written information for the service.

There were thus excellent opportunities for young people's involvement in improving the quality of care they received.

Areas for Improvement

The service intended to continue to meet the interests and preferences of the young people where possible. Work was ongoing with staff to ensure that young people were treated as equal partners as much as possible in the provision of care and support.

Grade awarded for this statement

6 - Excellent

Number of Requirements

0

Number of Recommendations

0

Statement 3

We ensure that service user's health and wellbeing needs are met.

Service Strengths

The service had helped to draw up the local Health Board's guidance on medicines in care homes for young people. The records for medicine and its storage were looked at today, and they complied fully with best practice.

A wide range of outside resources was used to ensure the health of the young people. These included a named nurse for looked after young people, consultant psychiatrists, and speech therapists. In several cases the staff had found and taken forward health issues not seen by other services. Increasingly these professionals support staff in their work by providing specialist advice and support.

Internal resources for health included a focus on activity, health awareness and healthy eating. This was helped by maintaining a vegetable garden whose produce was used in cooking. The garden was worked on by several of the young people. The housekeeper helped to promote cooking skills and health awareness. She also provided programs to help young people to budget in a realistic way.

Staff worked hard to find out the goals and preferences of the young people themselves, and to fulfill these. For example, karting, swimming, camping, cadets, dance and ballet were some activities which were regularly followed. This ensured that individual interests and skills were fostered, leading to an active and full life for each young person.

Areas for Improvement

The service intended to continue to monitor and to promote the health of the young people, through reviews and day to day support.

Grade awarded for this statement

6 - Excellent

Number of Requirements

0

Number of Recommendations

0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 6 - Excellent

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths

When the service is recruiting new staff, young people assist in the interviews. They are encouraged to prepare their own questions in advance and this has helped to put across the views of young people in the quality of staffing. Existing staff confirmed the value of young people being involved in their interviews.

There is regular input by young people into meetings of staff, either directly or indirectly.

Examples of this were:

- (i) views of the young people expressed in the house meeting are taken forward at the main staff meeting each week.
- (ii) young people write their own case record each day, which is used as the basis of the daily handover meeting
- (iii) the annual away day for staff training now routinely involve the young people coming along and playing an integral part in the training. Their views on good support staff had been put in visual form on the notice board in the dining room.

The manager has daily contact with staff on duty and with each of the young people. This ensures that young people's views are heard and carried forward at all levels of working of the service to relevant staff.

There was clear evidence that the service valued the voice of young people on staffing matters at all levels, including policy formation, recruitment and day to day practice. The service had an excellent commitment to maintaining and taking this forward as much as possible.

Areas for Improvement

The service was ensuring that all staff gave equal weight to the views of the young people in their work and the the working of the service.

Grade awarded for this statement

6 - Excellent

Number of Requirements

0

Number of Recommendations

0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service Strengths

All staff were qualified to at least SVQ level four with HNC. Additionally, several staff had further qualifications such as in Social work, psychology and community support and development. Registration of staff with the Scottish Social Services Council had been completed.

There was careful and precise attention to daily communication between staff, and this had been further improved recently. The daily handover meeting each day had a specific written agenda and covered the case records written by the young people, the communications book, diary and any needed changes in plans for the day for each young person or staff member. The manager makes a point of being at each handover meeting where possible.

Staff meeting minutes showed a focus on staff development to ensure smooth teamwork and to promote good practice with the young people. Working relationships between certain staff groups had been specifically discussed.

Outside training opportunities were regularly attended, there were talks by staff at seminars, and visits to other services were being arranged to allow staff to observe and to reflect on alternative approaches to practice.

The overall ethos was one of reflective practice where the development of everyone, staff as well as young people was valued and promoted.

Areas for Improvement

The service was finalising its training program for the coming year with the help of the training officer for the Council. Work was being done to introduce the new policy on supervision and appraisal. It was anticipated that this would further develop the professionalism and development of staff practice.

Grade awarded for this statement

6 - Excellent

Number of Requirements

0

Number of Recommendations

0

Other Information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Commission re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

Summary of Grades

Quality of Care and Support - 6 - Excellent	
Statement 1	6 - Excellent
Statement 3	6 - Excellent
Quality of Environment - Not Assessed	
Quality of Staffing - 6 - Excellent	
Statement 1	6 - Excellent
Statement 3	6 - Excellent
Quality of Management and Leadership - Not Assessed	

Inspection and Grading History

Date	Type	Gradings								
5 Dec 2008	Announced	<table> <tr> <td>Care and support</td> <td>6 - Excellent</td> </tr> <tr> <td>Environment</td> <td>6 - Excellent</td> </tr> <tr> <td>Staffing</td> <td>6 - Excellent</td> </tr> <tr> <td>Management and Leadership</td> <td>6 - Excellent</td> </tr> </table>	Care and support	6 - Excellent	Environment	6 - Excellent	Staffing	6 - Excellent	Management and Leadership	6 - Excellent
Care and support	6 - Excellent									
Environment	6 - Excellent									
Staffing	6 - Excellent									
Management and Leadership	6 - Excellent									
15 Sep 2008	Unannounced	<table> <tr> <td>Care and support</td> <td>5 - Very Good</td> </tr> <tr> <td>Environment</td> <td>5 - Very Good</td> </tr> <tr> <td>Staffing</td> <td>5 - Very Good</td> </tr> <tr> <td>Management and Leadership</td> <td>5 - Very Good</td> </tr> </table>	Care and support	5 - Very Good	Environment	5 - Very Good	Staffing	5 - Very Good	Management and Leadership	5 - Very Good
Care and support	5 - Very Good									
Environment	5 - Very Good									
Staffing	5 - Very Good									
Management and Leadership	5 - Very Good									

Terms we use in our report and what they mean

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- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

Enforcement - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

Disclosure Scotland- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

Participation - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

Personal Plan - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

How you can use this report

Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

People who use care services, their relatives and carers

We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.

The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

Reader Information

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Translations and alternative formats

This publication is available in other formats and other languages on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànanan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

هه بايتسد سيم رونا بز رگيد روا رولکش رگيد رپ شرازگ تعاشا هي

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

یوخ تاغلبو تا قیسن تب بلطلا دن ع رفاوتم روشنملا اذه

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Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

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Improving care in Scotland