



**Clackmannanshire
Council**

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Comhairle Siorrachd
Chlach Mhanann

Kilncraigs, Greenside Street, Alloa, FK10 1EB (Tel.01259-450000)

Audit and Scrutiny Committee

Thursday 18 April 2024 at 9.30 am

Venue: Council Chamber, Kilncraigs, Alloa, FK10 1EB



Audit and Scrutiny Committee

The remit of the Audit and Scrutiny Committee is:

Audit & Finance

- a) Receive, review and consider reports on the Council's finance
- b) Receive, review and consider reports on value for money and best value
- c) Consideration and monitoring of the Council's Annual Governance Statement
- d) Consider internal audit reports and results of internal audit investigations
- e) Consider external audit and resultant action plans
- f) Monitor and review actions taken on internal and external audit recommendations
- g) Consider the effectiveness of the Council's risk management procedures and the control environment
- h) Receive and consider reports on countering fraud and corruption.

Scrutiny

- a) Monitor council services, including the Health and Social Care Partnership (HSCP) against agreed outcomes, standards and targets
- b) Monitor the achievement of organisation-wide agreed outcomes, standards and targets
- c) Monitor the achievement of agreed outcomes, standards and targets by the community planning partnership
- d) Monitor Police and Fire performance against Plans approved by the Council
- e) Scrutiny of Council decision-making, with the ability to call in decisions
- f) Initiate or undertake scrutiny reviews
- g) Deal with matters referred by the Council for scrutiny purposes.

Members of the public are welcome to attend our Council and Committee meetings to see how decisions are made.

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10 April 2024

A MEETING of the AUDIT AND SCRUTINY COMMITTEE will be held in COUNCIL CHAMBERS, KILNCRAIGS, ALLOA on THURSDAY 18 APRIL 2024 at 9.30 am.



**Stuart Crickmar
Strategic Director (Partnership and Performance)**

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Audit and Scrutiny Committee – Committee Members (Membership 8 - Quorum 4)

Councillors

Wards

Councillor	Janine Rennie (Chair)	3	Clackmannanshire Central	LABOUR
Councillor	Denis Coyne (Vice Chair)	5	Clackmannanshire East	CONSERVATIVE
Councillor	Phil Fairlie	1	Clackmannanshire West	SNP
Councillor	Martha Benny	2	Clackmannanshire North	CONSERVATIVE
Councillor	William Keogh	2	Clackmannanshire North	LABOUR
Councillor	Kenneth Earle	4	Clackmannanshire South	LABOUR
Councillor	Ellen Forson	4	Clackmannanshire South	SNP
Councillor	Bryan Quinn	4	Clackmannanshire South	SCOTTISH GREEN



**MINUTES OF MEETING of the AUDIT AND SCRUTINY COMMITTEE held via MS TEAMS,
On THURSDAY 8 FEBRUARY 2024 at 9.30 AM.**

PRESENT

Councillor Denis Coyne (Vice Chair) (Chair)
Councillor Martha Benny
Councillor Kenneth Earle
Councillor Phil Fairlie
Councillor Ellen Forson
Councillor William Keogh
Councillor Kathleen Martin (S)
Councillor Bryan Quinn

IN ATTENDANCE

Stuart Crickmar, Strategic Director (Partnership & Performance)
Lorraine Sanda, Strategic Director (People)
Chris Alliston, Senior Manager, HR & Workforce Development (Partnership & Performance)
Lindsay Sim, Chief Finance Officer (Partnership & Performance)
Colin Bruce, Chief Education Officer (People)
Elizabeth Hutcheon, Management Accountancy Team Leader (Partnership & Performance)
Lee Robertson, Senior Manager, Legal and Governance (Partnership & Performance) (Clerk to the Committee)
Pete Leonard, Strategic Director (Place)
Sharon Robertson, Chief Social Work Officer (People)
Adrienne Aitken, Education Senior Manager (People)
Catriona Scott, Senior Manager (People)
Robbie Stewart, Senior Manager, Sport and Leisure (People)
Margaret Lewis, Senior Manager, Care and Protection (People)
Scott McDonald, Senior Manager, Justice Services (People)
Johan Roddie, Senior Manager, Permanence (People)
Gillian Scott, Senior Manager, Early Intervention (People)
Alison Mackie, Team Leader, Sport, Leisure and Libraries (People)
Derek Barr, Procurement Manager (Performance & Partnership)
Alastair Hair, Team Leader, Workforce Development and Learning (Partnership & Performance)
Sarah Langsford, Senior HR Business Partner (Partnership & Performance)
Murray Sharp, Programme Manager Family Wellbeing/Senior Manager Housing
Isabel Wright, Internal Audit Manager, Falkirk Council
Sarah McPhee, Senior Internal Auditor, Falkirk Council
Ewan Murray, Chief Finance Officer, Clackmannanshire & Stirling Health and Social Care Partnership
Sandy Denholm, External Auditor, Deloitte
Judi Richardson, Performance & Information Adviser (Partnership & Performance)
Melanie Moore, Committee Services, Legal and Governance (Partnership & Performance)
Gillian White, Committee Services, Legal and Governance (Partnership & Performance)

AS(24)01 APOLOGIES

Apologies for absence were received from the Chair, Councillor Janine Rennie. Councillor Coyne will chair the meeting in the absence of her Chair.

AS(24)02 DECLARATIONS OF INTEREST

None.

**AS(24)03 MINUTE OF AUDIT AND SCRUTINY COMMITTEE HELD ON 14
DECEMBER 2023**

The minutes of the meeting of the Audit and Scrutiny Committee held on Thursday 14 December 2023 were submitted for approval.

Decision

The minutes of the meeting of the Audit and Scrutiny Committee held on Thursday 14 December 2023 were agreed as a correct record by the Committee and signed off by the Vice Chair.

AS(24)04 PEOPLE BUSINESS PLAN – INTERIM UPDATE DECEMBER 2023

The report, submitted by the Chief Education Officer, provided an interim update on the progress across the 2023-2024 People Business Plan.

Motion

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

Moved by Councillor Denis Coyne. Seconded by Councillor Ellen Forson.

Decision

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

**AS(24)05 COMMUNITY LEARNING AND DEVELOPMENT PARTNERSHIP
PROGRESS REPORT**

The report, submitted by the Senior Manger, People, presented the Learning and Development Partnership Progress Report.

Motion

That the Committee agrees the recommendation as set out in the report.

Moved by Councillor Denis Coyne. Seconded by Councillor Phil Fairlie.

Decision

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

AS(24)06 ANNUAL REPORT OF THE CHIEF SOCIAL WORK OFFICER 2022-2023

The report, submitted by the Chief Social Work Officer, presented the Chief Social Work Officer (CSWO) Annual Report reflecting the reporting period 1 April 2022 to 31 March 2023 (attached as Appendix 1). The report provided an overview of professional activity for social work and social care within Clackmannanshire through the delivery of statutory functions and duties held by the Chief Social Work Officer.

Motion

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

Moved by Councillor Denis Coyne. Seconded by Councillor Phil Fairlie.

Decision

The Committee agreed to:

1. Challenged and commented on the report, the Committee agreed to note the contents of the report.
2. Note that the report will be submitted to the Officer of the Child Social Work Adviser (OCSWA) to the Scottish Government; and
3. Acknowledge the continued dedication and commitment of social work and social care staff in the delivery of services to Clackmannanshire citizens.

AS(24)07 ANNUAL REPORT OF THE CHIEF SOCIAL WORK OFFICER 2022-2023

The report, submitted by the Senior Manager, Permanence, provided Committee with an Interim update on the progress across the 2023-2026 Promise Plan. Integral to keeping The Promise is the priority area of Whole Family Support, therefore, this report also provides an update on the progress being made utilising the funding from the Whole Family Wellbeing Fund (WFWF) to work to improve the range of Family Support available across Clackmannanshire.

Motion

That the Committee agrees the recommendation as set out in the report.

Moved by Councillor Denis Coyne. Seconded by Councillor Ellen Forson.

Decision

Having challenged and commented on the report, the Committee agreed to note the contents of the report and attached appendices.

AS(24)08 MAXIMISING ATTENDANCE AND WELLBEING

The report, submitted by the Senior Manager, HR and Workforce Development, provided Committee with an update on the maximising attendance action plan presented to the Partnership and Performance Committee in 2019, and an overview of absence levels across the Council for 2022/23.

Motion

That the Committee agrees the recommendation as set out in the report.

Moved by Councillor Denis Coyne. Seconded by Councillor Phil Fairlie.

Decision

Having challenged and commented on the report, the Committee agreed to note the report and the accompanying appendices.

AS(24)09 EXCEPTIONS FROM THE APPLICATION OF CONTRACT STANDING ORDERS

It is a requirement of Contract Standing Orders that exceptions should be reported to the next available Audit and Scrutiny Committee. The purpose of the paper submitted by the Strategic Director, Partnership and Performance is to provide detail on Exceptions to Contract Standing Orders submitted in the previous quarter.

Motion

That the Committee agrees the recommendation as set out in the report.

Moved by Councillor Denis Coyne. Seconded by Martha Benny.

Decision

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

AS(24)10 CORPORATE RISK REGISTER

The report, submitted by the Strategic Director, Partnership and Performance, provided the Committee with the 2023/24 quarter 3 update on Clackmannanshire Council's Risk Register (Appendix A).

Motion

That Committee agrees the recommendation set out in the report.

Moved by Councillor Denis Coyne. Seconded by Councillor Ellen Forson.

Decision

Having commented and challenged the report, the Committee agreed to note the report as appropriate.

EXEMPT ITEMS

The Audit and Scrutiny Committee resolved in terms of Section 50(a) of the Local Government (Scotland) Act, 1973, that the press and public be excluded from the meeting during consideration of the following item of business on the grounds that they involved the likely disclosure of exempt information as detailed in Schedule 7A, Part 1, Paragraph 12

The Vice Chair asked for a 5 minute break to provide an opportunity for external parties attending virtually to leave the meeting. The meeting resumed at 1110 hours with 8 members present.

AS(24)11 INTERNAL AUDIT PROGRESS REPORT

The report, submitted by the Internal Audit Manager updated Committee on the progress with completion of the 2023/24 Internal Audit Plan.

Motion

To agree the recommendation set out in the report.

Moved by Councillor Denis Coyne. Seconded by Councillor Ellen Forson.

Decision

The Committee agreed to note the progress being made with completion of the 2023/24 Internal Audit Plan.

Ends 1130hrs



**MINUTES OF MEETING of the AUDIT AND SCRUTINY COMMITTEE held in Council
Chambers, Kilncraigs, Alloa On THURSDAY 7 MARCH 2024 at 9.30 AM.**

PRESENT

Councillor Janine Rennie (Chair)
Councillor Denis Coyne (Vice Chair)
Councillor Martha Benny
Councillor Phil Fairlie
Councillor Ellen Forson
Councillor William Keogh
Councillor Bryan Quinn

IN ATTENDANCE

Stuart Crickmar, Strategic Director (Partnership & Performance)
Lorraine Sanda, Strategic Director (People)
Chris Alliston, Senior Manager, HR & Workforce Development (Partnership & Performance)
Lee Robertson, Senior Manager, Legal and Governance (Partnership & Performance) (Clerk
to the Committee)
Pete Leonard, Strategic Director (Place)
Emma Fyvie, Senior Manager, Development (Place)
Alison Morrison, Senior Manager, Property (Place)
Andrew Buchanan, Housing Operations Manager (Place)
Gavin Wright, Team Leader, Planned Works & Compliance (Place)
Jason Ross, Auditor (Partnership & Performance)
Ali Davidson, Team Leader, Economic Development (Place)
Dawn Brisbane, Team Leader Environmental Health (Place)
Lesley Baillie, Strategy & Performance Adviser
Melanie Moore, Committee Services, Legal and Governance (Partnership & Performance)
Gillian White, Committee Services, Legal and Governance (Partnership & Performance)

ON TEAMS

Sharon Robertson, Chief Social Work Officer (People)
Derek Barr, Procurement Manager (Performance & Partnership)
Isabel Wright, Internal Audit Manager, Falkirk Council
Sarah McPhee, Senior Internal Auditor, Falkirk Council
David Williams, Interim Chief Officer, Clackmannanshire & Stirling Health and Social Care
Partnership
Ewan Murray, Chief Finance Officer, Clackmannanshire & Stirling Health and Social Care
Partnership
Iain McDonald, Senior Manager, Environment (Place)

AS(24)12 APOLOGIES

Apologies for absence were received from Councillor Kenneth Earle.

AS(24)13 DECLARATIONS OF INTEREST

None.

AS(24)14 EXCEPTIONS FROM THE APPLICATION OF CONTRACT STANDING ORDERS

It is a requirement of Contract Standing Orders that exceptions should be reported to the next available Audit and Scrutiny Committee. The purpose of the paper submitted by the Strategic Director, Partnership and Performance is to provide detail on Exceptions to Contract Standing Orders submitted in the previous quarter.

Motion

That the Committee agrees the recommendation as set out in the report.

Moved by Councillor Janine Rennie. Seconded by Ellen Forson.

Decision

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

AS(24)15 INTERNAL AUDIT PROGRESS REPORT

The report, submitted by the Internal Audit Manager provided an update on progress with completion of the 2023/24 Internal Audit Plan.

Motion

To agree the recommendation set out in the report.

Moved by Councillor Janine Rennie. Seconded by Councillor Ellen Forson.

Decision

The Committee agreed to note the progress being made with completion of the 2023/24 Internal Audit Plan.

AS(24)16 FINAL REVIEW OF 2021/23 PLACE BUSINESS PLAN

Council approved the current business plan for Place on 30 November 2023. The report, submitted by the Strategic Director, Place, provided the Committee with a final review of the previous Place Business Plan which covered the period 2021-23 and which was agreed in September 2021.

Pete Leonard, Strategic Director, Place advised Committee that on item PLC 213 101 on page 33 that the Final report including Action Plan is scheduled to go to Council on 21 March 2024, but it will now take a few months more before going to Council. Councillor Coyne asked about information on page 36 regarding PSN compliant before 31 March 2023 and was advised that it should be 2024 and not 2023.

Motion

That the Committee agrees the recommendation as set out in the report.

Moved by Councillor Janine Rennie. Seconded by Councillor Denis Coyne.

Decision

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

AS(24)17 COMMUNITY EMPOWERMENT ACT ANNUAL REPORT (COMMUNITY ASSET TRANSFER AND PARTICIPATION REQUESTS)

The Council is required under the terms of the Community Empowerment Act (Scotland) 2015 to produce an annual report on Community Asset Transfer Requests and Participation Requests. The report, submitted by the Strategic Director, Place, detailed the activities for the Council for the reporting year 1 April 2022 – 31 March 2023.

Motion

That the Committee agrees the recommendation as set out in the report.

Moved by Councillor Janine Rennie. Seconded by Councillor Ellen Forson.

Decision

Having challenged and commented on the report, the Committee agreed to note the contents of the report and accompanying appendices.

AS(24)18 ENVIRONMENTAL HEALTH OFFICIAL FOOD CONTROL PROGRESS REPORT

The report, submitted by the Strategic Director, Place, presented an overview of the progress the Council's Official Food Control Service Plan, April 2023 to March 2024 (appendix 1), submitted to Food Standards Scotland for review in June 2023.

Motion

That the Committee agrees the recommendation as set out in the report.

Moved by Councillor Janine Rennie. Seconded by Councillor Denis Coyne.

Decision

Having challenged the performance of the Council's food law regulation service and commented on the report, the Committee agreed to note the report.

AS(24)19 LOCAL EMPLOYABILITY PERFORMAMANCE

The report, submitted by the Strategic Director, Place, presented to Committee an overview of the work of the Economic Development team within the Council in terms of in-house delivery, commissioning and performance of local employability support, and the ongoing role of the Local Employability partnership which is chaired by Clackmannanshire Council (Economic Development team) for the year 2023/24.

Motion

That the Committee agrees the recommendation as set out in the report.

Moved by Councillor Janine Rennie. Seconded by Ellen Forson.

Decision

Having commented on the performance of the Council's Economic Development team in the delivery and performance of local employability services, the Committee agreed to note the report.

Ends 1120hrs

Report to: Audit and Scrutiny Committee

Date of Meeting: 18th April 2024

Subject: Police Performance Report for Clackmannanshire April 2023 to September 2023

Report by: Local Police Commander

1.0 Purpose

- 1.1. The purpose of this report is to provide the committee with information on the performance of Police Scotland in the Clackmannanshire local authority area for the period 1st April 2023 to 30th September 2023.
- 1.2. The report is aligned with the headings of the [Clackmannanshire Local Policing Plan 2020-2023](#) priorities (i.e. **Responsive to the concerns of our communities, Enhancing our collective resilience to emerging threats, Protecting people most at risk from harm and Promoting confidence through our actions Road Safety and Road Crime**).
- 1.3. The Clackmannanshire Police Performance Report (Appendix 1) contains the current information on performance against selected performance indicators. This report provides complementary information to that in the table to present a summary of performance of policing in Clackmannanshire Council area and also identifies emerging trends, threats and issues.
- 1.4. Data for this report is sourced from Police Databases that are subject to changes as enquiries progress. They can be best regarded as Point in Time figures. 3 year average figures are not available for all measures. The information in the table should be regarded as provisional.

2.0 Recommendations

- 2.1. That Committee notes the report, commenting and challenging as appropriate.

3.0 Considerations

- 3.1. Attention of members is drawn to the Management Information now published via Police Scotland Website which can be found at the following location - <https://www.scotland.police.uk/about-us/what-we-do/how-we-are-performing/>
- 3.2. Some of the risks and threats which continue to present in Clackmannanshire are:

- Domestic Abuse
- Crimes of Violence
- Possession and Supply of Controlled Drugs
- Anti-Social Behaviour
- Crimes of Dishonesty

- 3.3. By their nature, these remain longer-term threats and Forth Valley Division continues to focus on intervention and enforcement to address them.
- 3.4. There were no significant new operational issues emerging during the previous reporting period.
- 3.5. There were no significant new operational issues emerging during the current reporting period.

4.0 Sustainability Implications

- 4.1. None.

5.0 Resource Implications

5.1. *Financial Details*

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

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

5.4. *Staffing*

6.0 Exempt Reports

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

7.0 Declarations

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

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

Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all

Our families; children and young people will have the best possible start in life

Women and girls will be confident and aspirational, and achieve their full potential

Our communities will be resilient and empowered so that they can thrive and flourish

(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".

Police Performance Report April – September 2023

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
CI Kat Thompson	Local Area Commander, FV	101
PC Laura McNab	Command Support	

Approved by

NAME	DESIGNATION	
Barry Blair	Chief Superintendent	
	Forth Valley Division	

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Clackmannanshire Council Audit and Scrutiny Committee



POLICE PERFORMANCE REPORT

APRIL – SEPTEMBER 2023

BARRY BLAIR

CHIEF SUPERINTENDENT

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Contents

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Local Policing Priority Updates:

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Promoting confidence through our actions	pages 11-13
Enhancing our collective resilience to emerging threats	pages 14-15
Road Safety and Road Crime	pages 16-19
Performance Figures	pages 20-14

BACKGROUND TO THIS REPORT

From April 2013, the Police and Fire Reform (Scotland) Act 2012 has required Police Scotland to produce and publish a Local Policing Plan (LPP) for each local authority area. The LPP clearly sets out the policing priorities for Clackmannanshire.

Performance in relation to the identified policing priorities is monitored on an ongoing basis. Six monthly reports are produced to allow scrutiny by Clackmannanshire Council Audit and Scrutiny Committee. The quantitative information in this report covers the period from 1 April 2023 to 30 September 2023. The supporting qualitative information in this report highlights some of the notable activities undertaken by local and national officers in support our local policing priorities during the period from 1 April 2023 to 30 September 2023, as well as any notable developments at a national level that have an impact on the delivery of local policing services.

To support effective scrutiny and determine whether our preventative approach is having a lasting positive impact, members of the Audit and Scrutiny Committee will consider information linked to the priorities outlined within this plan which include:

- Responsive to the concerns of our communities
- Protecting people most at risk from harm
- Promoting confidence through our actions
- Enhancing our collective resilience to emerging threats
- Road Safety and Road Crime

This report will refer to crime groupings. Groups 1-5 refer to an amalgamation of five crime groups. They are Group 1, consisting of violent crime; Group 2, covering sexual offences; Group 3, covers a wide range of crimes of dishonesty, Group 4, includes vandalism, fire-raising, and malicious mischief; and Group 5, includes proactive crimes. All statistics are provisional and should be treated as management information.

RESPONSIVE TO THE CONCERNS OF OUR COMMUNITIES

Drug Warrants

In April 2023, the Community Policing Team (CPT) organised an intelligence led plain clothes operation in response to complaints about drug dealing in Tullibody. On one of the deployments officers detained two men and their vehicles under Section 23 Misuse of Drugs Act 1971 for the purposes of a search and seized a quantity of ecstasy tablets (£390), 33 grams of crystal white powder (crack cocaine), a quantity of tablets and £830 in cash. Two 22 year old men were arrested on suspicion of being concerned in the sale and supply of controlled drugs, interviewed and released pending a laboratory examination of the drugs. A report was submitted to the Procurator Fiscal.

In May 2023, the CPT received intelligence about a potential cannabis cultivation within an address in Sauchie, resulting in 14 cannabis plants (£2800) being seized and a 31 year old man being reported to the Procurator Fiscal.

In July 2023, the CPT gathered intelligence about the sale and supply of heroin from a premises in Alloa. The CPT along with colleagues from Pro-active CID and Response effected entry to the premises. Officers seized 45 grams of heroin (£2500), 18 wraps of cocaine (£400), 21 grams of cannabis (£240), a quantity of tablets and £8,800 in cash. A 32 year old man and a 52 year old woman were arrested and charged with being concerned in the supply of controlled drugs and released on an undertaking to appear at Alloa Sheriff Court at a later date.

During the reporting period there were 16 cases recorded for concerned in the sale and supply of controlled drugs (including possession with intent to supply), which is equal to the same reporting period in 2022. There were 3 cases recorded for producing, manufacturing, or cultivating controlled drugs, which is an increase of 2 cases from the same reporting period in 2022.

A total of 15 Misuse of Drugs Act 1971 search warrants were executed, with a total value of drugs seized being £217,545.00 (included ecstasy, heroin, cocaine, cannabis, benzidine and pregabalin) and £11,682.70 cash seized.

Our intelligence led approach to targeting and disrupting drug dealers and removing drugs from our local communities demonstrates we act on information and intelligence received from residents to reduce harm to individuals and our communities, making Clackmannanshire a safer place to work, live and visit.

Crime Series

In September 2023, several reports were received about a male targeting insecure houses and cars in Alloa. The CPT and Response Officers identified additional victims through house-to-house enquiries and social media appeals. Following

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investigation, a 43 year old man was arrested and charged for 10 crimes. The male has since been found guilty of all crimes and sentenced to 18 months in prison.

This coordinated investigation created the opportunity to increase public confidence in policing and reduce the fear of crime through effective policing and reassurance.

Tackling Anti-Social Behaviour

In September 2023, complaints were received from residents and businesses about Anti-Social Behaviour (ASB) in Alloa town centre, which included small fires being lit and one resident being threatened and plastics bottles being thrown at their windows.

In response, the CPT deployed in plain clothes and uniform resulting in two teenagers aged 14 years old and 15 years old being apprehended and charged with threatening and abusive behaviour (Section 38 Criminal Justice Licensing (Scotland) Act 2010) in the presence of their parents. The resident that was targeted was visited by the CPT, provided security and safety advice and referrals were submitted to partners to provide ongoing support.

The CPT continue to respond to complaints of ASB, working alongside partners and community groups to find long term solutions to prevent and deter disorder for the benefit of local communities. The CPT are actively involved in youth clubs and support community groups in each village, which have been created to support families in need and to deter and divert youths away from disorder.

By securing funding to assist local initiatives and taking an active role in these groups, the CPT assist by raising awareness on safer choices, impact of crime and provide suitable, worthwhile activities and learning for our young people.

Our daily patrol matrix and our weekend policing plans have been created to direct officers to areas where ASB occurs, building the opportunity for extra patrols in these areas and extra engagement with young people to prevent disorder.

During this reporting period the number of complaints regarding disorder have reduced from 1245 to 1155 incidents, a reduction of 7.2% compared to the same reporting period in 2022.

On 29 May 2023, in collaboration with our partners, Clackmannanshire's School Based Officers (SBOs) assisted the roll out of Health Week at Alva Academy.

The SBOs managed a stall, creating the opportunity for further engagement with pupils and delivered important safety inputs in relation to the areas covered under Health Week. By working closely with our partners, the event reached out to several young people in our local area.



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The SBOs also provided inputs at Junior Health week, which included the dangers of alcohol, smoking, drugs and vaping, all directly linked with youth related open space disorder.

In addition, the SBOs are involved in Personal and Social Education inputs at the secondary schools and provide additional safety information about drugs and alcohol.

Our SBOs delivered inputs on the impact of ASB across our three secondary schools, particularly the months leading up to the school holidays in Easter and Summer, by holding pupil engagement sessions, covering one school period a week. The aim of the inputs was to provide awareness on the impact disorder has on our communities, not only on the infrastructure, but more importantly, on the quality of lives for our residents. The SBOs further highlighted the impact the offending has on those responsible, the repercussions and the longer-term impact of offending on life choices, career progression and community acceptance.

SBOs also work closely with education teams at our three secondary schools, to deliver safety inputs at assemblies. The inputs during this reporting period related to internet safety, general online safety plus additional inputs provided to parents to ensure they are monitoring their child's internet usage, what to look out for and how to keep them safe whilst online.

The One Punch Campaign was also delivered to raise awareness of the impacts of violent behaviour, how this impacts the community and how it can go wrong very quickly.

Drug and alcohol inputs were also delivered weekly to our secondary school pupils, and after securing funding the SBOs were able to purchase £3000 worth of education aids to raise awareness and gain greater participation and interaction with pupils, highlighting emerging trends, particularly relating to vaping and psychoactive substances. These inputs are delivered to all secondary school year groups.

PROTECTING PEOPLE MOST AT RISK FROM HARM

Support for Missing Person Investigations

On 29 May 2023, a new scheme was introduced by Police Scotland known as the Philomena Protocol aimed at ensuring officers can trace children and young people reported missing in a timelier fashion. The protocol was first introduced by Durham Constabulary in 2019.

The protocol is primarily targeted towards children and young people living in care facilities and with foster carers. It encourages staff, families, and friends to compile a standardised form of useful information which could be used in the event of a young person going missing.

The CPT have a good working relationship with the staff at the Children’s care home in Clackmannanshire, who have adopted this protocol. This greatly assists police if or when a young person is reported missing.



The Philomena Protocol was developed following the success and learning of the Herbert Protocol; an initiative to support adults who are at risk of going missing. The Herbert Protocol is a national scheme that encourages carers, family, and friends to collate and provide useful information that can be used in the event of a vulnerable person living with dementia going missing to allow police to gain access to essential

information promptly.

Carers and/or relatives and friends can complete a form in advance which can be sent or handed to police in the event of a loved one going missing to reduce the time needed to gather this information. Remembering all sorts of information at times like this can be very distressing for those involved and being asked a range of questions by a police officer at this time can add to the stress and upset caused. The information contained within these forms, which can be downloaded from the Police Scotland website, aims to relieve some of that stress.

Over the reporting period there were a total of 105 missing person reports for Clackmannanshire and no incidences of the Philomena protocol being implemented.

Victim Survivor Feedback

An online form was recently launched on the Police Scotland website to gain anonymous feedback from people who have reported crimes of domestic abuse, rape, or other sexual crime. Local policing divisions will receive relevant feedback forms for review which provides an opportunity to highlight and share best practice as well as identifying potential areas for improvement.

Recovery Olympics – Community Engagement

On 30 June 2023, the Annual National Recovery Olympics event took place at Forthbank Stadium in Stirling, of which our CPT attended and submitted a team to take part in this event.



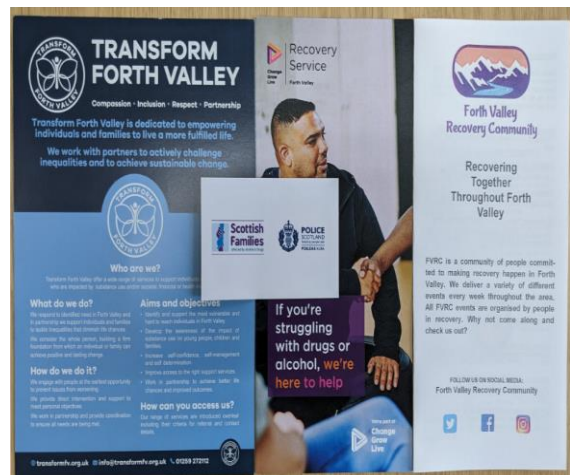
This event is run by the local drug addiction team and recovery initiatives and is aimed at getting everyone together, including those recovering from drug and substance abuse, along with those involved in supporting the schemes.

Over the last year and beyond, the CPT are heavily involved in the local recovery cafés and initiatives, supporting the work done to aid the recovery of substance misuse in our area, providing support and opportunities to increase the quality of life for those affected by addiction.

This event and the team submitted by the CPT ran very well, due to the ongoing engagement, our attendance was very welcome, and this has broken down a lot of barriers between law enforcement and the recovery community.

Drug Related Deaths

In Forth Valley, we created a support pack for members of the public who are witness to a suspected drugs related death and who are themselves a drug user. The pack contains information on local support services including Forth Valley Recovery Community, Change Grow Live and Transform Forth Valley.



It is hoped this will allow people affected by drugs to seek support, particularly at a time where a friend or family member has passed away due to drugs.



The CPT work closely with Transform Forth Valley and have held several joint initiatives over the last year. Between 31 May and 1 June 2023, Constable Grant Smith was joined at Sauchie Community Hall by our partners at Transform, providing advice and support about drug use to drug users, their family and friends.

Naloxone kits were provided to individuals to help to try and avoid fatal drug overdoses. Constable Grant Smith was also able

to provide advice about crime, community issues and drugs misuse.

Harm reduction

Over the reporting period Safer Communities ran a multi-agency drug support service awareness event in Clackmannanshire town centre which is a prevalent area for drug users to congregate. Safer Communities officers attended in their roles as Drug Related Death Coordinators and Crime Prevention. Partners including support workers from Transform Forth Valley and Change Grow Live also attended.

Information on what help exists locally for drug users and families was available to the public with the Crime Prevention officer giving advice on the Fraud Free 23 campaign.

Sextortion

We continue to receive reports of ‘Sextortion’ scams within the division and locally in Clackmannanshire. Sextortion is where a suspect contacts a victim online, engage in sexual conversation and encourages the victim to send a sexual image or video and demand money or the image or video will be shared with the victim’s family and friends.

In response Police Scotland and Forth Valley Division commenced an awareness campaign to highlight this scam, on social media, distributing posters and leaflets and our School Based Officers (SBOs) provide inputs on internet safety at our 3 secondary schools.



The crime of extortion/attempted extortion (sextortion) is a group 1 crime. The total group 1 crimes for this reporting period have increased from 54 to 58 compared to the same reporting period in 2022. Of note crimes of extortion account for the increase. There have been no crimes of murder, attempted murder, culpable homicide and there have been decreases in serious assault by -5.3% and robbery by -60%.

Public Protection Related Demand

Between 1 April 2023 and 30 September 2023, the Forth Valley Concern Hub processed 1245 concern reports relating to incidents in the Clackmannanshire local authority. These reports cover a range of circumstances including domestic abuse, adult concerns, child protection, hate concerns and youth offending. Reports are commonly shared with our statutory partners in social work, education, health, Scottish Children's Reporter Administration as well as support services such as Women's Aid, Transform and Barnardo's, where appropriate. During this period, we assessed information in respect of 1245 unique incidents and shared information with partners in relation to 830 of these incidents to facilitate discussion and support the identification of the most appropriate response.

An Initial Referral Discussion (IRD) is held between statutory partners in response to child or adult protection referrals to agree a plan for the investigation. These meetings ensure relevant information is shared and risk assessed to determine what course of action should be taken either by a single agency, through a joint investigation or whether a referral to a case conference is required. During the reporting period 99 IRDs took place in relation to vulnerable adults and children in Clackmannanshire.

A child protection case conference is held when partners are concerned that a child or young person is experiencing or at risk of experiencing significant harm and a plan around the care and wellbeing of the child requires to be developed. As an outcome of such meetings, children can be added to or removed from the child protection register.

205 such conferences were held in respect of children in Clackmannanshire during this reporting period.

Adult Support and Protection (ASP) is the overall term that Social Work use in relation to the duties, responsibilities and actions undertaken to ensure that adults who may be more at risk of harm are kept safe. Different types of multi-agency meeting types exist for ASP, including but not limited to case conferences, core groups, professionals' meetings, escalating concern reviews. Discussions consider risks that the vulnerable adult is exposed to and how best they can be protected or enabled to make informed decisions concerning these risks. 35 meetings of this kind were requested for adults in Clackmannanshire during the reporting period.

Early and Effective Intervention

Early and Effective Intervention (EEI) is available to deal with offences of a non-serious nature which are committed by young people under the age of 18 who have reached the age of criminal responsibility (12 years). This route offers a means to divert young people from the standard justice route which would normally involve a referral to the Scottish Children's Reporter Administration (SCRA). The EEI process is a multi-agency approach which incorporates the values and principles of Getting it Right for Every Child (GIRFEC). During this period there were approximately 157 incidents reported to police which resulted in youth offenders being charged. Of these, 28 young people were discussed at multi-agency meetings by partners within

the forum. There were a further 15 instances of persons being referred to other agencies through the EEI process, where there were existing statutory or 3rd sector support in place for the child or young person. 44 received warnings from the police at an early stage. The remainder were reported to SCRA or the Procurator Fiscal either directly by the reporting officers prior to EEI Assessment being carried out or after having been assessed as not fitting the remit for EEI.

Disclosure Scheme for Domestic Abuse Scotland

The Disclosure Scheme for Domestic Abuse Scotland (DSDAS) gives people the right to ask about the background of their partner and allows concerned relatives and friends to ask if their loved one's partner has been abusive in the past. This scheme also gives Police Scotland the power to tell people they may be at risk of domestic abuse by their partner, even if this information has not been asked for. For Clackmannanshire, we received 25 applications during the reporting period and made 15 disclosures to protect vulnerable victims from Domestic Abuse within our communities.



STRIVE

In September 2023, a 19 year old female was referred to STRIVE by Police after she had been involved in several reports of anti-social behaviour at her address within a short period of time. The officers who attended had concerns the female was not managing independent living within her tenancy and may require further support.

Upon screening the information and history of the female between the services, it was established she had been a looked after child. When she turned 18, she moved out of her foster carers address and presented as homeless. She had been given her own tenancy but was ill equipped with the required life skills, struggling with the day to day running of her home and at risk of becoming involved in persistent ASB. Social Work confirmed she had previously refused to engage with the aftercare social work team or housing support.

As a result of the referral and discussion, money advice and housing representatives from STRIVE carried out an unplanned visit to the female. They found the property was sparsely furnished with no carpets, curtains, or basic cooking utensils. This was clearly a contributing factor in her ability/confidence in trying to prevent people attending at the address and becoming involved in ASB. She was supported through the Scottish Welfare Fund to allow her to properly furnish her home and afford her privacy, giving her more pride in her home and reducing ASB at her address.

It was also discovered she was struggling to budget and was in energy debt with the risk of her utilities being disconnected. This was further exacerbated as she did not have the knowledge or confidence to deal with this and had become complacent.

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STRIVE were able to refer the female to the money advice team for longer term assistance in tackling her energy debt, becoming more financially stable moving forward by ensuring she was accessing benefits that she was entitled to.

A further referral was made to Clackmannanshire Work, who support young people to access further studies or employment. The female was keen to engage with this as she was hopeful to gain meaningful employment and less dependent on benefits.

PROMOTING CONFIDENCE THROUGH OUR ACTIONS

Community Engagement



On 29 July 2023, community Constables Leigh Allen and Barry Ritchie attended the Hawkhill Community Fun Day and engaged with the local community.

This was a great community engagement day and created the opportunity for police to interact with children, young people and families in a positive way.

Alloa Fire Station Open Day

On 19 August 2023, Alloa Fire Station held their family community open day. This event was attended by all emergency services, along with the Community Policing Team from Alloa.

The CPT took the opportunity to engage with the community, provide some valuable safety advice and break down barriers, engaging with families and getting the important safety message across.



Clackmannan's Community officer, Constable Barry Ritchie was on patrol in his community when he was approached by the grandparents of a young girl, who loves the police and wished to be a police officer when she is older. The girl and her family regularly see Constable Ritchie on patrol in Clackmannan, whether he is in a police van, on foot or on his police bicycle and he always has time to stop and speak with them.

The girl had her 5th Birthday in September, and the family asked Constable Ritchie if he could visit her on her birthday, as it would make her year. Knowing the impact, he could have and the real difference for the girl's birthday, Constable Ritchie, Miller, and Mason stopped by for a visit on her

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birthday to say hello and present her some Police Scotland gifts, much to her delight.

Hopefully, this has inspired the girl to take up the role of a police constable in the future.

Police Scotland Youth Volunteers (PSYV)



Constable Tracy Diamond is the PSYV Co-ordinator and Clackmannanshire has an active Alloa PSYV group who have participated in several local community events.

Across the reporting period Alloa PSYV contributed to their local communities in a variety of ways, volunteering at the Tullibody Delph Pond clean up and the Race for Life providing some great experiences for the young people.

Alloa PSYV along with Falkirk PSYV visited the RNLI in South Queensferry where they all received some water safety advice and learned about RNLI work.

Our Alloa PSYV along with Forth Valley Divisions Safer Communities team attended the learning disability sport games, held over two days at Stirling University. The Forth Valley Disability Sport group participated and included athletes from Clackmannanshire and the PSYV where able to support athletes throughout the event.

Alloa PSYV took part in the Kilt Walk (14.9 miles) after choosing to fund raise for local charity 'Connect' which provides local young people who experience social isolation with a befriending service. They raised £2000 for the charity.

Furthermore, Alloa PSYV have engaged with the public, providing safety advice and information when supporting local communities at Dino Day Alloa and Alloa Saints Youth football tournament.

Safer Communities Department - Equality, Diversity and Inclusion

Ramadan, which took place throughout April is one of the most sacred times for the Muslim faith. This particular year saw a raid at Al – Aqsa Mosque in Jerusalem during prayer time on 4 April 2023 which, as expected, had an impact at our local Mosques with concern around their own personal safety. Throughout Ramadan police ensured support and regular in person visits to all Forth Valley Mosques (including Alloa), providing reassurance and safety for members.

Safer Communities attended a Dementia networking event which saw partners and third party organisations from across the Forth Valley area attend and receive some

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particularly insightful information regarding the daily struggles and safety concerns for those living with Dementia.

The Forth Valley Safer Communities Team were actively involved in LGBT pride month; Internal awareness and information was provided to all Forth Valley police officers, with information stands at police offices, including Kilncraigs, Alloa.

The Safer Communities Team also attended and supported a Forth Valley Pride in the Community event during which LGBT Youth Scotland showcased a viewing of the 5 minute film 'Past, Present and Proud' made with young people from Forth Valley, where we were able to learn about and contribute to LGBT Youth Scotland's new social history project (Un)seen, (Un)heard, and help with further planning towards a future Forth Valley Pride. The team also took part in the Rainbow Rounders event, held this year in Forth Valley showing visible support to our LGBT community, with business's and community members attending from throughout the Forth Valley area, including Clackmannanshire.

The Safer Communities Team attended and supported the Awakening Music Festival at Falkirk Stadium. The event which was held for persons living with Disabilities, was attended predominantly by disability communities and groups from the Forth Valley area. Many Clackmannanshire community members enjoyed engagement with the team.

The team also provided an input covering internet safety, hate crime, keeping safe and a number of other relevant topics to our Forth Valley Dates and Mates social group which is attended by persons living with learning difficulties/disabilities. The group is attended by Clackmannanshire residents amongst residents from other areas within Forth Valley.

Your Police Survey

Understanding the views and priorities of Scotland's diverse communities is fundamental to how Police Scotland responds to the needs of the public. Public engagement activities help the service improve how it delivers policing services in local communities, ensuring they are accessible and inclusive for everyone.

The Your Police 2023-24 survey has been designed to listen and better understand the views and priorities of communities by giving them the opportunity to share their thoughts about policing and safety in their local area. The survey covers various themes, such as:

- Feeling of safety in local area
- Locations where people feel less safe
- Confidence in policing
- Respect for police
- Police performance and attitudes
- Concern about crime
- Feedback on contacting the police

- Suggestions for improvement of the police service.

The survey can be accessed at the following link: <https://bit.ly/3mZGF6L> or by scanning the QR code below:

Accessible formats of the survey are available. An easy-read and British Sign Language version of the survey is available on the survey overview page. The survey takes approximately 10 minutes to complete and all individual responses to the survey are anonymous.



ENHANCING OUR COLLECTIVE RESILIENCE TO EMERGING THREATS

Disruption to Serious and Organised Crime

In July 2023, intelligence was received about a potential cannabis cultivation being grown within a residential property in Alloa. The CPT developed the intelligence, and a drugs search warrant was executed resulting in a large-scale cannabis cultivation being found within. A total of 300 mature plants, valued at £180,000.00 was seized along with all the equipment. Given the scale of the operation and potential links to serious and organised crime the investigation is ongoing and led by our proactive CID to identify the persons responsible.

In July 2023, Constable Miller, CPT and Constable Gibb, Divisional Alcohol, Violence Reduction Unit (DAVRU) at Alloa were patrolling Tillicoultry when they observed a man driving his car, who was known to be involved in the sale and distribution of controlled drugs, county wide and links to organised crime. The officers stopped the vehicle and detained him under Section 23 Misuse of Drugs Act 1971 for the purposes of a drugs search. He was searched along with his car and officers recovered 216 grams of cannabis (£3,240) and £712,70 in cash. The 70-year-old man was reported for being concerned in supply of controlled drugs.

Investigation into the theft of high value motor vehicles following residential housebreakings, identified links to organised crime groups, operating in multiple areas across Scotland. As a result, our local officers have increased patrols across Clackmannanshire to target these travelling criminal groups. The CPT have provided key information to local community groups, residents associations, community councils and via our local media outlets, highlighting the vulnerabilities associated with vehicle security and preventative measures to increase security to prevent these types of sophisticated thefts. Our divisional priority team have ownership of this crime trend and are working with neighbouring police divisions to identify the persons responsible and bring them to justice.

Counter Terrorism

Forth Valley and Fife Divisions jointly ran Exercise Safe Steeple at the Scottish Police College. Exercise Safe Steeple takes the form of a multi-agency Tabletop Exercise

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and comprises a mix of pre-loading by Subject Matter Experts coupled with facilitated discussion and feedback. The exercise focuses primarily on recovery rather than response; namely the 2 days, 2 weeks and then 2 months after a Marauding Terrorist Attack (MTA) with the aim 'To enhance the multi-agency preparedness in responding to and recovering from a terrorist related incident'. This event was attended by over 100 participants from various organisations and was met with extremely positive feedback on the day.

Events and Emergency Planning

Between 1 April and 30 September 2023 officers from Police Scotland provided policing at nine events across the Clackmannanshire area. Officers attended at various gala days, including Alva, Dollar, Menstrie, and Tillicoultry. Officers assisted with traffic management and enjoyed community engagement at these events, working with stewards to keep everyone safe and ensure the events were able to run as planned. Police attended the Alva Games and assisted with the planning of the event, working with organisers, Local Authority, and other partner agencies to collectively agree what was required for the delivery of the safe event.

Football

In May 2023, Alloa welcomed Scottish League 1 Champions Dunfermline to the Indodrill Stadium. A crowd of over 1600 enjoyed an entertaining match which Dunfermline won 2-0. Police conducted patrols in the town centre, train station and within vicinity of the stadium to ensure those in attendance could enjoy the occasion.

Matches against Stirling Albion in July in the Viaplay Cup and again in a league fixture in August also required policing. In recent local derby matches police have faced challenges with youth disorder and use of pyrotechnics. Our Dedicated Football Officer works closely with the Safety Officers at the clubs to ensure the safety of those attending and allow the supporters of each club to enjoy the action on the pitch. Our SBOs are also assisting and delivering relevant inputs to pupils at our Secondary Schools.

Running Events

Throughout the year officers within the Events and Operations Planning Team work closely with the Local Authority to plan for the many running events in the Clackmannanshire area. The Safety Advisory Group process is invaluable to allow police to work with organisers to minimise risk and disruption and allow the events to run smoothly and have the positive impact on the community intended by the organisers. This includes larger events such as the Alloa Half Marathon, and smaller events which do not require police attendance at the actual event, such as the Tilly 10k or the Wee County Harriers Relay Race.

ROAD SAFETY AND ROAD CRIME

Priority Routes

There is one Priority Route in the Clackmannanshire area, namely, the A91 road. This remains unchanged from previous years. Officers patrol this road on a daily basis to provide a visible presence/deterrent and to detect offences including those comprising the 'fatal 5'.

The 'fatal 5' are as follows.

- Careless driving
- Drink and drug driving
- Not wearing a seatbelt
- Using a mobile phone
- Speeding

Road users who commit one of the Fatal Five offences are far more likely to be involved in a fatal collision than those who do not.

Speed Patrol

On 30 August 2023, in response to complaints about speeding, Constable Ritchie conducted speed patrols through the A91 in Dollar. On this occasion no offending was detected, however, several vehicles were provided education around road safety and speed.

Through this reporting period the CPT have carried out 81 hours of speed checks at several locations around Clackmannanshire, paying particular attention to our priority routes, A91 – Dollar Road, Tillicoultry, A91 - Menstrie to Alva. In addition, the A908/B9140, Fishcross, Forrestmill and Alloa Road, Clackmannan were subject to speed checks.



During this reporting period there were 55 speeding offences, an increase of 29 offences (111.5%) compared to the same period in 2022.

The SBOs cover one hour of speed patrol each day between the start and end of school, utilising joint work with the pupils doing a HNC in Police studies or PSYV staff to provide additional tuition. This work extends into our local primary schools, where our Junior Road Safety Officer (JRSO) scheme is utilised, along with school staff and Police, to provide direct patrols, awareness, and education in relation to persons speeding around our local schools.

Joint Roads Policing Operations

During the reporting period the CPT planned and conducted 3 joint operations involving local policing officers and Roads Policing, particularly related with the National Speeding campaign. The operations ran on 3 days, 2 June 2023, 14 June 2023 and 26 June 2023 with a focus on speeding on the A91 along the Hillfoots, due to an increase in serious injury collisions and a fatal collision. The results of the operations were as follows:

- 1 driver reported for speeding (50mph in 30mph).
- 9 Conditional offers of fixed penalty notices issued for speeding (speeds between 44mph and 48mph in 30mph limit).
- 1 Conditional offer for a red light.
- 54 warnings issued to drivers on the A91, in relation to increased speeds, which were below the chargeable threshold.
- 1 Conditional offer of fixed penalty (Stopped in area of pedestrian crossing).
- 1 Conditional Offer of fixed penalty (delivery driver parking on the area of a Puffin crossing).

Between May and June 2023, the CPT conducted further joint operations with Roads Policing colleagues, conducting road check operations around the Aberdona, near Forrestmill, to tackle travelling criminals utilising vans, during the hours of darkness, to commit thefts. This resulted in 24 vehicles being stopped and checked with no criminality found.

Between 26 June 2023 and 16 July 2023, the CPT and Roads Policing focused on the National Drink Drive campaign, with intelligence led, directed patrols, however no offences were found for driving unfit through drink or drugs. All drivers stopped, were found to be fit to drive.

In August 2023, DAVRU officers observed a man known to be disqualified driving in the Alloa area and on observing police he made off at speed and failed to stop. After a short pursuit, the vehicle was stopped by police and a 50 year old driver arrested and charged with driving whilst disqualified, driving with no insurance and dangerous driving. On appearance at court, he was found guilty and disqualified from driving for 8 additional years, ordered to re-sit his driving test on completion of his disqualification period, issued a home detention curfew for 3 years with an electronic tag and a 3 year restriction of liberty order.

In September 2023, Constable Anderson from Response Policing, observed a man known to him for driving on a provisional licence without supervision in the Alloa area. The car was stopped and established the driver had taken the car without permission. The 21 year old man was charged for taking and driving away a motor vehicle, driving without insurance and a provisional licence. At court the man was found guilty and issued a £300 fine and 6 penalty points endorsed on his provisional licence which revoked his licence.

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In September 2023, the CPT observed a vehicle being driven in the Alloa area, believed to be driven without insurance. The officers attempted to stop the car, however the driver failed to stop, instigating a pursuit. Due to the reckless manner of driving, authority to continue the pursuit was stood down by the police control room. Officers later traced the car abandoned and a containment was placed on the area resulting in the driver being traced. The 31-year-old man was arrested and charged for taking the car without permission, no insurance, and no driving licence. After appearing at court, he was found guilty and given a £640 fine and 9 penalty points endorsed on his licence.

In June 2023, as part of the National Seatbelt and Child Safety Week, the CPT and SBOs completed a 2-day training course delivered by a national company about child car seat safety. This provided our officers with increased knowledge in respect of approved child restraints, all to keep children safe on the roads.

Roads Policing Unit

In April 2023, Road Policing Officers from Stirling responded to a call from a member of the public about an intoxicated driver in the Alloa area. The driver was stopped and failed a roadside drug test. The driver was arrested and required to provide a sample of blood, the results of which are awaited.

In May 2023, Officers carried out a road check on the A91 road. This resulted in 2 vehicles being seized for being driven without insurance and 3 drivers warned for speeding.

During this reporting period several Local Response and Community Officers were trained by Road Policing Officers in the use of speed detection equipment so that they could also tackle the issue of speeding in the communities of Clackmannanshire.

School Parking



On 16 August 2023, the CPT deployed to all the primary schools throughout Clackmannanshire, for the first day back after summer leave. The aim of these patrols was to address any illegal/dangerous parking at the start of the school year.

Officers engaged with several drivers providing advice to ensure the safety of all school children. One driver was issued a fixed penalty for causing an obstruction.

On 30 August, the Tullibody Community Constable Leigh Allen, patrolled his local schools to ensure safe access for the children. During this visit, he observed a parent parked illegally, causing a danger to the children. The driver was issued a fixed penalty notice.



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On 31 August 2023, Clackmannan CPT conducted patrols around Clackmannan Primary School, and one vehicle issued a fixed penalty for inappropriate parking.



The CPT continue to carry out patrols around our primary and secondary schools to enforce offences where they are identified and provide education where appropriate.

The schools' prioritised during the reporting period were Sunnyside Primary, Craigbank Primary, Deerpark, Abercromby, Dollar (Strathdevon) and Menstrie Primary. Of note school staff and parent council members commented favourably on the police presence and impact.

During this period 20 fixed penalty notices were issued for parking on double yellow lines, along with 32 warnings delivered for inconsiderate parking.

Parking, particularly within the town centre of Alloa, continues to be subject of ongoing complaints from the community. Our officers when call demand and resourcing permits continue to monitor and issue parking tickets. In this reporting period 96 local authority fixed penalty tickets were issued for parking in disabled bays and double yellow lines in the town centre of Alloa and the centre of each village. Education and advice are provided where appropriate, particularly around local schools.

To further promote road safety and make our roads a safer place for children and young people the CPT secured 3000 road safety books covering a variety of different road safety topics for different age groups from the APS group who co-ordinate 'Ziggy's Road Safety Mission'. The CPT are distributing these to target groups during our community engagement events and road safety inputs.

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**Audit and Scrutiny Committee - Clackmannanshire
April 2023- September 2023**

Violence, Disorder & Antisocial Behaviour						
		Apr 2022 - September 2022	Apr 2023 - September 2023	Victims	% Change	3 year average
1	Total No Group1: Crimes of Violence	54	58	4 more	7.4%	-8.9%
2	Murder	-	-	-	-	-
3	Attempted Murder	1	-	-	-100.0%	-100.0%
4	Culpable Homicide (common law)	-	-	-	-	-
5	Culpable Homicide (other)	-	-	-	-	-100.0%
6	Serious Assault detection rate	42.9%	50.0%		7.1%	5.2%
7	Serious Assault	19	18	1 less	-5.3%	-27.0%
8	Robbery and assault with Intent to rob detection rate	53.3%	100.0%		46.7%	27.8%
9	Robbery and assault with Intent to rob	15	6	9 less	-60.0%	-50.0%
10	Common assault detection rate	73.6%	74.9%		1.3%	2.7%
11	Common assault	284	303	19	6.7%	5.9%
12	Number of complaints regarding disorder	1245	1155	90	-7.2%	x

**Audit and Scrutiny Committee - Clackmannanshire
April 2023- September 2023**

Violence, Disorder & Antisocial Behaviour (continued)
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		Apr 2022 - Sept 2022	Apr 2023 - Sept 2023	Victims	% Change	3 year average
13	Number of Domestic Abuse Incidents Reported to the Police	355	348		-2.0%	-9.8%
14	Total Crimes and offences in domestic abuse incidents	142	142		-	-11.8%
15	Percentage of Domestic Incidents that result in a crime being recorded	40.0%	40.8%		0.8%	-0.9%
16	Total crimes and offences in domestic abuse incidents detection rate	62.3%	59.4%		-4.7%	-19.6%
17	Total Detections for Domestic Bail Offences	13	12		-7.7%	-37.9%
18	Ensure 95% of domestic abuse initial bail checks are conducted within a prescribed timeframe (24hrs)*	95.8%	82.9%		-13.5%	x
19	Hate Crime and offences detection rate	66.7%	67.6%		0.9%	-13.2%
Violence, Disorder & Antisocial Behaviour - Stop and Searches						
		Apr 2022 - Sept 2022	Apr 2023 - Sept 2023 (Positive)	Victims	% Change	3 year average
20	Number of stop and searches conducted (total)	70	56		-20.0%	x
On the 11th May 2017 Police Scotland adopted a new code of practice on the use of stop and search. At this time the use of non-statutory (Consensual) search ceased. Further information on Police Scotland's use of stop and search and on the code of practice is available on the Police Scotland Website.						

**Audit and Scrutiny Committee - Clackmannanshire
April 2023- September 2023**

Additional Identified Local Priorities						
		Apr 2022 – Sept 2022	Apr 2023 – Sept 2023	Victims	% Change	3 year average
21	Number of detections for supply of drugs (incl. possession with intent)	16	16		-	11.6%
22	Number of detections for drugs production, manufacture or drugs cultivation	1	3		200.0%	12.5%
23	Theft by housebreaking (including attempts) detection rate	4.5%	64.0%		59.5%	23.5%
Context: Includes dwelling house, non-dwelling and other premises.						
24	Theft by housebreaking (including attempts)	22	25	3 more	13.6%	-35.3%
Context: Includes dwelling house, non-dwelling and other premises.						
25	Theft by shoplifting detection rate	65.9%	60.1%		-5.8%	-12.2%
26	Theft by shoplifting	132	213	81 more	61.4%	118.8%
27	Vandalism & Malicious Mischief detection rate	33.2%	38.4%		5.2%	1.3%
28	Vandalism & Malicious Mischief	193	224	31 more	16.1%	-2.3%
29	Number of detections for Consuming Alcohol in a designated place (where appropriate byelaws exist)	3	2		-33.3%	-64.7%
Public Protection						
		Apr 2022 - Sept 2022	Apr 2023 - Sept 2023	Victims	% Change	3 year average
30	Number of Sexual Crimes	70	50	20 less	-28.6%	-33.0%
31	Sexual Crimes detection rate	48.6%	48.0%		-0.6%	-5.1%
32	Rape detection rate	43.8%	66.7%		22.9%	16.7%

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**Audit and Scrutiny Committee – Clackmannanshire
April 2023 - September 2023**

Road Traffic Casualty Statistics					
	Apr 2022 - Sept 2022	Apr 2023 - Sept 2023	Victims	% Change	3 year average
People Killed	1	0	1 less	-100.0%	x
People Seriously injured	6	2	4 less	-66.7%	x
People Slightly Injured	8	4	4 less	-50.0%	x
Children (aged<16) Killed	0	0	0	0	x
Children (aged<16) Seriously Injured	3	1	2 less	-66.7%	x

Road Safety & Road Crime - Detected					
	Apr 2022 - Sept 2022	Apr 2023 - Sept 2023	Victims	% Change	3 year average
33	Dangerous driving	12	9	-25.0%	-37.2%
34	Speeding	26	55	111.5%	46.0%
35	Disqualified driving	5	5	-	-37.5%
36	Driving Licence	32	17	-46.9%	-52.3%
37	Insurance	80	48	-40.0%	-41.9%
38	Seat Belts	8	4	-50.0%	-40.0%
39	Mobile Phone	2	8	300.0%	380.0%

**Audit and Scrutiny Committee – Clackmannanshire
April 2023 - September 2023**

Public Confidence					
April 2023 - September 2023					
		Number of Complaints about the Police		Number of Complaints per 10,000 Police Incidents	
40	Complaints received about the Police	33		45.5%	
		On Duty Allegations	Off Duty Allegations	Quality of Service Allegations	Total Number of Allegations
41	Total Allegations Recorded	38	0	18	56

The complaints received are the total Complaints about the Police received and logged on our system. One complaint about the Police can have several allegations contained within, similar to one crime report having several charges contained within. The allegations are similar to individual charges, for example a member of the public can submit a complaint about the Police which is recorded as one complaint, within this complaint they could outline their dissatisfaction in relation to not receiving adequate updates in relation to the crime reported (allegation 1), not being satisfied with the time taken to progress their crime report (allegation 2) and the uncivil manner of the subject Police Officer investigating their crime (allegation 3).

Conventions:

– means null or zero

x = not calculated

Report to: Audit and Scrutiny Committee

Date of Meeting: 18th April 2024

Subject: Fire Performance Report – Quarter 1 & 2, 2023/24

**Report by: Local Senior Officer, Clackmannanshire-Fife-Stirling LSO
Area**

1.0 Purpose

- 1.1. The purpose of this report is to provide committee with:
- 1.2. An overview of the half year performance of the Scottish Fire and Rescue Service (SFRS) in Clackmannanshire covering the period 1st April 2023 to 30th September 2023. The report (Appendix One) is based on performance against objectives and targets set out in the Local Fire and Rescue Plan for Clackmannanshire. Performance indicators are detailed in the summary report.

2.0 Recommendations

- 2.1. It is recommended that committee notes, challenges and comments on the report as appropriate.

3.0 Considerations


- 3.1. A number of significant trends are worth highlighting.
- 3.2. There has been no fire related fatalities and five fire casualties in the reporting period.
- 3.3. A Serious Fire Task Group has been set up within the SFRS. This group will produce a quarterly report providing information on fire fatalities which will assist in local Community Safety Engagement activity.
- 3.4. There were 24 Accidental Dwelling Fires (ADF), an increase of 13 when compared with the same period the previous year. The cause of these fires has predominantly been cooking related activities which in Scotland is the number one cause of fires in the home. This will continue to be a focus of our on-going prevention work.
- 3.5. Work continues to identify and support vulnerable people in Clackmannanshire, through the Home Fire Safety Visit (HFSV) Programme and fire safety referrals through multi-agency activity. The quantity and quality

of referrals from partners allow the service to target resources within Clackmannanshire, with the aim of reducing the number of accidental dwelling fires and casualties from these fires in the long term.

During the reporting period, local operational crews and the Community Action Team carried out 269 HFSV's. Post fire advice was also offered on 51 occasions after an ADF.

- 3.6. A Youth Volunteer scheme continues to be a success at Alloa station and will become a pivotal part of youth engagement within the Clackmannanshire area. One individual within the programme has been awarded a Chief Fire Officers Commendation following his actions to render medical aid to a member of the Clackmannanshire Community.
- 3.7. There were 11 deliberate primary fires, an increase of three compared with the same period last year. There were 57 deliberate secondary fires, which is a reduction of 21 compared with the same period last year.
- 3.8. The number of Unwanted Fire Alarm Signals during the reporting period was 62. This is reduction by 40 compared to the same period last year. We continue to monitor all UFAS activity and contact all duty holders to discuss the implications of UFAS and identify where improvements can be made. We are also informing duty holders of the latest fire detection technology available which has a proven record in reducing unwanted signals.

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Lee Turnock	Group Commander for Clackmannanshire-Fife-Stirling LSO Area	
Kenneth Barbour	Area Commander & LSO for Clackmannanshire-Fife-Stirling LSO Area	



SFRS ANNUAL PERFORMANCE REPORT

01st April 2023 - 30th September 2023

Covering the activities and performance in support of the Local Fire and Rescue Plan for Clackmannanshire.



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

**Working together
for a safer Scotland**

ABOUT THE STATISTICS IN THIS REPORT

The activity totals and other statistics quoted in this report are provisional in nature and subject to change because of ongoing quality assurance and review.

Because all statistics quoted are provisional there may be differences in the period totals quoted in our reports after original publication which result from revisions or additions to the data on our systems.

From 2015-16 onwards responsibility for the publication of end-year statistical data transferred from the Scottish Government to the SFRS. This change of responsibility does not change the status of the figures quoted in this and other SFRS reports reported to the Committee.

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DEFINITIONS

Accidental Dwelling Fire

Building occupied by households, excluding hotels, hostels and residential institutions. In 2000, the definition of a dwelling was widened to include any non-permanent structure used solely as a dwelling, such as caravans, houseboats etc. Caravans, boats etc. not used as a permanent dwelling are shown according to the type of property. Accidental includes fires where the cause was not known or unspecified.

Fire Fatality

A person whose death is attributed to a fire is counted as a fatality even if the death occurred weeks or months later.

Fire Casualty

Non-fatal casualties consist of persons requiring medical treatment including first aid given at the scene of the fire, but not those sent to hospital or advised to see a doctor for a check-up or observation (whether or not they actually do). People sent to hospital or advised to see a doctor as a precaution, having no obvious injury are recorded as precautionary 'check-ups'.

Deliberate Fire

Includes fires where deliberate ignition is merely suspected, and recorded by the SFRS as "doubtful".

Non-Domestic Fires

These are fires identified as deliberate other building fires or accidental other building fires.

False Alarms

Where the FRS attends a location believing there to be a fire incident, but on arrival discovers that no such incident exists, or existed.

Unwanted Fire Alarm Signal

Where the FRS attends a non-domestic location believing there to be a fire incident, but on arrival discovers that no such incident exists, or existed.

Primary Fires:

- Buildings (including mobile homes) fit for occupation (i.e. not wholly derelict) and those under construction.
- Caravans, trailers etc.
- Vehicles and other methods of transport (not derelict unless associated with business e.g. scrap metal).
- Outdoor storage (including materials for recycling), plant and machinery.
- Agricultural and forestry premises and property.
- Other outdoor structures including post-boxes, tunnels, bridges, etc.

Secondary Fires

- Single derelict buildings.
- Grassland etc., including heath, hedges, railway embankments and single trees.
- Intentional straw or stubble burning.
- Outdoor structures, including: lamp-posts, traffic signs and other road furniture, private outdoor furniture, playground furniture, scaffolding, signs and hoarding etc.
- Refuse and refuse containers.
- Derelict vehicles (a vehicle without a registered keeper).

1. INTRODUCTION
















1.1 This is the 6-month report covering the SFRS's performance and activities in support of the seven priorities in the Local Fire and Rescue Plan for Clackmannanshire 2019 / 2021, namely:

- Priority 1 – Local Risk Management and Operational Preparedness
- Priority 2 – Unintentional Harm and Injury
- Priority 3 – Domestic Fire Safety
- Priority 4 – Deliberate Fire Setting
- Priority 5 – Built Environment
- Priority 6 – Unwanted Fire Alarm Signals
- Priority 7 – Transport and Environment

1.2 As well as supporting the seven priorities in the Local Fire and Rescue Plan for Clackmannanshire, this monitoring report shows how SFRS activities and performance contribute to the wider priorities of the Clackmannanshire Council Community Planning Partnership (CPP), as set out in the Clackmannanshire Community Plan (LOIP).

2. SIX-MONTH PERFORMANCE SUMMARY

2.1 The table below provides a summary of the half year activity from 1st April 2023 to 30th September 2023 compared to the same period from 2021/2022 and 2022/2023.

<p>HI 1 Accident Dwelling Fires</p>  <p>Apr 21 / Sep 21 - 24 Apr 22 / Sep 22 - 11 Apr 23 / Sep 23 - 24</p>	<p>HI 2 ADF Fatal Casualties</p>  <p>Apr 21 / Sep 21 - 0 Apr 22 / Sep 22 - 0 Apr 23 / Sep 23 - 0</p>	<p>HI 3 ADF Non-Fatal Casualties</p>  <p>Apr 21 / Sep 21 - 4 Apr 22 / Sep 22 - 0 Apr 23 / Sep 23 - 5</p>
<p>HI 4 Deliberate Primary Fires</p>  <p>Apr 21 / Sep 21 - 11 Apr 22 / Sep 22 - 08 Apr 23 / Sep 23 - 11</p>	<p>HI 5 Deliberate Secondary Fires</p>  <p>Apr 21 / Sep 21 - 50 Apr 22 / Sep 22 - 78 Apr 23 / Sep 23 - 57</p>	<p>HI 6 Non-domestic Building Fires</p>  <p>Apr 21 / Sep 21 - 16 Apr 22 / Sep 22 - 08 Apr 23 / Sep 23 - 08</p>
<p>HI 7 Fatal Casualties in Non-Domestic Building Fires</p>  <p>Apr 21 / Sep 21 - 0 Apr 22 / Sep 22 - 0 Apr 23 / Sep 23 - 0</p>	<p>HI 8 Non-Fatal Casualties in Non-Domestic Building Fires</p>  <p>Apr 21 / Sep 21 - 5 Apr 22 / Sep 22 - 0 Apr 23 / Sep 23 - 0</p>	<p>HI 9 Unwanted Fire Alarm Signals</p>  <p>Apr 21 / Sep 21 - 86 Apr 22 / Sep 22 - 102 Apr 23 / Sep 23 - 62</p>
<p>HI 10 Road Traffic Collision (RTC) Incidents</p>  <p>Apr 21 / Sep 21 - 08 Apr 22 / Sep 22 - 07 Apr 23 / Sep 23 - 03</p>	<p>HI 11 Fatal RTC Casualties</p>  <p>Apr 21 / Sep 21 - 0 Apr 22 / Sep 22 - 0 Apr 23 / Sep 23 - 0</p>	<p>HI 12 Non-Fatal RTC Casualties</p>  <p>Apr 21 / Sep 21 - 02 Apr 22 / Sep 22 - 04 Apr 23 / Sep 23 - 01</p>
 Below annual headline target	 Above annual headline target	
 Less than 10% above headline target		

3. Priority 1: Local Risk Management and Operational Preparedness

Description

Risk Management and operational preparedness is a key area of work for the SFRS. In Clackmannanshire, this means:

- Knowing what the risks are in Clackmannanshire and then making plans, so we are resilient to respond to any event.
- Being prepared to respond to national threats or major emergencies.
- Developing flexibility to deploy crews, to take on a broadening role within the community.
- Firefighters being quipped to deal with emergencies safely and effectively and our stations being in a constant state of readiness.
- Ensuring that firefighter safety is paramount in everything we do. This will ensure that our personnel are able to meet the challenges we face
- Undertake Operational Reassurance Visits to Hotels within the Clackmannanshire Council region and support best fire safety practices.

Activity

During 1 April 2023 – 30 September 2023 we delivered our training commitment to operational firefighters, whereby we trained and tested their preparedness to deal with:

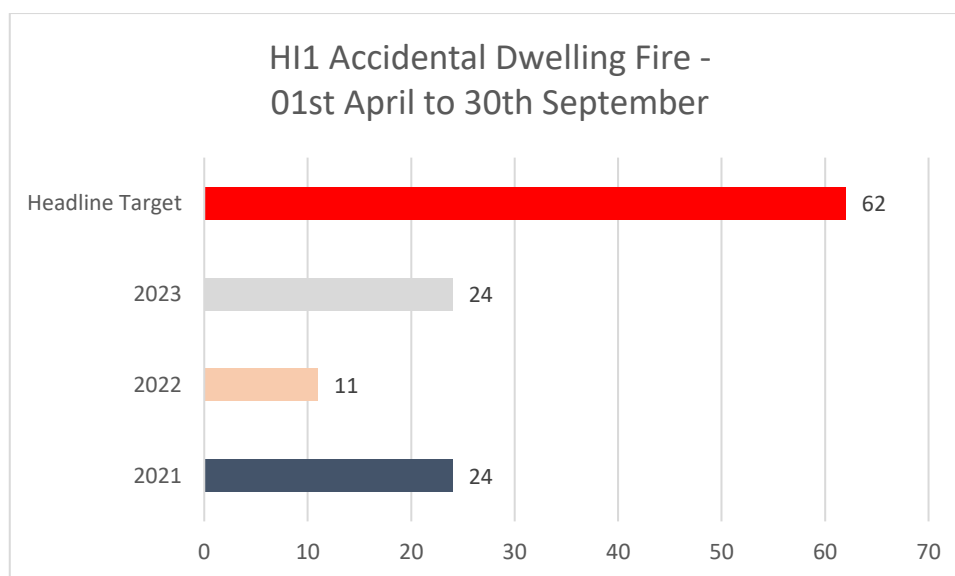
Breathing Apparatus
Fire Behaviour
Road Traffic Collison
Trauma training
Pumps
Ladders
Rope
Water Rescue
Fire Behaviour
Tactical Ventilation
Incident Command

4. Priority 2: Unintentional Harm and Injury

- 4.1 The Building Safer Communities programme is a collaborative initiative which seeks to help national and local partners and communities work together to make Scotland safer and stronger. The programme vision is of a flourishing, optimistic Scotland in which resilient individuals, families and communities live safe from crime, disorder, danger and harm.
- 4.2 In October 2016 a strategic assessment of Unintentional Harm in Scotland was completed. This assessment aims to provide a picture across Scotland and is intended for use as a resource of information for policy makers and local practitioners. This is the first time that the different sources of relevant data and information that inform incidents of unintentional harm in Scotland has been put together into one single strategic assessment.
- 4.3 The strategic assessment is designed to complement the wide range of good work that is underway across the country, both at national and local partnership level. In so doing it provides a snapshot in time of trends and is designed to inform strategic planning and help direct future action and intervention.
- 4.4 In setting this out, the strategic assessment identifies five areas of priority, representing both those identified as most at risk of unintentional harm; and those areas for focus of partnership activity:
- Under 5s
 - Over 65s
 - areas of increased deprivation
 - strategic data gathering, analysis and sharing
 - bridging the gap between strategy and delivery
- 4.5 The strategic assessment is complimented by a summary document that captures the main findings and recommends for some next steps to action. Case studies and a short literature review of interventions to prevent and reduce unintentional harm have also been produced.
- 4.6 In addition, a number of thematic briefing papers are available for practitioners which cover key points relating to specific unintentional harm and set out in clear format the key trends and considerations relating to:
- Children and Young People
 - Older People
 - Deprivation
 - Home Safety
 - Road Safety
 - Outdoor Safety
- 4.7 SFRS continue to be an active member of the Forth Valley Local Resilience Partnership and share appropriate information
- 4.8 Appendix 1 provides a summary of activities SFRS has undertaken to improve community resilience through preventative and multi-agency initiatives.

5. Priority 3: Domestic Fire Safety

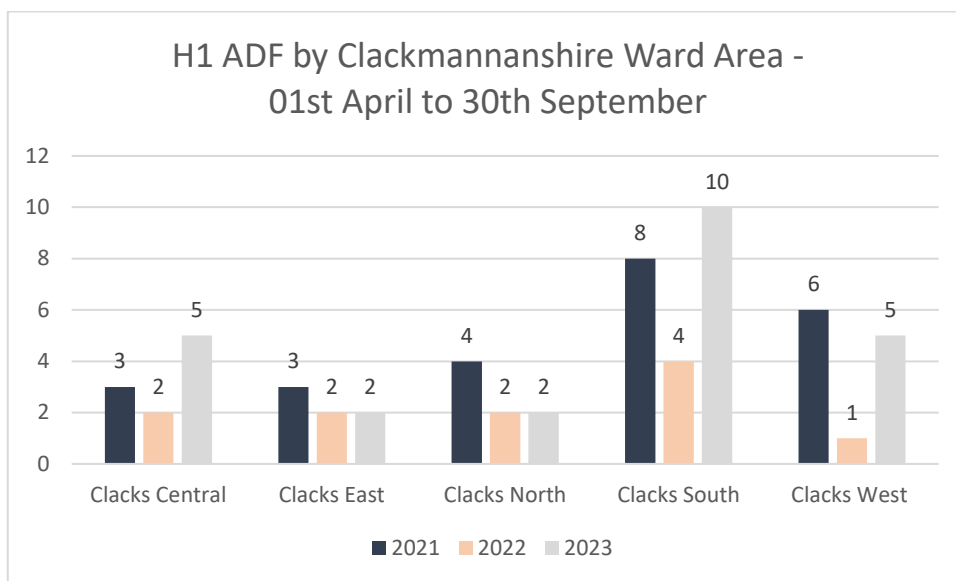
- 5.1 **Accidental Dwelling Fires (ADF)** have risen to 2021 levels with 24 incidents recorded. This is an increase of 13 from the previous reporting period but still tracking to be below the annual headline figure of 62.



Graph 1: H11 - Accidental Dwelling fires 1st April – 30th September 2023 and previous two years of reporting figures.

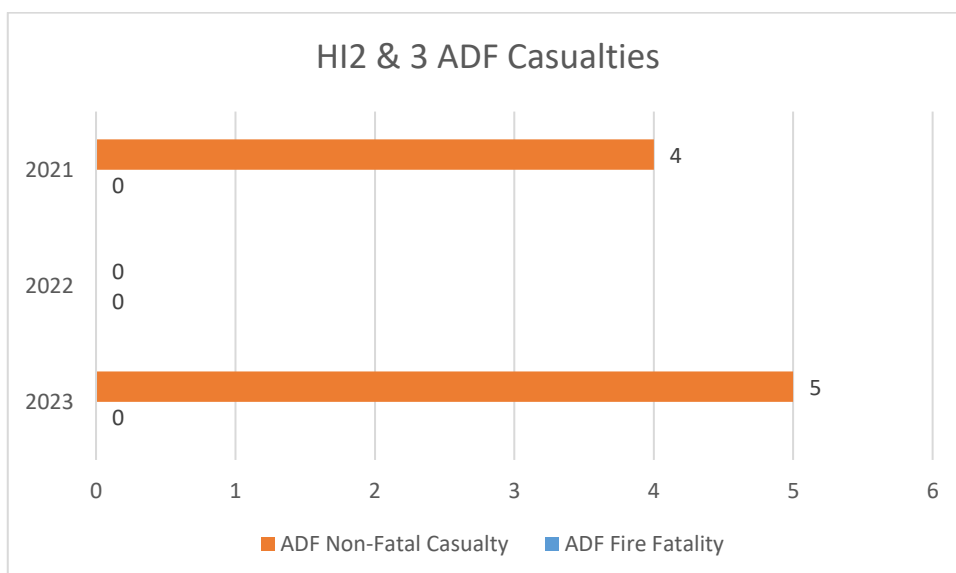
- 5.2 16 incidents were recorded within single occupancy properties, seven within residential flats and one within sheltered housing.
- 5.3 41% of ADF fires were linked to cooking appliances (10). 14 were linked to adults within the age range of 18-64 and four aligned to elderly residents (over 65).
- 5.4 The main location of fire was identified as the Kitchen (16), with the second largest location frequency being the Livingroom (4).
- 5.5 It is disappointing to identify that approximately half of all properties (13) had smoke detection present and that three of these did not operate/assist in raising alarm (on these occasions there may have been insufficient products of combustion to activate alarm, fire discovered by person.).
- 5.6 45% of the incidents required direct SFRS intervention (11) with the remainder either extinguished prior to SFRS arrival or by removal from property.
- 5.7 Of the 24 incidents recorded there was a requirement on 10 occasions for SFRS support to assist occupants either remove themselves from the property or assist relocate products of combustion from the property.
- 5.8 The information above describes a stable trend in fire reduction and severity. This can be attributed to improved fire safety awareness but requires collective efforts to increase access to effective fire detection which gives an early warning of fire in line with new Scottish Government Smoke Detection laws which came into effect 01 February 2022.

5.9 Other demographics of note include most prevalent time of day for an ADF was either 15:00 or 18:00 (3 respectively). April had the greatest frequency of ADFs (6) and Sunday had the greatest instances of ADFs.



Graph 2 – 3 Year Breakdown of ADF incidents by Clackmannanshire Council Ward within reporting period of 1st April to 30th September.

5.10 SFRS are pleased to confirm that there were no **ADF Fatal casualties** within this reporting period.



Graph 3 – HI2 and HI3 – ADF Fatalities and Non-Fatal casualties.

5.11 **ADF Non-fatal fire casualties** has increased to five from the previous reporting period. Whilst thankfully still low in frequency this has seen a return to comparative figures recorded in 2021.

- 5.12 It is reassuring however, that medical oxygen was only administered on one occasion and only one casualty was transported to hospital with injuries appearing slight.

Indicator Description

The largest single type of primary fire in Clackmannanshire is accidental fires in the home and their prevention is a key focus of the Service's community safety activity.

HI 1 – Accidental Dwelling Fires (ADF)

As a headline target, the aim is to reduce the rate of ADF's, in a growing Clackmannanshire population, by keeping these fires **below 62**, each year.

HI 2 – ADF Fatal Casualties

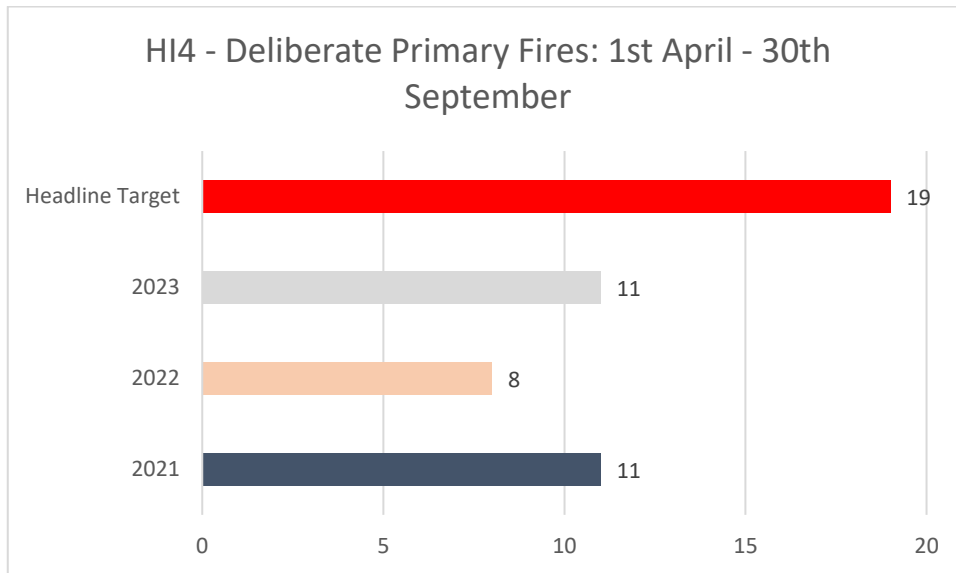
This indicator counts those people for whom fire has been clearly identified as the cause of death, even if they die some-time after the actual fire. Those who die at, or after, the fire but where fire is **not** identified as the cause of death are not included in these figures.

HI 3 – ADF Non-Fatal Casualties

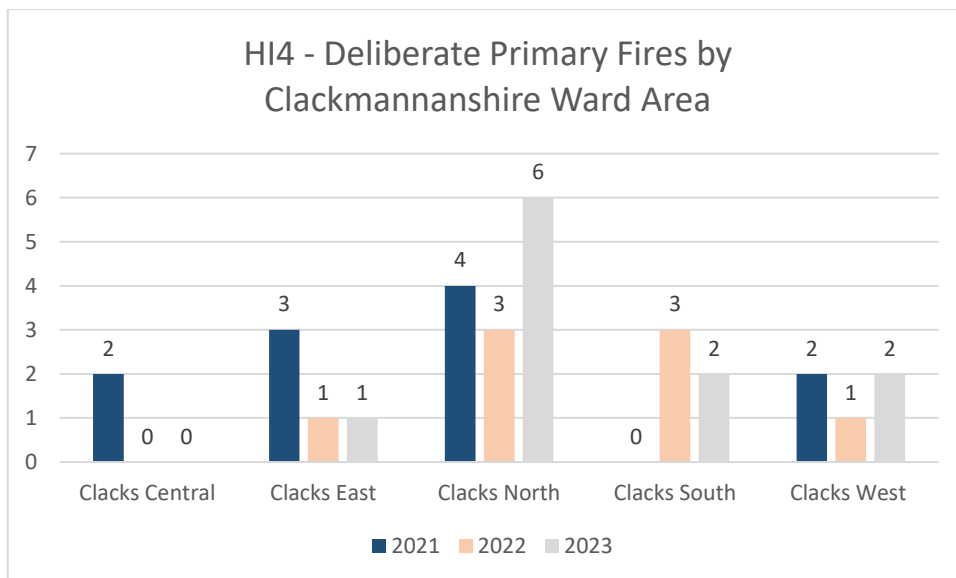
This headline target counts all types of non-fatal fire injury in the home, including precautionary checks. As a headline target, the aim is to reduce the risk of injury from fire in the home, in an increasing Clackmannanshire population.

6. Priority 4: Deliberate Fire Setting

- 6.1 **Deliberate Primary Fires** accounted for 11 incidents within the Clackmannanshire Council area for the reporting period. This sees a slight increase of three from the previous reporting period but is below the headline annual target set as 19 as per the local plan.
- 6.2 The main incident type recorded during this period was woodland/crops with three events. Within the Urban setting, outdoor structures such as garden sheds were recorded as being the victim of deliberate fire setting.
- 6.3 Ten of the incidents required SFRS direct intervention to either extinguish or isolate/remove combustible products from premises.



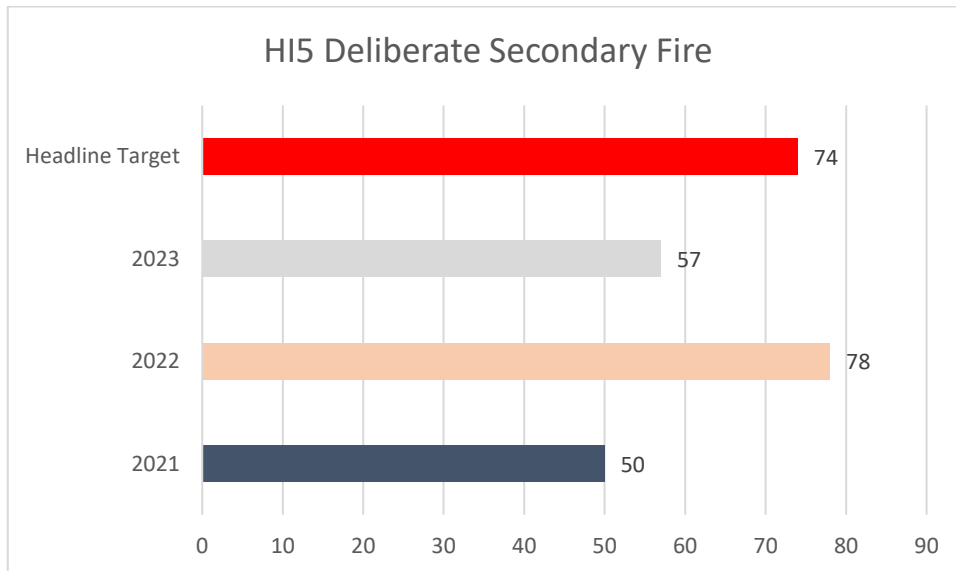
Graph 4 – HI4 Deliberate Primary Fires 1st April – 30th September 2023 and previous two years of reporting figures.



Graph 5 – Breakdown of Deliberate Primary Fires by Clackmannanshire Council Ward

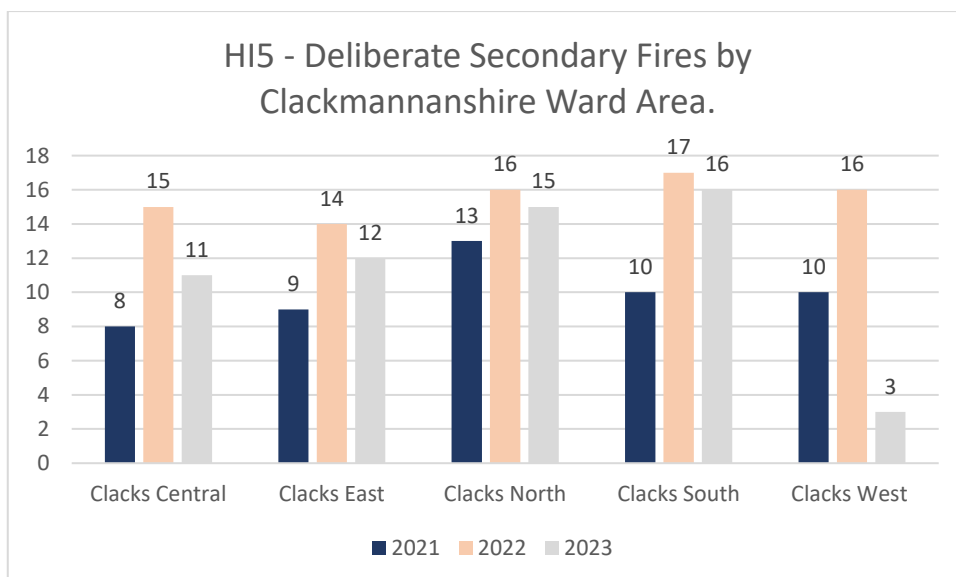
6.4 Clackmannanshire Council experienced 57 **Deliberate Secondary Fires** within this reporting period. This is a reduction of 27% from the previous reporting year and below the three-year average of 62 incidents.

6.5 The two highest incident types involved either roadway/public access grass verges or loose refuse. Four incidents were linked to Wheelie Bins.

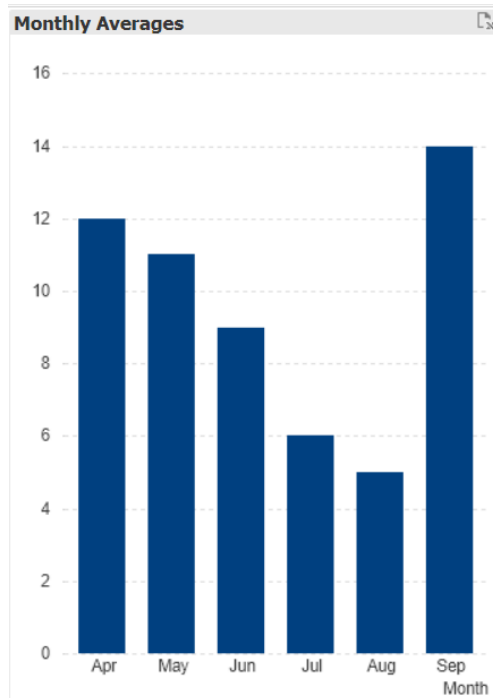


Graph 6 – HI5 Deliberate secondary fires 1st April – 30th September 2023 and previous two years of reporting figures.

- 6.6 As part of SFRS’ deliberate fire reduction strategy we continue to actively target schools in high activity areas to deliver talks regarding the dangers and consequences of deliberate fire setting. These talks take place normally in April and October, which are the peak periods of activity.
- 6.7 We will continue to work with our Police and Local Authority partners to identify deliberate fire setting incidents early to ensure that solutions are implemented to prevent further incidents. We will also liaise with premises occupiers, particularly in town centres, to give advice on refuse storage and security which can be a cause of deliberate fires.



Graph 7 – Deliberate Secondary Fires by Clackmannanshire Council Ward



Graph 8 – Deliberate Secondary Fire incidents by month.

Indicator Description

These headline and indicators targets account for all types of fire that are believed to have been started intentionally, and are categorized as Deliberate Fires and Deliberate Secondary Fires.

HI 4 – Deliberate Primary Fires

These deliberate fires cover the following types:

- Fires in the home
- Fires in non- domestic buildings
- Fires in motor vehicles

As a headline target the aim is to reduce the rate of deliberate primary fires in Clackmannanshire by keeping these fires **below 19** each year

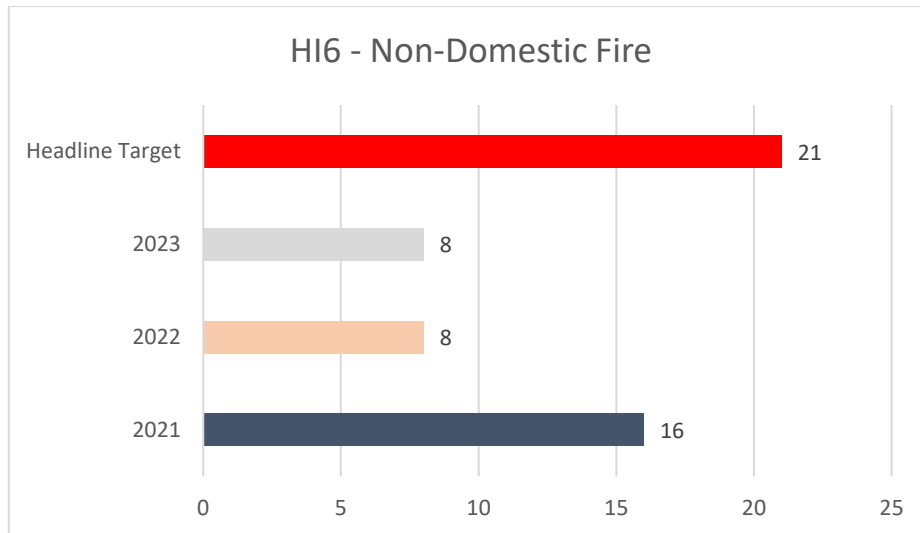
HI 5 – Deliberate Secondary Fires

These deliberate fires cover the majority of outdoor fires including grassland and refuse fires and includes fires in derelict buildings, but not chimney fires.

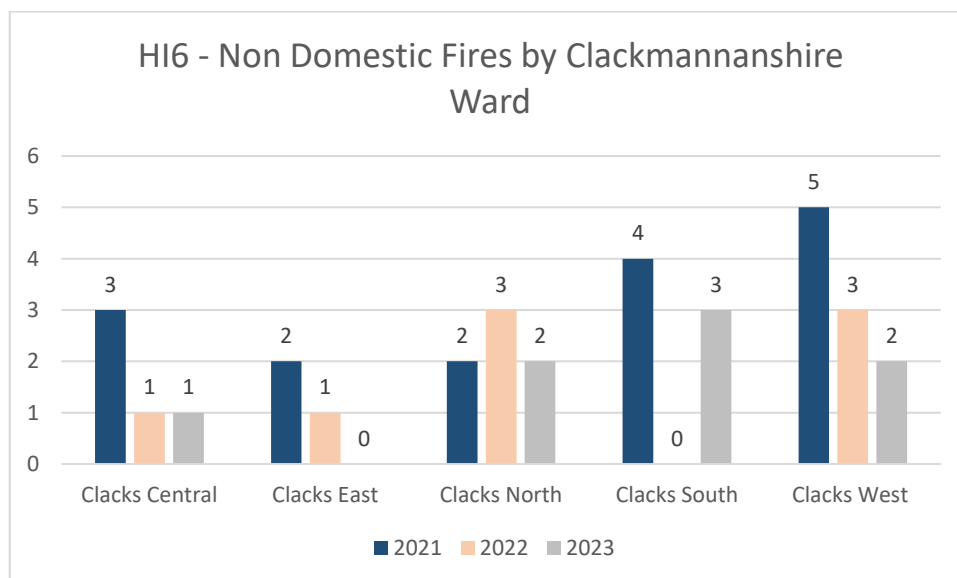
As a headline target the aim is to reduce the rate of deliberate secondary fires in Clackmannanshire by keeping these fires **below 74** each year

7. Priority 5: Built Environment

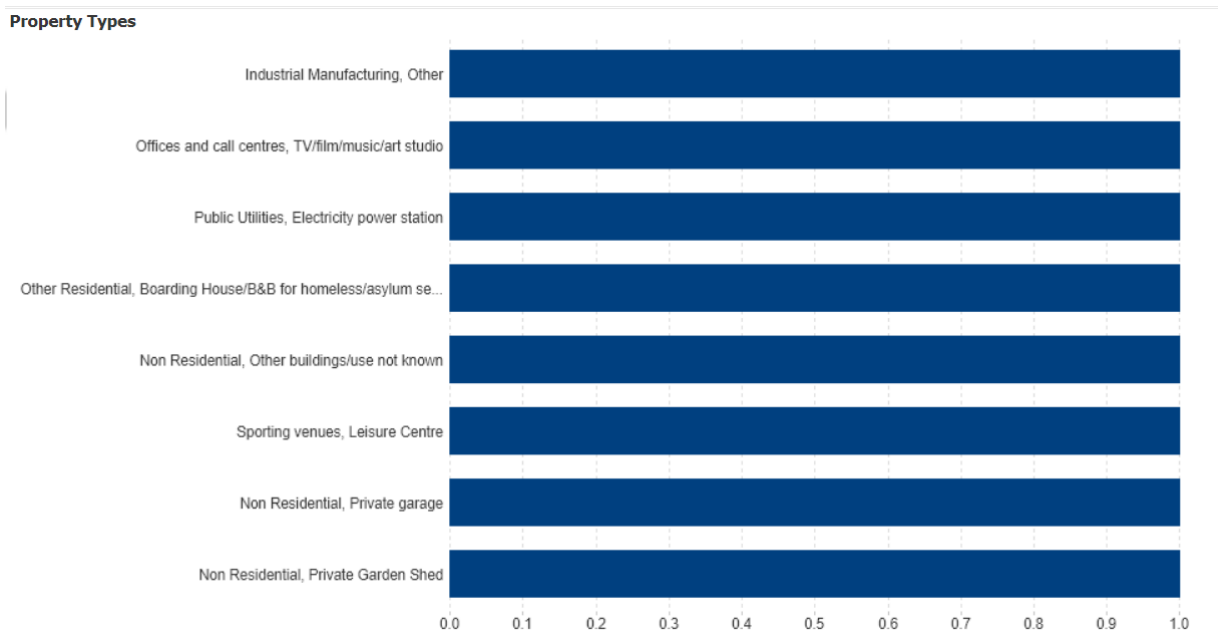
7.1 **Non-Domestic Building Fires** equated to eight incidents for this reporting period. This is on par with the previous reporting period and below the 16 experienced in the same period of 2021.



Graph 9 – HI6 Non-Domestic building fires 1st April – 30th September 2023 and previous two years of reporting figures

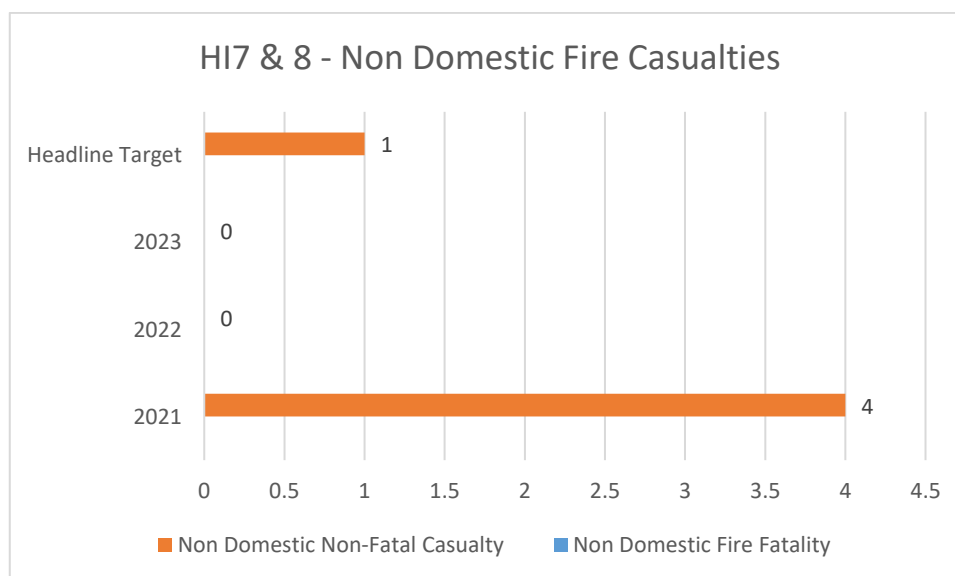


Graph 10 – Non-Domestic Building Fires by Clackmannanshire Council Ward



Graph 11 – Non-domestic Building fires recorded by property type.

- 7.3 62% (5) of the reported incidents were identified as accidental with the main causes of fire being reported as overheating or faulty equipment.
- 7.4 Four incidents identified that damage was contained to the initial room of origin and one which resulted in damage to the entire building.
- 7.5 SFRS are pleased to advise that there were no reported **Fire fatalities** or **Non-Fatal Fire Casualty** in non-domestic buildings within this reporting period.



Graph 12 – HI7 & 8 Non-Domestic Fire Fatalities and Non-Fatal Casualties 1st April – 30th September 2023.

- 7.6 We continue to deliver a programme of fire safety audits in relevant premises - as detailed within section 78 of the Fire (Scotland) Act 2005 - identified as high risk on an ongoing basis. We also complete thematic audit programmes where patterns emerge of incidents in a particular risk group such as Hotels.

- 7.7 As well as the audit programmes described above, we also deliver ‘post fire audits’ which take place as soon as possible after a fire has occurred in premises. The purpose of these audits is to deliver further fire safety advice to the premise’s occupier, and to identify any issues which could be used to inform other similar premises types in order to prevent further incidents of a similar nature.

Indicator Description

These headline and indicators targets cover the types of non-domestic buildings applicable to Part 3 of the Fire (Scotland) Act 2005 and is designed to reflect the effectiveness of fire safety management in respect of these types of building. These include buildings like Care Homes, Hotels, and hospitals

HI 6 Non-domestic Building Fires Applicable to the Act

As a headline target, the aim is to reduce the rate of accidental fires in non-domestic buildings (where the Act applies), by keeping these fires **below 21**, in Clackmannanshire each year.

HI 7 Fatal Fire Casualties in Non- Domestic Building Fires Applicable to the Act

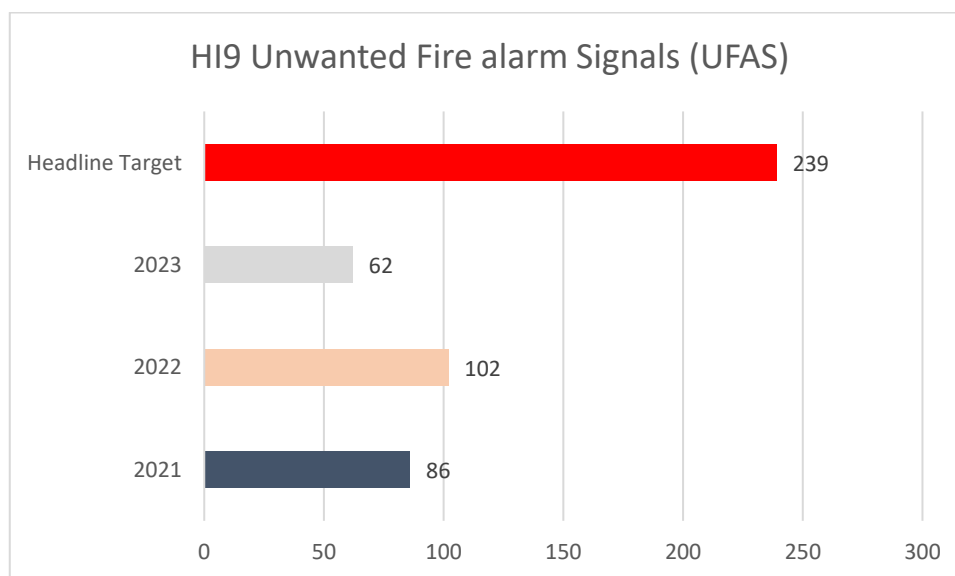
As a headline target the aim is to have **0 Fatal Fire Casualties** in Non- Domestic buildings.

HI 8 Non – Fatal Fire Casualties in Non-Domestic Building Fires Applicable to the Act

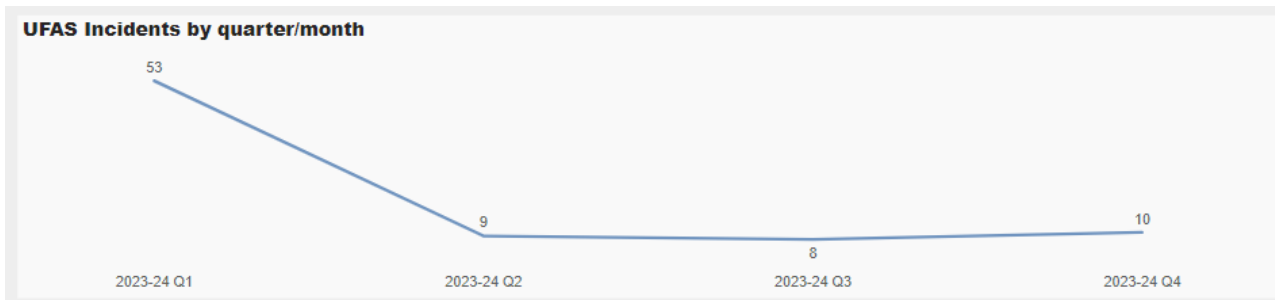
As a headline target, the aim is to reduce the rate of Non-Fatal Fire Casualties in Non-Domestic Buildings by keeping these below **1**, in Clackmannanshire each year.

8. Priority 6: Unwanted Fire Alarm Signals

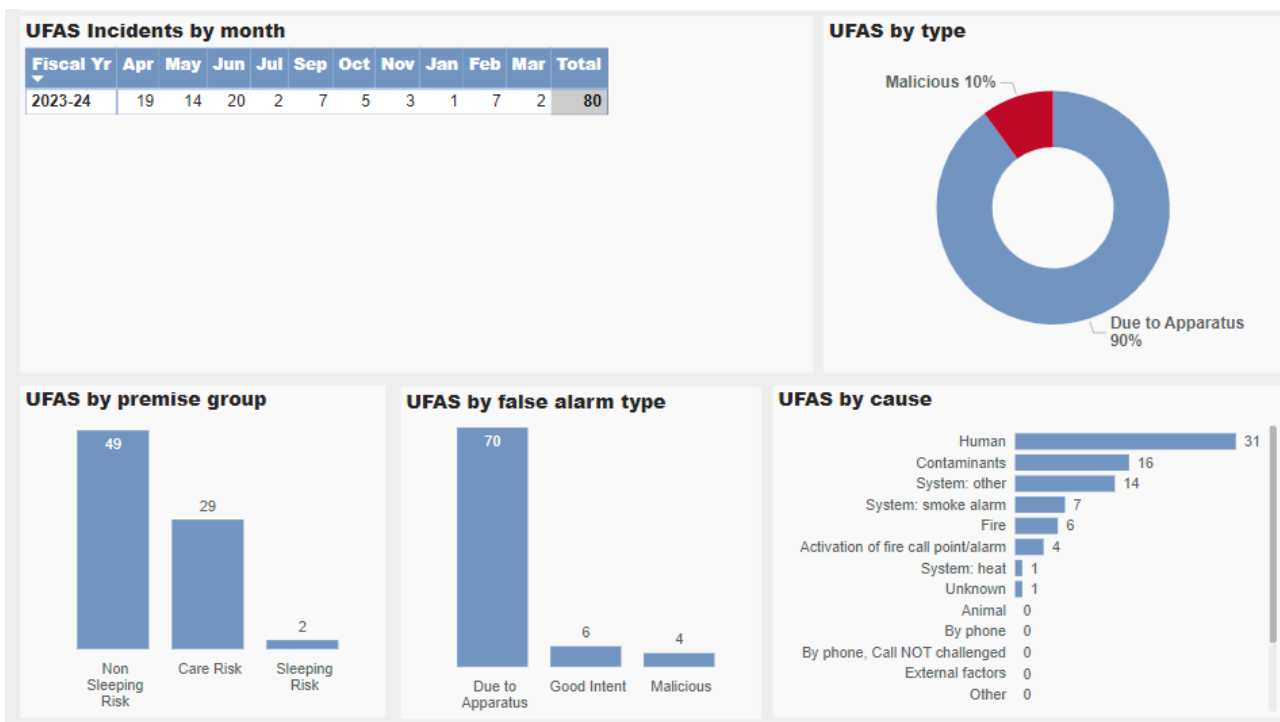
- 8.1 SFSR reports **Unwanted Fire Alarm Signals (UFAS)** of 62 for the first two quarters of 2023-24. This is a reduction of 39% (40) from the 2022-23 reporting period.



Graph13 – HI9 UFAS 1st April – 30th September 2023 and previous two years of reporting figures.

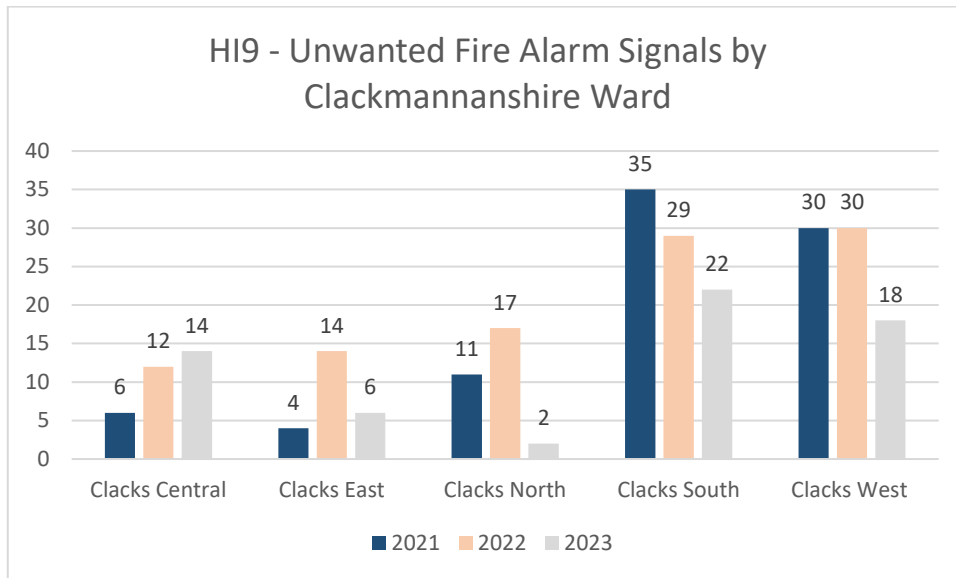


Graph 14 – UFAS incident data to date 2023-2024 following implementation of new UFAS response Policy.

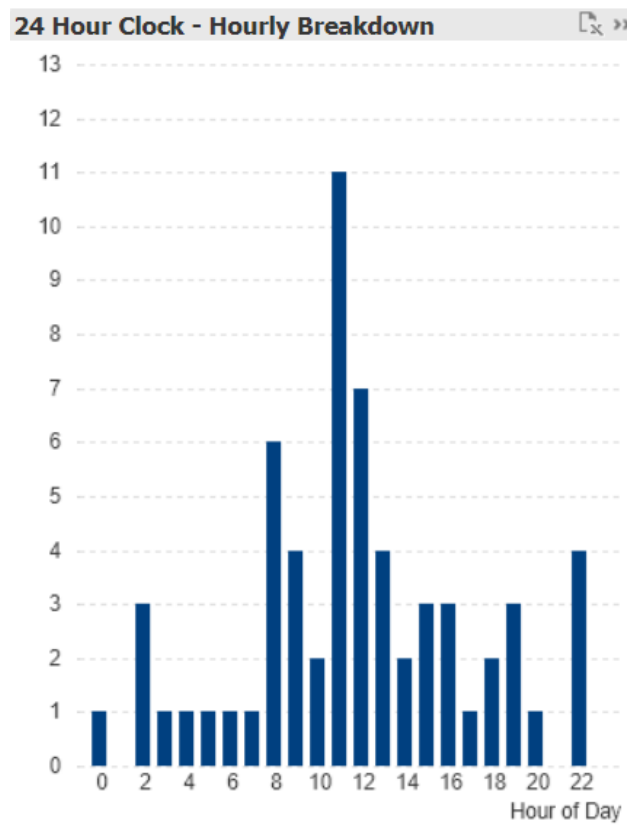


Graph 15 – UFAS incident data and cause of alarm for Clackmannanshire Council Area.

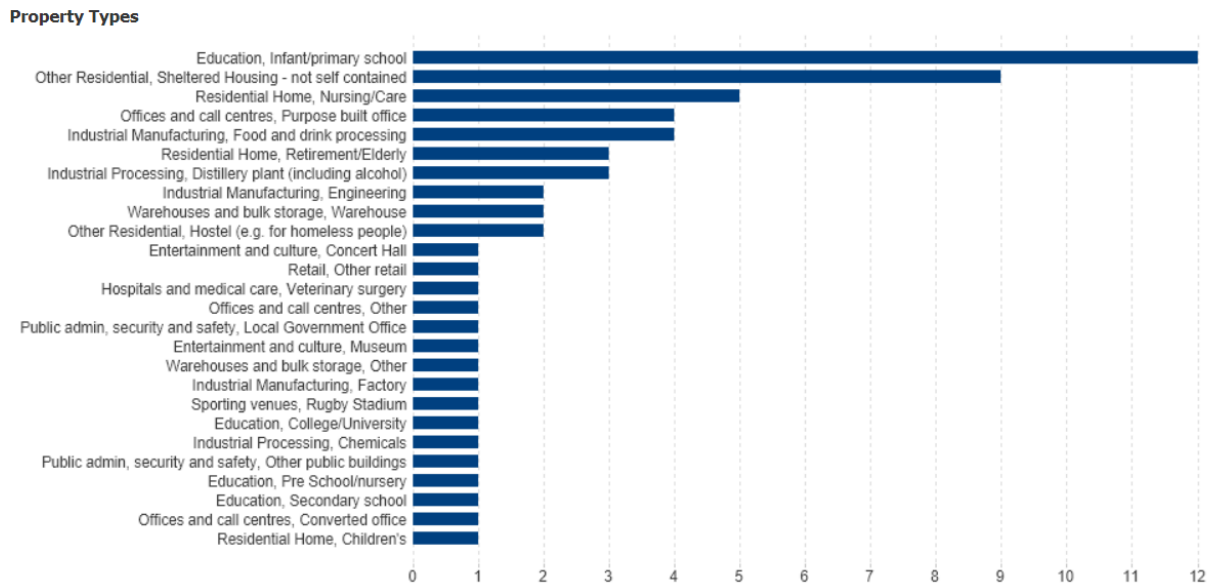
- 8.2 UFAS Reduction Strategies continue to be managed and monitored by a 'UFAS Champion' who contacts premises occupiers after each UFAS incident, to discuss the activation, as well as strategies to reduce or eliminate.
- 8.3 Data has been included to demonstrate efforts to reduce UFAS following the implementation of the new UFAS response policy on 01 July 2023. Clackmannanshire continues to experience UFAS incidents involving both sleeping and non-sleeping risks (the latter are not exempt from the policy) however the data is demonstrating positive outcomes and improvements in this area of reporting. We remain committed to supporting Premises Duty Holders achieve high levels of fire safety and the UFAS Champion continues to engage robustly with duty holders across all sectors to address spikes and drive these types of incidences down.



Graph 16 – Unwanted Fire Alarm Signals (UFAS) by Clackmannanshire Council Ward



Graph 17 – Unwanted Fire Alarm Signal (UFAS) reported by time of day within Clackmannanshire Council area.



Graph 18 – Unwanted Fire Alarm Signal (UFAS) by premises type within Clackmannanshire Council area.

Indicator Description

Automatic Fire Alarms (AFA) are fundamental to providing early warning from fire, giving people the chance to evacuate safely. However, to be effective, they must be properly installed, and a good fire safety management regime must be in place by the duty holder, so they do not activate where there is no fire.

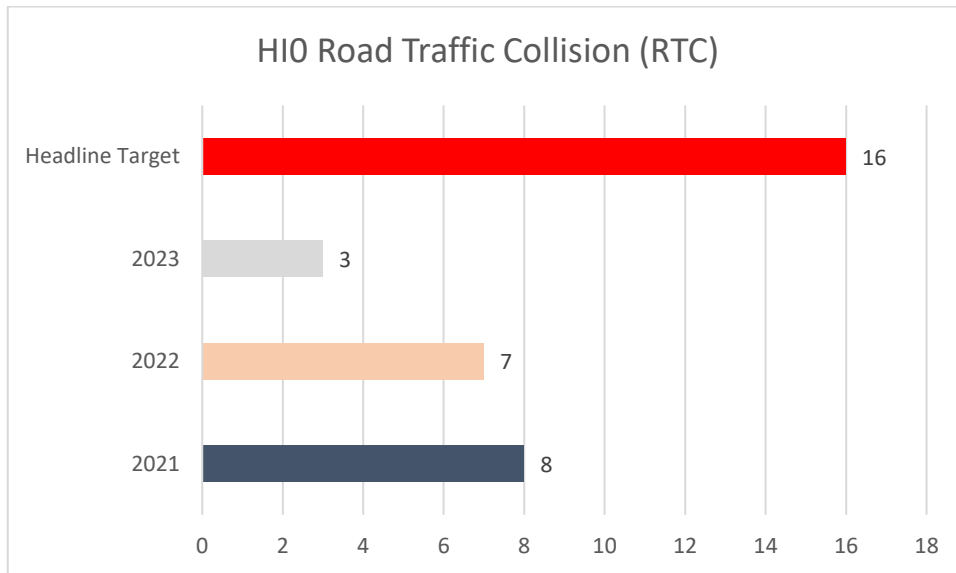
Every Unwanted Fire Alarm Signal (UFAS) from an AFA has an impact in terms of unnecessary blue light journeys, redirecting SFRS resources away from other activities such as community safety work and causing considerable disruption to businesses.

HI 9: Unwanted Fire Alarm Signals (UFAS)

As a headline target, the aim is to improve fire safety management and awareness, by reducing the number of attendances to unwanted fire alarm signals from automatic systems in non-domestic buildings to **less than 239** each year.

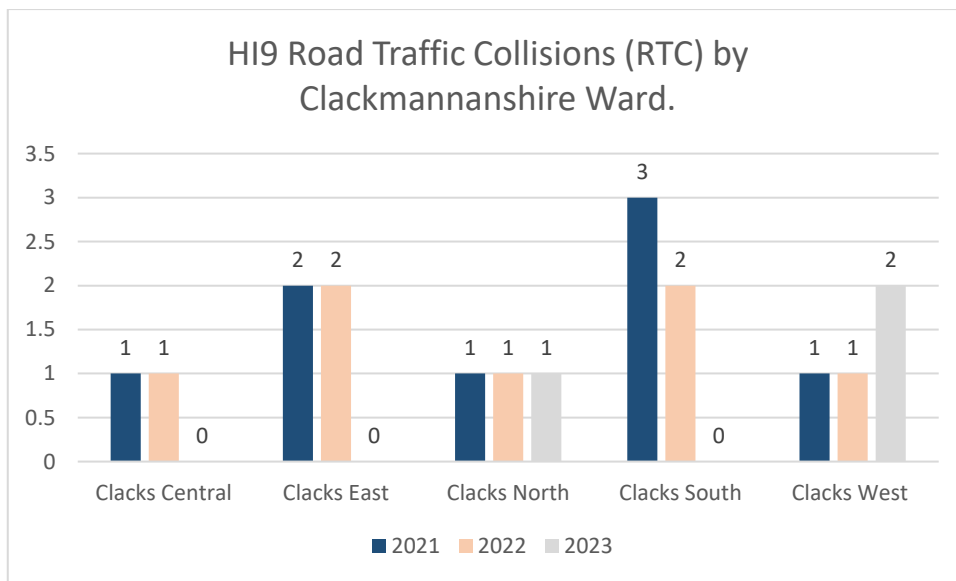
9. Priority 7: Transport and Environment

9.1 SFRS were mobilised to three **Road Traffic Collision (RTC)** Incidents within the first two quarters of 2023-2024 which sees a decrease of four from the previous reporting period and is tracking to be below the annual headline target of 16.



Graph 19 – H10 Road Traffic Collision (RTC) attendances 1st April – 30th September 2022-23 and previous two years of reporting figures

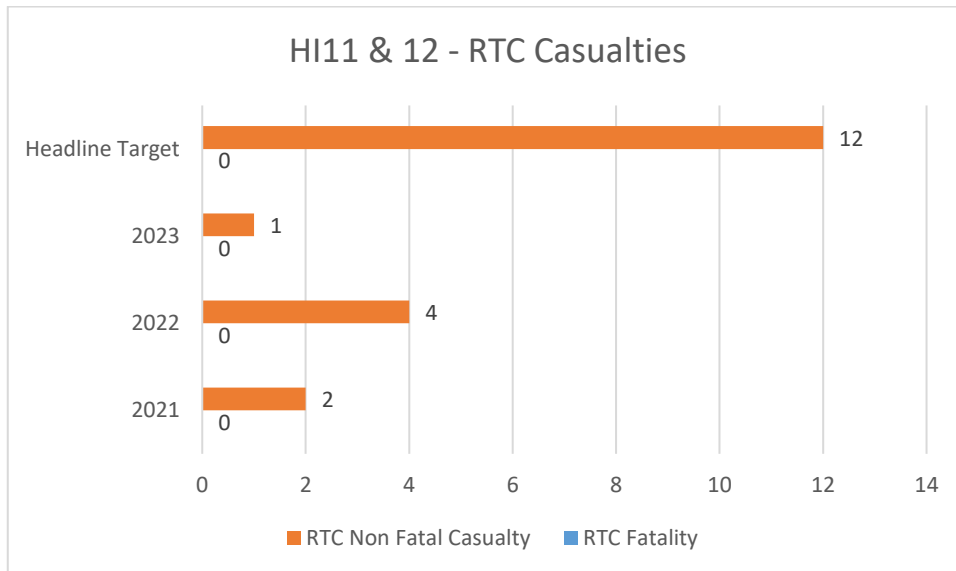
9.2 All of the RTCs reported involved a private domestic car.



Graph 20 – RTC incidents by Clackmannanshire Council Ward

9.3 SFRS are pleased to report that there were no **Fatal RTC Casualties** for this reporting period and only one associated **RTC Non-Fatal Casualty**. This individual was identified as the driver of the vehicle involved and was transported to hospital with injuries that appeared to be slight.

9.5 This reporting period sees a decrease in the number of non-fatal casualties by three and is tracking to be below the headline annual target of no more than 12 non-fatal RTC casualties.

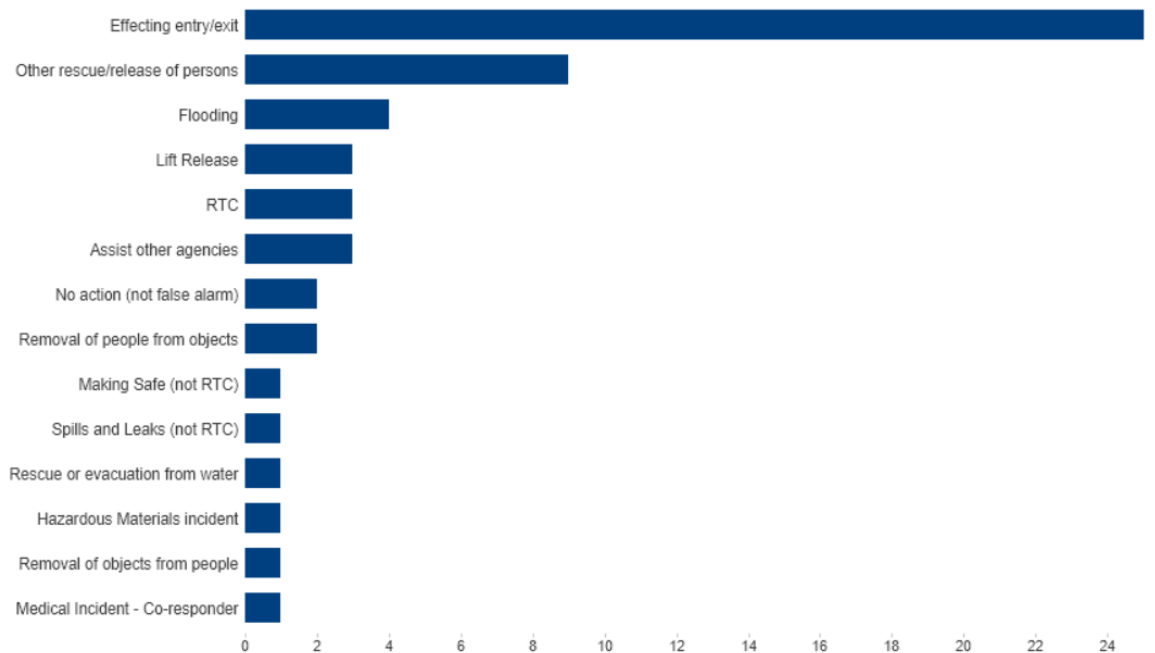


Graph 21 – HI11 & 12 RTC related Fatal and Non-Fatal Casualties 1st April –30th September 2023.

9.6 No persons required extrication/Release from their vehicle by means of Pneumatic Rescue Equipment.

9.7 **Special Service / Water Related Incidents** - Water related incidents caused by environmental factors are thankfully rare. Four water related incidents were attended during this period. Of this, SFRS actions involved making properties safe following localised pluvial flooding.

There was one reported incident which required trained SFRS Water Rescue personnel to enter waterways to perform rescues or assist in removal of persons from inland water.



Graph 22 – Special Service Incidents 1st April – 30th September 2023

Indicator Description

The SFRS has become increasingly involved in more non-related fire prevention work, in support of its role in promoting the wider safety and wellbeing of its communities. The headline indicators and targets reflect the fact that most of the non-fire related incidents attended by the SFRS in Clackmannanshire are RTC incidents.

HI 10: RTC Incidents

As a headline target, the aim is to reduce the rate of RTC's in Clackmannanshire, by keeping them **below 16** each year.

HI 11: Fatal RTC Casualties

As a headline target, the aim is to reduce the risk of death from RTC's in Clackmannanshire, by keeping **0** Fatal RTC Casualties

H12: Non- Fatal RTC Casualties

As a headline target, the aim is to reduce the risk of injury from RTC's in Clackmannanshire by keeping them **below 12** each year

10. Conclusions

Specific indicators, including Accidental Dwelling Fires and Fire Casualties have continued to remain low in frequency. The severity of those accidental dwelling fires has also decreased significantly. This statement remains the same for the number of Deliberate Primary and Secondary fires, Non- Domestic fires, RTC's and RTC casualties.

SFRS has historically seen a significant level in the number of Unwanted Fire alarm signals however we are confident that subsequent annual performance reports will see a continued reduction in such events following the implementation of our new UFAS "Time for Change" response policy which goes live on the 01 July 2023.

We will continue to manage demand reduction strategies linking in with key partner agencies to create a safer place to live, work and visit with some wider partnership work examples undertaken below.

Appendix 1 – Community Safety Engagement Activities – Clackmannanshire Council Area

Home Fire Safety Visits (HFSV) – 01/04/23 to 30/09/23	
High Risk	133
Medium Risk	89
Low Risk	47
Total Completed	269
Adult Protection (AP1) Referrals	16
Adult Protection (AP1) Case Conference	1
Safe and Well visits	SFRS National Pilot finished (Phase 1) Await updates from Governance.

Post Domestic Incident Response	51
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Safety Equipment Dispensed – 01/04/23 to 30/09/23	
Fire retardant bedding	3
Fire retardant throws	3
Ashtrays	0
Letterbox defenders	7

Community Safety Engagement Activities – 01/04/23 to 30/09/23	
Partner training	3 Community Engagement events incorporating MECCS fire risk recognition and referral pathway training and Transform Forth Valley.
Community Justice	1 event at HMP Prison Glenochil, establishment of Life Skills Courses.
Hoarding / Home Fire Safety	2 stalls within CGL and MECS Office promoting the risk recognition and referral pathways as part of National Hoarding Awareness Week (May). Visits to Alzheimer Scotland Carer Group including 15 carers. within area to include Alzheimer Scotland Carers Group. engagement events relating to Home Fire Safety incorporating Group talks and HFSV exercises.
Anti-Social Behaviour (ASB)	11 ASB Workshops, Patrols and Partner events responding to areas of concern, known hotspots and community groups within areas of high risk to include Maple Court, Travelling community camps and Alloa Town Centre. Various school visits and Primary school and Secondary school within locality.
Bonfire Community Engagement	Alloa Academy – 125 S2 pupils All Primary School received engagement within Clackmannanshire council area by Operational Crews.
Water Risk Community Events	7 recorded activities including stalls at Alva Academy (500+ pupils) and primary schools. Patrols with partners at identified water hotspots including Powmill Quarry
Road Safety Event	3 events to include Forth Valley College, and Parents groups.
Seasonal Thematic Action Plans (TAP)	Spring TAP – 11 activities by Operational crews to include ASB, Secondary Fire interventions, Open day at Alloa Fire station

	<p>and support to community led gala days and summer events.</p> <p>Summer TAP – 10 activities by Operational crews to Reduce fire-related anti-social behaviour, deliberate primary, and secondary fires. Reduce the number of fires in derelict/unoccupied buildings. Reduce the number of fires involving refuse/rubbish. Reduce the number of outdoor fires involving grass/ heather/heathland and/or forested areas. Promote fire safety within seasonal sleeping risks. Promote water safety. Reduce the number of fires and accidents involving boats, leisure craft and ferries. Contribute to the delivery of summer road safety initiatives.</p>
Corporate Parenting Events	Attendance at Corporate Parenting events including “Oor Clacks”, Children and Young People’s Strategic Partnership and Clackmannanshire Councils People Directorate celebration event with 500+ attendees.

Appendix 2 - Acts of Violence

There were **no** reports of acts of violence towards firefighters during the reporting period, which reflects on the positive partnership working carried out within the Clackmannanshire Council area.

Appendix 3 – On-Call Recruitment and Retention

	Target Operating Model	No. Of Personnel	Vacancies	Notes of Interest	Recruitment Pathway
Alloa	15	14	1	4	3
Tillicoultry	15	11	3	3	4

SFRS continues to experience challenges on a national scale in recruitment and retention of On Call Firefighters. Clackmannanshire Council is no different however in 2023-24 we are embarking on a local recruitment drive #YouareSFRS accompanied by increased visibility and open-door events. SFRS would like to thank elected members for their support and contributions towards preparation for this.

Background Papers

SFRS Local Fire and Rescue Plan for Clackmannanshire Local Authority Area 2021. Link - [Document | Scottish Fire and Rescue Service \(firescotland.gov.uk\)](#)

Report Contact: Lee Turnock

Group Commander

Clackmannanshire - Fife – Stirling LSO

Scottish Fire and Rescue Service

Email – lee.turnock@firescotland.gov.uk

Report to: Audit and Scrutiny Committee

Date of Meeting: 18th April 2024

Subject: Clackmannanshire Local Fire and Rescue Plan Review 2023

Report by: Local Senior Officer, Clackmannanshire-Fife Stirling LSP Area

1.0 Purpose

- 1.1. The Scottish Fire and Rescue Service (SFRS) is required under the Fire (Scotland) Act 2005, as amended by the Police and Fire Reform (Scotland) Act 2012, to prepare Local Fire and Rescue Plans for each local authority in Scotland.
- 1.2. The publication of our new Strategic Plan 2022-25 in October 2022 instigated a requirement to carry out a mandatory review of all Local Fire and Rescue Plans. This review will provide us with information on how well we are performing against our existing priorities, as well as highlighting areas for continued improvement and opportunities for change against the growing needs of our communities.
- 1.3. This review has now been undertaken with the attached report issued to Clackmannanshire Council's Audit and Scrutiny Committee for review. The purpose of this report is for noting and presents elected members with performance of SFRS against Local Priorities for the lifecycle of the current Fire and Rescue Local Plan.

2.0 Recommendations

- 2.1. It is recommended that committee notes, challenges and comments on the report as appropriate.

3.0 Considerations

- 3.1. As a national organisation SFRS is committed to working in partnership with local authorities to address local and regional priorities which are designed to improve the outcomes of the communities of Scotland.
- 3.2. Whilst also delivering a response model that is fit for purpose and meets best value for the public purse, SFRS wish to work collaboratively with stakeholders to realise positive outcomes, working together for a safer Scotland.

3.3. Local Fire and Rescue Plans set the Scottish Fire & Rescue Service's (SFRS) national and local operating context and outline our specific priorities for that area. In their preparation, due regard is given to the Fire and Rescue Framework for Scotland and the SFRS Strategic Plan.

3.4. Throughout 2024 SFRS will reach out to elected members through consultation to discuss local priorities and develop a new Local Fire and Rescue Plan that is tailored to meet the needs of the Audit and Scrutiny Committee and the people of Clackmannanshire.

3.5. Within the Local Fire & Rescue Plan for Clackmannanshire, seven objectives have been identified. These are:

Objective 1: Local Risk Management and Operational Preparedness.

Objective 2: Unintentional Harm and Injury.

Objective 3: Domestic Fire Safety.

Objective 4: Deliberate Fire Setting.

Objective 5: Built Environment.

Objective 6: Unwanted Fire Alarm Signals.

Objective 7: Transport and Environment.

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
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Kenneth Barbour	Area Commander & LSO for Clackmannanshire-Fife-Stirling LSO Area	

**Working together
for a safer Scotland**



**SCOTTISH
FIRE AND RESCUE SERVICE**

Working together for a safer Scotland

CLACKMANNANSHIRE AREA LOCAL FIRE AND RESCUE PLAN REVIEW 2023

Safety. Teamwork. Respect. Innovation.

Introduction

The Scottish Fire and Rescue Service (SFRS) is required under the Fire (Scotland) Act 2005, as amended by the Police and Fire Reform (Scotland) Act 2012, to prepare Local Fire and Rescue Plans for each local authority in Scotland.

Local Fire and Rescue Plans set out our national and local operating context and outline our specific priorities for that area. In their preparation, due regard is given to the Fire and Rescue Framework for Scotland and the SFRS Strategic Plan.

The publication of our new Strategic Plan 2022-25 in October 2022 instigated a requirement to carry out a mandatory review of all Local Fire and Rescue Plans. This review will provide us with information on how well we are performing against our existing priorities, as well as highlighting areas for continued improvement and opportunities for change against the growing needs of our communities.

The information contained within this Review will contribute towards the development of a new Local Fire and Rescue Plan that is tailored to local needs.

Performance Data – what the figures told us

Performance Data: Overall Operational Activity

Data contained within this review has been displayed using Statistics Process Control (SPC) Chart. SPC Charts are used to look at variation within datasets. The blue line represents the average (in this case, the mean) and the red lines represent the Upper and Lower Control Limits (UCL and LCL). There are standard guidelines that indicate whether there is any cause for concern in the data:

- If data points fall outside of the UCL and LCL, this implies that they are not within the 'normal' range. It could be that a one-off event has caused the data to be outside of the range.
- If multiple data points (usually 6 or more) consecutively fall above or below the mean it implies that this is likely not random variation and that something is behind this change.
- If multiple data points (at least 6) show a continual increase or decrease, no matter where they are in relation to limits or means, this implies that there is a trend in the data.
- If we see two or more data points very close to the UCL or LCL, this could be an early warning sign that something is happening other than random variation and further investigation could be needed.
- Otherwise, data points that fall between the UCL and LCL are likely to be caused by random variation.

Performance Local Priorities

Local Priority 1: Local Risk Management and Operational Preparedness

Operational Intelligence

During the reporting period, SFRS continued to maintain an Operational Intelligence system, which is a database of premises which are inspected based on the level of risk it presents to;

- SFRS Personnel
- Public
- Community Resilience
- Historic and Cultural Value

Our personnel gather information on these premises including site plans, building construction, utilities isolation, risks to Firefighter safety and other key information. The premises are categorised as high, medium or low, and inspected according to the risk level.

Over the planning period, our personnel maintained the database by completing an inspection programme, ensuring that new risks were identified and inspected, and that premises which either no longer present a risk, or no longer exist, were removed from the system.

Training

Our personnel undertake a programme of training within the SFRS Training for Operational Competence (TFOC) framework. This training programme ensures that all personnel receive training on the 46 incident types over a rolling three-year programme. This includes core, standard, and advanced training modules. Personnel on stations with a specialist rescue resource also receive additional training in that discipline.

Preparedness

As part of the Forth Valley Local Resilience Partnership, we have prepared for, and participated in an exercise programme, which tests the emergency procedures of our business partners. This exercise programme ensures that all partner personnel can operate safely in the event of an emergency, and that our major businesses can return to normal working sooner.

Our personnel also identify premises within their own station area, and working with premises holders, complete exercises on a smaller scale.

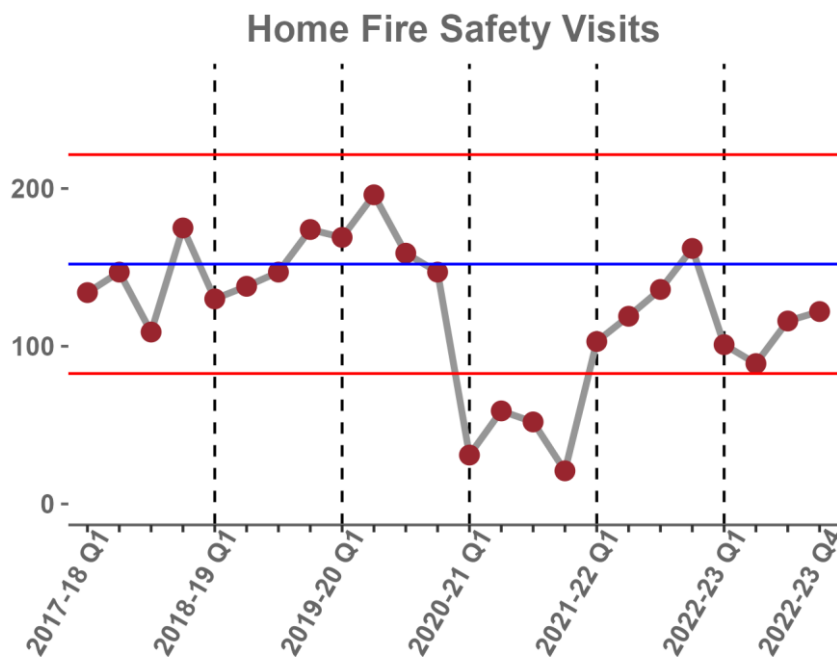
Local Priority 2: Unintentional Harm and Injury

The Building Safer Communities programme is a collaborative initiative which seeks to help national and local partners and communities work together to make Scotland safer and stronger. The programme vision is of a flourishing, optimistic Scotland in which resilient individuals, families and communities live safe from crime, disorder, danger and harm.

Home Fire Safety Visits (HFSV) are a proven method of engaging with people at risk from fire and for providing appropriate fire safety information and advice reducing the risk of unintentional harm from fire within the home environment.

A HFSV may be defined as: A comprehensive assessment carried out by a trained assessor, which examines the levels of fire risk within the home. It provides a means to mitigate the risk through the provision of guidance, advice and, if required, the installation of smoke and heat alarm(s)'.

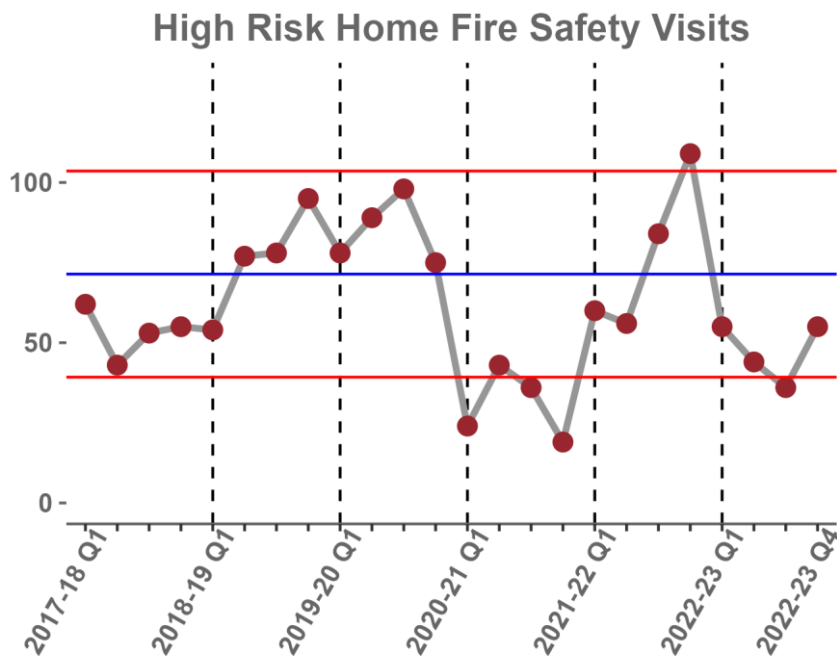
The graph below highlights our current performance within Clackmannanshire over the reporting period 2020 -2023, also included are figures prior to the COVID 19 Pandemic.



Home Fire Safety Visits in Clackmannanshire were subject to random variations before the Covid-19 pandemic in 2020-21. There was a substantial decrease in Home Fire Safety Visits in 2020-21 Q1, shown by the data point being far below the lower control limit. Figures have slowly increased since then, but with the exception of 2021-22 Q4 they have been below average, showing that the number of visits carried out has not return to levels seen before the pandemic. This is consistent with national patterns in the data.

Targeting and Prioritising Visits

Targeting of HFSVs to those most at risk (High Risk HFSV) will be informed by analysis and assessment of data, trends, operational intelligence and also through information / referrals received from partner agencies.



Similar to overall Home Fire Safety Visit figures, visits that were considered high risk were affected by the Covid-19 pandemic, with a large reduction seen between 2019-20 Q4 to 2020-21 Q1. From 2020-21 Q1 to 2021-22 Q2 figures were below average, before an increase above the upper control limit in Q4. Figures since then have returned to below average with 2022-23 Q3 being below the lower control limit. This shows that the number of high-risk visits has not returned to levels seen before the pandemic. Overall patterns in Clackmannanshire are consistent with what has been seen nationally across Scotland.

Fire and smoke alarms: changes to the law

A new law came into effect in February 2022 and has come about because of the Grenfell fire in London in 2017, and it applies to all Scottish homes.

Every home now needs to have interlinked fire alarms. Being interlinked means if one alarm goes off, they all go off. You may not always hear the alarm closest to the fire, especially if you're somewhere else in the house. An interlinked system will alert you immediately and can help save lives. It is the property owner's responsibility for meeting the new standard.

How we worked to improve our performance

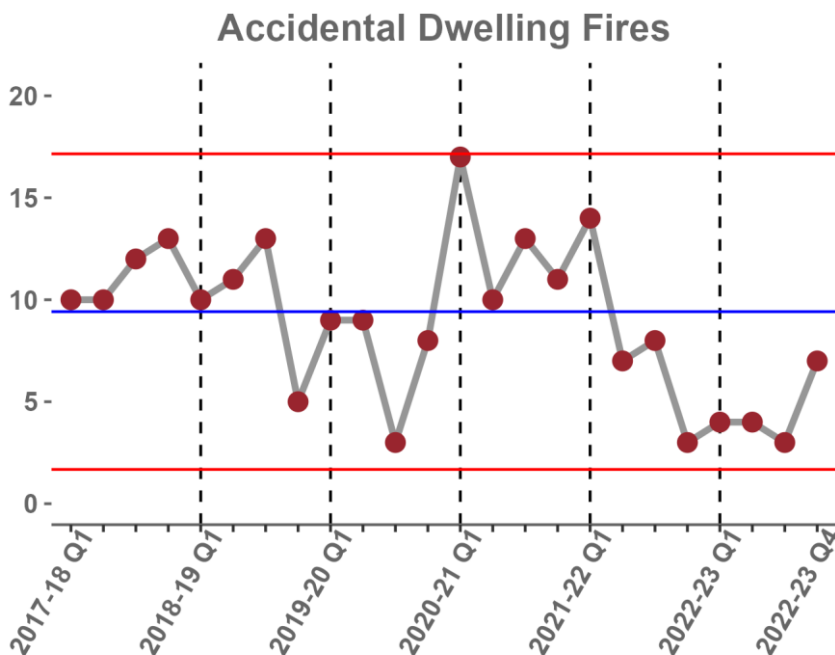
Targeting of HFSVs is informed by analysis and assessment of data, trends, operational intelligence and also through information / referrals received from partner agencies.

HFSV to high-risk vulnerable persons continues to be our primary focus to reducing fire related accidental harm. Partner agencies and their practitioners are a proven way of helping SFRS identify vulnerable persons who are at risk from fire, this relies on partner referrals into SFRS.

In an effort to increase partner referrals into SFRS, locally we have trained over 500 Partner practitioners on fire risk recognition and the referral pathway following the removal of COVID restrictions.

Local Priority 3: Domestic Fire Safety

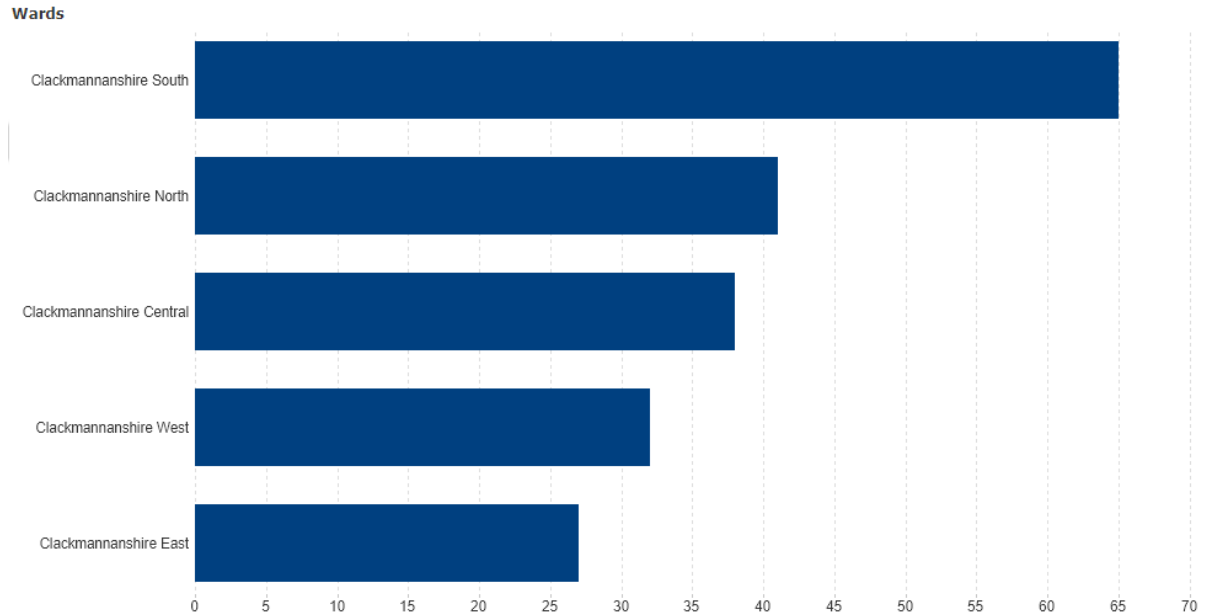
Accidental Dwelling Fires cause considerable distress for the occupier and local community, but also place a significant financial cost to the economy.



Accidental dwelling fires in Clackmannanshire have been subject to random variations since 2017-18 Q1. Figures have been below average since 2021-22 Q2, indicating a downward trend. Nationally, there has been a decrease in accidental dwelling fires since 2017-18.

Accidental Dwelling Fires by Ward:

Across the reporting period, Accidental Dwelling Fires in Clackmannanshire has averaged at 41 incidents per year. The ward breakdown for the years 18-23 can be seen below. Clackmannanshire South has recorded the most incidents, whilst Clackmannanshire East has recorded the least number of incidents.



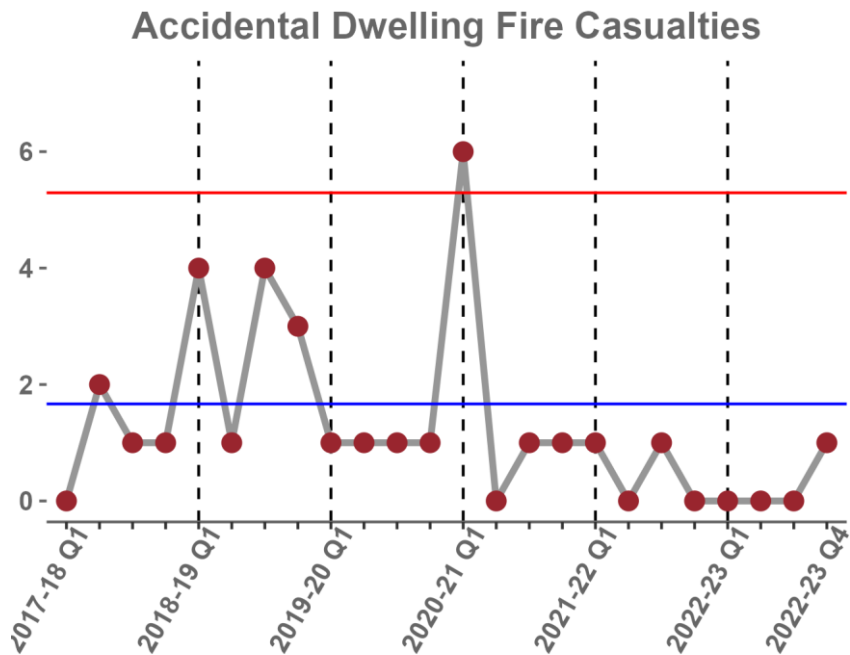
Evidence shows that Accidental Dwelling Fires in 22-23 are well below (22) the five-year average of 56, the severity from the fires has also decreased significantly. Our data shows that majority of Accidental Dwelling Fires are a result of cooking.

A number of these incidents (45%) required no action to be taken by SFRS personnel, and only 10% resulted in the use of a hose reel jet. Of the incidents, 90% of damage remained in the room of origin.

Although the number of domestic dwellings fitted with smoke detection increases every year, through our own, and partner agency work, only 75% of addresses suffering an Accidental Dwelling Fire had working smoke detection, which gives an early warning, and prevents a much more serious incident developing. Of those addresses with smoke detection, 9% did not operate to give that vital warning.

The Stirling Clackmannanshire Fire, Local Senior Officer (LSO) area has consistently delivered a high number of Home Safety Visits when compared to other LSO areas. This has contributed to the low numbers of incidents across our area, as well as the low fire severity at incidents which do occur.

Accidental Dwelling Fire Casualties



Accidental dwelling fire non-fatal casualties have remained within control limits since 2017-18 Q1 with the exception of 2020-21 Q1. From 2020-21 Q2 figures have been below average. Nationally, figures have remained consistently below average since 2020-21 Q1.

In 2020-21, there were a total of 2 dwelling fire fatalities.

How we worked to improve our performance

SFRS is currently undertaking a review of our Home Safety Visit system which will enable us to better target those most at risk, not only from fire, but also from unintentional harm injuries in the home. We will continue to work with our partners, to reduce the risk from fire and unintentional injuries as we move forward into the new Local Plan.

Local Priority 4: Deliberate Fire Setting

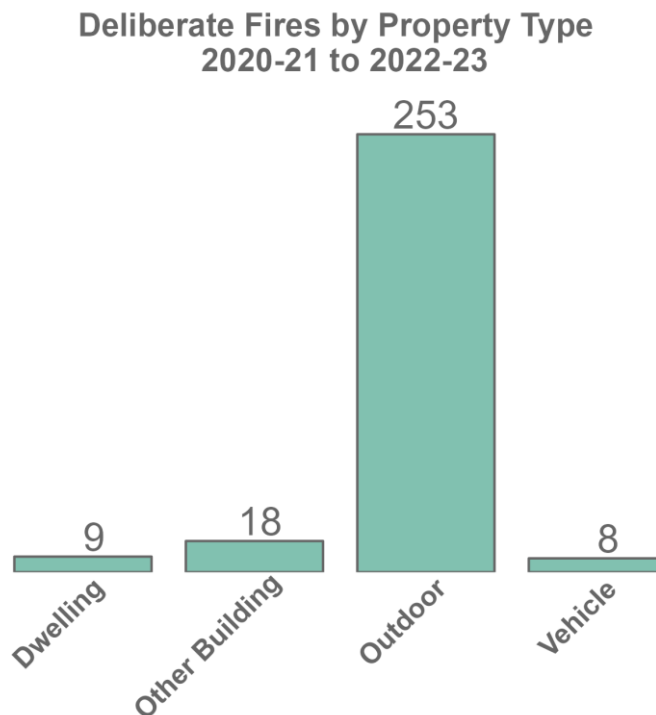
Deliberate fire setting is a significant problem for the Scottish Fire and Rescue Service and is responsible for a high number of all secondary fire activity attended by fire crews in Clackmannanshire. These fires are split into two categories, which are described below:

Primary Fires - are generally more serious fires that harm people or cause damage to property. Primary fires are defined as fires that cause damage and meet at least one of the following conditions:

- any incident which involves uncontrolled combustion requiring equipped personnel
- any fire involving fatalities, casualties, or rescues.
- any fire attended by six or more pumping appliances.

Secondary Fires - are generally small outdoor fires, not involving people or property. These include refuse fires, grassland fires and fires in derelict buildings or vehicles.

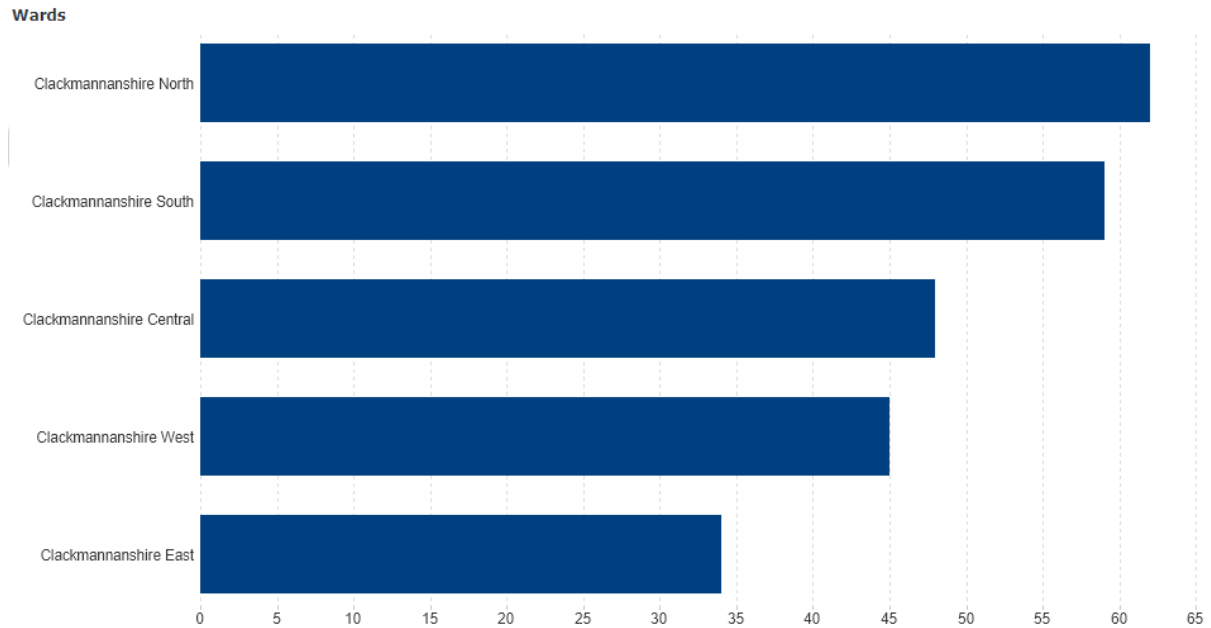
There remains a close link between deliberately set secondary fires and other forms of anti-social behaviour.



Between 2020-21 and 2022-23, most deliberate fires have occurred in outdoor settings, with 253 fires in total occurring in this property type over this time. This is followed by other building fires (18 fires in total), dwelling fires (9 in total) and vehicle fires (8 in total).

Deliberate Secondary Fire Setting by Ward

Out with UFAS incidents, deliberate 'secondary' fire setting accounts for more incidents within Clackmannanshire than any other:



The figures above highlight that deliberate secondary fire setting continues to be an area of concern.

Deliberate Fire Reduction Strategy

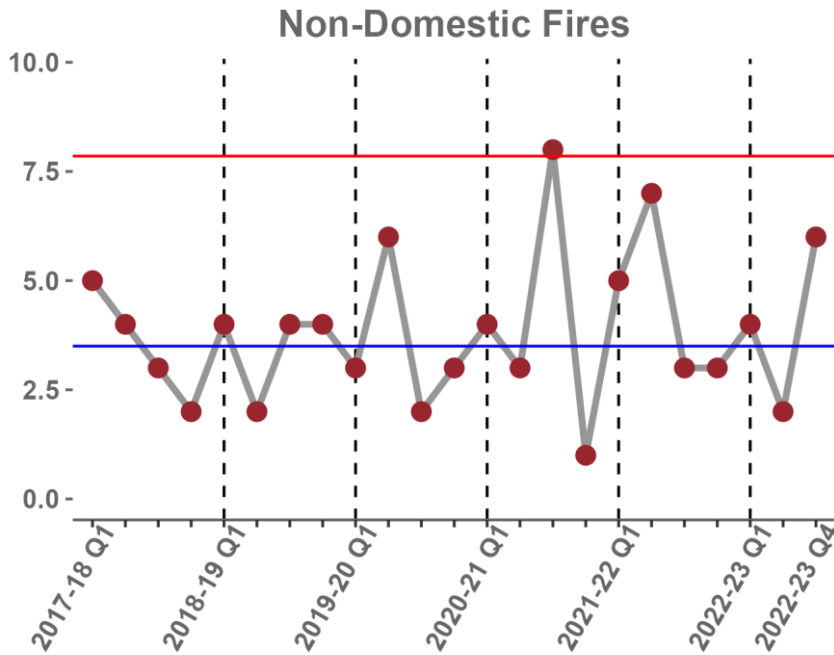
Locally we target schools in high activity areas to deliver talks regarding the dangers and consequences of deliberate fire setting. These talks take place normally in April and October, which are the peak periods of activity.

We also work with our Police and Local Authority partners to identify deliberate fire setting incidents early to ensure that solutions are implemented to prevent further incidents.

We also liaise with premises occupiers, particularly in town centres, to give advice on refuse storage and security which can be a cause of deliberate fires.

Local Priority 5: Built Environment

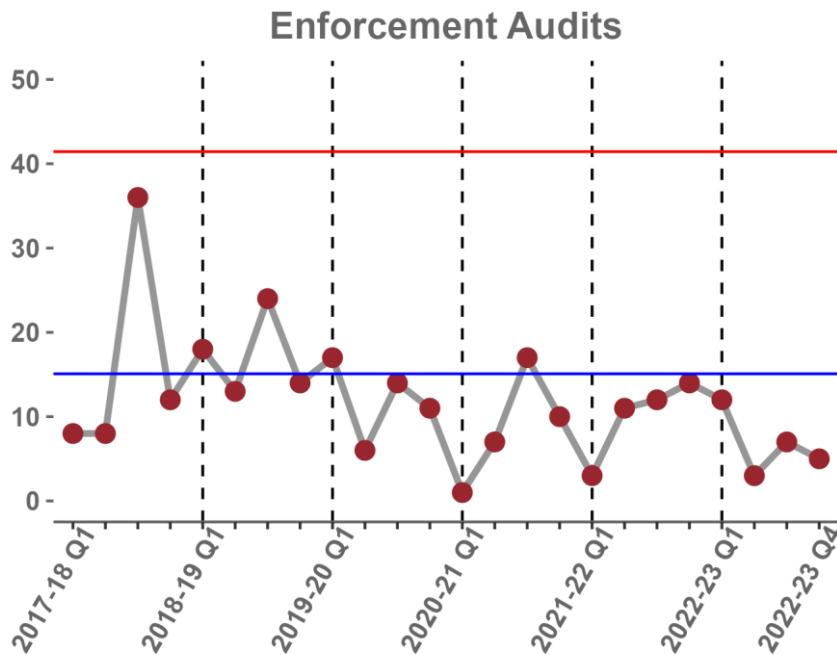
All fires in workplaces and business premises are classified as Non- Domestic Fires and come under the scope of the Fire (Scotland) Act 2005. Incidents involving fires in non-Domestic properties in Clackmannanshire have risen in the reporting period.



Non-domestic fires have been subject to random variations since 2017-18 Q1 and have remained within the control limits with the exception of 2020-21 Q3 which was on the upper control limit. There are no clear overall trends or patterns. Nationally, non-domestic fires have shown a decreasing trend since 2017-18.

Audit Programme

In undertaking our statutory duties in respect of Part 3 of the Fire (Scotland) Act 2005 (as amended), SFRS will implement a risk-based methodology and establish a programme to audit relevant premises, prioritising premises that present the greatest risk to life safety.



Audit figures were subject to random variation between 2017-18 Q1 and 2019-20 Q4. During the Covid-19 pandemic, figures decreased, with the figures for 2020-21 onwards being on or below the average. This is consistent with national patterns in the data.

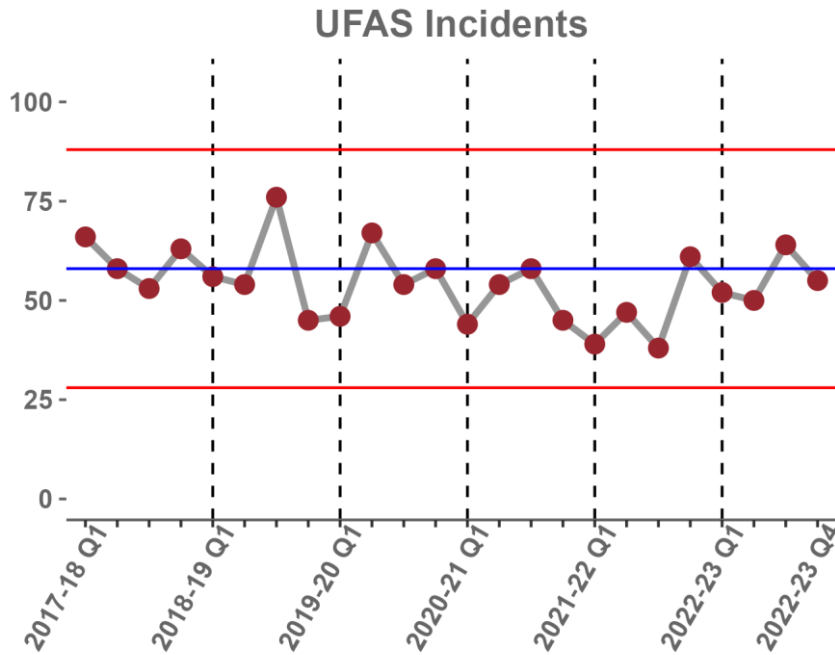
How we worked to improve our performance

We continue to deliver a programme of fire safety audits in relevant premises - as detailed within section 78 of the Fire (Scotland) Act 2005 - identified as high risk on an ongoing basis. We also complete thematic audit programmes where patterns emerge of incidents in a particular risk group.

As well as the audit programmes described above, we also deliver 'post fire audits' which take place as soon as possible after a fire has occurred in a premises. The purpose of these audits is to deliver further fire safety advice to the premises occupier, and to identify any issues which could be used to inform other similar premises types in order to prevent further incidents of a similar nature.

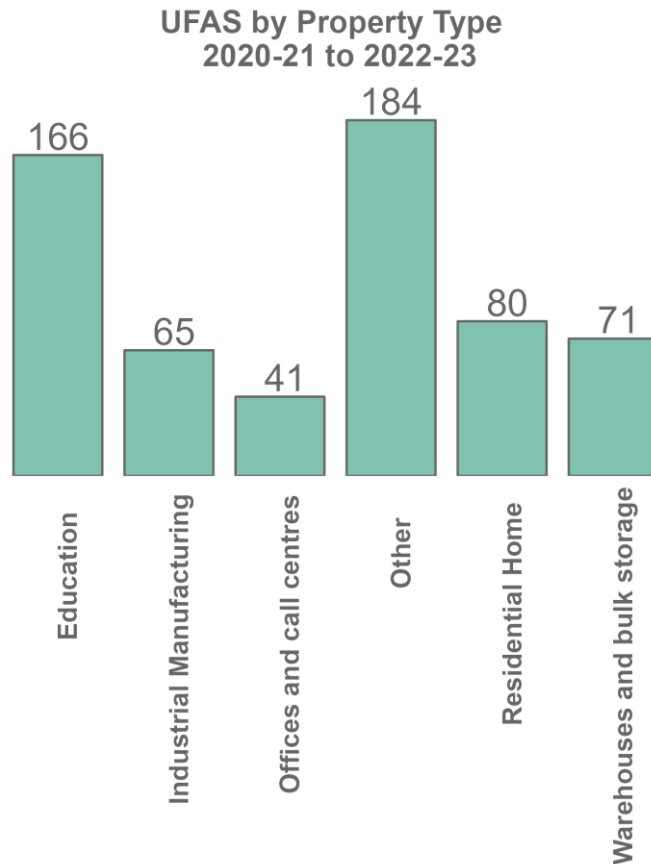
Local Priority 6: Unwanted Fire Alarm Signals

An Unwanted Fire Alarm Signal (UFAS) can be defined as ‘any alarm activation which is not the result of a fire or a test’. UFAS incidents have fluctuated in Clackmannanshire over a five-year period. The graph below highlights the trend over five years:



Unwanted Fire Alarm Signals (UFAS) have been subject to random variation since 2017-18. Nationally, figures decreased during the Covid-19 pandemic, when most offices were closed, and home working was encouraged. This meant that less people were in workplace buildings, and so there was less opportunity for an unwanted signal to occur. Between 2020-21 Q1 and 2021-22 Q3, figures were on or below average. This could have been due to the Covid-19 pandemic. Since then, figures have returned to average levels. This is consistent with national patterns in the data.

UFAS by Property Type



Between 2020-21 and 2022-23, most UFAS occurred in property types that fall under the category 'Other', with 184 occurring here within this time. This was followed by education (166), residential homes (80) and warehouses and bulk storage (71).

How we worked to improve our performance

Unwanted Fire Alarm Signals (UFAS) Reduction Strategies continue to be managed and monitored by an 'UFAS Champion' who contacts premises occupiers after each UFAS incident, to discuss the activation, as well as strategies to reduce or eliminate.

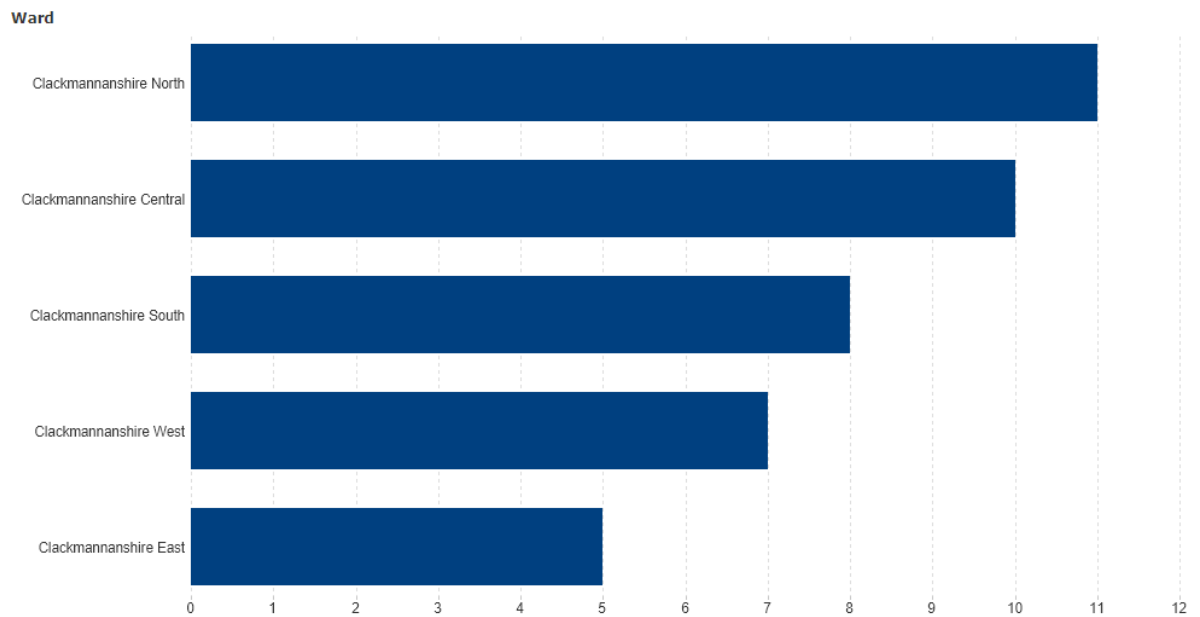
In July 2023 SFRS has changed how it responds to automatic fire alarm (AFA) call outs to commercial business and workplace premises, such as factories, offices, shops and leisure facilities - unless a fire has been confirmed. This change does not apply to sleeping premises, such as hospitals, care homes, hotels or domestic dwellings who will continue to get an emergency response. The change will reduce blue light journeys to AFA calls and associated road risk and carbon emissions. The new response model will allow firefighters more time to focus on upskilling, training and prevention work.

Local Priority 7: Transport and Environment

Water Related Incidents

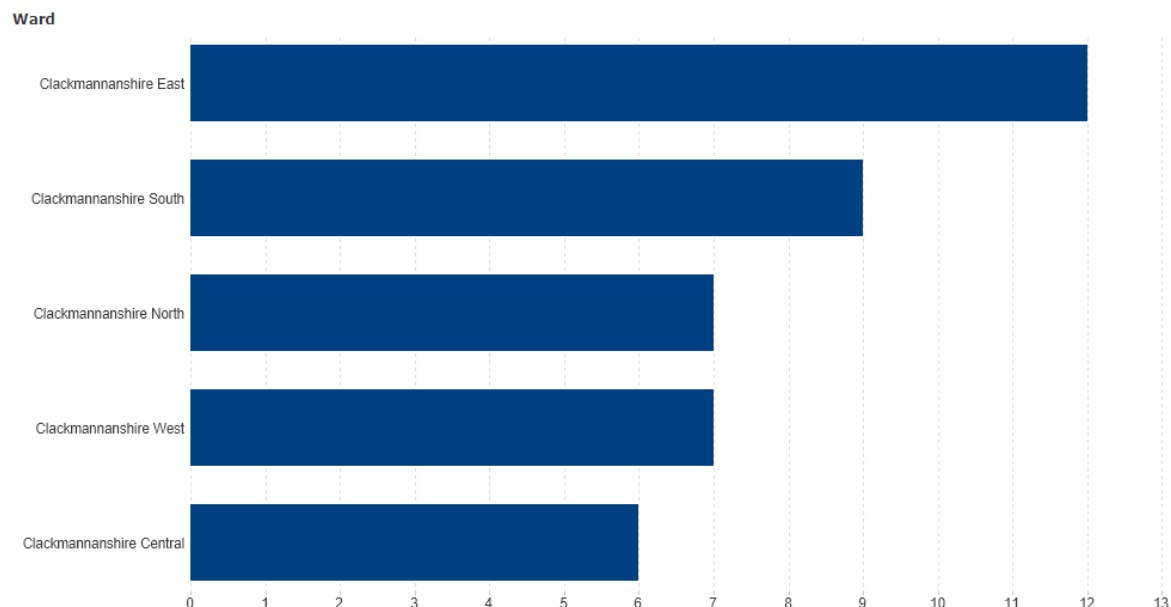
Water related incidents caused by environmental factors are thankfully rare. An average of 14 flooding incidents were attended during the three-year period 2021 -2023. One incident over the three-year period related to pumping out following localised pluvial flooding.

There were only two reported incidents which required trained SFRS Water Rescue personnel to enter waterways to assist with evacuations.



Road Traffic Collisions (RTC)

As SFRS generally only attend RTC's of a serious nature, where persons are trapped, the figures below do not capture every RTC which occurs within Clackmannanshire:



How we worked to improve our performance

Water

- Water Safety input delivered to primary and secondary schools.
- Winter Ice Safety input delivered to primary and secondary schools.
- Seasonal foot patrols conducted at Locations of Concern creating water safety engagement opportunities with young people and members of the public.
- Inland and Coastal Water Safety CSE events
- Waterside Responder scheme Training delivered to businesses across Clackmannanshire who's work location is beside a body of water.

Water Safety Concerns in Clackmannanshire - any concerns around water safety in Clackmannanshire can be sent to the Stirling and Clackmannanshire Water Safety Group where experts in water safety can collectively discuss the concerns and identify how to improve the situation.

Road

SFRS Stirling, Clackmannanshire and Fife area, along with our partners, deliver valuable educational projects including 'Safe Drive Stay Alive', 'Cut It Out' and 'Biker Down'

Partnership events developed and delivered included:

- Road Safety input delivered to primary and secondary schools.
- Safe Drive Stay Alive (SDSA) Road Safety Production delivered to secondary pupils in 5th year.
- Virtual Reality (VR) Road Safety input delivered to Secondary School leavers.
- Road Traffic Offending input delivered to Criminal Justice Groups.
- Biker Down - Improving motorcyclists risk awareness and driving ability.

Conclusion

SFRS in Clackmannanshire is committed to working in partnership with Clackmannanshire Council, Police, Health and Social Care and third sector partners, to implement a prevention strategy which will reduce the risk of harm to our communities, through fire and other risks. SFRS is currently contributing to the Local Outcome Improvement Plan (LOIP) and Locality Plans. This will in turn improve outcomes for our communities across Clackmannanshire.

As demands and expectations from our communities for our services continue to expand across Scotland, SFRS, as a national organisation, is progressing with our transformation programme, which is being designed to ensure that we have the appropriate resources in the best location to safely manage incidents which do occur. This transformation programme includes expanding the role of our personnel, to meet the needs of our communities and partners.

It is recognised however, regardless of how active the SFRS is in its prevention agenda, operational demand will still be present. It is therefore vital to ensure the SFRS can respond as and when such demand arises. The continuous process of identifying and reviewing the range of risks within our communities will provide the basis as to how we will manage and respond to such risks to safeguard the safety of our firefighters and our communities.

Recommendation

It is recommended that the following priorities are taken forward in the new Local Fire and Rescue Plan for the Area:

Priority 1 - Local Risk Management and Operational Preparedness

Priority 2 - Unintentional Harm and Injury

Priority 3 - Domestic Fire Safety

Priority 4 - Deliberate Fire Setting

Priority 5 - Built Environment

Priority 6 - Unwanted Fire Alarm Signals

Priority 7 - Transport and Environment

NOT PROTECTIVELY MARKED

Report to Audit & Scrutiny Committee

Date of Meeting: 18 April 2024

Subject: Partnership & Performance: Half Year 2023/24 Business Plan Update

Report by: Strategic Director, Partnership & Performance

1.0 Purpose

- 1.1. Partnership & Performance delivers a diverse range of services, including a number of statutory and essential support functions. This report provides the Committee with an update on performance, risks and achievements, relating to the Business Plan 2023/24 agreed by Council in autumn 2023. (link can be found at <https://www.clacks.gov.uk/document/meeting/1/1202/7748.pdf>)
- 1.2. This report updates on progress as at 30 September 2023. Appendix 1 provides a fuller update on progress; however a number of areas are highlighted with the Considerations section of this report.

2.0 Recommendations

- 2.1. Committee is asked to note, comment on and challenge the report.

3.0 Considerations

- 3.1. This report provides Committee with an update on progress to date with the Partnership & Performance Business Plan 2023/24. It should be noted that data on some Key Performance Indicators is not available at this juncture; however a full year end report will be provided later in autumn 2024. The service is currently developing its business plan for the 2024/25 performance period.
- 3.2. Partnership and Performance continues to play a key part in the coordination and management of response, transformation and business as usual activity. This work ranges from emergency planning, business continuity and major incident response; communications; health and safety; governance improvement actions and further developments in digital approaches.
- 3.3. The report outlines a continuing changing risk profile, with cost inflation remaining a significant risk, not just for the Council's resource base but also impacts on our citizens and communities. Labour issues have continued to present challenges over the course of the past year; this includes industrial

action and labour market issues, which continue to impact on recruitment and retention, and in some instances organisational capability. As an accredited Living Wage employer, there continues to be demonstrable improvement in spend in the local economy, as the service continues its endeavours to make a positive impact on the County's Community Wealth and Wellbeing Economy objectives.

- 3.4. Whilst Appendix 1 provides a more detailed description of performance and risk within our Business Plan, this cover report draws out a number of highlights, including achievements and areas for improvement.

3.5. HR and Workforce Development

- 3.6. Ongoing progress continues to be in a number of areas. This includes:

- 3.7. Further work took place during the reporting period to prepare for introduce Multifactor Authentication for user access to iTrent. System development and streamlining of processes has also been a key focus for HR operations team and through development work, in conjunction with Myjobscotland, with initial work also being commenced on an HR Chatbot.

- 3.8. The H&S team continue to ensure, as far as is reasonably practicable, that Council business is conducted and services are delivered without causing harm or ill health to our staff or any others affected by our activities. Work undertaken during the reporting period includes:

- Development or review of 5 policies
- Completion of 331 training activities
- Completion of 30 risk profiling sessions with Team Leaders
- 29 contacts with PAM Assist and 16 referrals for physiotherapy
- Analysis of 22 Stress Risk Assessments
- Ongoing development of Evotix focussing on DSE self assessment, Educational Excursions, Potentially Violent People and Stress Risk Assessments

- 3.9. Work on new approaches to internal communication has continued, with the team hosting the Sponsors Voice podcast, and undertaking filming for various projects across a range of service areas. This has included supporting the environment and sustainability team, and producing podcasts around climate change, culture, community wealth building and sports development.

- 3.10. The team continues to deliver a range of learning and development opportunities for staff. Over the period, 66 courses were delivered as part of the corporate training calendar. In addition to a range of e-learning resources being created to support both corporate, and service based requirements, there were a total of 214 posts advertised through the myjobscotland portal.

Finance and Revenues

- 3.11. The annual budget process for 2024/25 was progressed over the summer towards ensuring the Council agreed a balanced budget. There was also continued oversight of an ambitious 20-year Capital Programme, supporting Be the Future, contributing significantly to an investment-led recovery in Clackmannanshire. The draft accounts were also prepared and consider by Council over this period.
- 3.12. In addition, the service continued to facilitate core governance processes, including supporting, advising and providing solutions for services with outturns, business cases and major procurement and commissioning enabling progression with Be the Future priority areas. Whilst the service has continued to face challenges with recruitment due to ongoing labour market shortages, considerable progress was made on local expenditure targets and enabling Living Wage accreditation, contributing to the Council's Community Wealth Building programme.

Partnership and Transformation

- 3.13. The service continued to improve operational service delivery across a range of areas whilst ensuring a focus on transformational activities. This work included an ongoing focus on civil contingencies response and preparedness including developments in business continuity; cyber preparedness; National Power Outage and resilient telecoms; exercise and debrief activity as well as supporting response and recovery during numerous weather related incidents. Work with community resilience groups has continued to go from strength to strength over the summer months. Preparatory work has also continued ahead of the Protect Duty and is well underway.
- 3.14. An ongoing focus on customer service continued. The refresh of the Customer Charter and Customer Contact Policy; provision of training for all customer services staff and planning for reopening Kilncraigs reception.
- 3.15. ICT and Digital Transformation projects continued at considerable pace. ICT projects have focussed on the implementation of a new telephony system alongside a major security programme of work for the reaccreditation of Public Sector Network compliance. Implementation of ICT capital programme has included projects to support future ways of working; IT infrastructure improvements and supporting the continued roll out of digital devices and ICT equipment in schools. A programme management methodology has been established, alongside a technical design authority to manage IT, security and digital programmes of work.

The service provided considerable support to a number of core Council and partnership strategies, including a significant period of engagement on a new Wellbeing LOIP with Clackmannanshire Alliance Board members.

Legal & Governance

- 3.16. Similar to many services, Legal & Governance has continued to see volatility during a period of high demand for its services, with a number of increasingly complex projects developing through Be the Future. The service continues to work towards a redesign to improve overall capacity and resilience.

- 3.17. The Licencing. Team continue to support Licencing Board responsibilities, with increased demand. A major achievement included a significant development in Short Term Lets regulations introduced during the year in line with legislative requirements.
- 3.18. The public archive service was fully restored in 2022, with continuing high demand. The Registrar has continued to provide an important public service to citizens in the registration of births, marriages and deaths. The Scotland's People service is fully reopened and the team continued to provide a high quality Scottish Certificates service.
- 3.19. Risk and performance management staff overhauled the cross service risk and integrity forum and ensured the Council's public performance reporting system remained maintained to a high standard. This included reporting of a number of statutory reports, including the Local Government Benchmarking Framework and complaints reporting. The team is also instrumental in facilitating submission of the Annual Governance Statement as part of the annual accounts.

Conclusion

- 3.20. Partnership and Performance continues to demonstrate impact in terms of delivering business critical and essential governance functions, whilst also playing a crucial role in enabling delivery of the Council's transformational priorities, whether through Be the Future or the supporting an investment-led recovery through the capital plan.
- 3.21. Not all of the intended actions within the plan have been delivered to date, and year end slippage is likely for some projects. Staff continue to be stretched and tested over a prolonged period, and capacity and skills gaps have impacted on some plans. The global supply chain and national labour market issues continue to impact. Despite ongoing challenges and risks, whether these are inflation, cyber security or labour supply, the Portfolio demonstrates achievement and response in the context of enabling delivery of Council priorities. This is testament to the flexibility, expertise and resilience of its many dedicated staff.

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

6.0 Exempt Reports

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

7.0 Declarations

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

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

Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all

Our families; children and young people will have the best possible start in life

Women and girls will be confident and aspirational, and achieve their full potential

Our communities will be resilient and empowered so that they can thrive and flourish

(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 Not applicable

9.0 Legality

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

10.0 Appendices

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

Appendix A – 2023/24 Performance Report

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)

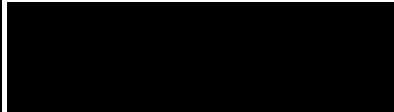
Yes (please list the documents below) No

Business Plan 2023/24-23 (link can be found at <https://www.clacks.gov.uk/document/meeting/1/1202/7748.pdf>)


















Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Stuart Crickmar	Strategic Director	2127

Approved by

NAME	DESIGNATION	SIGNATURE
Stuart Crickmar	Strategic Director	

Key to symbols used in this report

PIs		ACTIONS		RISKS	
Long Trend (Overall trend over longer term)	Status (Compares actual performance with target)	Status	Current Rating Likelihood x Impact (1 - 5)	Status	
 Performance has improved	 Alert	 Completed		 Rating 16 and above	
 Performance has remained the same	 Warning	 In progress/Not started		 Rating 10 to 15	
 Performance has declined	 OK	 Check progress		 Rating 9 and below	
 No comparison available - May be new indicator or data not yet available	 Unknown	 Overdue	The likelihood of a risk occurring, and the impact if it does occur are each scored on a scale of 1 to 5, with 1 being the least likely or the least significant impact. Detailed guidance on scoring is provided in the Risk Management Policy and guidance.		
		 Cancelled			

Key Organisational Performance Results

Code	INDICATOR	2022/23	2023/24	Q2 2023/24	Q2 2023/24	Lead
		Value	Target	Value	Note	
ALL FRD L&D	Instances of Fraud detected	0	n/a	0	No recorded incidents of fraud in the recorded period.	Senior Manger Legal & Governance
ALL HO1 HWD	Percentage of Health & Safety risk assessments up to date - Council	40%	100%	60%	All teams have now submitted at least one assessment. Work ongoing with managers to ensure assessments are appropriate and complete. IOSH Managing Safely roll out assisting with this.	Senior Manager HR & Workforce Development

Code	INDICATOR	2022/23	2023/24	Q2 2023/24	Q2 2023/24	Lead
		Value	Target	Value	Note	
ALL AB1 GOV	Average FTE days lost through sickness absence per employee (All Council staff)	14.02	8.5	6.54	<p>The average FTE for Q2 22/23 was 6.18 days as compared to 6.54 for Q2 23/24. As was previous advised to Committee a number of measures have been put in place to support attendance including a review of the Council's maximising attendance policy and procedure, approval of mental health and well being policy, approval by council of our wellbeing strategy as well as absence being a standing item at bipartites which includes figures on completed return to works and support and guidance. In addition a number of support measures for wellbeing are available on the council website and these resources are regularly updated.</p> <p>It is recognised that absence levels continue to be high despite intervention, we have an aging workforce and absences tend to longer in duration which impacts on the overall FTE days lost. HR continue to work with services to ensure appropriate supports are in place but also that the relevant agreed process are being followed.</p>	Senior Manager HR & Workforce Development

Partnership & Performance: Customer Results

Code	INDICATOR	2022/23	2023/24	Q2 2024/23	Q2 2022/23	Lead
		Value	Target	Value	Note	

Code	INDICATOR	2022/23	2023/24	Q2 2024/23	Q2 2022/23	Lead
		Value	Target	Value	Note	
P&P CNQ BUS	% Councillor Enquiries responded to within timescale - Partnership & Performance	62%	100%	73.33%	Though the service has not met its target, continued efforts are being made to do so with favourable movement evident in the early part of 2023/34.	Strategic Director - Partnership & Performance
P&P C02 CUS	% formal complaints closed within timescale - Partnership & Performance	33%	100%	55.56%	The service remains someway of target despite the favourable trend. An ongoing focus is being maintained on performance.	Strategic Director - Partnership & Performance
P&P C04 CUS	% formal complaints dealt with that were upheld/partially upheld - Partnership & Performance	54%	N/a	25%	Fewer complaints were upheld.	Strategic Director - Partnership & Performance
P&P FOI GOV	% Freedom of Information requests responded to within timescale - Partnership & Performance	88%	100%	78.74%	The unfavourable movement is being monitored, with continued efforts to bring performance closer to target by the year end.	Senior Manager - Legal & Governance
P&P MPQ BUS	% MP/MSP enquiries responded to within timescale - Partnership & Performance	50%	100%	0%	Only one enquiry was received, however it was not within timescale.	Strategic Director - Partnership & Performance


Partnership & Performance: People Results



Code	INDICATOR	2022/2 3	2023/2 4	Q2 2023/24	Q2 2022/23	Lead
		Value	Target	Value	Note	





Code	INDICATOR	2022/23	2023/24	Q2 2023/24	Q2 2022/23	Lead
		Value	Target	Value	Note	
P&P AB1 GOV	Average FTE Days Sickness Absence (Partnership & Performance)	8.85	8.5	5.27	The average FTE for Q2 22/23 was 3.26 days as compared to 5.27 for Q2 23/24. A number of longer term absence have contributed to the increase in absences levels within the portfolio. These are managed in line with Council procedures and appropriate and supportive interventions put in place.	Strategic Director - Partnership & Performance







Improvement Actions





Code	ACTION	By When	Progress	Expected Outcome	Latest Note	Lead
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Code	ACTION	By When	Progress	Expected Outcome	Latest Note	Lead
NEW	Co-ordinate major incident response/recovery and ensure that statutory plans for resilience are in place, updated and tested as part of a scheduled programme of work. This includes implementing workforce development around Integrated Emergency Management and Business Continuity Management.	31-Mar-2024	100%		Over the reporting period work has been taken forward in preparation for the new Protect Duty (Martyn's Law) and Clackmannanshire Council had led the development of a regional National Power Outage framework and has contributed to the refresh of Fuel and Care for People plans. As part of the Scottish Risk Assessment work has also been taken forward to ensure preparedness in respect of Cyber Security. Pro-active work to further develop corporate and service business continuity plans and arrangements has also been taken forward with support provided to key service areas. Multi-agency Safety Advisory Groups have continued to be implemented to ensure public events are carried out safely; and engagement work with Community Resilience Groups continues with arrangements working well. Over the reporting period a number of incidents have required a coordinated response and recovery; most notably around severe and adverse weather events.	Strategic Director - Partnership & Performance

Code	ACTION	By When	Progress	Expected Outcome	Latest Note	Lead
NEW	Ensure robust plans and processes are in place for managing CONTEST risks and ensuring compliance with statutory duties	31-Mar-2024	<div style="width: 100%;"><div style="width: 100%; background-color: #4f81bd; color: white; text-align: center;">100%</div></div>		Plans are in place to ensure compliance with the national CONTEST Strategy with oversight of this work provided through the Risk and Integrity Forum. Nationally work is being taken forward to review the Prevent guidance for authorities along with revised training models. Prevent remains part of the Councils mandatory training programme for all employees. Arrangements are in place for Prevent Multi-agency Panels (PMAP) and training has been undertaken by key staff on the processes to ensure compliance with Prevent duties. Early preparatory work is underway for the new Protect Duty which is anticipated to commence in 2025. This duty has requirements for buildings and premises security arrangements with an audit across Clackmannanshire on the implications and requirements for this work well underway. The service continues to engage with national and regional multi-agency groups relating to CONTEST delivery.	Senior Manager Partnership & Transformation
P&P 20 003	Support consultation and engagement activities (budget and corporate strategies).	31-Mar-2024	<div style="width: 100%;"><div style="width: 100%; background-color: #4f81bd; color: white; text-align: center;">100%</div></div>		Significant engagements undertaken and completed on LOIP and budget. Consultation has also taken place on a number of significant corporate strategies including on the Sport and Active Living refresh; Anti-social behaviour strategy and Accessibility Strategy. Where appropriate feedback has been reported using the 'you said we did' functionality on Citizen Space.	Senior Manager Partnership & Transformation

Code	ACTION	By When	Progress	Expected Outcome	Latest Note	Lead
P&P 20 004	Develop and publish key corporate and partnership strategies and annual reports to comply with statutory reporting duties.	31-Mar-2024	<div style="width: 80%;"><div style="background-color: #4f81bd; height: 10px; width: 80%;"></div></div> 80%		Corporate and partnership strategies relating to legislative requirements are up to date with plans published as required	Senior Manager Partnership & Transformation
P&P 20 005	Refresh our Corporate Communications Strategy, related policies and Communications channels in line with Be the Future and the Strategic Roadmap.	31-Mar-2024	<div style="width: 75%;"><div style="background-color: #4f81bd; height: 10px; width: 75%;"></div></div> 75%		A corporate communications strategy has been developed which aligns with the Councils Statement of Priorities and Be the Future. Subject to engagement, this strategy is expected to be taken forward to Council for approval in Spring 2024.	Senior Manager Partnership & Transformation
P&P 20 006	Implement approved Mainstreaming Equalities and Diversity Report 2021/25.	31-Mar-2024	<div style="width: 100%;"><div style="background-color: #4f81bd; height: 10px; width: 100%;"></div></div> 100%		The Council's progress on Mainstreaming Equalities and Diversity report was agreed at Council in July 2023 and published on the Council's website thereafter. Equality and Fairer Scotland Impact Assessments on key policy changes are published on the relevant section of the Councils website.	Senior Manager Partnership & Transformation
P&P 20 007	Finalise a new Wellbeing Local Outcomes Improvement Plan with Alliance partners and review Community Planning partnership structures and operating arrangements to ensure effective leadership and collaboration to implement the plan	31-Mar-2024	<div style="width: 80%;"><div style="background-color: #4f81bd; height: 10px; width: 80%;"></div></div> 80%		A significant period of engagement has been carried out on the draft strategic priorities and enablers for the Wellbeing Economy Local Outcomes Improvement Plan. A final development event is scheduled in Spring 2024, following which the draft plan will be finalised for approval.	Senior Manager Partnership & Transformation


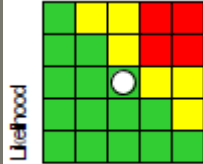
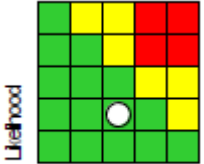
Code	ACTION	By When	Progress	Expected Outcome	Latest Note	Lead
P&P 20 010	Develop and deploy a refreshed Interim Workforce Plan	31-Mar-2024	<div style="width: 100%;"><div style="background-color: #4f81bd; height: 10px; width: 100%;"></div></div> 100%		Interim Workforce Strategy 2023-25 was approved by Council in November 2023.	Senior Manager HR & Workforce Development
P&P 20 012	Significantly extend reach of new Health & Safety Management System	31-Mar-2022	<div style="width: 100%;"><div style="background-color: #4f81bd; height: 10px; width: 100%;"></div></div> 100%		Ongoing progress and development of the system which will continue for the foreseeable future.	Senior Manager HR & Workforce Development
P&P 20 013	Substantially conclude and Implement P&P Redesign, including implementation of immediate workforce plan priorities	31-Mar-2024	<div style="width: 75%;"><div style="background-color: #4f81bd; height: 10px; width: 75%;"></div></div> 75%		Revenues complete, though finance ongoing. ICT being progressed as part of security and M365 review. Legal & Governance complete..	Strategic Director - Partnership & Performance
NEW	Enable approved Annual Accounts	31-Mar-2024	<div style="width: 50%;"><div style="background-color: #4f81bd; height: 10px; width: 50%;"></div></div> 50%		The Annual Accounts has experienced a significant overrun this year, with staff resourcing featuring as a significant factor.	Senior Manager Finance & Revenues
NEW	Ensure completion of Internal Audit Actions as per agreed timelines	31-Mar-2024	<div style="width: 75%;"><div style="background-color: #4f81bd; height: 10px; width: 75%;"></div></div> 75%		Ensuring a focus on completing internal audit actions remains an important priority for the management team.	Strategic Director - Partnership & Performance
NEW	Make required preparations for the General Election	31-Mar-2024	<div style="width: 100%;"><div style="background-color: #4f81bd; height: 10px; width: 100%;"></div></div> 100%		Work on target as per the required timetable. A degree of uncertainty remains about the precise timing, with assumption being it can be called at any time.	Senior Manager - Legal & Governance




Code	ACTION	By When	Progress	Expected Outcome	Latest Note	Lead
P&P 20 022	Complete a review Standing Orders & Scheme of Delegation	31-Mar-2024	<div style="width: 75%;"><div style="background-color: #4f81bd; height: 10px;"></div></div> 75%		The Scheme of Delegation has been reviewed by the Monitoring Officer and will be submitted to Council in due course. Thereafter the review of the Standing Orders will commence.	Senior Manager - Legal & Governance
P&P 20 023	Enable an approved balanced budget 2024/25	31-Mar-2024	<div style="width: 100%;"><div style="background-color: #4f81bd; height: 10px;"></div></div> 100%		Completed and approved by Council	Senior Manager Finance & Revenues
P&P 20 028	Refresh the Councils Digital and ICT Strategy incorporating: review of appropriate plans, policies and asset plans; embed sound programme and project governance arrangements. Ensure PSN compliance and Sound Cyber Security Foundations Migration to M365 platform	31-Mar-2024	<div style="width: 75%;"><div style="background-color: #4f81bd; height: 10px;"></div></div> 75%		Significant work has been taken forward over the reporting period which has included the establishment of robust Digital and IT programme management arrangements including embedding project and programme management methodology and technical design processes. This includes the Digital and IT programme board which meets monthly. Significant focus for the Board has been around Cyber Security and Safety and work to obtain Public Services Network re-accreditation. This work provides a necessary foundation for other Digital and IT work streams, including Digital transformation and implementation of M365 alongside a replacement programme of major ICT systems. Plans to refresh the Digital and IT strategies and supporting policies is part of this work. Oversight of this work is taken through the Strategic Oversight Group.	Senior Manager Partnership & Transformation
P&P 20 031	Consolidate corporate support Information management approaches and develop an action plan to address gaps	31-Mar-2024	<div style="width: 50%;"><div style="background-color: #4f81bd; height: 10px;"></div></div> 50%		New information governance officer is now in post. Work has now commenced on records management.	Senior Manager - Legal & Governance

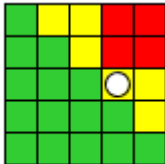
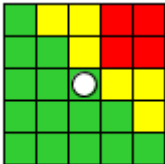
Code	ACTION	By When	Progress	Expected Outcome	Latest Note	Lead
NEW	Review, streamline and integrate Performance Management Framework incorporating: Implementing revised Business Planning Guidance Self Assessment and Annual Governance Statement Process Improvements to management information and data Risk management Streamlined reporting	31-Mar-2024	<div style="width: 80%;"><div style="background-color: #4f81bd; height: 10px;"></div></div> 80%		New business planning guidance and corporate performance management framework approved by Council. New self assessment approach agreed and being progressed with support from the Improvement Service. A new Risk management Strategy has been approved by Council. The Annual Governance Statement process has been completed for 2022/23.	Senior Manager Legal & Governance
P&P 21 007	Review Procurement Strategy	31-Mar-2024	<div style="width: 0%;"><div style="background-color: #4f81bd; height: 10px;"></div></div> 0%		Work has not started due to conflicting priorities as a result of major corporate procurement activity.	Senior Manager Finance & Revenues
NEW	Achieve Armed Forces Silver Accreditation	31-Mar-2024	<div style="width: 75%;"><div style="background-color: #4f81bd; height: 10px;"></div></div> 75%		Work is underway in preparation for an application for Silver level Armed Forces Employers Recognition Scheme, with applications due in Spring 2024.	Senior Manager Partnership & Transformati on
NEW	Refresh the Social Media and Networking Policy and associated guidance.	31-Mar-2024	<div style="width: 50%;"><div style="background-color: #4f81bd; height: 10px;"></div></div> 50%		Work is underway to refresh the Social Media and Networking Policy and Guidance. It is anticipated this will be completed in the Summer 2024; slightly later than the previous target date.	Senior Manager Partnership & Transformati on
NEW	Finalise the Fraud Strategy and Fraud risk management arrangements and implementing a programme of training for Directors and managers.	31-Mar-2024	<div style="width: 50%;"><div style="background-color: #4f81bd; height: 10px;"></div></div> 50%		Initial discussions have taken place with Internal Auditors on training. Currently reviewing fraud approaches and resourcing more generally.	Senior Manager Legal & Governance

Code	ACTION	By When	Progress	Expected Outcome	Latest Note	Lead
P&P 21 011	Develop and deploy a refreshed Customer Charter	31-Dec-2023	<div style="width: 100%;"><div style="background-color: #4f81bd; height: 10px; width: 100%;"></div></div> 100%	✔	Approved and complete.	Senior Manager Partnership & Transformation
P&P 21 012	Develop and deploy a refreshed Unacceptable Behaviour Policy	31-Dec-2023	<div style="width: 100%;"><div style="background-color: #4f81bd; height: 10px; width: 100%;"></div></div> 100%	✔	Approved and complete.	Senior Manager Partnership & Transformation
P&P 21 013	Develop and deploy a refreshed Whistleblowing Policy	31-Mar-2023	<div style="width: 100%;"><div style="background-color: #4f81bd; height: 10px; width: 100%;"></div></div> 100%	✔	Approved and complete.	Senior Manager Legal & Governance
P&P 21 014	Complete Financial Regulations Review	31-Mar-2023	<div style="width: 0%;"><div style="background-color: #4f81bd; height: 10px; width: 0%;"></div></div> 0%	⚠	Work not started at 30/09/23 due to competing priorities and resource constraints – it is likely this work will slip into 2024/25.	Senior Manager Finance & Revenues
P&P 21 015	Complete Contract Standing Orders Review	31-Mar-2023	<div style="width: 0%;"><div style="background-color: #4f81bd; height: 10px; width: 0%;"></div></div> 0%	⚠	Work not started at 30/09/23 due to competing priorities and resource constraints – it is likely this work will slip into 2024/25.	Senior Manager Finance & Revenues


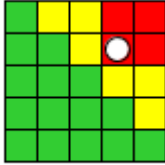
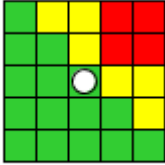

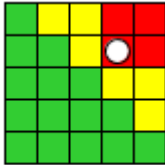
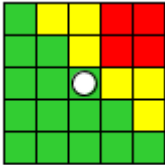
Risk Register

ID & Title	P&P SRR 001	Breakdown or significant interruption in service provision for internal and or external customers as a result of catastrophic systems or knowledge loss or major incident.	Status		Managed By	Strategic Director - Partnership & Performance	Current Rating	9	Target Rating	6
Potential Effect	Breakdown or significant interruption in service provision for internal and or external customers as a result of catastrophic systems or knowledge loss or major incident.									
Related Actions	P&P 20 001	Co-ordinate major incident response/recovery and ensure that statutory plans for resilience are in place, updated and tested as part of a scheduled programme of work which included Covid response and recovery and EU Withdrawal risk and mitigation. Implementing workforce development around Integrated Emergency Management and Business Continuity Management will also be taken forward in 2021/22.	Internal Controls		Business Continuity Plans		 Likelihood Impact	 Likelihood Impact		
Latest Note	Concurrent risks from supply chain and labour issues, the cost of living crisis, adverse weather, geopolitical events or major outage continue to pose an ongoing risk to business continuity. IMTs continue to be convened as necessary and a substantial review of business continuity plans will be undertaken over the current year.									

ID & Title	P&P SRR 003	Sub optimisation of community empowerment opportunities and the risk that we will not be able to achieve our corporate priority to empower families and communities. Ineffective communication and engagement with communities may result in poor relationships, breakdown of trust and loss of confidence which impacts on the Councils reputation.	Status		Managed By	Senior Manager Partnership & Transformation	Current Rating	12	Target Rating	9
Potential Effect	Sub optimisation of community empowerment opportunities and the risk that we will not be able to achieve our corporate priority to empower families and communities. Ineffective communication and engagement with communities may result in poor relationships, breakdown of trust and loss of confidence which impacts on the Councils reputation.									
Related Actions	P&P 20 003	Support consultation and engagement activities (budget and corporate strategies).	Internal Controls	Customer Consultation & Engagement						
	P&P 20 005	Refresh our Corporate Communications Strategy, related policies and Communications channels in line with Be the Future and the Strategic Roadmap.		Community Learning & Development Strategy						
				Mainstreaming Equality & Diversity						
				Community Asset Transfer Guidance						
Latest Note	P&P resources for this area of work are modest however Council has agreed additional resources as part of the recent budget, which will enable capacity building, alongside 3 rd sector efforts									

ID & Title	P&P SRR 004	Ineffective or poor engagement with staff resulting in poor relations and an inability to be unable to embed our values and achieve our vision. Workforce gaps as a result of difficulties with recruitment and retention and or displacement leading to difficulties in meeting statutory or regulatory requirements both now and possibly more acutely in the future.	Status	▲	Managed By	Senior Manager HR & Workforce Development	Current Rating	12	Target Rating	9
Potential Effect	Ineffective or poor engagement with staff resulting in poor relations and an inability to be unable to embed our values and achieve our vision. Workforce gaps as a result of difficulties with recruitment and retention and or displacement as a result of ongoing Covid response matters leading to difficulties in meeting statutory or regulatory requirements both now and possibly more acutely in the future.									
Related Actions	P&P 20 005 Refresh our Corporate Communications Strategy, related policies and Communications channels in line with Be the Future and the Strategic Roadmap.	Internal Controls	Staff Survey							
	P&P 20 010 Undertake Staff Survey		Strategic Workforce Plan							
	P&P 20 013 Substantially conclude and Implement P&P Redesign, including implementation of immediate workforce plan priorities									
Latest Note	<p>Progress continues to be made in relation to our approach to communication and engagement with staff. Various methods are being used to ensure messaging is cascaded to all levels of the organization (e.g. Video messaging, CONENCTED, Briefings, All Managers circulation) although it is recognised that there are still hard reach groups which we need to address. The most recent staff survey showed that 55% of staff responded positively to being kept up to date with what is happening in their team and around the organisation. This highlights the need for further exploration of how the Council communicates with its staff members. Further 55% of employees also feel they can access information about the Council.</p> <p>A Staff / TU working group will be created to analyse results of the staff survey and make recommendations for development. In addition, the Workforce Development & Learning team continues to develop approaches to staff communication, with monthly video updates with the CEO being agreed and rolled out (starting February 2024 and continuing for the next 12 months). Service based workforce plan for P&P has been agreed, with the WFD & Learning team continuing to support other Directorates in the creation of their plans.</p>									

ID & Title	P&P SRR 006	There is a risk that the labour shortage environment amplifies the risk of a significant governance failure that could lead to a potential for serious financial, reputational or workforce harms.	Status	?	Managed By	Strategic Director - Partnership & Performance	Current Rating	16	Target Rating	9
Potential Effect	There is a risk that the current pandemic environment amplifies the risk of a significant governance failure that could lead to a potential for serious financial, reputational or workforce harms.									
Related Actions	P&P 20 006	Implement approved Mainstreaming Equalities and Diversity Report 2021/25.	Internal Controls		Internal Audit Programme					
	P&P 20 012	Embed new Health & Safety Management System			External Audit Assurance & Improvement Plan					
	P&P 20 019	Lead on the approach to deliver approved Annual Accounts			Annual Governance Statement					
	P&P 20 029	Implement Scottish Cyber Security Resilience Framework and identify associated improvement plan.								
	P&P 20 031	Consolidate corporate support Information management approaches and develop an action plan to address gaps								
	P&P 21 001	Refresh the Councils Prevent strategy and approaches including implementing a programme of training and reviewing the Prevent Multi-agency Panel (PMAP) process in line with CONTEST statutory duties and as part of the Corporate Risk and Integrity approach.								
	P&P 21 007	Procurement Strategy Review								
	P&P 21 014	Financial Regulations Review								
Latest Note	Staff turnover and a stretched workforce has resulted in increased risks of failures of governance. Capability and remains variable across the directorate, and therefore this risk will require ongoing significant focus for the immediate future. Corporate and service workforce plans are in place to support a more sustainable and stable workforce.									

ID & Title	P&P SRR 007	Risk that current resource base cannot meet rising demand resulting from emerging environmental factors including Brexit, the cost of living crisis, high inflation and climate change.	Status		Managed By	Strategic Director - Partnership & Performance	Current Rating	16	Target Rating	9
Potential Effect	Risk that current resource base cannot meet rising demand resulting from Covid pandemic and other environmental factors including Brexit and climate change.									
Related Actions	P&P 20 023	Lead on the approach to deliver an approved balanced budget 2022/23	Internal Controls	Budget Strategy & Monitoring			Likelihood	Impact	Likelihood	Impact
	P&P 21 015	Contract Standing Orders Review		Corporate Transformation Programme						
				Procurement Strategy						
Latest Note	Demand pressures are indicating a high degree of uncertainty in regard of short to medium term budget planning, though there are signs that current acute inflationary costs pressures may start to ease to some extent in the next 18 months. Ongoing geopolitical events in Eastern Europe, and an uncertain world economic climate suggesting our greatest challenges continue to lie ahead. Whilst this is impacting on costs to the Council, it is also impacting on our communities, which in turn is increasing service demands. Given the extent of external environmental factors there is a large element of this risk that the Council may need to tolerate and react to in the short to medium term.									
ID & Title	P&P SRR 008	Covid biosecurity requirements and then increasing financial constraint have driven accelerated demand and expectation for increased digital service provision. There is a risk that the Council will not be able to meet these changes or that increased reliance on digital services increases the risks associated with outages or related to information security.	Status		Managed By	Strategic Director - Partnership & Performance	Current Rating	16	Target Rating	9
Potential Effect	Covid biosecurity requirements have driven accelerated demand and expectation for increased digital service provision. There is a risk that the Council will not be able to meet these changes or that increased reliance on digital services increases the risks associated with outages or related to information security.									
Related Actions	P&P 20 029	Implement Scottish Cyber Security Resilience Framework and identify associated improvement plan.	Internal Controls				Likelihood	Impact	Likelihood	Impact
	P&P 20 031	Consolidate corporate support Information								

	management approaches and develop an action plan to address gaps				
	P&P 20 032 Implement M365 and the Digital Champions Programme to support deployment across the workforce.				
	P&P 20 033 Deliver the agreed IT capital plan				
Latest Note	The Council has made significant investment in digital infrastructure, including M365, the digital hub and IoT. Additional capacity has been agreed to accelerate progression of ICT infrastructure and digital roadmaps.				

Report to **Audit & Scrutiny Committee**

Date of Meeting: **18th April 2024**

Subject: **Corporate Performance Report**

Report by: **Strategic Director – Partnership & Performance**

1.0 Purpose

- 1.1. This report presents a summary of key local demographics and Council performance data, up to and including the 2022/23 financial year, aligned to the current Statement of Corporate Priorities (2023/24). Appendix A forms part of the Council's statutory Public Performance Reporting (PPR) duties and, for each priority area, summarises relevant statistics and performance levels, including analysis, charts and detailed data tables.

2.0 Recommendations

- 2.1. That Committee notes the report, commenting and challenging as appropriate.

3.0 Considerations

- 3.1.1. This report aims to summarise many of the key challenges, processes, performance results and outcomes associated with Clackmannanshire Council's Statement of Corporate Priorities 2023/24. This information will be used in support of the Be the Future Transformation Programme and fulfilment of the Council's statutory duties around Public Performance Reporting, Continuous Improvement and Best Value. A further piece of work is being progressed to ensure close alignment with the recently approved corporate priorities. This will come forward to Committee during the course of this year. Further information and a range of strategies and performance reports can be accessed at: <https://www.clacks.gov.uk/council/performance/>.
- 3.1.2. While the Council clearly cannot fully control all demographic and statistical results presented, the aim is to be outcome-focussed and aware of cause and effect, both in how we can positively influence results, and in how they should influence our own policies and resource allocation. There are, however, many indicators that we can directly control through adherence to internal processes and governance mechanisms, and ensuring we follow a robust, evidence-based approach to informed decision-making.
- 3.1.3. The Council is not alone in its efforts to address the challenges outlined, working with a wide range of public, private and third sector partners to promote common aims and principles. While other Community Planning Partners may lead activity in some areas discussed (such as health and crime) these are still directly relevant to the Council's outlined priorities and, as the overall lead for the Clackmannanshire Alliance, we take our role in upholding partner values very seriously. While this report focusses mainly on the past, with particular reference to impacts and changing behaviours arising from events over the last few years, the forthcoming refresh of the Local Outcomes Improvement Plan will outline partnership actions to address the key issues identified.

4.0 Sustainability Implications

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

5.0 Resource Implications

5.1. *Financial Details – There are no direct financial implications arising from this report.*

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. Yes ✓

5.4. *Staffing – There are no direct staffing implications arising from this report.*

6.0 Exempt Reports

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

7.0 Declarations

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

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

Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all ✓

Our families; children and young people will have the best possible start in life ✓

Women and girls will be confident and aspirational, and achieve their full potential ✓

Our communities will be resilient and empowered so that they can thrive and flourish ✓

(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. If there are no appendices, please state "none".

Appendix A – Corporate Plan Performance Report


11.0 Background Papers

11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered) Yes (please list the documents below) No ✓

Author(s)

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

Approved by

NAME	DESIGNATION	SIGNATURE
Stuart Crickmar	Strategic Director – Partnership & Performance	

Clackmannanshire Council

Corporate Performance Report 2022/23

This report aims to summarise many of the key challenges, processes, performance results and outcomes associated with Clackmannanshire Council's Statement of Corporate Priorities 2023/24. This information will be used in support of the Be the Future Transformation Programme and fulfilment of the Council's statutory duties around Public Performance Reporting, Continuous Improvement and Best Value. Further information and a range of strategies and performance reports can be accessed at: <https://www.clacks.gov.uk/council/performance/>.

While the Council clearly cannot fully control all demographic and statistical results presented, the aim is to be outcome-focussed and aware of cause and effect, both in how we can positively influence results, and in how they should influence our own policies and resource allocation. There are, however, many indicators that we can directly control through adherence to internal processes and governance mechanisms, and ensuring we follow a robust, evidence-based approach to informed decision-making.

The Council is also not alone in our efforts to address the challenges outlined, working with a wide range of public, private and third sector partners to promote common aims and principles. While other Community Planning Partners may lead activity in some areas discussed (such as health and crime) these are still directly relevant to the Council's outlined priorities and, as the overall lead for the Clackmannanshire Alliance, we take our role in upholding partner values very seriously. While this report focusses mainly on the past, with particular reference to impacts and changing behaviours arising from events over the last few years, the forthcoming refresh of the Local Outcomes Improvement Plan will outline partnership actions to address the key issues identified.

The report presents analysis, charts and detailed performance data aligned to the following priorities:

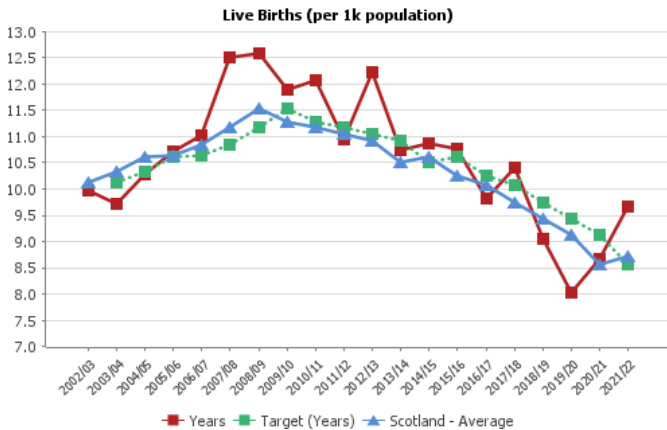
1. Population & Physical Health	1.1 Population Age Groupings
	1.2 Pre-birth & Early Years
	1.3 Conditions, Admissions & Discharge
	1.4 Life Expectancy & Mortality
2. Community Resilience & Care Experience	2.1 Poverty
	2.2 Crime
	2.3 Alcohol & Substance Misuse
	2.4 Mental Health
	2.5 Children & Young People's Care
	2.6 Adult & Older People's Care
3. Attainment, Jobs & Economy	3.1 Education & Attainment
	3.2 Employability & Labour Market
	3.3 Business & Economy
4. Climate & Environment	4.1 Active Travel & Road Safety
	4.2 Energy Efficiency & Emissions
	4.3 Recycling & Outdoor Spaces
	4.4 Neighbourhoods & Amenities
5. Resources & Assets	5.1 Workforce
	5.2 Physical Assets & Revenues
	5.3 Financial Sustainability
	5.4 Service Costs & Efficiency

Demographic & Performance Analysis

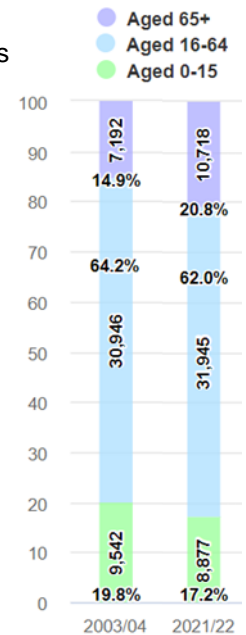
1. Population & Physical Health

1.1 Population Age Groupings

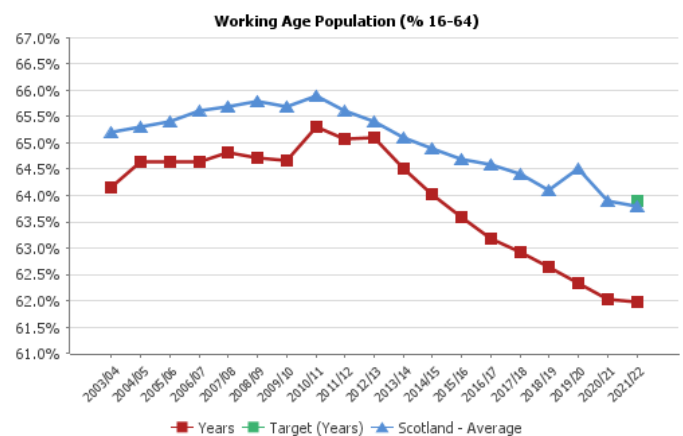
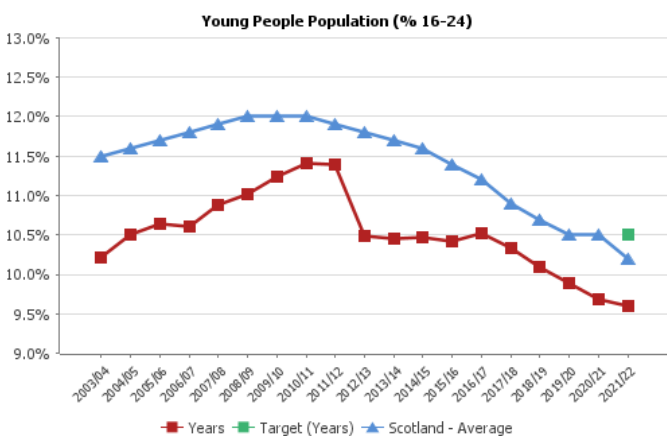
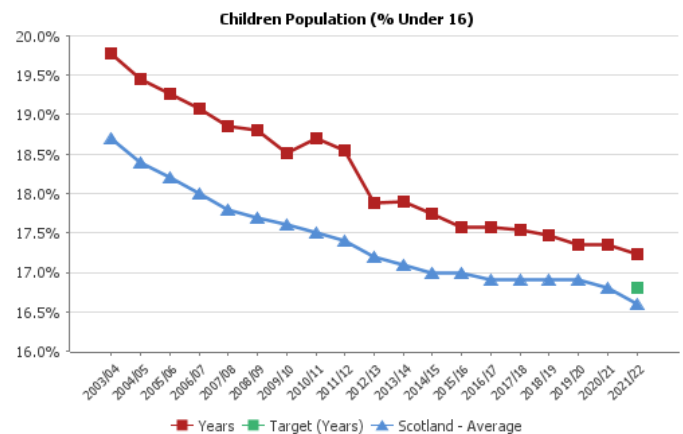
While Clackmannanshire Council is very keen to welcome people of all ages to the area, demographic changes over the last 2 decades present increasing challenges for public services and the local economy. Total population has increased by 6.8% to 51,540, remaining the lowest of any Scottish mainland authority, with implications for financial sustainability and economies of scale, which we aim to mitigate with innovative procurement projects.



In 21/22, the area saw the 2nd highest birth rate of any authority, though the local rate is variable and broadly following the national reducing trend. This data is used to assess likely intake levels for early learning and childcare establishments and primary schools in the coming years, to ensure there is suitable local provision, and that our workforce and school estate are managed with maximum efficiency.



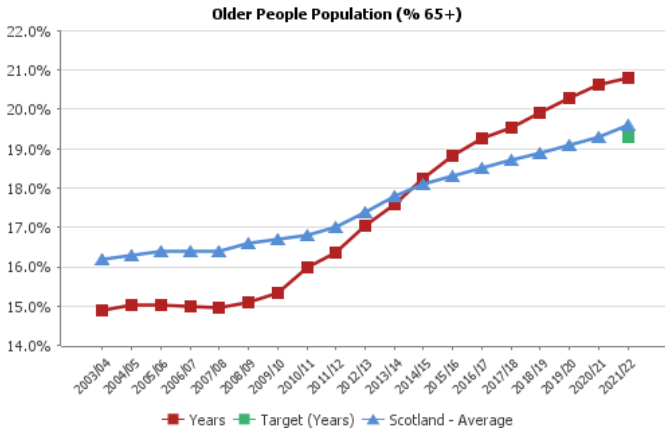
We have a higher proportion of children (under 16) than Scotland as a whole (17.2% versus 16.6%), though reducing at a slightly faster rate (2.6% over 20 years, 2.1% nationally). This applies similarly in under 18 year-olds, reducing by 3.1% to 19.4% of the local population (down 2.5% nationally to 18.7%). These proportions are not only reducing in total numbers, but also due to greater numbers in older groups. High proportions of children and older people are big positives but this does require consideration of how public services must adapt. Conversely, the proportion of young people (aged 16-24) is below average (9.6% versus 10.2%). This has a balancing effect, resulting in a total aged 0-24 of exactly the same as Scotland (26.8%), which may be masking differing levels of need and demand in Clackmannanshire.



There are fewer young people entering the labour market than reaching retirement age, resulting in a net reduction in the overall working age population. From a peak of 65.3% in 10/11, this group has decreased to 62.0% (a 5.1% variance, versus 3.2% across Scotland to 63.8%). Again, this prompts consideration of the complexities faced by a smaller proportion of people who may be caring for both older and younger generations simultaneously, and how services support the needs and opportunities of all groups. This report will discuss various factors relating to education and employability services, as well as health and resilience issues that may affect full participation.

Charts show Clackmannanshire's value in red

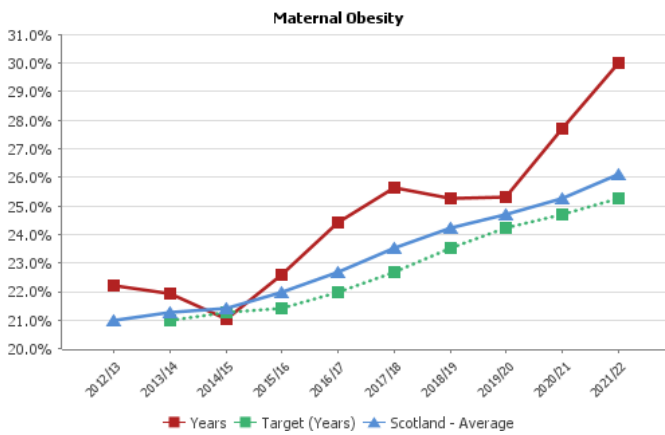
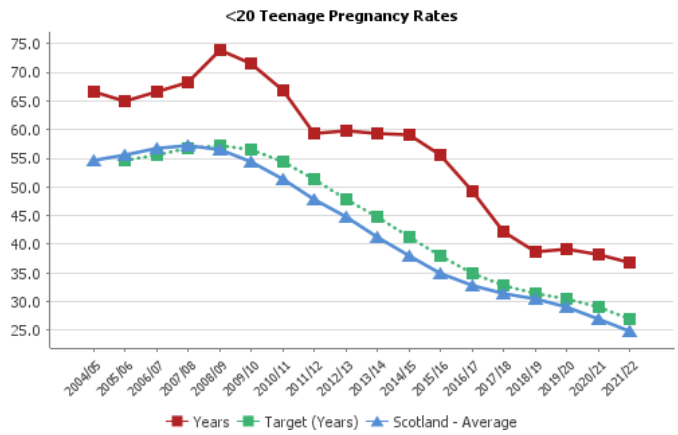
Charts are magnified to make results clearer but this exaggerates trends and variance



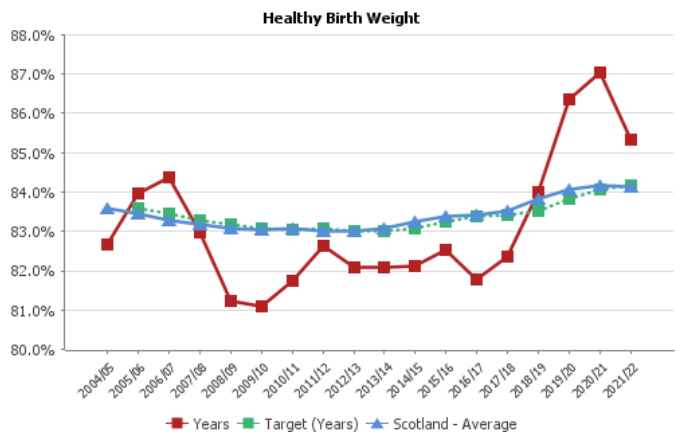
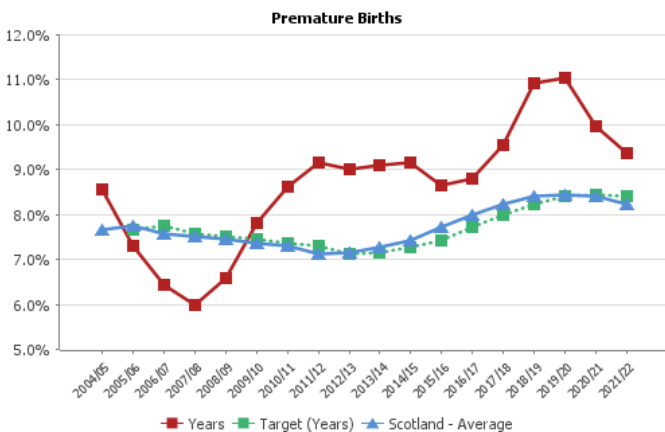
One significant change is the local population ageing at a faster rate than Scotland as a whole. Those aged over 85 make up 2.1% of the population, currently below the Scottish proportion (2.4%) and increasing at the same rate (0.7% since 03/04). Those over 75, however, have now overtaken the Scottish rate (8.9% & 8.7%, respectively), and the total over 65 has increased by 5.9%, while the Scottish figure has increased by 3.4%. It is hugely positive that people are living longer but later sections will discuss how much of this is likely to be lived in good health. This also requires health and social care services to manage increasing demand, as well as implications for many other areas, such as the wheelchair accessibility of local neighbourhoods.

1.2 Pre-birth & Early Years

Substantial progress can be seen locally and nationally in reducing teenage pregnancies (per 1,000 females in relevant age groups). The local rate for under 16 year-olds peaked at 11.5 in 13/14, over twice the Scottish rate of 5.3, with both reducing to 2.3 in 21/22. For under 18 year-olds, our rate dropped from 47.4 in 08/09 to 18.6 in 21/22, though remaining above the Scottish rate of 13.6. As shown, both the local and Scottish rates for under 20 year-olds have more than halved since the 08/09 peak, though the local rate has remained the 2nd highest of any authority throughout the period shown. Supports for young mothers include assistance in re-entering education or gaining employment, advice on benefits and budgeting, and other skills such as cookery classes.



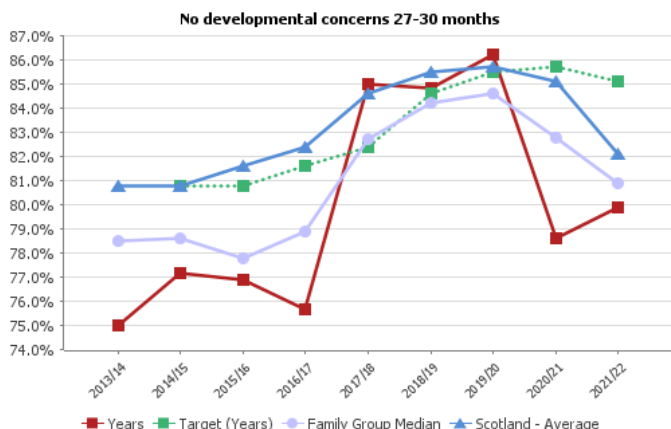
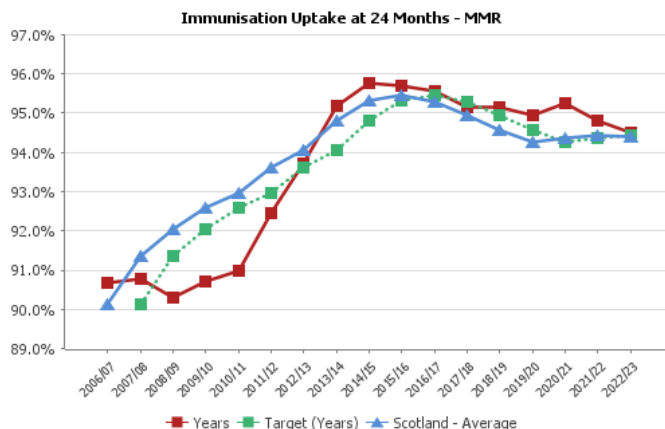
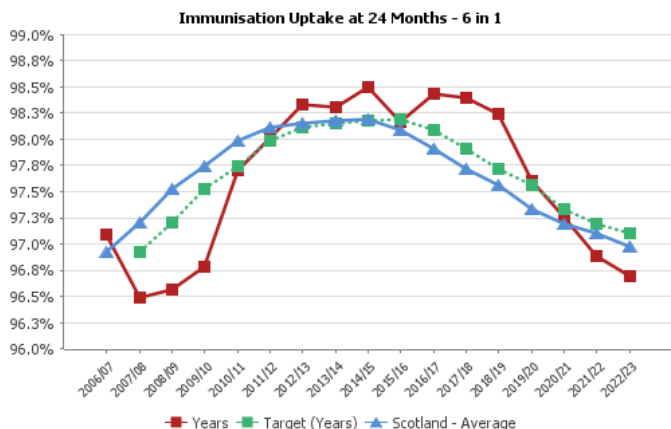
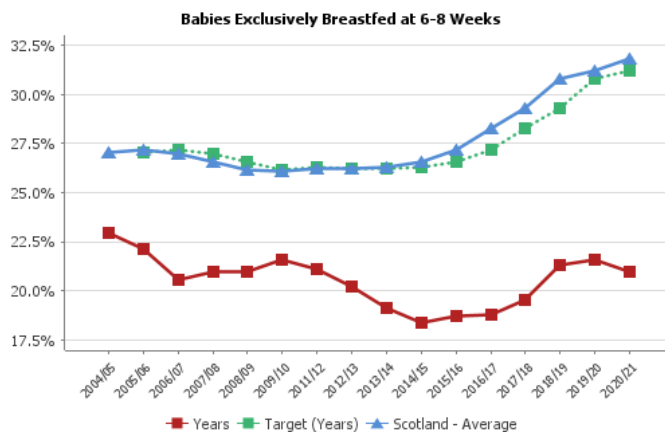
A more concerning trend can be seen in maternal obesity where, in only 2 years, we have moved from close to the Scottish rate of a quarter, to nearly a third of pregnant women with a body mass index of 30 or over. Our ranking has move from just inside the 2nd quartile (16th) into the bottom quartile (26th). This may have arisen due to lower levels of physical activity during pandemic lockdowns and the closure of local leisure facilities, and the Scottish rate also continues to increase. Work is ongoing with health service colleagues around a range of maternity indicators and the promotion of healthy lifestyles to improve the overall health of local residents, and ensure children get the best possible start in life, learning healthy behaviours from their families.



Charts show Clackmannanshire's value in red

Charts are magnified to make results clearer but this exaggerates trends and variance

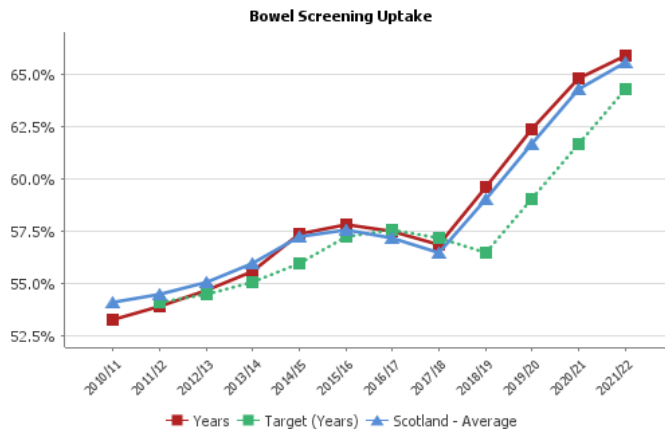
Clackmannanshire's rate of premature births has been higher than average for over a decade and the recent reduction only saw our ranking improve from the highest of any authority, to the 4th highest, though we clearly hope this trend continues. Positive results can be seen in babies with a healthy birth weight, where we moved from 26th in 16/17 to the best rate in Scotland for both 19/20 & 21/22. The most recent result saw us move to 5th place, hoped to be a temporary reduction. While the 5-year trend for breastfeeding shows improvement, the most recent year did see a slight decline, contrary to the national trend, and rates are consistently below average. Immunisation uptake is closer to average, with local and national improvement to 14/15 but reducing rates since, most notably in the 6 in 1 vaccination.



The earliest stages are crucial to later development, preparedness for learning and future life chances, and many of the above factors are relevant to the proportion of children with 'no developmental concerns' at their 27-30 month health review. A significant increase saw our ranking improve from 31st to 14th in 17/18, however this has since moved to 24th. As noted, many measures, particularly in this first section, are more informative than necessarily performance indicators, however, we must use all available data to ensure services are designed with prevention, early intervention and demand-analysis at their core. The inclusion of health & wellbeing in the Council's Statement of Corporate Priorities demonstrates our awareness of the wide-ranging implications of these issues to the lives of local people.

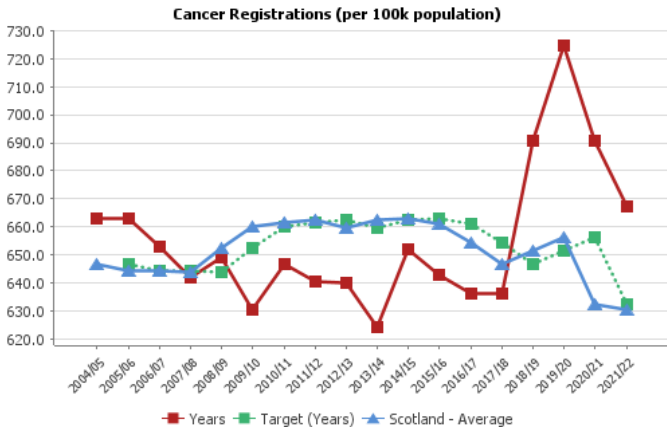
1.3 Conditions, Admissions & Discharge

Continuing on the theme of early intervention, positive trends can be seen both locally and nationally in the uptake of bowel screening by eligible men and women (aged 50-74). Uptake is now at nearly two thirds, with Clackmannanshire slightly above average. It is hoped that this improved awareness will contribute to a future reduction in cancer registrations, where the area has recently seen some of the highest rates in Scotland (though, as noted, the magnified chart does exaggerate this variance). Similarly high rates of lung cancer registrations can also be seen locally, which will be discussed in more detail in a later section of this report.

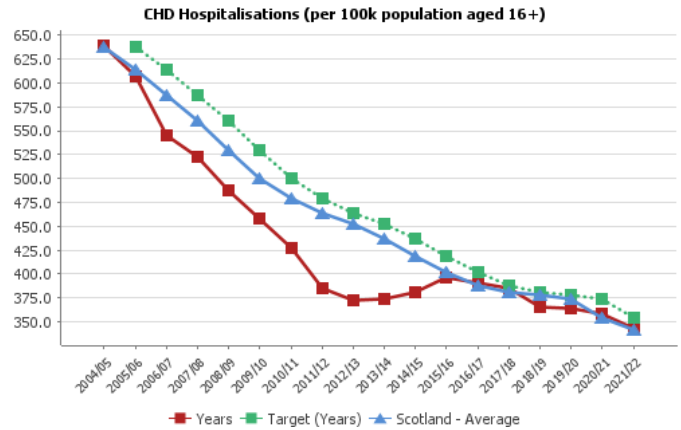
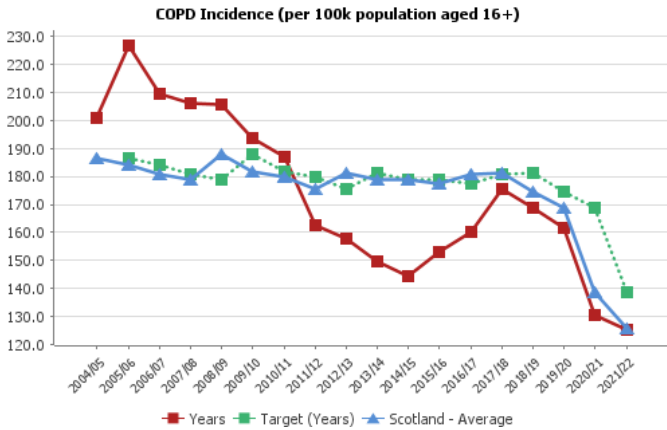


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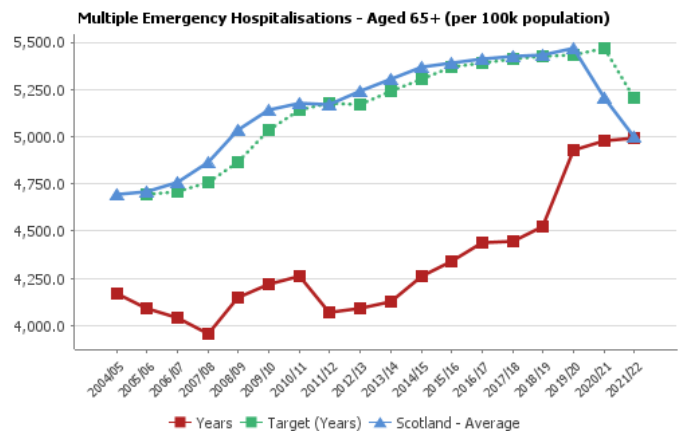
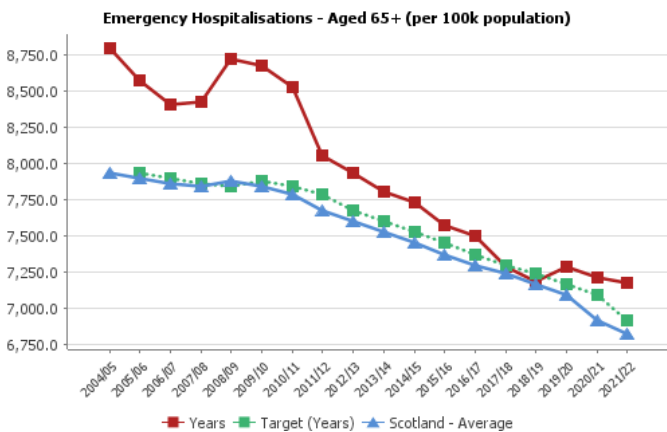
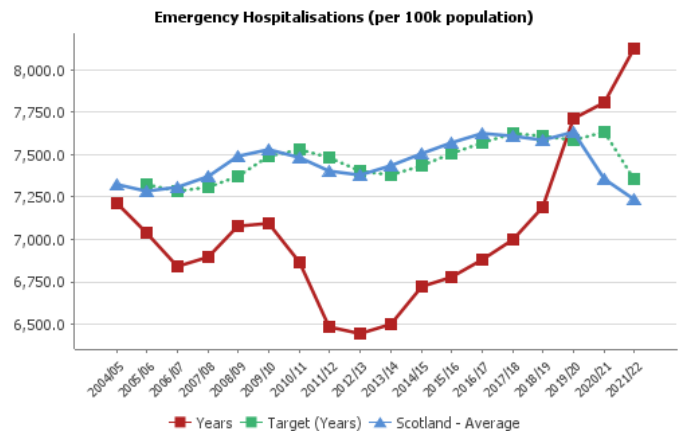
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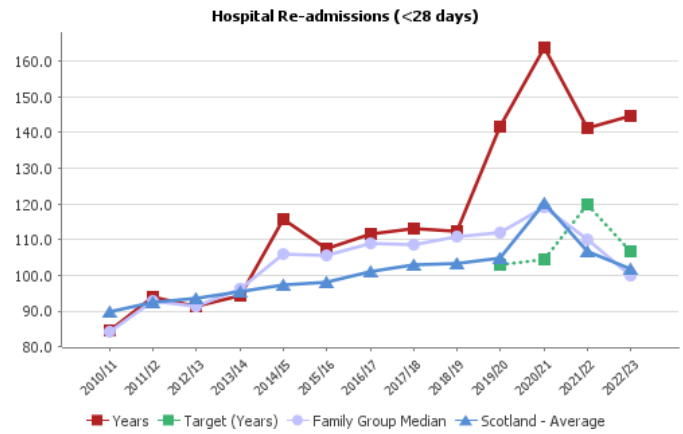
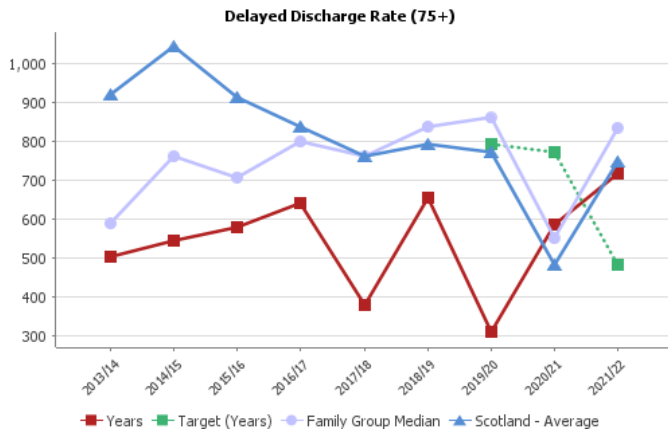
While the area has historically seen high levels of Chronic Obstructive Pulmonary Disease, these have also reduced to a greater degree than across Scotland, now close to average. Hospitalisations due to this condition have, however, been consistently below average. While this was previously also the case for Coronary Heart Disease admissions, these rates increased for 3 years to 15/16, now closely aligned to nationally reducing trends. Many of these issues are particularly relevant to the higher proportion of older people in the area, who may be managing multiple health conditions that must be taken into account, not only by residential and home care services, but also by other services where eligibility, payment and levels of demand are closely linked to age or health grounds, such as special waste uplifts.



Also of key relevance to health and care services are rates of emergency hospital admissions which are, unfortunately, another area where a concerning local trend is evident. Our rate is now 7th highest in the country, with Falkirk 6th highest, and similar worsening trends in both Falkirk and Stirling. This may, therefore, be an area where heightened partnership efforts around awareness, prevention and early intervention are required across Forth Valley. This issue is compounded by recent concerns over capacity within hospitals and particularly accident and emergency departments. It is also of note that, as demonstrated by the following charts on people aged 65+, this increase is predominantly among younger age groups.



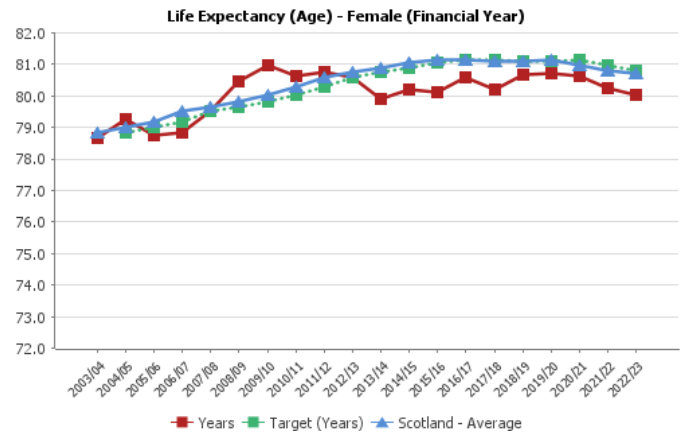
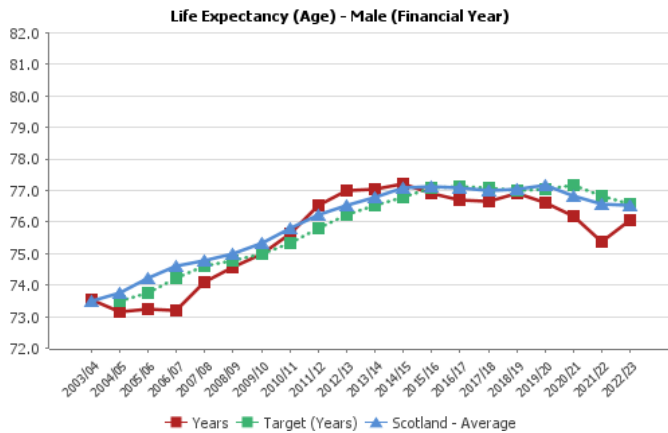
A more complex picture can be seen for older people in this respect, with historically high rates of admission reducing substantially in contrast to the increasing rate for the whole population. At the same time, however, greater numbers of older people are experiencing multiple emergencies (2 or more within a single year), with both of these results now close to the Scottish average.



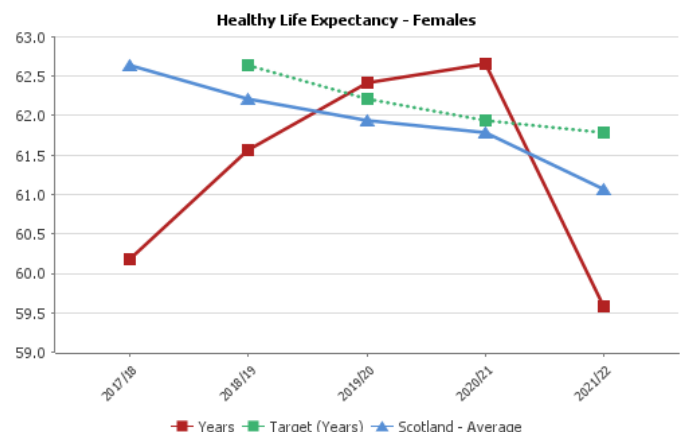
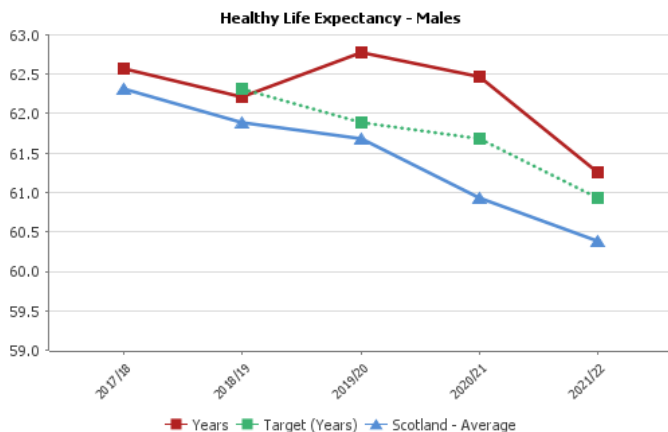
While the delayed discharge rate for older people fluctuates, it is generally below or near the Scottish rate. This appears more closely aligned to local care service management, with other Forth Valley authorities ranked in lower quartiles, however, re-admissions with 28 days shows a close correlation. Here, Clackmannanshire, Falkirk and Stirling have all been ranked among the worst performing 4 authorities for 3 years running. Given varying deprivation and demographics in these areas, it would appear that this is another area where a strong partnership approach with NHS Forth Valley and both Health & Social Care Partnerships will be required to address issues.

1.4 Life Expectancy & Mortality

It is disappointing that most publicly available health data references only 2 Equalities characteristics (age and binary gender), however, from the data that is available, it can be seen that there are differing issues for men and women, some of which will be discussed elsewhere in this report. For life expectancy, there are broadly similar trends and rankings for both groups, though males are likely to live to the age of 75.4 and females 80.3, around 5 years longer (4 nationally). The charts below use the same scale to illustrate this comparison.



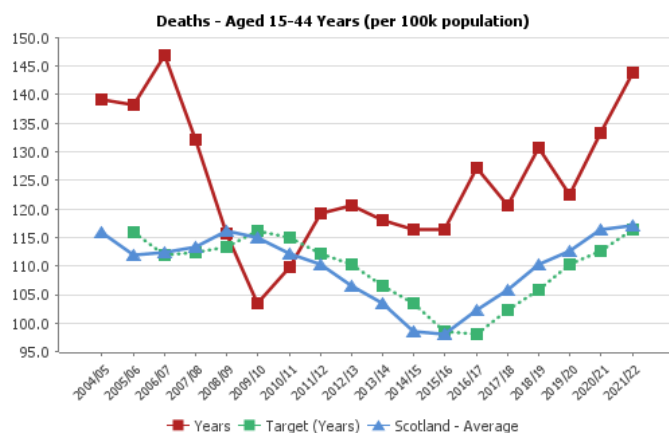
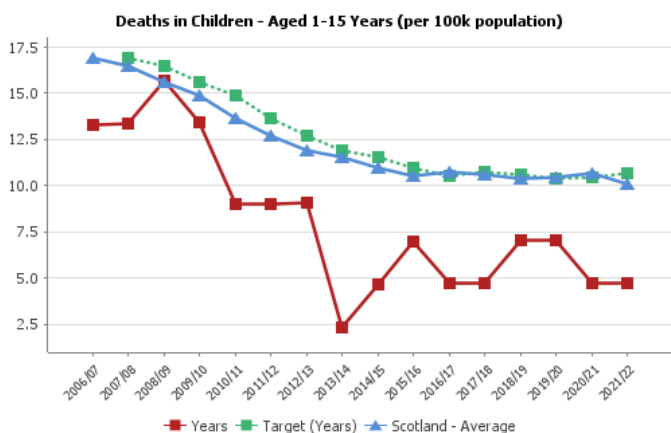
As is often the case, Clackmannanshire sees a greater degree of annual variance due to the lower numbers involved but, at a national level, incremental annual improvement can be seen in overall life expectancy up to 14/15. This then plateaued until 20/21 when the tragic loss of life from the Covid pandemic began increasing excess deaths and negatively impacting average life expectancy. Some differing trends can, however, be seen in data on healthy life expectancy, showing the likely number of years lived in 'good' health.



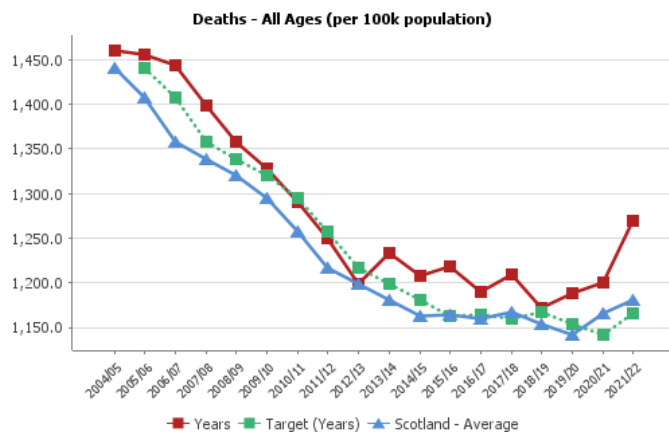
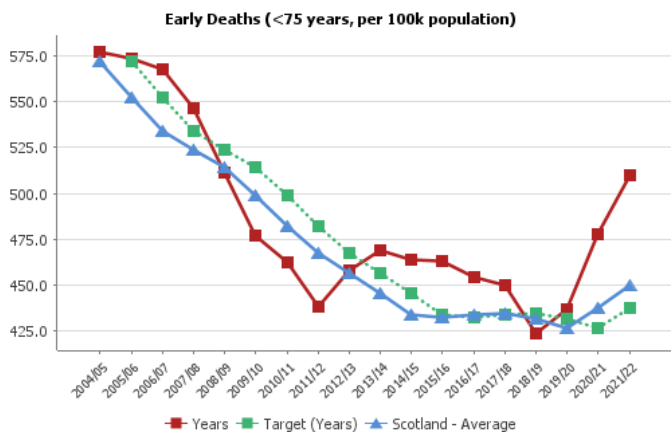
Charts show Clackmannanshire's value in red

Charts are magnified to make results clearer but this exaggerates trends and variance

For males this is 61.3 years locally, above average in all 5 years, with a lowest ranking of 18th out of 32 authorities. Female results were below average in 3 of the 5 years, with a lowest ranking of 26th, and the latest figure of 59.6 nearly 2 years below that of males. Therefore, while males in the area are likely to live around 14 years of their lives in less than 'good' health, for females this is 21 years (nationally 16 & 20, respectively). This is compounded by known financial inequalities, such as recent findings that women are only likely to have around a third of the savings by retirement age, suggesting greater vulnerability to poverty, discussed in the following section.



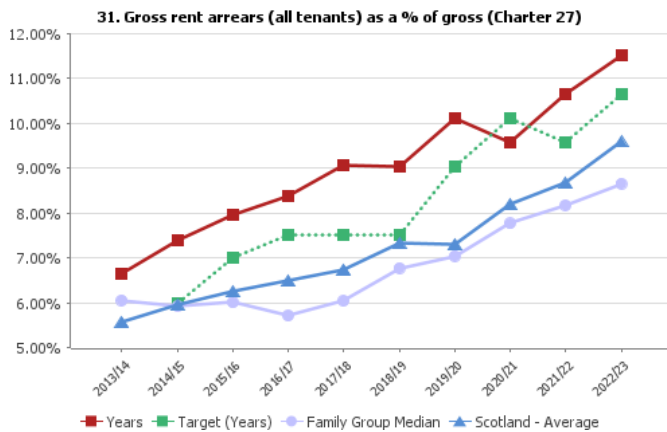
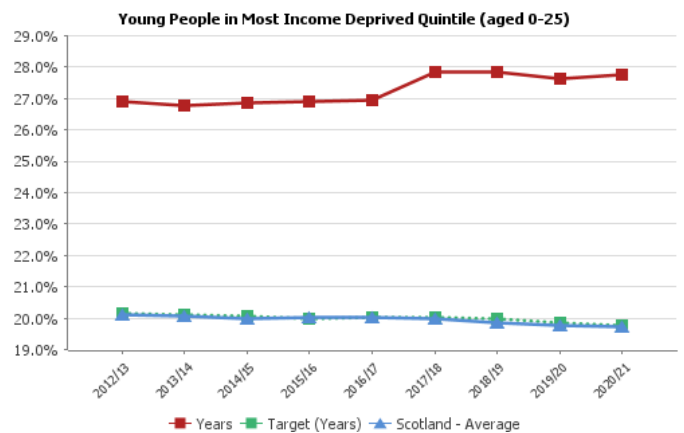
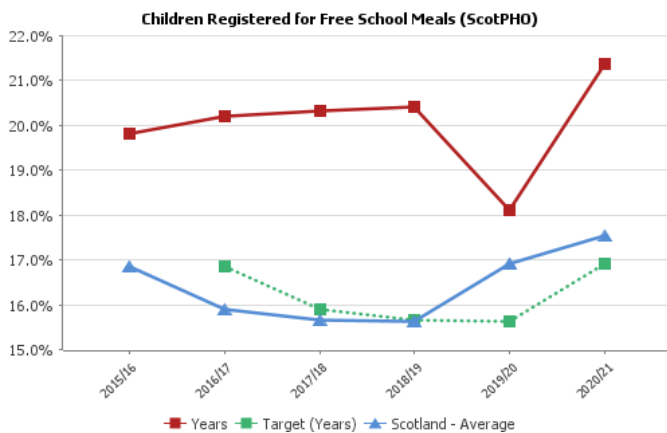
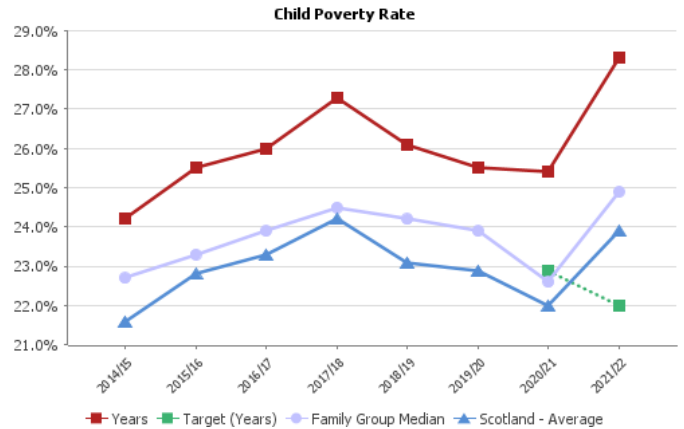
The local infant mortality rate (aged 0-1) has reduced from 29th place to 16th, now below the Scottish average. We also have a low rate of child mortality (aged 1-15), top quartile for the last 9 years and currently 3rd lowest in the country. These are the only two groups with no significant increase since the start of the pandemic which is, sadly, evident in most other mortality indicators. Several rankings have moved to the bottom quartile, such as early deaths (under 75), and those from cancer and coronary heart disease (where Covid, or the focussing of health services on Covid, may have contributed). Though rates have increased for 15-44 year-olds and overall, rankings remain static, suggesting the severity of local impact was proportionate to authorities' existing levels. It is likely this relates to some demographic and health factors already mentioned and resilience issues in the following section.



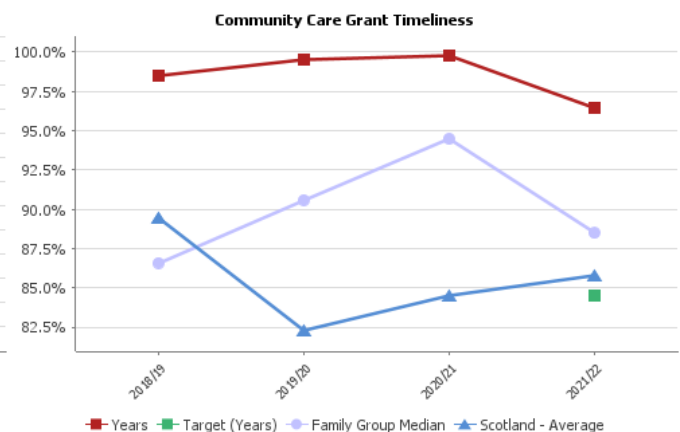
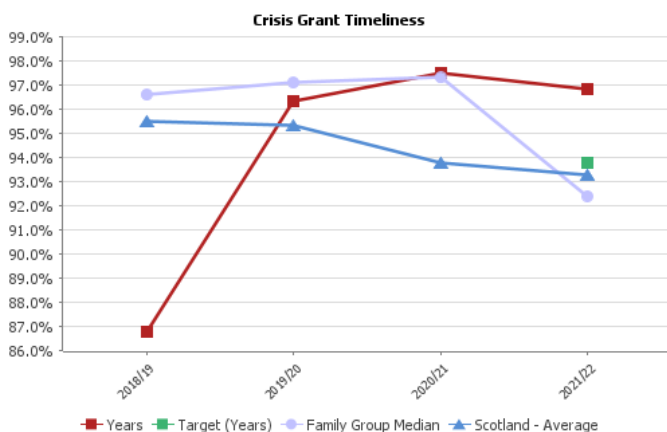
2. Community Resilience & Care Experience

2.1 Poverty

Clackmannanshire's Local Outcomes Improvement Plan outlines key actions to address deprivation, a long-standing issue of concern for the area. Child poverty rates (after housing costs) are consistently in the bottom quartile, with the latest value of 28.3% the 3rd highest in the country, where the overall rate is 23.9%. There are also high rates of free school meal uptake (primary 4 & above), 21.4% versus a Scottish figure of 17.5%, though based on registrations rather than eligibility. 27.8% of local young people (aged 0-25) live in the 20% most income deprived areas of Scotland, with a national figure of 19.7%. Traditionally high levels of rent arrears continue to increase, to 11.5% (9.6% nationally) and our 20th place ranking is also bottom quartile (not all authorities provide housing services so quartiles are smaller).

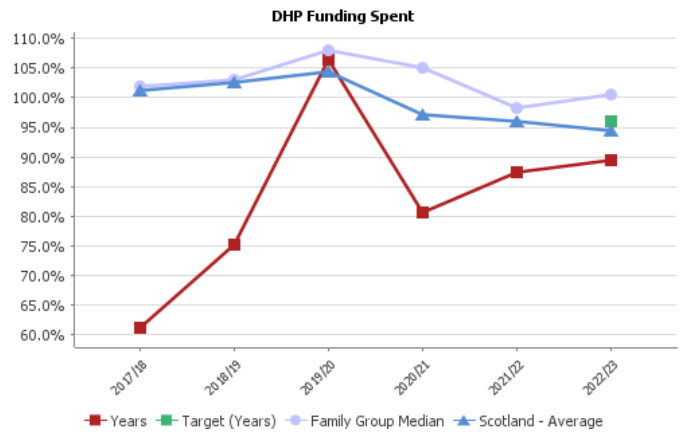
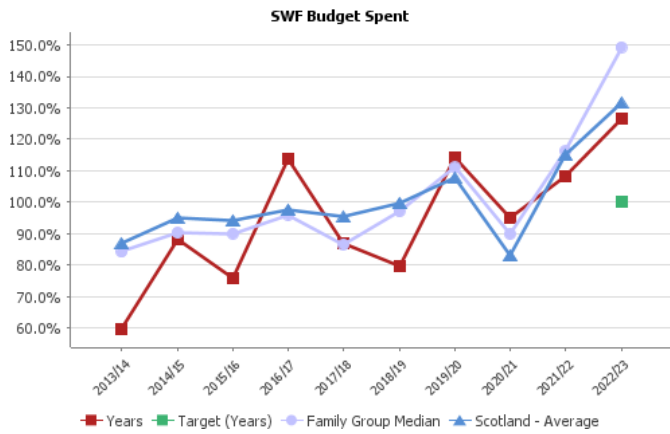


The Council has improved the timeliness of processing crisis grant applications, from 87% to 97% of decisions provided within 1 day (93% nationally). Despite a slight decline in community care grant timeliness, performance (also at 97%) remains substantially above the Scottish average (86%). As shown on the following page, the proportion of Scottish Welfare Fund and Discretionary Housing Payments funding spent within year are more variable, with rates similar to the Scottish averages (both improving from bottom quartile rankings to 18th and 16th, respectively). The fact that many authorities are spending more than 100% of funding and topping up from other sources, plus the wide range of results, particularly for SWF (27% to 204%) strongly suggests that national budget allocation requires review.



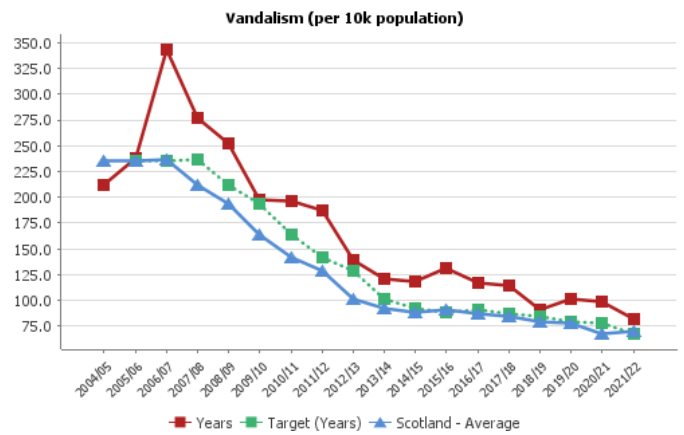
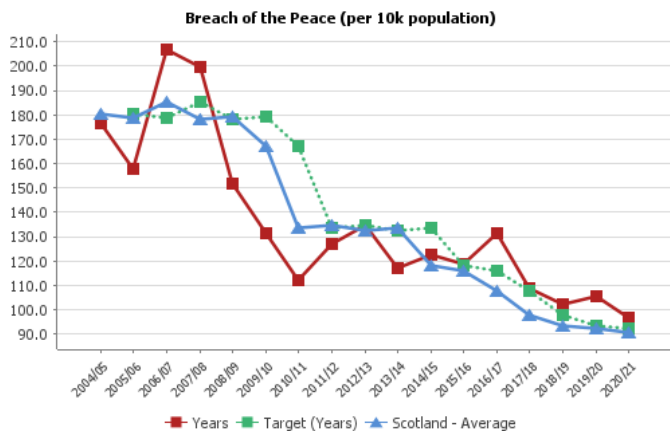
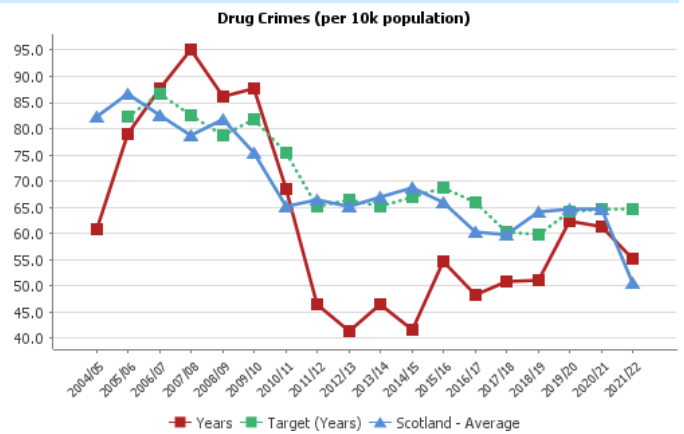
Charts show Clackmannanshire's value in red

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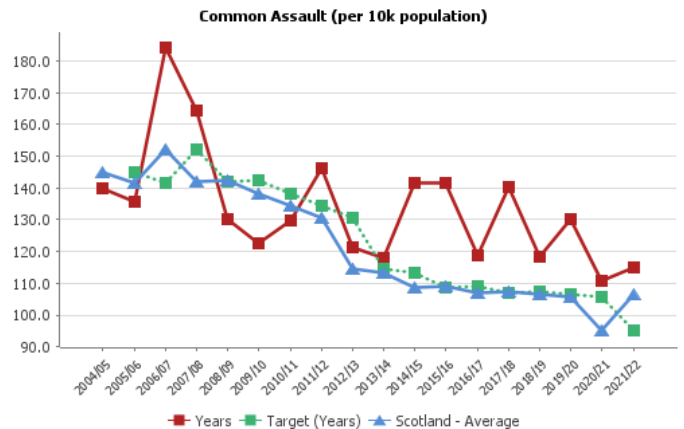
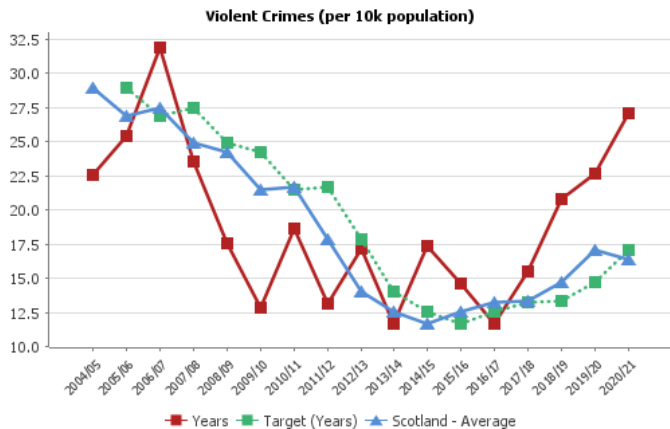


2.2 Crime

This is another area where the Council is clearly not the lead public body, but works in close partnership with Police Scotland to uphold the law and manage prevention, detection and impacts. The next section will discuss substance misuse in more detail and, while this is another issue of concern for the area, the rate of drug crimes has been below average for the last decade. It has, however, gradually increased over this period and is now above the Scottish rate. Instances of breach of the peace and vandalism are reducing in line with national trends, though both remain above average, with vandalism rates ranked in the bottom quartile.

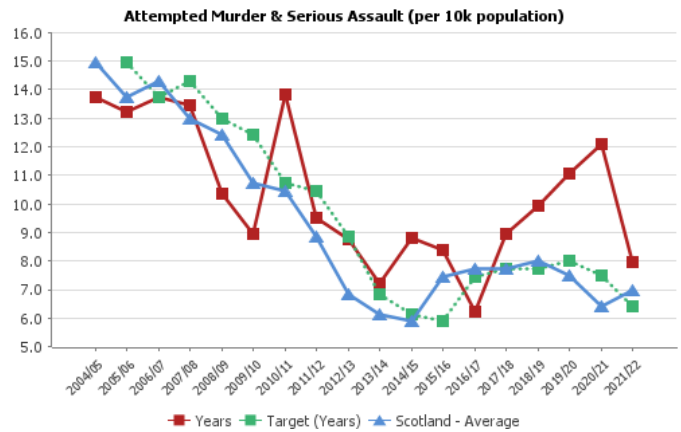
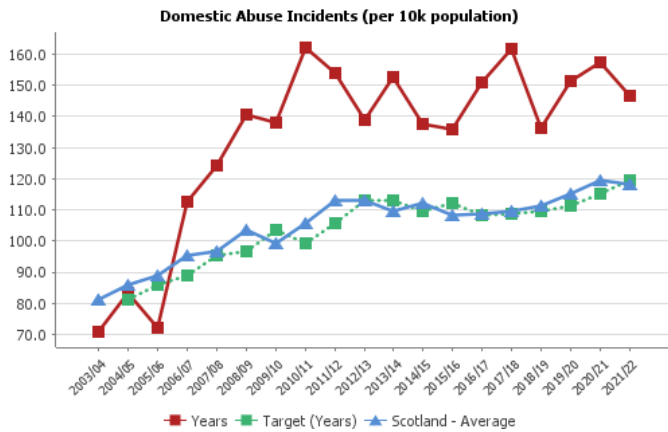


More concerning trends are evident, both nationally and particularly locally, in relation to violent crimes, with regular Police Scotland reports to the Council's Audit & Scrutiny Committee detailing remedial actions and initiatives to tackle these issues. Rates of common assault also remain above average, generally in the bottom quartile, though the most recent result moved into the 3rd quartile.

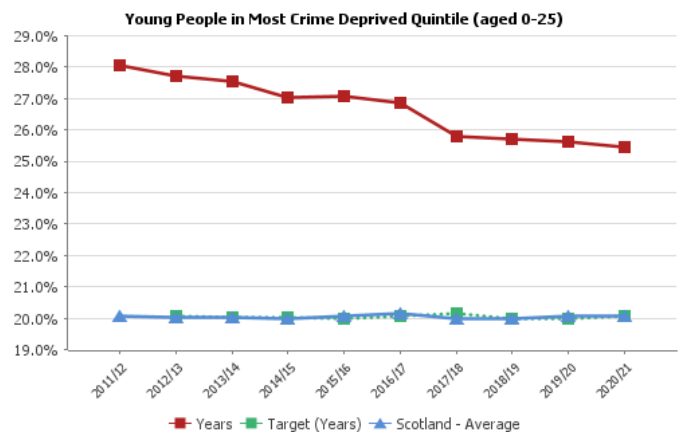
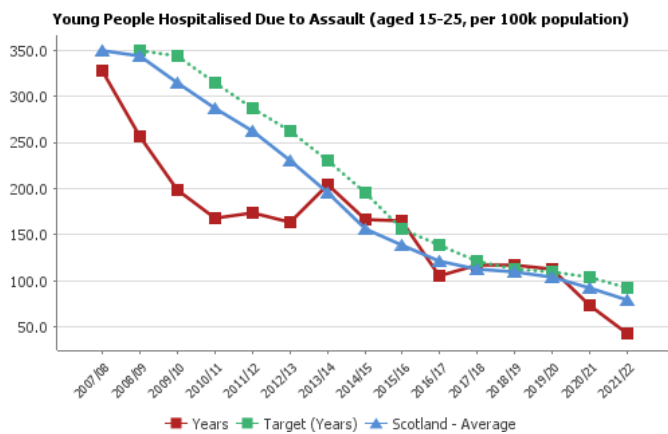


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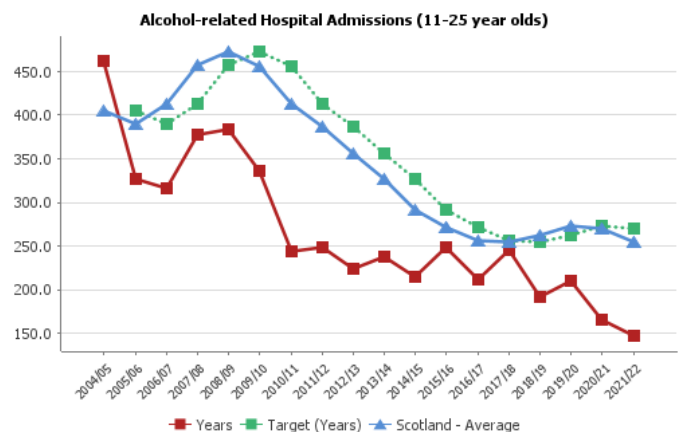
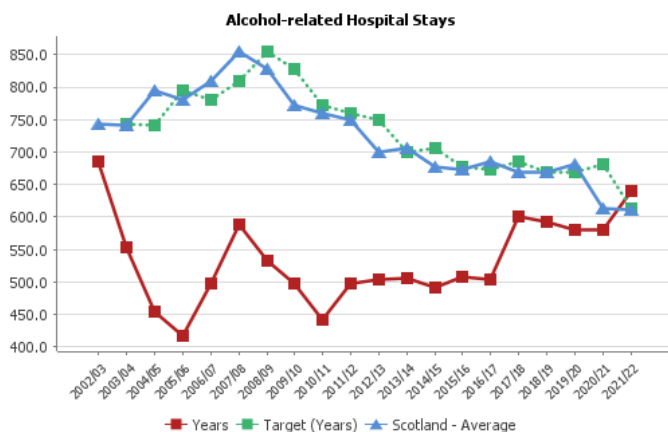
As outlined in the Local Outcomes Improvement Plan, tackling inequalities and violence against women and girls are high priorities for Council and partnership action. While being aware that domestic abuse is more often perpetrated by males against females, we must ensure supports are inclusive for all affected and that all people are educated on the topic, which is also of key relevance to child protection, as discussed later. Though there is evidence of a slight reduction over the most recent 5 years, Clackmannanshire's domestic abuse rate remains substantially higher than average, currently the 4th worst in the country. Similarly poor rankings are seen for the rate of attempted murder and serious assault, though recent reductions are clearly welcome improvements.



As mentioned, the impacts of crime on children and young people are often extensive and long-lasting, not least when this poses a direct threat to their physical health and safety. The significant reduction in young people (aged 15-25) hospitalised due to assault is another very welcome result. The steep local trend in the last 2 years may relate to local enforcement of Scotland becoming the first UK nation to ban the smacking of children (Nov-2020) with our ranking improving from 24th to the 6th lowest rate in the country. Though there has been some improvement, 25.5% of Clackmannanshire's young people live in the 20% most crime deprived areas in Scotland, as evidenced elsewhere in this section, and work continues to reduce crime and protect vulnerable groups.

2.3 Alcohol & Substance Misuse

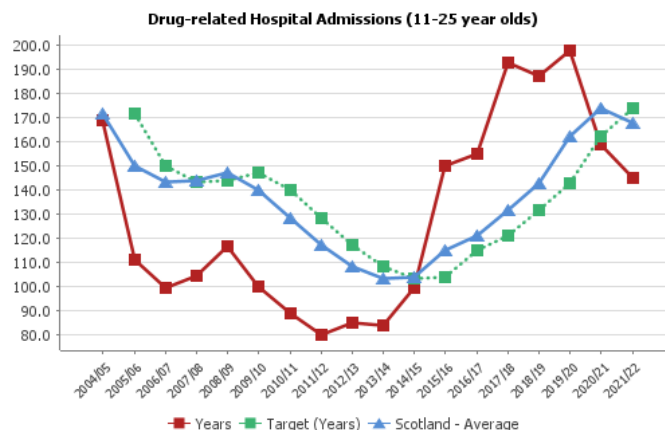
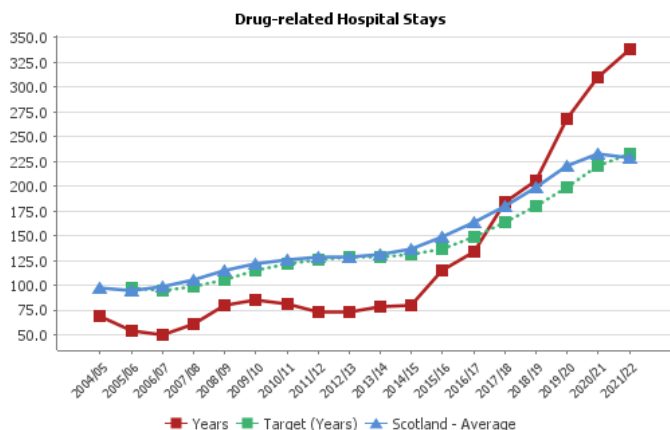
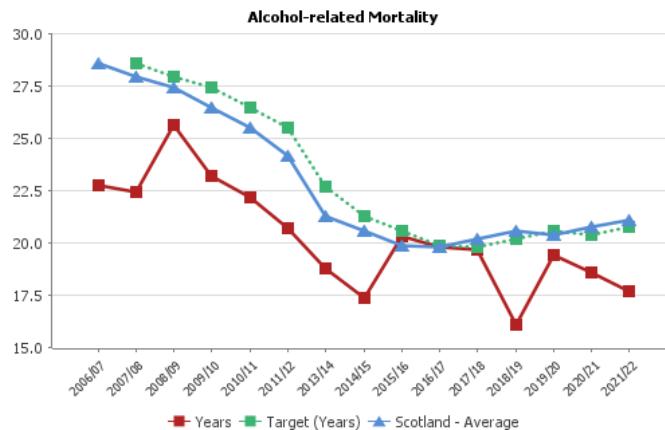
The Alcohol & Drug Partnership continues its focus on reducing the impacts of these issues locally with both preventative and responsive interventions. While alcohol-related hospital admissions have historically been lower than average for both adults and young people (aged 11-25), differing trends can be seen over the last decade.



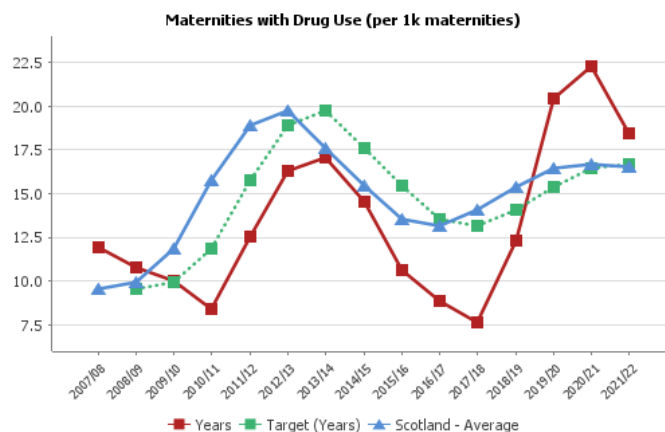
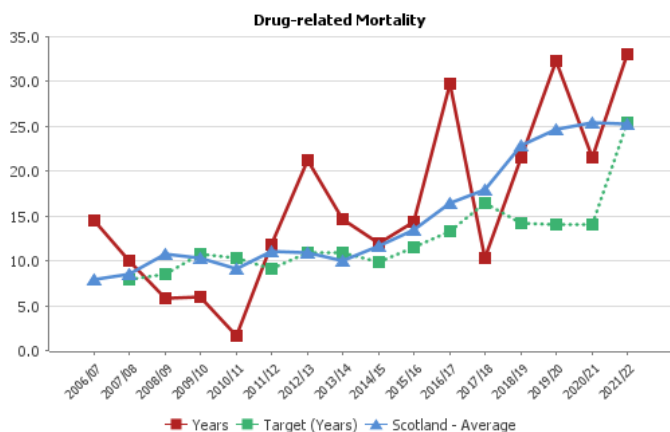
Charts show Clackmannanshire's value in red

Charts are magnified to make results clearer but this exaggerates trends and variance

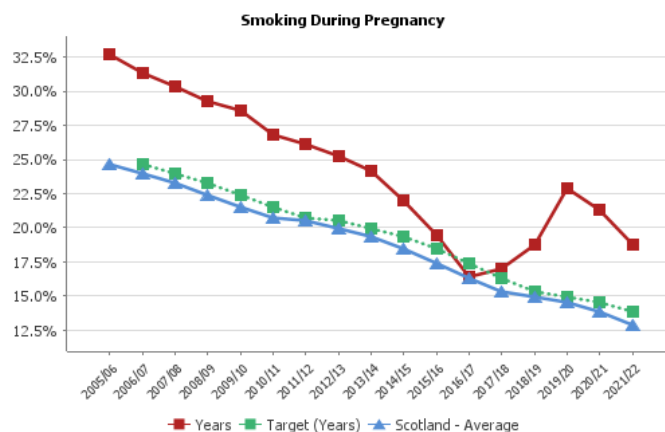
Admissions across all age groups have been steadily increasing and are now above average, however, the rate amongst young people continues to reduce and is now the 2nd lowest in the country. Alcohol-related deaths are also on a broadly reducing trend (to 17.7 per 100,000 population) in contrast to slight annual increases for 6 years nationally (now 21.1). While trends for both males and females are roughly similar, the female rate is lower (most recently 10.1 versus 12.8 nationally) but was close to or above the Scottish average for 6 years, prior to an improvement from 23rd to 9th place in 21/22. The substantially higher rate amongst males is 25.4 but is consistently below the Scottish average (29.4), currently in 15th place.



Though fewer admissions relate to drugs than alcohol, here the national rate is worsening, and the local increase more significant, now 4th highest in the country. Contrasting patterns in alcohol- and drug-related admissions can also be seen for young people, with a steep increase in the latter, though improving from 24th to 8th over the last 2 years. Again, lower numbers involved in drug-related deaths result in high annual variance locally, now ranked 26th (33.1 per 100,000 population, 25.2 nationally). Similarly to alcohol, differing rates can be seen for men and women, with a higher male rate of 29.7 (33.2 nationally) but rankings improving from 27th to 17th over the last 5 years. The female rate is 17.5 (13.1 nationally) but rankings have declined from 18th to 27th over 5 years.



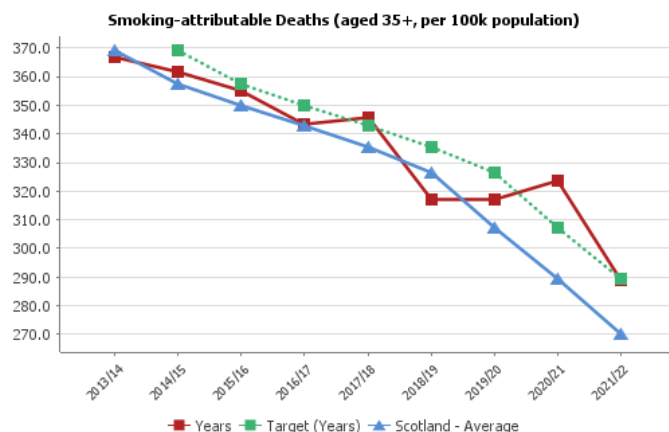
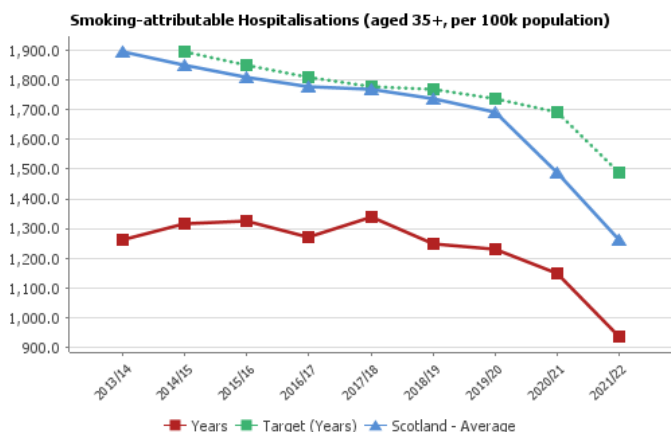
Fluctuation is also evident in maternities with drug use, where results have been higher than average for the last 3 years (now at 18.5 per 1,000 maternities, versus 16.6 across Scotland). Rates of smoking during pregnancy are very broadly reducing in line with national trends but higher than the Scottish rate of 12.9%, at 18.8% (the 4th highest in the country). These rates are closely associated with deprivation, ranging from 2.1% in the least deprived areas (2.5% across Scotland) to 32.0% in the most deprived areas (24.3% nationally). We also have the 2nd highest post-partum smoking rates in the country (at health visitor First Visit review) of 21.3%, where the Scottish figure is 15.8%.



Charts show Clackmannanshire's value in red

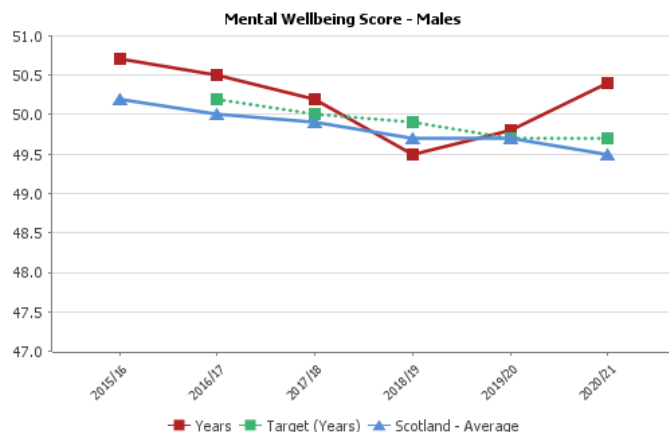
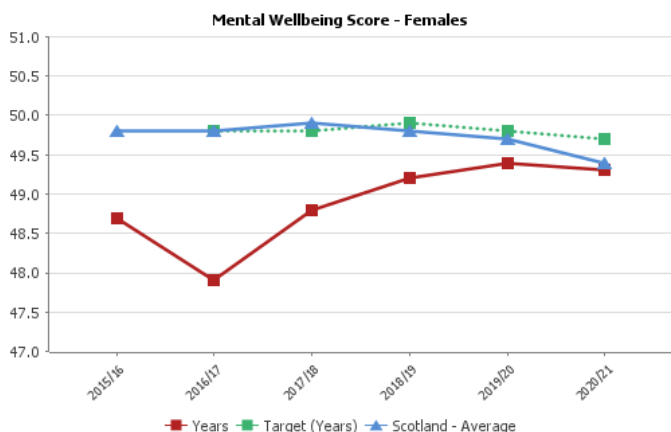
Charts are magnified to make results clearer but this exaggerates trends and variance

Tobacco is also a key area of focus for the Alcohol & Drug Partnership and it can be seen that smoking-attributable hospitalisations (aged 35+) are higher than both alcohol- and drug-related. While we now have the 8th lowest rate in the country, sadly, the transfer of health service focus to Covid in the most recent 2 years may have contributed to fewer admissions for treatment of other conditions, and also to the increase in smoking-attributable mortality.

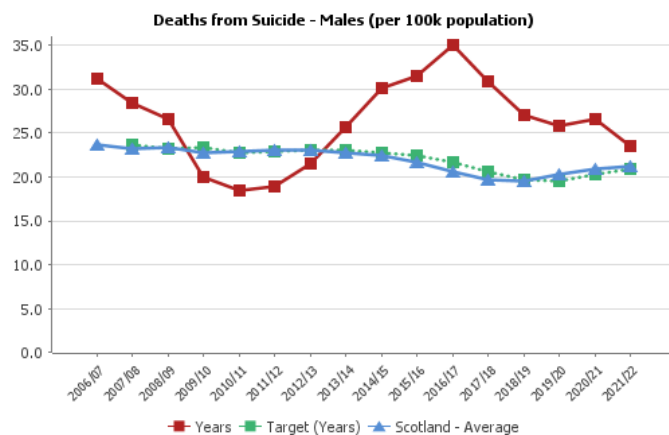
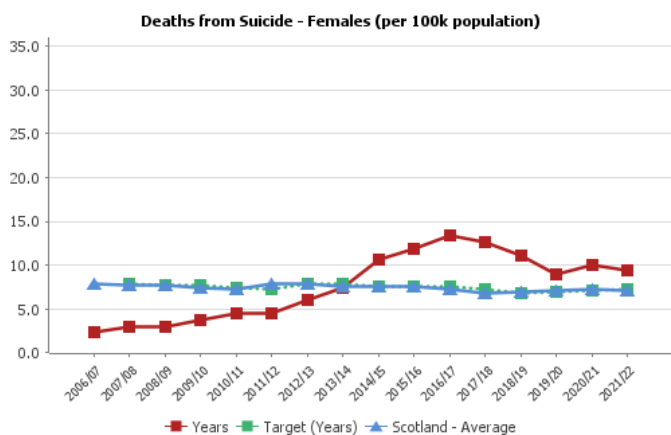


2.4 Mental Health

Many sections and indicators in this report could be grouped differently but since there are known associations between deprivation, alcohol & substance misuse, mental health and child protection, it was felt these were best analysed together in order to outline many of the related challenges for the resilience of our local communities.



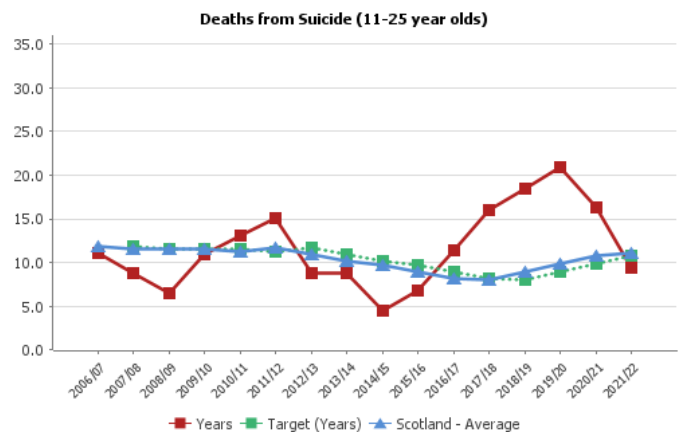
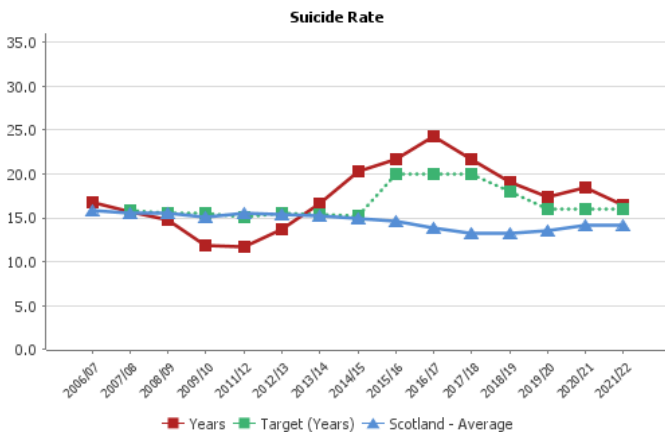
Complex and varying results can be seen in relation to mental wellbeing scores and suicide rates, with rankings spread across all 4 quartiles (again, the same scales have been used in the charts for comparable indicators in the hope of clarifying some of the similarities and differences). While the average local mental wellbeing score for females is lower than for males, the suicide rate is also lower. Nationally, mental wellbeing scores are similar for both groups but the known higher suicides rates among men are clearly evident. Rankings for both female indicators are generally in or near the bottom quartile, which is also the case for male suicides, however, the most recent male mental wellbeing score was the 8th highest in the country.



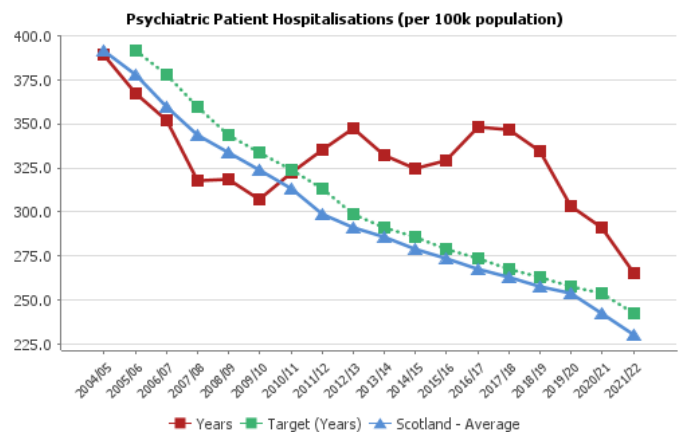
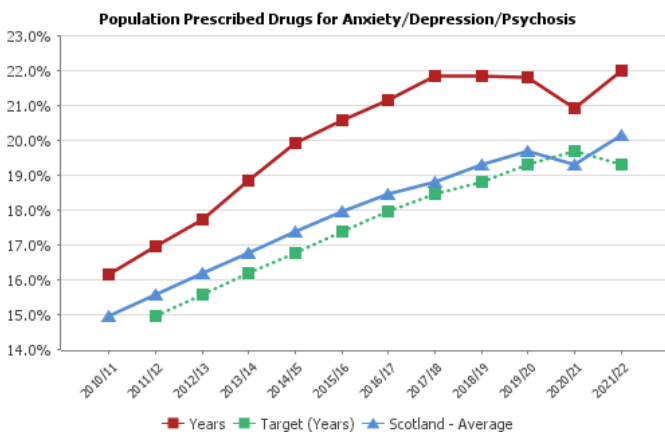
Charts show Clackmannanshire's value in red

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Clackmannanshire's overall suicide rate has, therefore, also been ranked in the bottom quartile for most of the last decade and was the 7th highest in Scotland in 21/22 (16.5 per 100,000 population versus 14.1 nationally). The Scottish rate for young people (aged 11-25) is generally around a third lower than the overall rate and has reduced for 2 consecutive years locally, contrary to the slight national increase, and is now at 9.4 per 100,000 population (11.1 nationally) with the ranking improving from 30th to 12th.

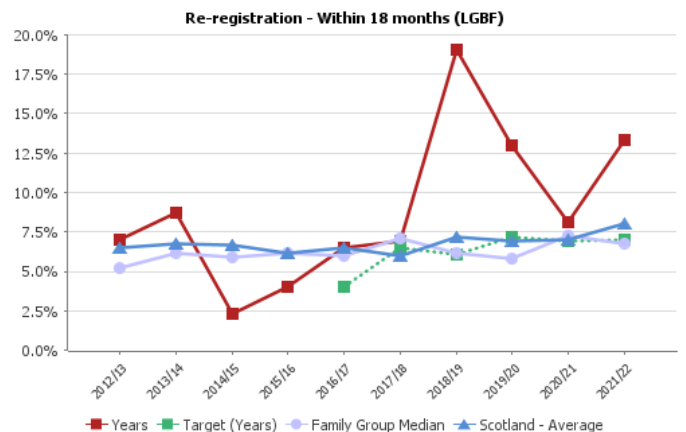
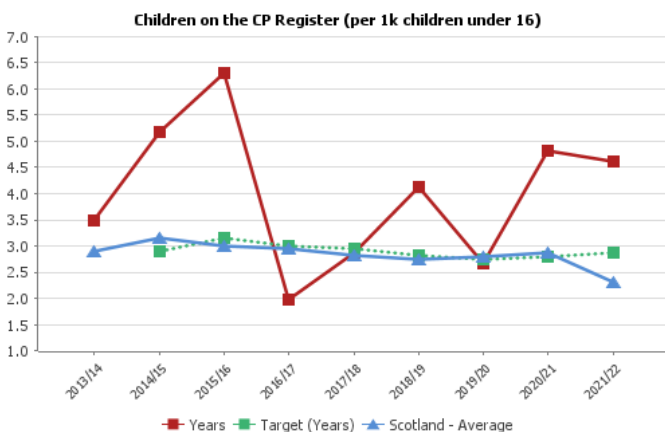


While mental health-related prescriptions are above average and increasing, it may be that wider uptake with more people acknowledging issues and seeking help is contributing to a reduction in hospitalisations. Other factors may be improved understanding, treatment policy changes, promotion of other therapies and 'social prescribing'. Work is ongoing within a number of partnerships, including with health service colleagues and educational psychology, to ensure that services and supports continue to develop with trauma-informed approaches at their core.



2.5 Children & Young People's Care

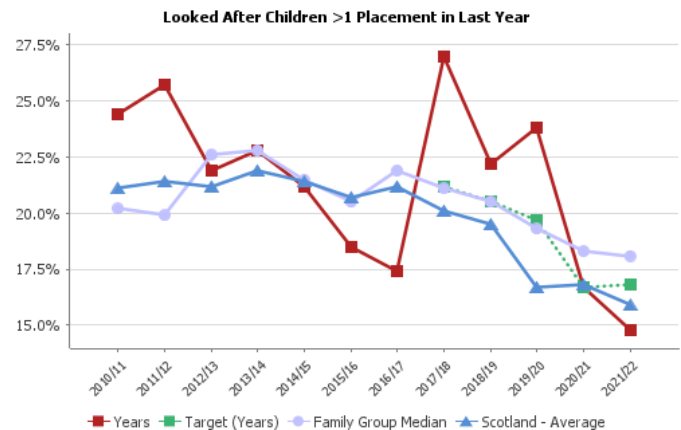
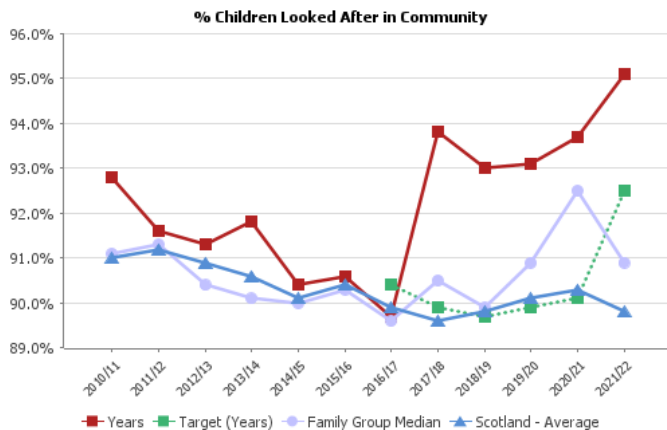
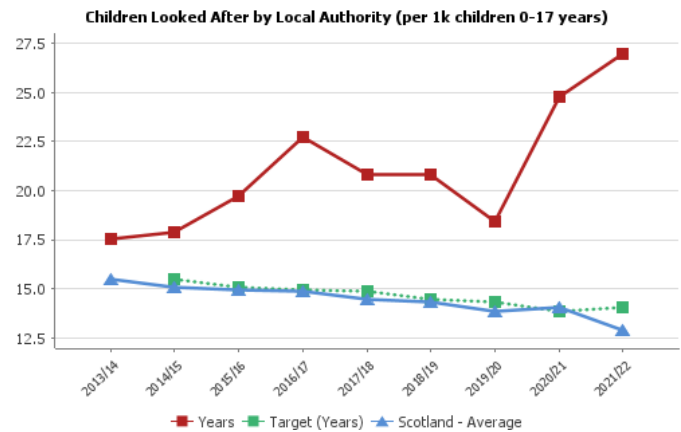
A number of the challenges already mentioned contribute to a higher local rate of children on the child protection register. As shown, these rates fluctuate, often due to a high number of large sibling groups which we would always aim to support to remain together, wherever possible. We have also recently seen high rates of children re-registered within 18 months, whose removal from the register may have been premature. Though both were ranked in the bottom quartile in 21/22 (with the 2nd highest rate of children on the register), local data shows that both rates reduced in 22/23 and 23/24, though figures are provisional and currently being integrity-checked.



Charts show Clackmannanshire's value in red

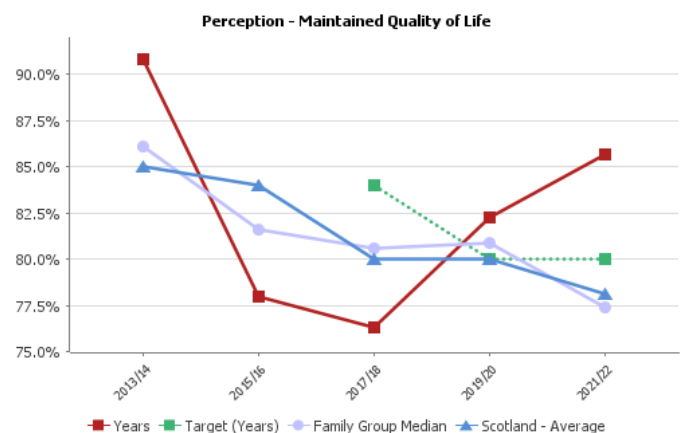
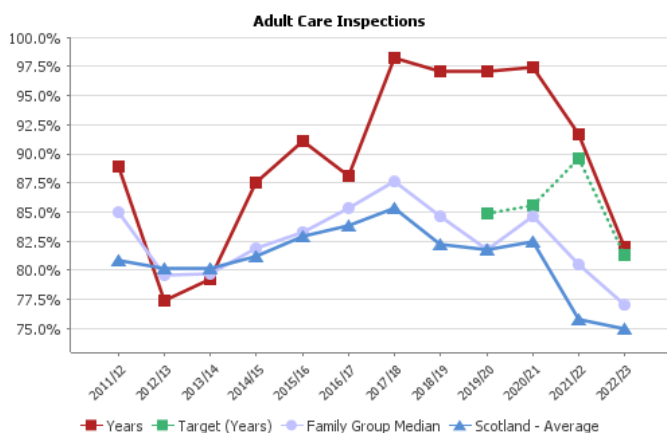
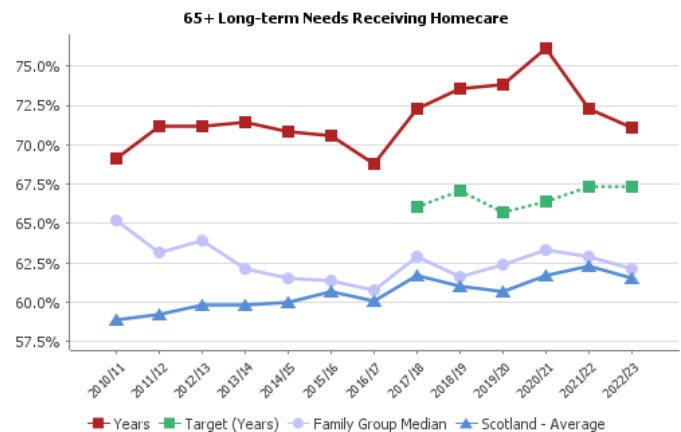
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Children's Reporter referrals for care and protection and where there is parental drug or alcohol misuse are common local issues, where rankings are also amongst the highest in the country, though there has been a significant reduction in children referred for offences. Rates of children looked after by the authority are also high and we have a continuing focus on ensuring children remain within their local communities, as evidenced by top quartile rankings for the last 5 years, and currently the highest proportion in the country. We have also substantially reduced the number of care experienced children with more than one placement in a year, where the ranking improved from 27th to 12th in 20/21 and remained at that level in 21/22.



2.6 Adult & Older People's Care

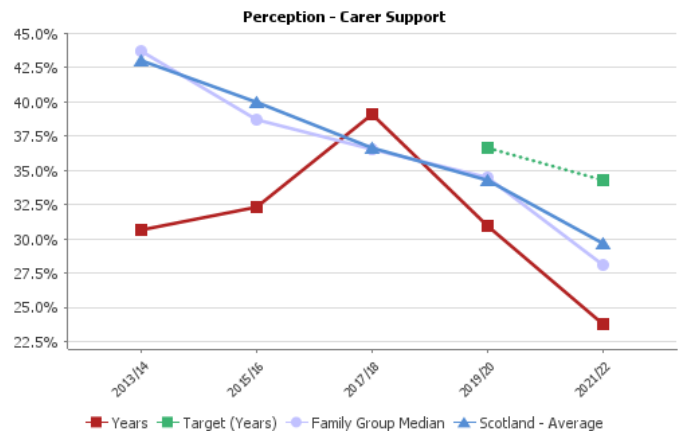
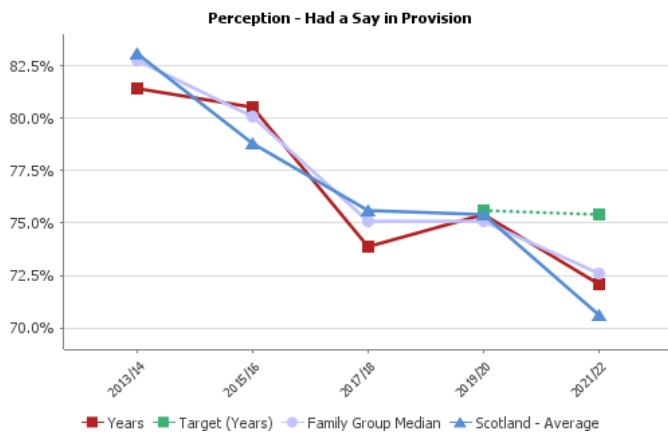
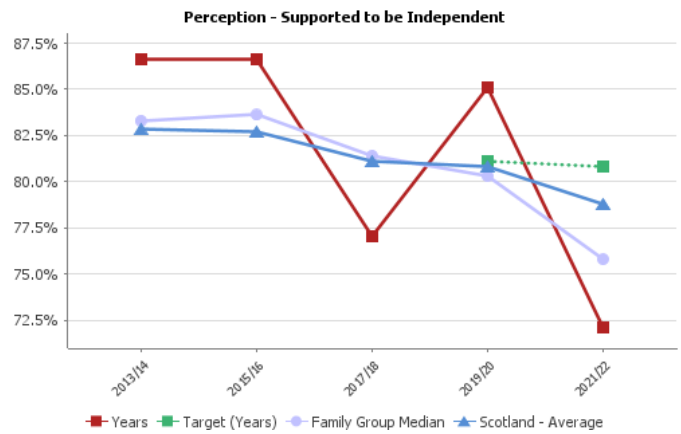
Our Chief Social Work Officer has oversight of both child and adult care services (provided via the health & social care partnership), ensuring best practice is applied across all areas. Our strong commitment to ensuring older people are also supported to remain in their communities is demonstrated through consistently strong performance in the proportion of those aged 65+ with long-term needs receiving homecare, with rankings within the top 4 authorities in all 13 years for which data is held. Top quartile rankings have also been achieved for the last 9 years in adult care inspections, with the best result in Scotland for 5 consecutive years. This dipped slightly to 6th place in 22/23 though pandemic-related methodological changes mean national and local results may not be directly comparable to previous years.



Charts show Clackmannanshire's value in red

Charts are magnified to make results clearer but this exaggerates trends and variance

The issues already mentioned regarding the ageing population and health demographics in the area, as well as recruitment and retention difficulties across the wider care sector do, however, mean services are struggling to manage increasing demand. This is reflected in the experience of those receiving care, where national results for all 4 perception measures have declined in all 5 years recorded, with local results ranked across all 4 quartiles over this period. There was improvement in those agreeing 'support improved or maintained their quality of life', to the 3rd best result in the country, however, we also saw the 3rd lowest result in those agreeing they are 'supported to live as independently as possible', and results are close to average for those agreeing they 'had a say in how support was provided'.

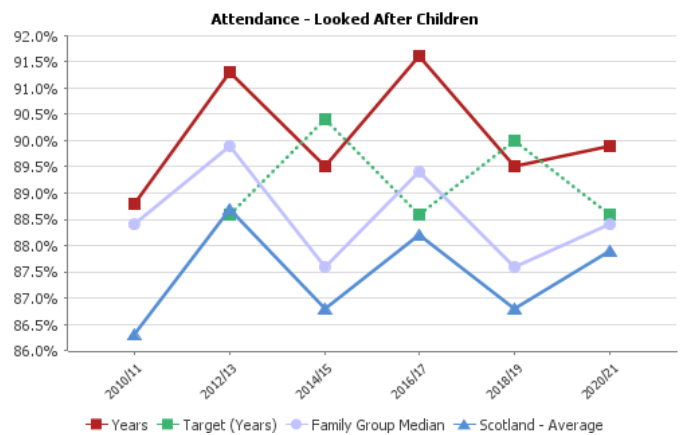
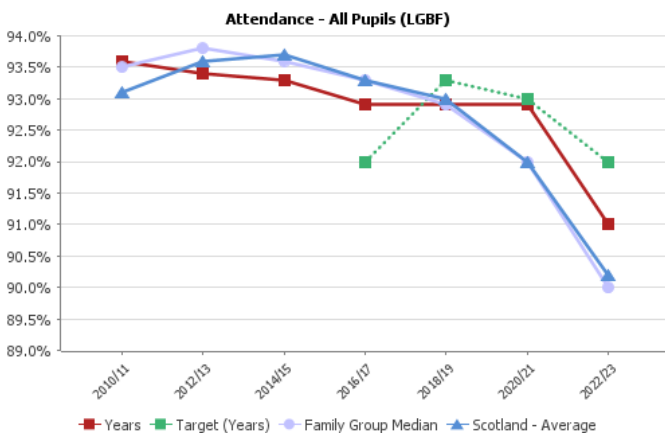
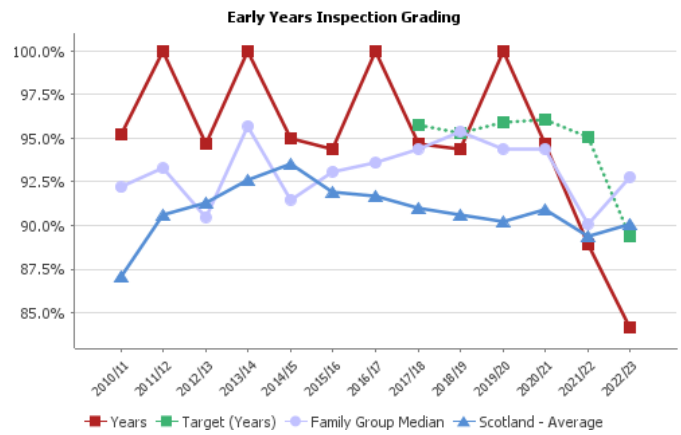


While, in perception indicators for those directly receiving care services, two thirds to three quarters of responses or above are positive, results from unpaid carers are considerably lower. Key resilience risks are evident in less than a third (29.7%) of carers feeling 'supported to continue in their caring role', dropping to less than a quarter (23.8%) in Clackmannanshire, which was the lowest result in the country. Work continues across health and social care partnerships, including through the Carers' Planning Group and local carers' centres, to improve provision and engagement, as well as targeted supports for young carers.

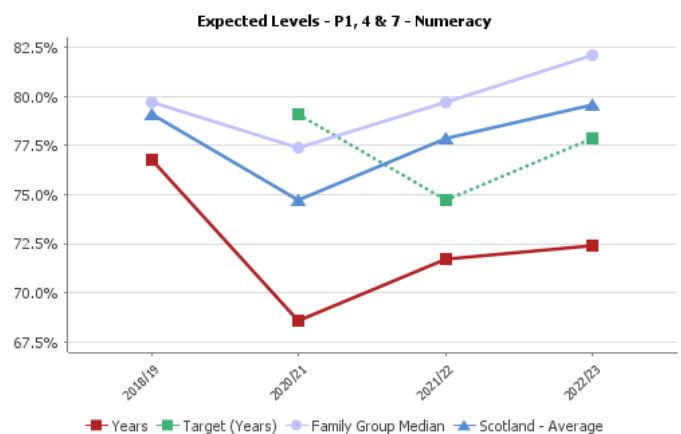
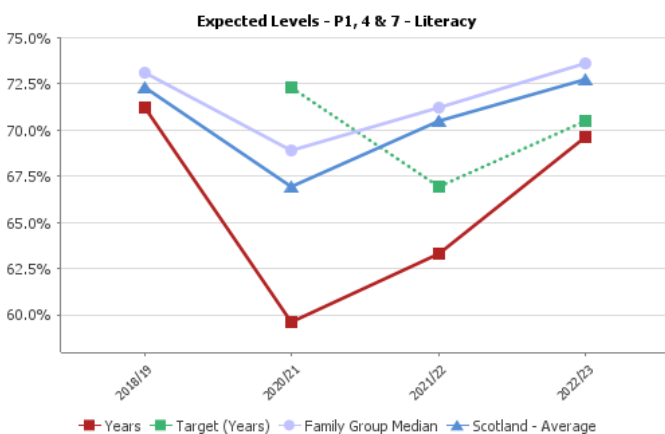
3. Attainment, Jobs & Economy

3.1 Education & Attainment

It is hoped that the previous sections explain some of the difficulties that may be experienced by local children and young people before even beginning to engage with education services, where an extensive range of activities aim to provide whole family support, including the Family Wellbeing Partnership. It can be seen that early learning and childcare establishments traditionally achieve strong inspection results, with 100% of funded provision graded good or better in 4 separate years. This has, however, declined from 1st place to 31st over the last 4 years, as highlighted in the People Directorate risk register, where actions to enhance and improve quality assurance are in place to support one local authority provider and two partner providers.



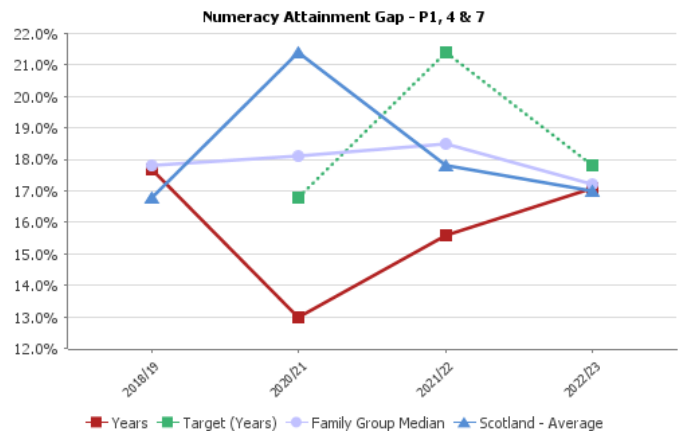
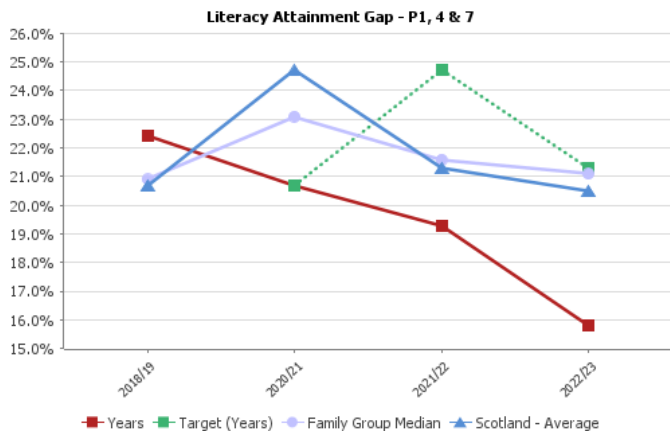
It is no longer of any value to report on school exclusions since these have been at negligible levels in Clackmannanshire since 18/19, with alternative approaches always being sought, though rates remain high in many other areas of the country, particularly for care experienced children. The national decline in overall school attendance since 14/15 has not been seen to the same extent locally, where we are now within the top quartile. Even stronger results can be seen in attendance rates for care experienced children, which is a key local priority, as evidenced in top quartile results for all years reported, currently the 5th highest in Scotland.



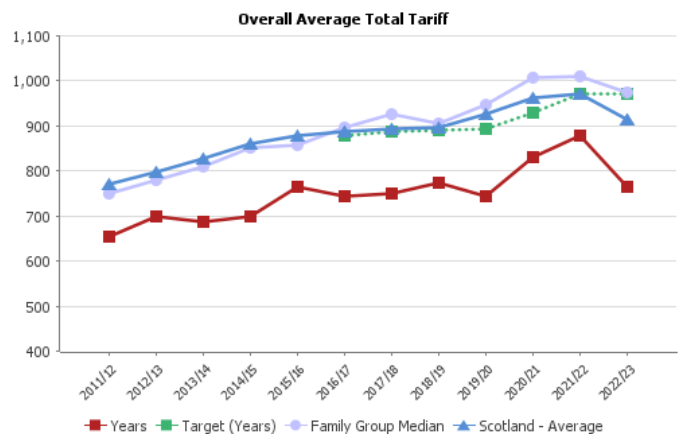
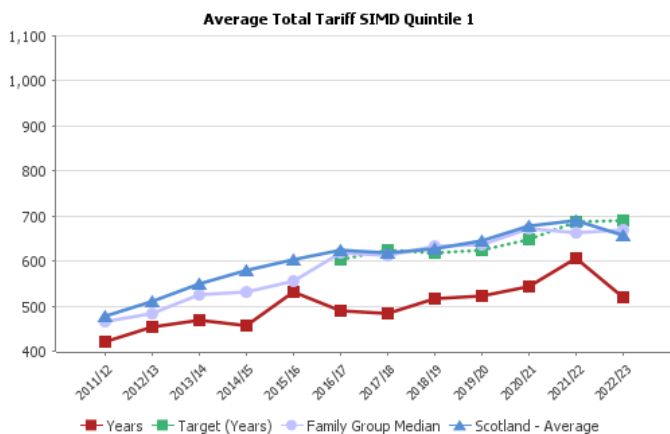
Progress is being made in the proportion of primary 1, 4 & 7 pupils achieving expected Curriculum for Excellence levels in both literacy and numeracy, though these remain below average. As shown on the following page, however, differing results can be seen for literacy and numeracy in the percentage difference in primary school attainment between pupils from the least and most deprived areas. The steeper rate of improvement for literacy shown above is complemented by a continued reduction in the attainment gap, where we have performed in the top quartile for the last 3 years, currently with the 4th lowest gap in the country. While the local numeracy attainment gap was the lowest of any authority in 20/21 and remained in the top quartile the following year, another subsequent increase means we are now close to average, in 14th place.

Charts show Clackmannanshire's value in red

Charts are magnified to make results clearer but this exaggerates trends and variance

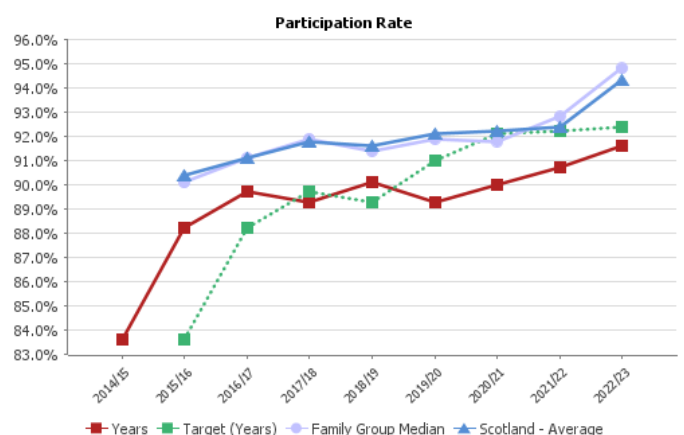
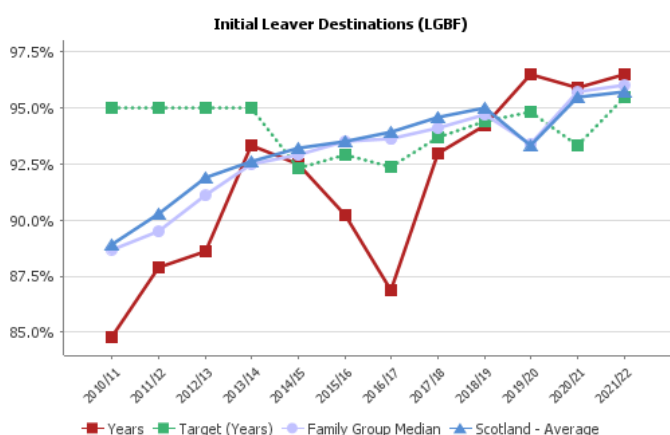


Secondary school attainment is also a major area of focus for the Council, with contrasting results for pupils living in the different deprivation quintiles and rankings across all 4 quartiles. The charts below use the same scale to outline the significant impact poverty can have on academic achievement and, while our overall results were the lowest in the country in 22/23, there was slightly less of a reduction in the most deprived areas (ranked 24th). We clearly cannot disregard the significant disruption to education services during the pandemic, and particularly the changes made to the teaching and assessment methodologies in use. The local dip in 22/23 is an exaggerated form of the national trend and it should be noted that results improved in only 3 local authority areas last year.



3.2 Employability & Labour Market

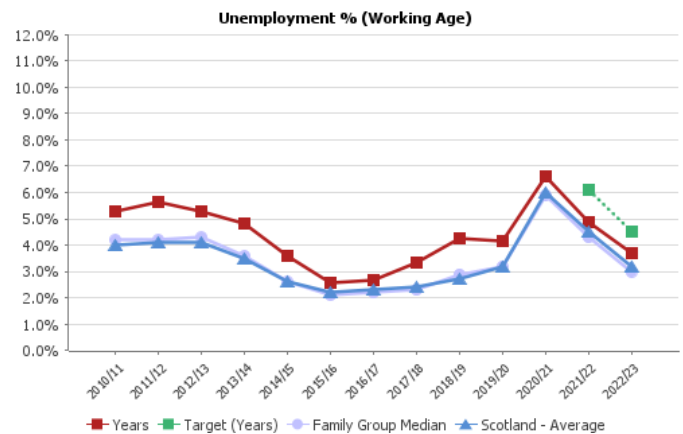
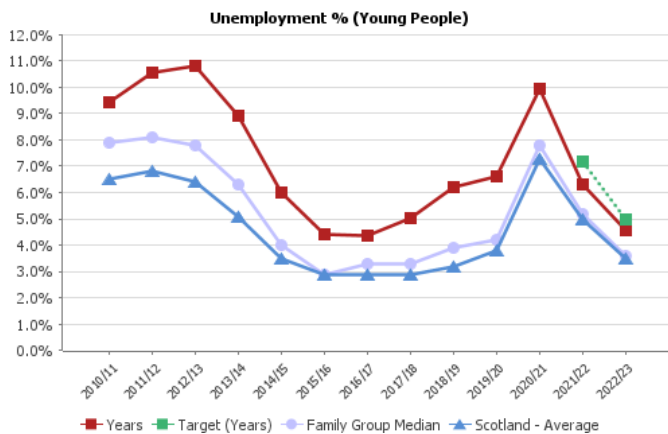
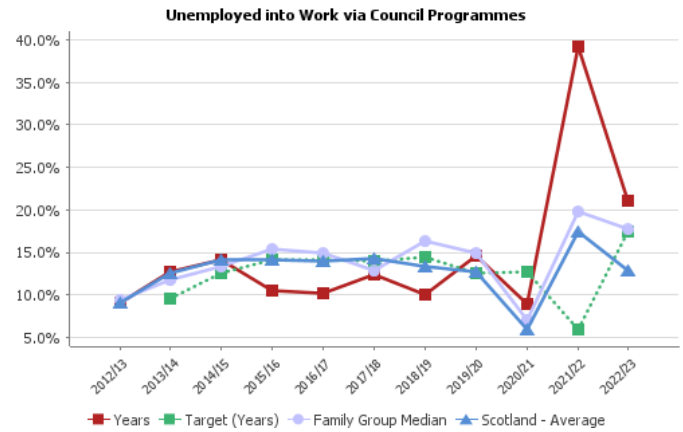
Continued improvement is evident in both the proportion of school leavers entering positive destinations (employment, training, further education, etc.) and the overall participation rate for 16-19 year-olds, though all authorities perform within tight margins in these indicators (less than 7% between best and worst performers). In leaver destinations, this represents a local improvement from the lowest result in Scotland in 16/17 to 10th place in 22/23. This has now been above the national average and our family group (authorities with similar deprivation levels), for 3 consecutive years. This has, however, not yet translated into the same ranking improvement in participation, where we remain in the bottom quartile.



Charts show Clackmannanshire's value in red

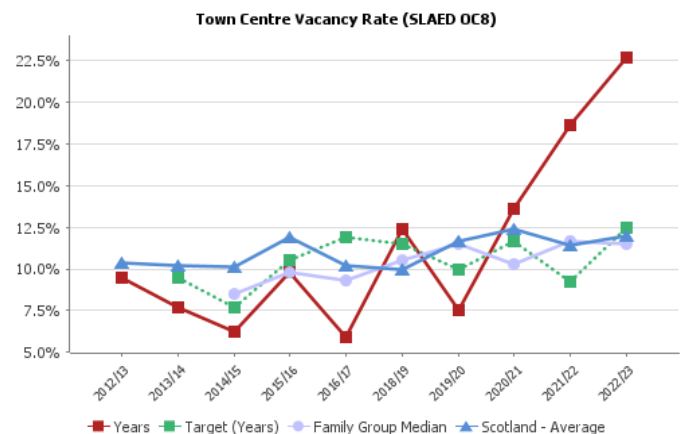
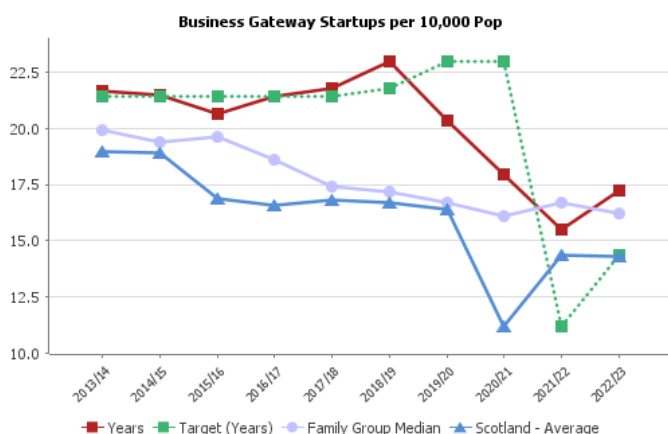
Charts are magnified to make results clearer but this exaggerates trends and variance

Again, the same scale is used in the charts below to illustrate the higher unemployment rates amongst young people (aged 16-24) in comparison to the overall working age population (aged 16-64). Every authority saw a sharp increase in claimants during 20/21 then 2 subsequent years of reductions. Though it is not the case in all areas, the national result for both indicators has now recovered and, while rates remain in the bottom quartile locally, both are now below pre-pandemic levels (significantly so in the case of young people). Much of this was due to the ClacksWorks employability service supporting over 500 people into employment over 2 years, representing 39% of unemployed people in 21/22 and 21% in 22/23, substantially above the Scottish rates of 17% and 13%, respectively.



3.3 Business & Economy

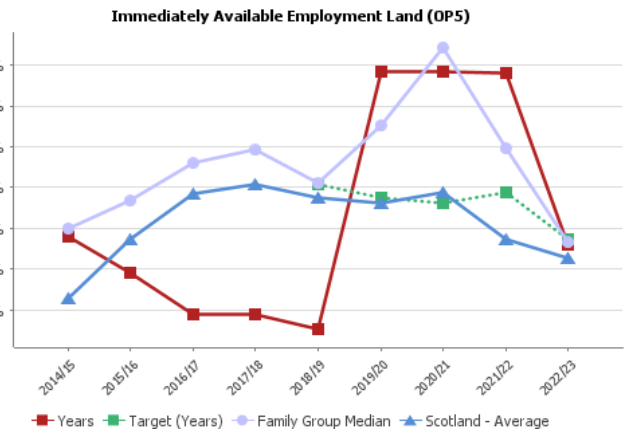
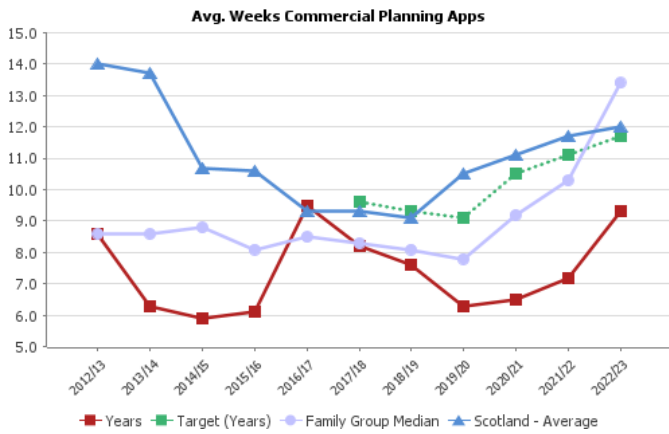
Clackmannanshire's rate of business startups is consistently higher than the Scottish average, with a peak of 6th place in 18/19 and now 14th. For these indicators, our family group is based on population density/rurality, and we have also surpassed the above average levels seen in this group in all years but 21/22. With reducing rates, it was felt that targets should be reset with the more realistic aim of remaining above the Scottish average. These reductions, and significant pandemic impacts on businesses, have seen the proportion of vacant town centre retail units increase, without the recovery seen nationally in 21/22, and now the highest rate in the country.



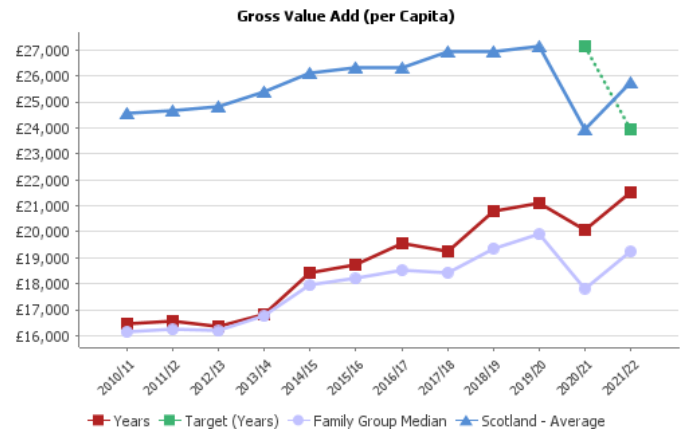
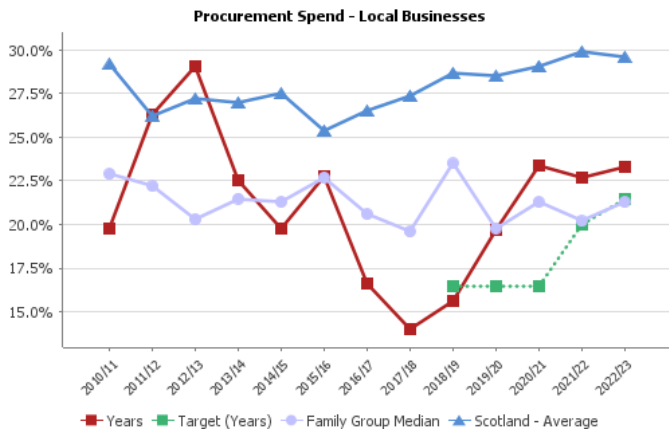
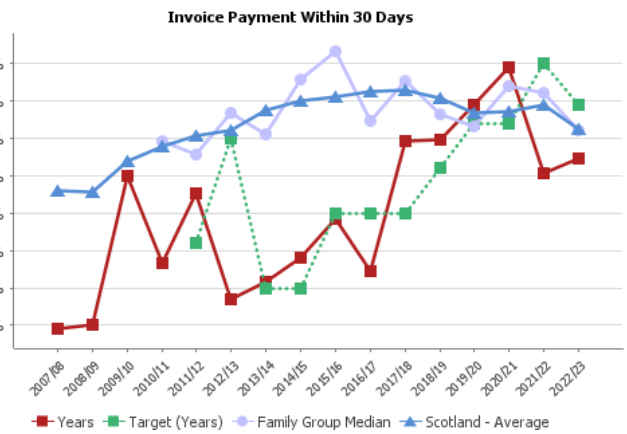
The average time taken for the Council to process commercial planning applications has increased, though not to the same extent as our family group, broadly following the national trend and continuing top quartile rankings for the 5th consecutive year. This is associated with an annual increase in the number of applications received over the last 5 years (with the exception of a slight reduction in 20/21) as well as increasing complexity and more time spent by officers on non-planning application activity. While the Local Development Plan identifies sufficient land for employment purposes, it becoming immediately available is dependent on market conditions, whether applications are received, and whether planning permission can be granted. We remain slightly above average, despite the recent reduction also seen elsewhere (with only 3 authorities improving in 22/23).

Charts show Clackmannanshire's value in red

Charts are magnified to make results clearer but this exaggerates trends and variance



Councils themselves can influence local economies and, despite a prior decline, a slightly greater proportion of invoices were paid within 30 days in 22/23. Though in the bottom quartile, this improvement was contrary to national and family group trends, as a result of returning to a full complement of staff in key areas towards the end of the year. The Council always seeks to procure goods and services locally, however, there are some technicalities regarding the location of head offices, and a high proportion of spend is invested in Forth Valley as the next priority. Gross Value Add represents the overall productivity of the area, where we have seen the 3rd highest levels of improvement of any authority over 12 years (from 24th to 18th while others' rankings remain virtually static). We are joined by only 2 other authorities in improving to above pre-pandemic levels in 21/22.



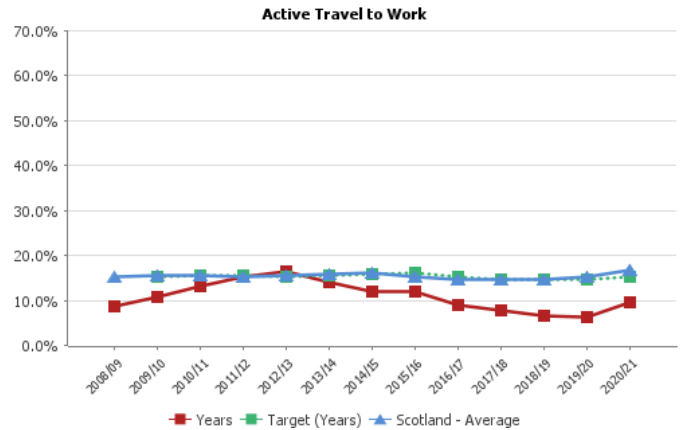
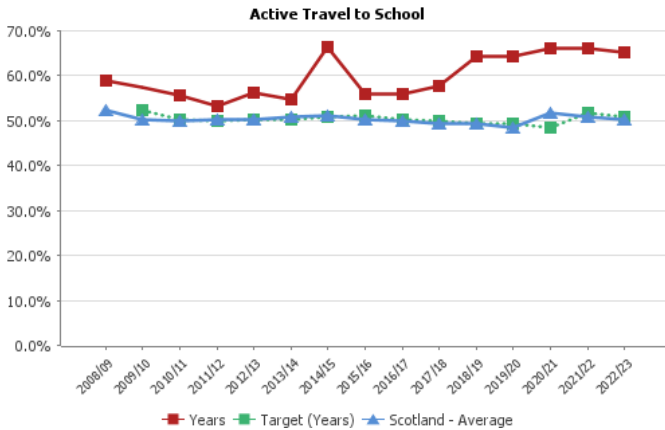
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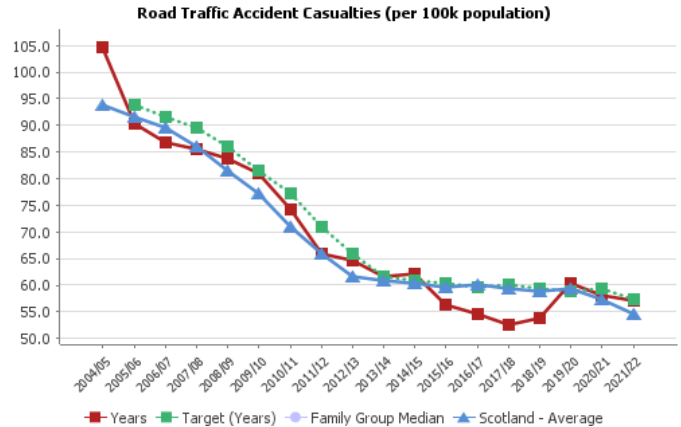
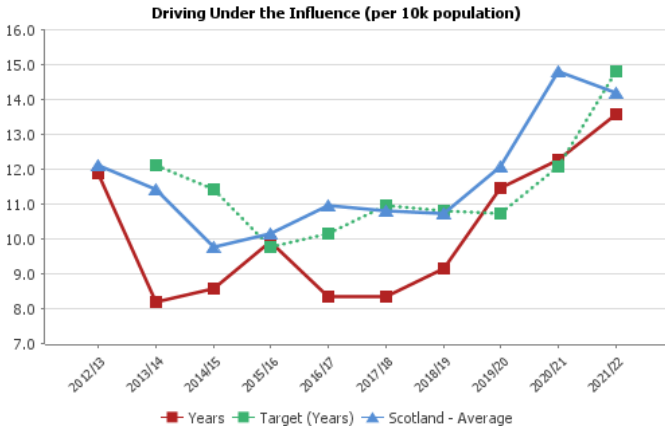
4. Climate & Environment

4.1 Active Travel & Road Safety

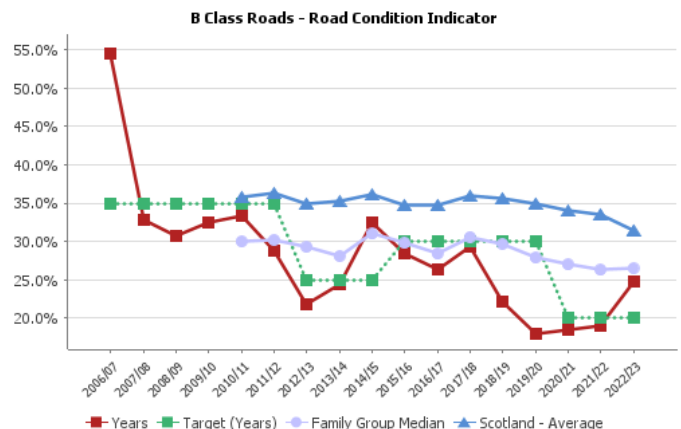
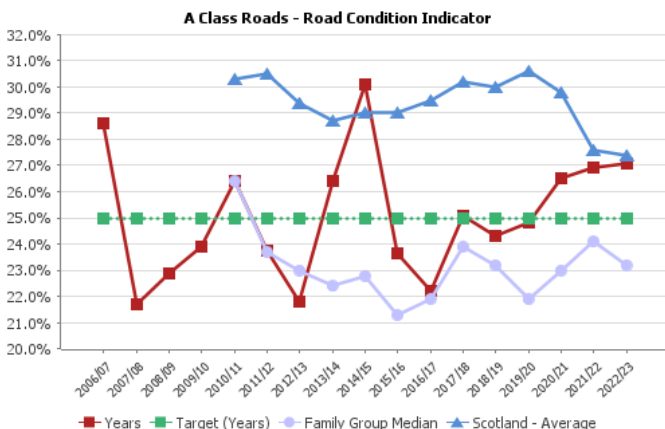
Exemplary levels of active travel to school can be seen, with nearly two thirds (65.3%) of primary and secondary school children normally travelling in an active way (with a Scottish rate of 50.2%). We have achieved top quartile rankings in all years but one, with the 2nd highest levels of any authority for the last 2 years. As shown, however, these excellent rates among our young people are not reflected in adults, where we have been in or near the bottom quartile for the last 5 years reported (though data is only available to 20/21). Work is ongoing as part of our Net Zero ambitions to improve these results, where the current local rate is 9.5%, with a Scottish average of 16.9%.



Significant investment has been made in our core paths network, and the safer routes to school initiative, to promote accessible and sustainable active travel routes, often separate from the main road network, alongside work to make our roads more walking- and cycling-friendly. We are also focussed on ensuring the area has suitable public transport provision, and road safety is a key priority in schools. While there has been a local and national increase, the local rate of 'driving under the influence' offences remains below average and, though we are now slightly above average for road traffic accident casualties, this has seen a substantial reduction.



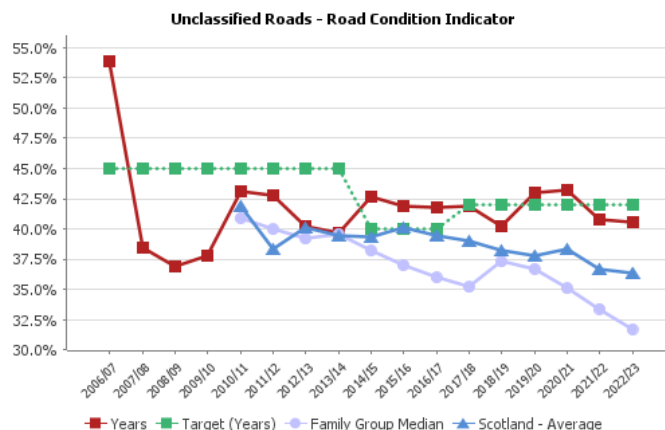
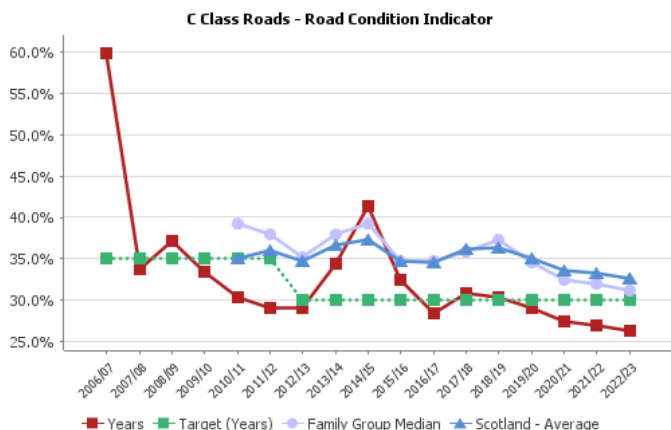
The quality of our road network is also an important factor for road safety, vitally in relation to the possible impact of incidents on families and communities, but also the potential financial implications of insurance claims against the Council, as well as ensuring we exploit our key central location to attract people and trade to and through the area.



Charts show Clackmannanshire's value in red

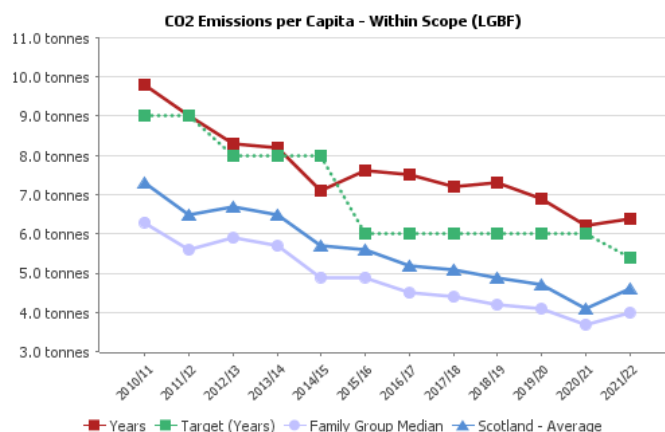
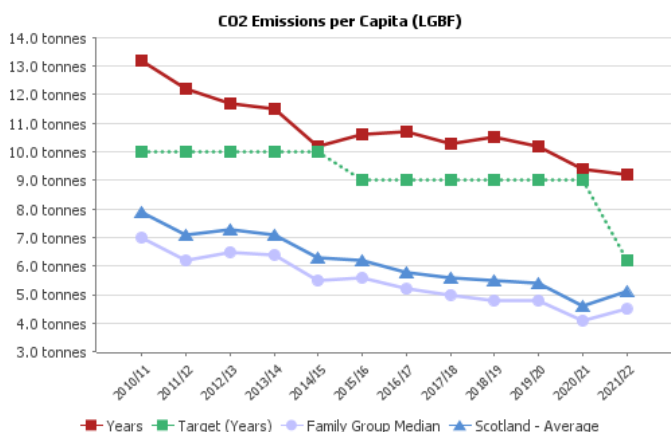
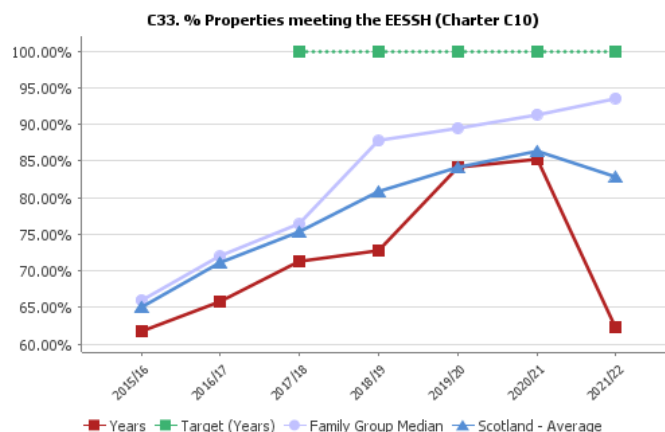
Charts are magnified to make results clearer but this exaggerates trends and variance

These charts show the proportion of the road network that 'should be considered for maintenance treatment', where we would aim to be below the Scottish average. Though we remain above average for unclassified roads and there have been increases in A and B class roads (very slight in the case of A class), these remain better than average and our ranking for C class roads is in the top quartile. Roads and winter maintenance continues to be a high priority and must be managed within the context of reducing budgets across many environmental services.

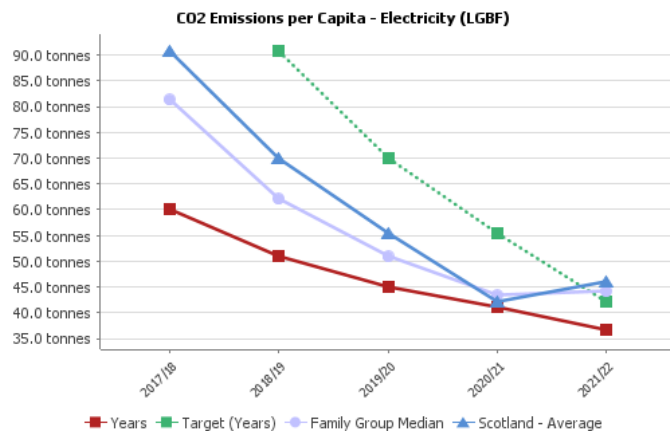
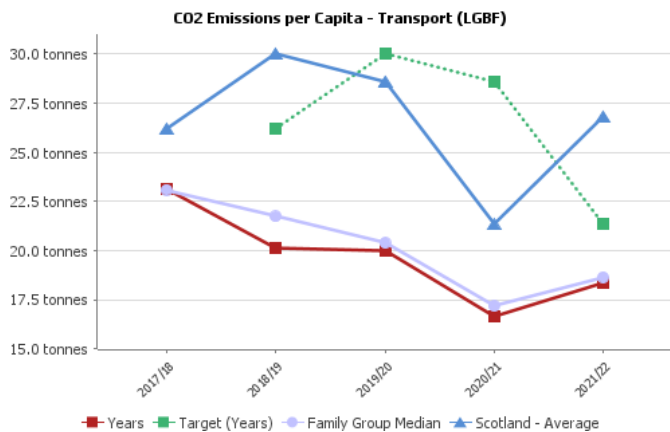


4.2 Energy Efficiency & Emissions

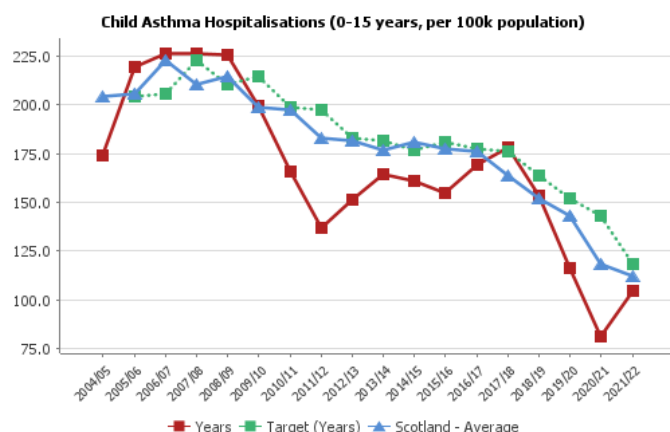
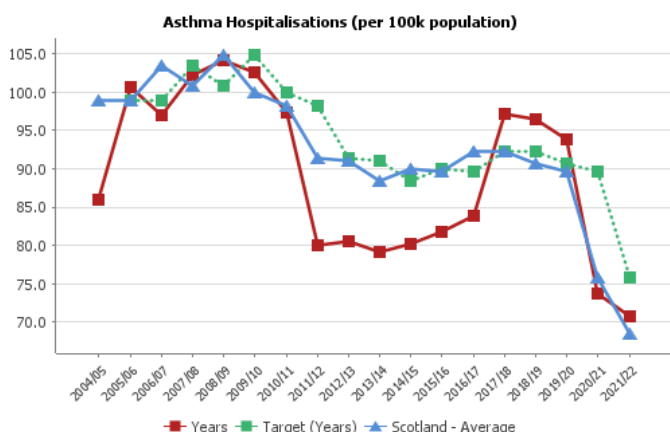
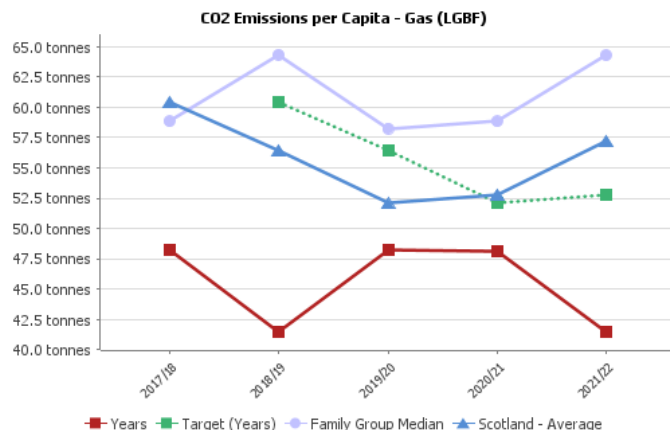
The reduction shown in Council performance against the Energy Efficiency Standard for Social Housing (EESH) does not reflect a material degradation in the standard of properties but relates to reporting changes and Energy Performance Certificates expiring during lockdowns when we were unable to access properties for re-assessment. A programme to address this is well underway, coupled with improvement works in 'hard to treat' homes that will see results improve. The area's industrial heritage means we have some of the highest levels of carbon dioxide emissions in the country (in contrast to our family group's better than average results), both across all emissions and those 'within local authority scope'. Reductions have, however, been made at a slightly faster rate than nationally and, for all emissions, we were among only 3 authorities whose results continued improving in 21/22.



The Council welcomes the addition of new emissions indicators to the local government benchmarking framework, as shown on the following page, though there may be issues with this newly-released data. We are attempting to clarify the exact formula in use by the national reporting body, but this relates only to whether results are 'per capita' as stated, or whether they have been calculated 'per 1,000 population', which would affect all authorities' results equally. The data does still appear to confirm the breakdown already known locally, with significant emissions from industry and waste, but lower proportions from transport, electricity and natural gas, resulting in top quartile rankings for all 3 sources.

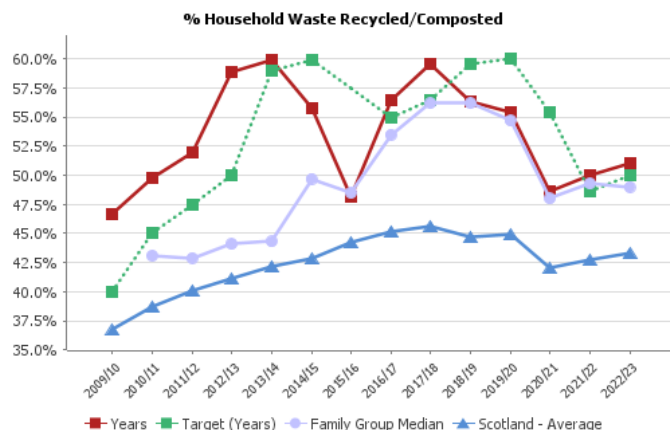


Again, the indicators below could clearly have been aligned to the health section of this report, however evidence linking asthma with local air quality as well as, more recently, to housing quality meant they were felt appropriate for discussion alongside these areas. There may be a correlation between reducing emissions levels and the reducing rate of asthma hospitalisations, across all age groups and particularly in young people (0-15 years), whose greater vulnerability is reflected in higher rates, though a greater reduction has also been seen. With periods of both above and below average performance in the past, Clackmannanshire rates are now close to average in both groupings.



4.3 Recycling & Outdoor Spaces

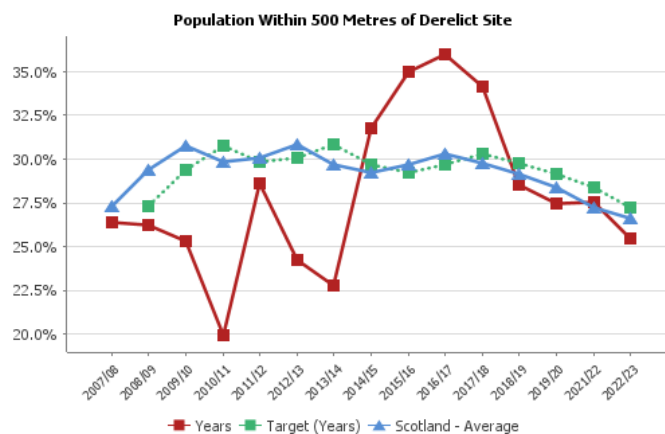
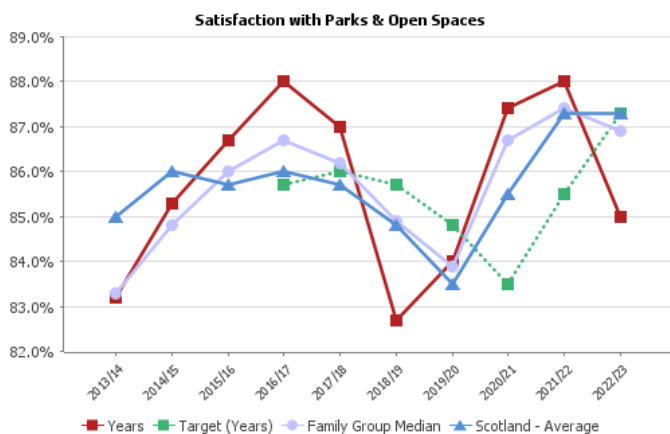
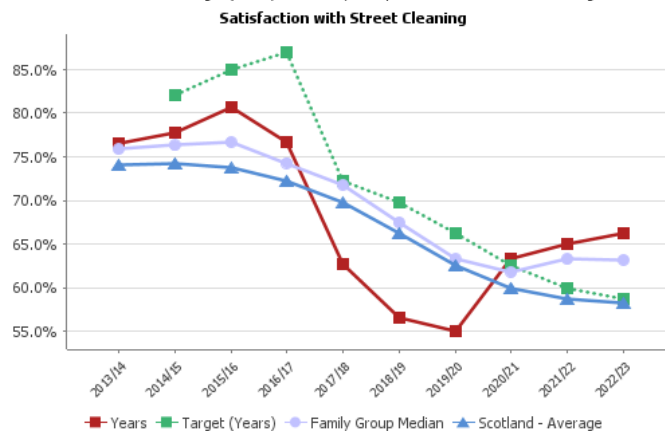
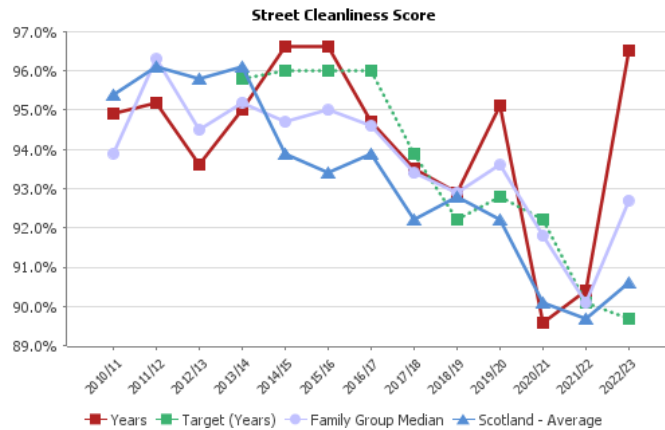
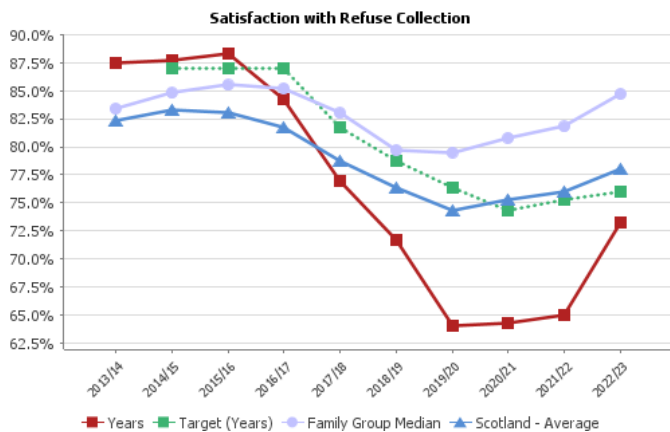
Having historically been an extremely strong performer in household waste recycling, rates did suffer (as they did nationally) as a result of service disruption during the pandemic. As well as temporary closure of the recycling centre, there was an increase in non-recyclable clinical waste and the Council was, at times, required to redeploy staff into vital roles to protect the most vulnerable in our communities. While we have moved out of the top quartile, rates remain well above average (51.0% versus 43.3% nationally). This is also the case in street cleanliness, assessed independently by Keep Scotland Beautiful, where we improved substantially to 96.5% of streets graded 'acceptable' (Scotland = 90.6%) with an associated ranking improvement from 14th place to the 3rd best in the country.



Charts show Clackmannanshire's value in red

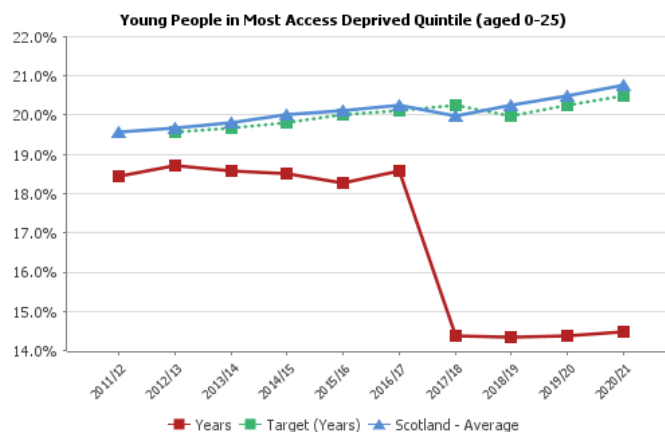
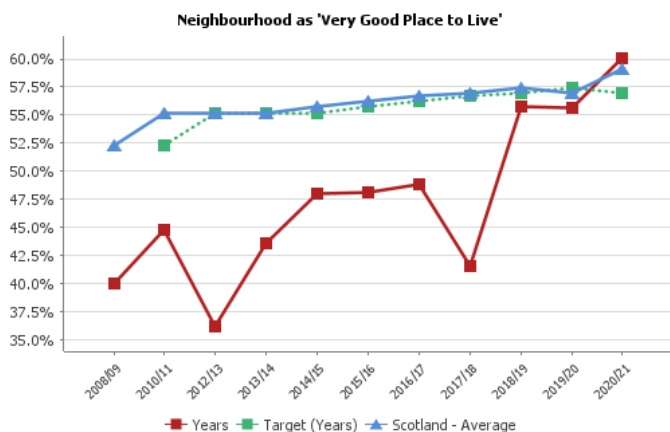
Charts are magnified to make results clearer but this exaggerates trends and variance

Though there are still data integrity concerns around the Scottish Household Survey, Clackmannanshire's results show variable levels of satisfaction with environmental services. For refuse collection, we remain in the bottom quartile, despite seeing the greatest improvement of any authority in 22/23. Perceptions around street cleaning continue to improve, now in 9th place, though we have moved to below average for satisfaction with parks and open spaces. Similar variance is seen in the proportion of the local population who live within 500 metres of a derelict site, though this has also now moved to below average (which, in this instance, is a positive) to 25.5% against a Scottish average of 26.6%.



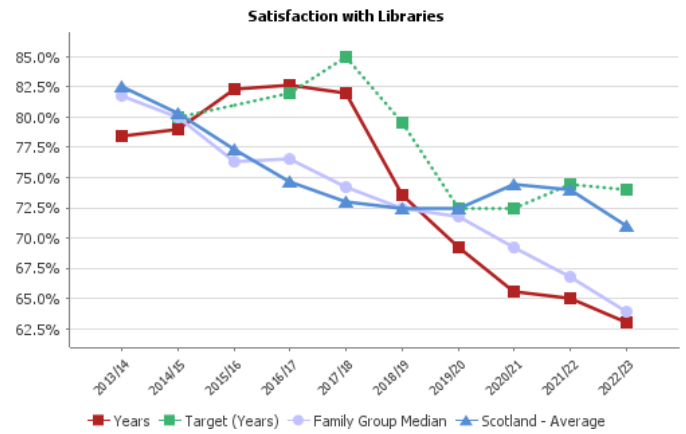
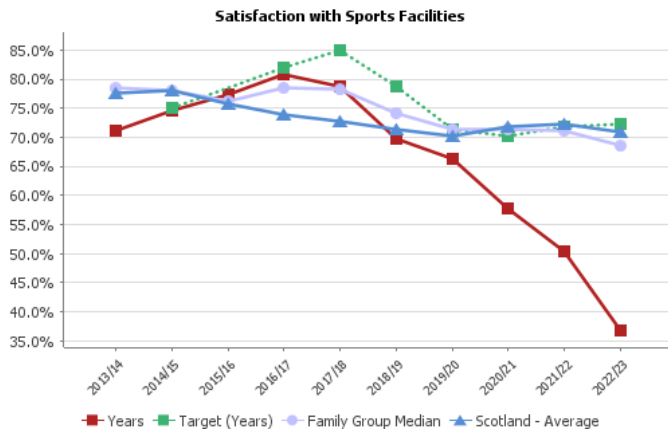
4.4 Neighbourhoods & Amenities

Increasing pride in the local area is evidenced in the proportion of people rating their neighbourhood as a 'very good place to live', having improved in all but 2 years since 08/09, and crossing to above the Scottish average with the latest result. We also have a substantially lower proportion of young people (aged 0-25) living in the 20% most access deprived areas in Scotland. Clackmannanshire's central location and compact nature (covering the 2nd smallest area of any Scottish authority) as well as the facilities and services available within local communities means this result has been the 6th best in the country for 4 consecutive years.

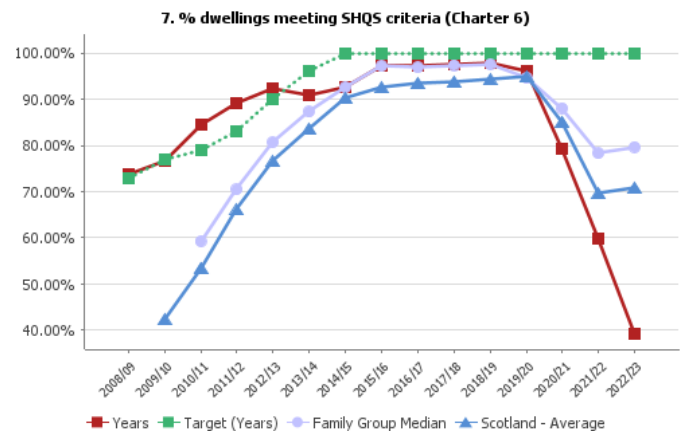
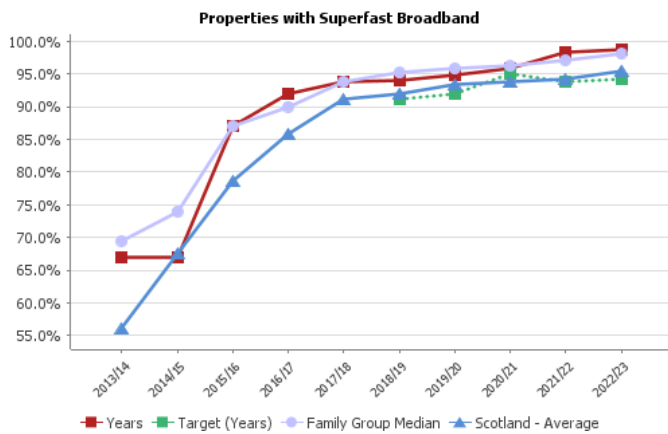


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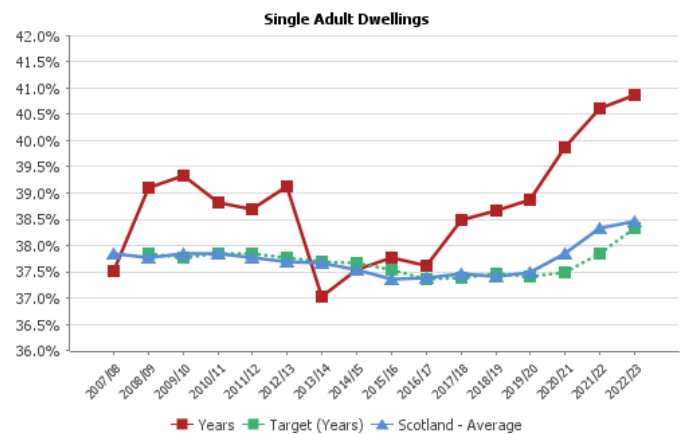
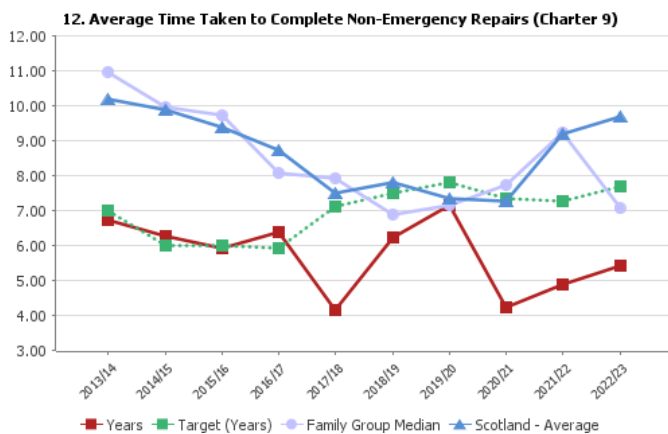
Charts are magnified to make results clearer but this exaggerates trends and variance



We have, however, seen declining rates of satisfaction with local sports facilities and libraries, now both in the bottom quartile, associated with the closure of some facilities and financial sustainability concerns around the Council's ability to retain all community access points within reducing budgets. The Council aims to address this with ambitious plans for a state of the art Wellbeing Hub, including co-location with Lochies School for children with complex additional support needs. The project has seen key recent progress and milestones, with construction expected for delivery in 2026.



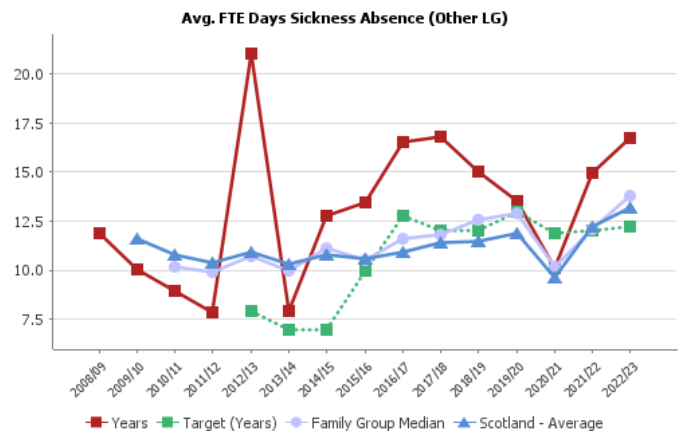
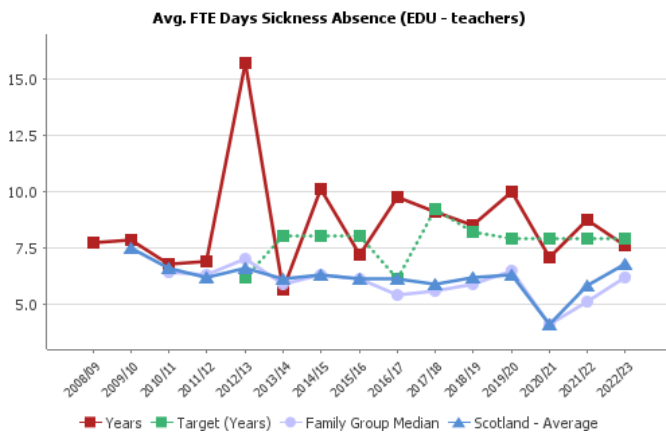
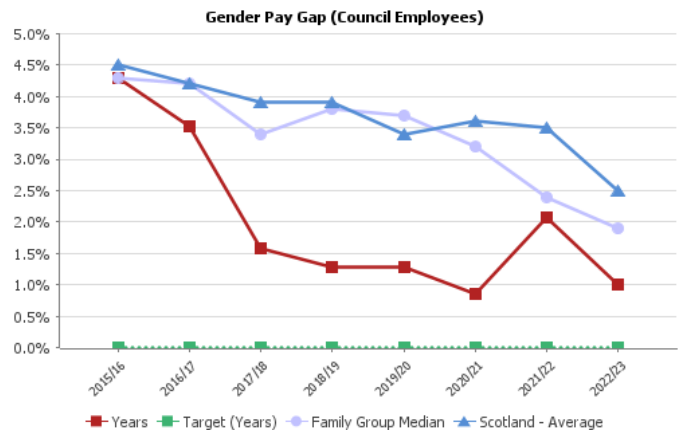
Our central location is also relevant to the area having the 5th highest proportion of properties with superfast broadband in the country, supporting us to address inequalities around digital connectivity and ensuring availability is not a barrier to hybrid learning and working opportunities. We have, however, seen a marked reduction in properties meeting the Scottish Housing Quality Standard, again associated with a change in guidance and reporting. Despite slight increases, our responsiveness to non-emergency housing repairs has been the fastest in the country for 2 years running, with average completion time of 5.4 working days (9.7 nationally). One possible concern for community resilience could, however, lie in high proportions of single adult dwellings (4th highest in Scotland), particularly with recent publicity of the impact of loneliness on mental health, and services must take this into account to ensure communities are fully inclusive to potentially vulnerable groups, such as older people.



5. Resources & Assets

5.1 Workforce

While the preceding sections have focussed on the effectiveness of services, responsiveness to needs and expectations, and outcomes we want to see improve, there are clearly also issues around how resources are deployed internally to deliver this. As with other employers, the Council has recently been impacted by a number of workforce issues, including an overall reduction in the labour market leading to recruitment difficulties, the threat of strike action linked to pay negotiations and increased absence rates due to Covid. Work continues on our interim workforce strategy, and we have implemented the real living wage, with a gender pay gap of 1.0%, below the Scottish rate of 2.5%. Sickness absence amongst teachers improved last year while the rate for other local government employees increased, though both remain in the bottom quartile, and the exclusion of Covid from these measures is likely to be masking the business impact on workforce availability.



This chart presents the breakdown of the Council workforce (based on full time equivalent posts) to outline how services are resourced to deliver on core strategic priorities. Though alignment is not direct, and not all services are included in cost indicators within the local government benchmarking framework, this chart is grouped and shaded similarly to those in the Service Costs and Efficiency section to enable a very rough comparison of financial and workforce investment in each area. (In this instance, white text is purely so that numbers can be read and has no link to benchmarks).

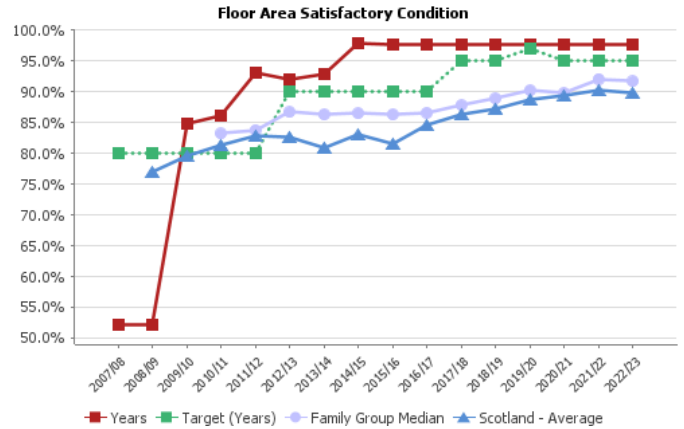
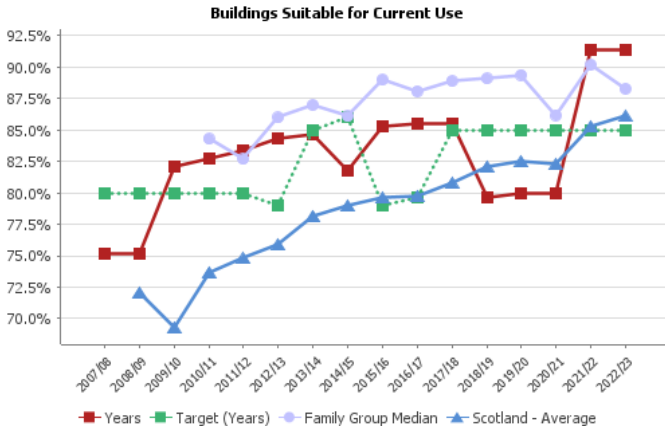


Charts show Clackmannanshire's value in red

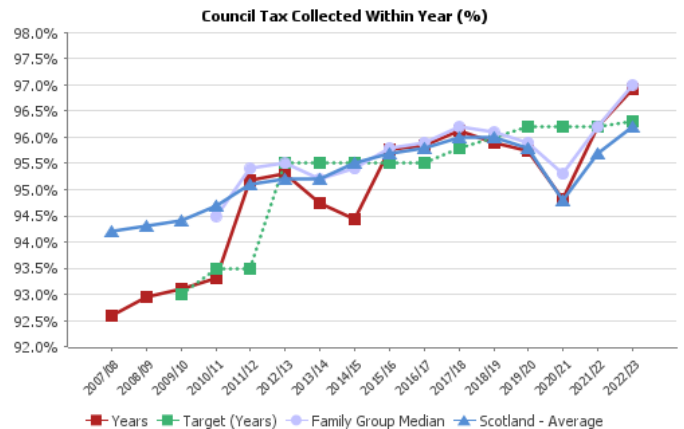
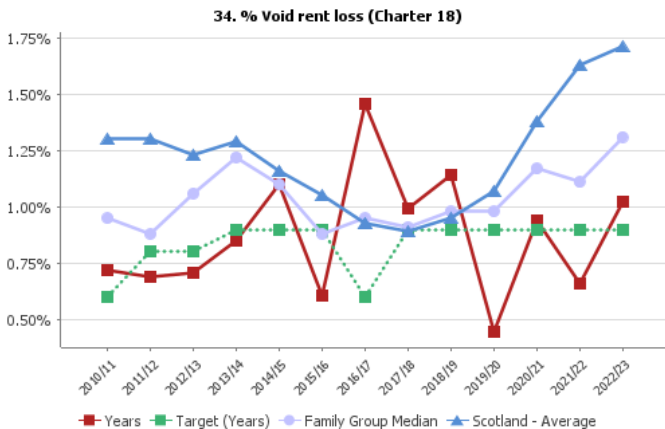
Charts are magnified to make results clearer but this exaggerates trends and variance

5.2 Physical Assets & Revenues

As well as the physical assets already mentioned, such as the road network and housing stock, the Council also manages a property portfolio of 81 public buildings, including the school estate. The suitability of each for its current use is assessed annually against the 'core facts criteria', with 91.4% of operational buildings graded good or satisfactory in 22/23 (86.1% across Scotland) where our rank improved from 23rd to 9th over 2 years. Condition is also assessed, with 97.5% judged to be satisfactory (as a proportion of total floor area), where the Scottish result was 89.7%, and our 3rd place ranking continues top quartile performance for the 9th consecutive year.

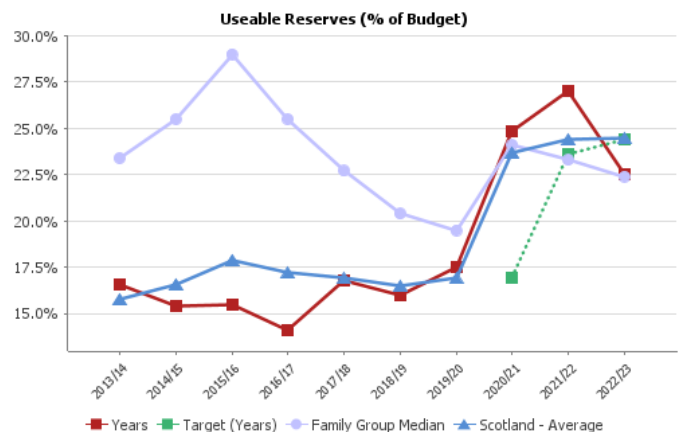


While the challenges of rent arrears in an area of high deprivation are a key concern for the Council in terms of how we can support people to sustain tenancies and prevent homelessness, rent loss due to properties being empty (void) is an issue of internal efficiency. Though local rates were above average between 16/17 and 18/19, there has been a substantial national increase since then, and the proportion of rent lost in Clackmannanshire was the 9th lowest in Scotland in 22/23. All authorities perform within very tight thresholds in Council tax collection, where we received 96.9% within year in 22/23, and results have been slightly above average for 3 years.



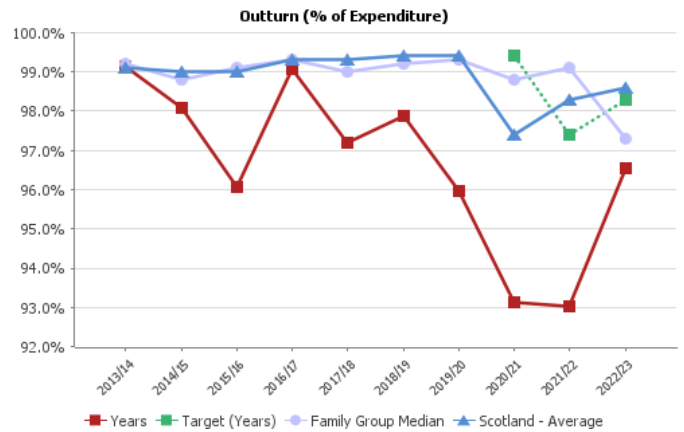
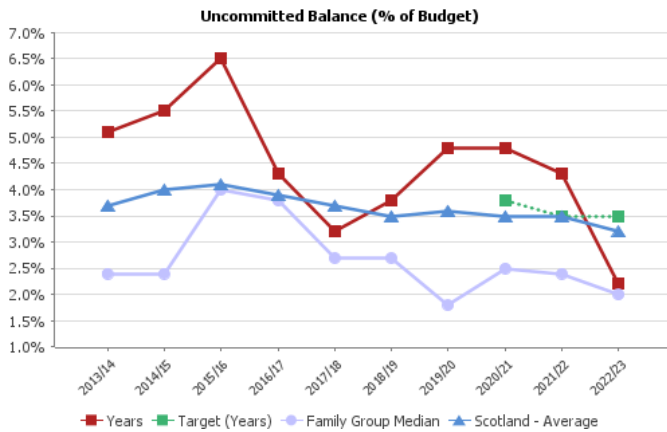
5.3 Financial Sustainability

Until the recent reduction, useable reserves (as a percentage of budgeted net revenue) has seen an improving trend for several years and we are now more closely aligned to our family group. As shown on the following page, last year also saw a reduction in the Council's uncommitted general fund balance (as a percentage of budgeted net revenue), where we were in the top quartile for the last 4 years but have now moved to 20th place. In contrast, the aim is to increase net outturn (as a percentage of net budgeted expenditure), where a substantial improvement has seen our ranking improve from 30th to 22nd. In light of increasing financial pressures, the Council's budget process now runs throughout the year, with significant emphasis on consultation and engagement with our communities.

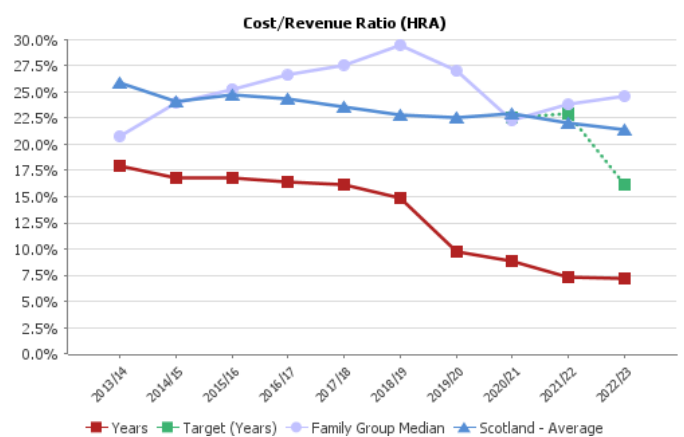
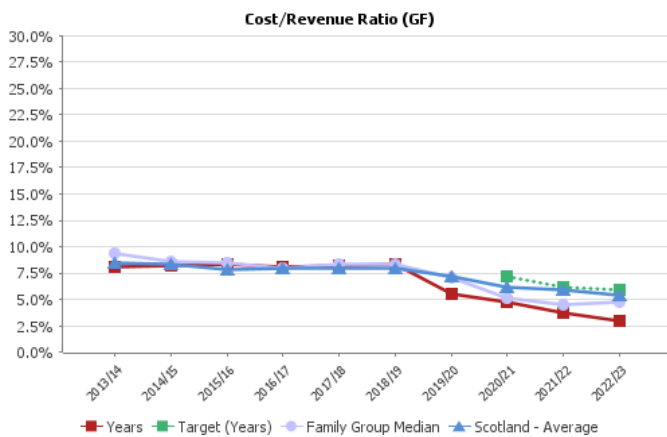


Charts show Clackmannanshire's value in red

Charts are magnified to make results clearer but this exaggerates trends and variance



Again, the charts below use the same scale to outline the differing challenges associated with the ratio of financing costs to net revenue stream, between the general fund budget and housing revenue account. Here, the aim is to minimise the ratio, and we have performed within the top quartile in both for over 4 years. For general fund, our ratio is 3.0% with a Scottish average of 5.4%, and it is notable that our housing revenue account ratio is far closer to this, at 7.2%, than it is to the HRA Scottish average of 21.4%, resulting in another 1st place ranking.



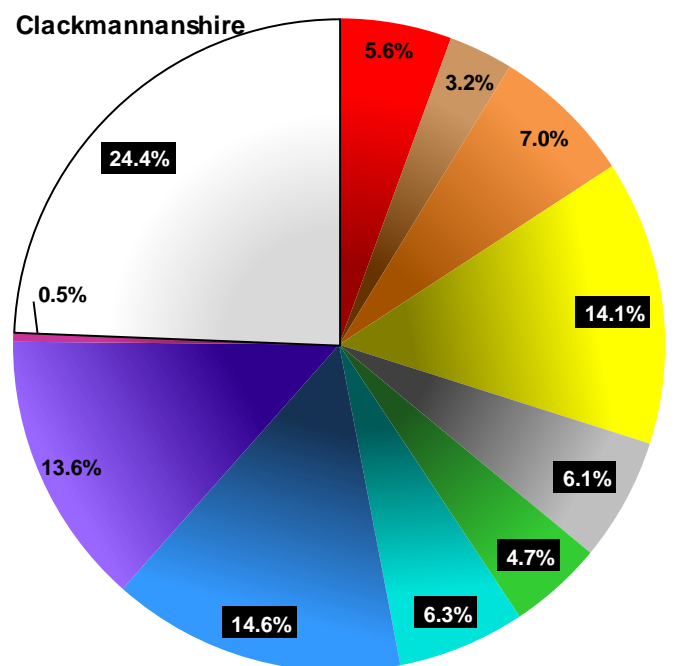
5.4 Service Costs & Efficiency

The final table in Annex A provides detail on a range of benchmarked cost indicators across the areas noted below. While the Council always seeks to improve process efficiency and the aim of minimising cost remains a requirement, it must be acknowledged that some areas are now close to a minimum viable threshold for service continuation. When viewed across the range of LGBF measures (focussing on performance and excluding the demographic factors in this report), Clackmannanshire's levels of cost- and time-efficiency are consistently around the best of any authority (3rd in 22/23). For effectiveness, average rankings usually in the 3rd quartile have now moved into the bottom quartile (26th). For satisfaction, average rankings have been in the bottom quartile for a sustained period (currently 27th).

- Place - Environment (Parks & Open Spaces, Street Cleaning, Waste & Roads)
- Place - Development (Ec. Dev., Planning, Trading Stds & Env. Health)
- HSC - Older People's Care (Residential & Community)
- HSC - Other Adult Care (excluding Older People's Care)
- P&P - Central Support (including Council Tax Collection & Grant Funding)
- People - Looked After Children's Care (Residential & Community)
- People - Early Learning & Childcare Establishments
- People - Primary Schools
- People - Secondary Schools
- People - Leisure (Sports Facilities & Libraries)
- Other - Non-LGBF Services

Charts show Clackmannanshire's value in red

Spend Profile



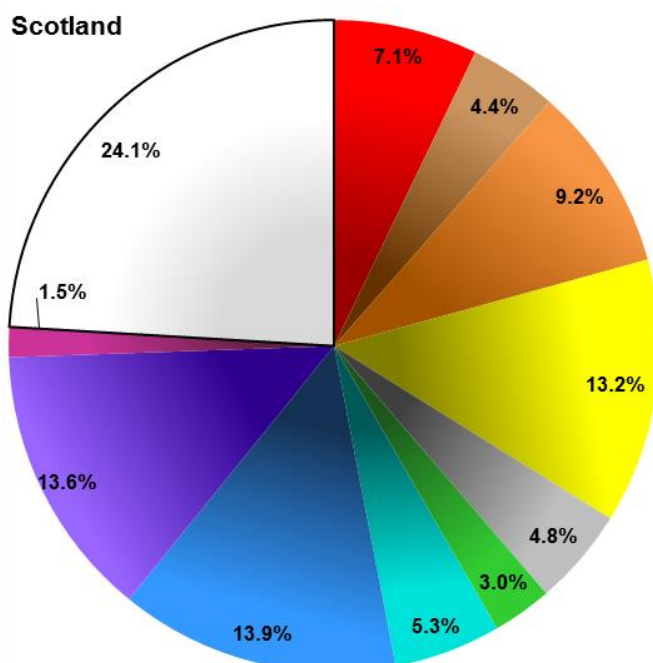
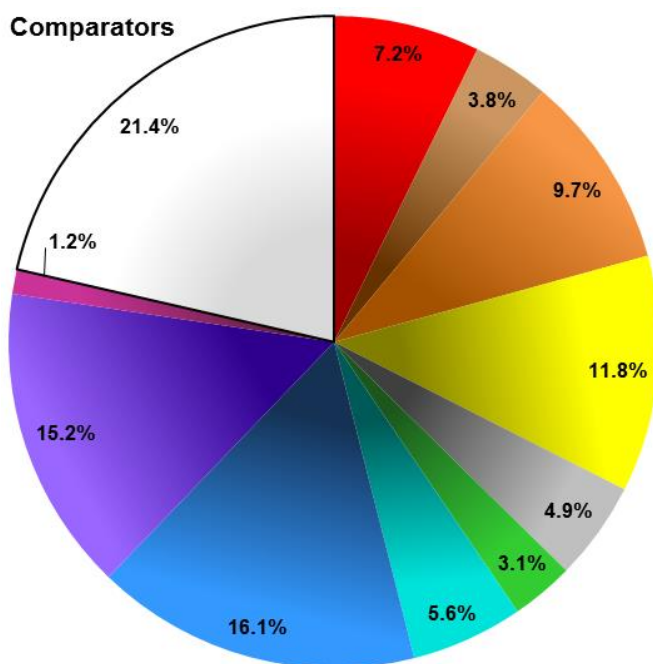
Charts are magnified to make results clearer but this exaggerates trends and variance

Rather than seeing costs as negatives to be reduced, this analysis considers the positives of where money and time are invested by summarising overall spend and staffing profiles. This aims to support assessment of whether the breakdown is a proportionate reflection of the Council's core ambitions, as set out in the Statement of Corporate Priorities. Just like Scotland's people, each local authority is fantastically unique and diverse in many ways, all with differing natures, challenges and aspirations. While Councils must manage or adhere to various common priorities, duties and standards, they must also manage discretionary areas and choose the emphasis placed on each.

In this analysis, raw benchmark cost data has been repurposed into a calculation of 'costs as a % of total general fund budget'. This is a relatively crude method but aims to prompt consideration of the functions where spend is higher or lower than average, and whether this aligns to the areas of greatest risk and priority to local people and communities. Spend profiles are presented for Clackmannanshire, for Scotland as a whole and for 3 comparator authorities (Renfrewshire, South Lanarkshire and West Lothian Councils). As noted elsewhere, benchmarking family groups are based on deprivation (for Social Work, Education & Housing) and population density/rurality (for all other services). Cost indicators cover both groupings and these 3 authorities are in Clackmannanshire's family group for both, so are the most demographically similar overall.

On the previous page, the black boxes with white text highlight where Clackmannanshire's proportion of spend is greater than that across Scotland as a whole. It should be noted that nearly a quarter of spend is not accounted for in benchmarked cost measures, and that only specific areas of provision are included so, while shading is similar across related areas, the spend and staffing profiles are not directly comparable. Also, higher central support costs are unavoidable for small authorities as policy, support and regulatory duties are not proportionate to budget or population, nor are the IT systems required for managing services. As stated, we continue to seek internal efficiencies but these 2 areas are of lesser significance in terms of this comparison.

More relevant is the fact that we spend a greater proportion of budget on adult care (excluding older people's care), services for care experienced children, early learning & childcare and primary education. We spend a similar or smaller proportion on environment and development services, older people's care, secondary education and sport & leisure services. The staffing profile in section 5.1 should also be taken into account and highlights some areas of divergence between the allocation of financial and workforce resource (though benchmark data is not available for the latter). The main assessment of overall performance, therefore, will be in the extent to which these profiles align with stated priorities and commitments.



- Place - Environment (Parks & Open Spaces, Street Cleaning, Waste & Roads)
- Place - Development (Ec. Dev., Planning, Trading Stds & Env. Health)
- HSC - Older People's Care (Residential & Community)
- HSC - Other Adult Care (excluding Older People's Care)
- P&P - Central Support (including Council Tax Collection & Grant Funding)
- People - Looked After Children's Care (Residential & Community)
- People - Early Learning & Childcare Establishments
- People - Primary Schools
- People - Secondary Schools
- People - Leisure (Sports Facilities & Libraries)
- Other - Non-LGBF Services





















Annex A – Detailed Performance Data Tables

































As well as internal Council systems, data is sourced primarily from the [Local Government Benchmarking Framework \(LGBF\)](#) & [Scottish Public Health Observatory \(ScotPHO\)](#), both of which collate and publish datasets from a wide range of public/national bodies (sources for individual indicators can be provided on request).

Guidance & Summary

Overall Summary of Performance	Green	Amber	Red	Total	The overall summary for each indicator shows an 'average' of the trend, status & benchmark results (equally weighted, though in certain processes one of these factors may be more important). This highlights whether performance levels are broadly positive (green), where attention or action may be required (amber) and areas of underperformance (red).			
1. Population & Physical Health	6	16	8	30				
2. Community Resilience & Care Experience	14	19	13	46				
3. Attainment, Jobs & Economy	6	11	4	21				
4. Climate & Environment	14	11	5	20				
5. Resources & Assets	11	16	5	32				
Total	51 (32%)	73 (46%)	35 (22%)	159				
5-year Trend	Improving	Static	Static	Declining	Static	Declining	Total	Whether values improved, remained static or declined over 5 years. This aims to support assessment of post-pandemic recovery and energy/cost of living impacts. See charts above as not all comparison values are shown in data tables if recent values are not available. Where static (within 5%) other factors are taken into account to differentiate between consistently strong/acceptable and potential area of concern. Significant decline (more than 10%) is red.
1. Population & Physical Health	5	2	10	4	2	7	30	
2. Community Resilience & Care Experience	22	3	2	3	3	13	46	
3. Attainment, Jobs & Economy	7	2	3	1	4	4	21	
4. Climate & Environment	15	2	2	3	1	7	20	
5. Resources & Assets	14	1	4	1	0	12	32	
Sub-total	63 (40%)	10 (6%)	21 (13%)	12 (8%)	10 (6%)	43 (27%)	159	
Total	Green: 73 (46%)	Amber: 33 (21%)	Red: 53 (33%)					
Target Achievement (Status)	Green	Amber	Red	Total	Whether we met or performed within 5% of the target (green), missed it by 5-15% (amber) or by more than 15% (red). May reflect national targets, Scottish or Family Group results, incremental improvement or quartile thresholds (remain in top quartile or move out of bottom). Targets should be realistic and cost reductions must take into account minimum viable levels.			
1. Population & Physical Health	16	7	7	30				
2. Community Resilience & Care Experience	22	7	17	46				
3. Attainment, Jobs & Economy	15	3	3	21				
4. Climate & Environment	20	3	7	20				
5. Resources & Assets	20	5	41	32				
Total	93 (58%)	25 (16%)	41 (26%)	159				
Comparison to Benchmarks (Rank Quartile)	Top	Second	Third	Bottom	Total	Results are ranked best (1 st) to worst (32 nd) and grouped into quartiles (top 8 authorities, etc.) to support learning from strong performers and assess local, national & Family Group trends. FG available for LGBF – 8 similar authorities in terms of deprivation (Social Work, Education & Housing) or population density/rurality.		
1. Population & Physical Health	3	4	14	9	30			
2. Community Resilience & Care Experience	9	6	11	20	46			
3. Attainment, Jobs & Economy	4	5	3	9	21			
4. Climate & Environment	9	3	10	8	20			
5. Resources & Assets	10	9	9	4	32			
Total	35 (22%)	27 (17%)	47 (30%)	50 (31%)	159			

1. Population & Physical Health

1.1 Population Age Groupings		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Birth Rate (per 1,000 population)	9.1	8.0	8.7	9.7			8.6			8.7	2	
	Children as % of Total Population (aged under 16)	17.5%	17.4%	17.3%	17.2%			16.8%			16.6%	22	
	Young People as % of Total Population (16-24)	10.1%	9.9%	9.7%	9.6%			10.5%			10.2%	13	
	All Working Age as % of Total Population (16-64)	62.6%	62.3%	62.0%	62.0%			63.9%			63.8%	14	
	Older People as % of Total Population (65+)	19.9%	20.3%	20.6%	20.8%			19.3%			19.6%	15	

1.2 Pre-birth & Early Years		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Teenage Pregnancies - Under 20 Years (per 1,000 females aged 15-19)	38.6	39.1	38.1	36.7			27.1			24.9	31	
	Maternal Obesity	25.3%	25.3%	27.7%	30.0%			25.3%			26.1%	26	
	Premature Births	10.9%	11.1%	9.9%	9.4%			8.4%			8.2%	28	
	Healthy Birth Weight	84.0%	86.3%	87.0%	85.3%			84.2%			84.1%	5	
	Babies Exclusively Breastfed at 6-8 Weeks	21.3%	21.6%	21.0%				31.2%			31.8%	27	
	Immunisation Uptake at 24 Months - 6 in 1	98.2%	97.6%	97.3%	96.9%	96.7%		97.1%			97.0%	22	
	Immunisation Uptake at 24 Months - MMR	95.1%	94.9%	95.2%	94.8%	94.5%		94.4%			94.4%	20	
	Children with 'No Developmental Concerns' (at 27-30 month health review)	84.8%	86.2%	78.6%	79.9%			85.1%		80.9%	82.1%	24	

Yellow shading = multiple year aggregate (average over 2 – 5 years)

MMR = Measles, Mumps & Rubella; COPD = Chronic Obstructive Pulmonary Disease; CHD = Coronary Heart Disease

1.3 Conditions, Admissions & Discharge		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Bowel Screening Uptake	59.6%	62.4%	64.8%	65.9%			64.3%			65.6%	20	
	Cancer Registrations (per 100,000 population)	691	725	691	667			633			630	30	
	COPD Incidence (per 100,000 population aged 16+)	169	161	131	125			139			126	19	
	CHD Hospitalisations (per 100,000 population 16+)	366	364	359	343			355			342	17	
	Emergency Hospitalisations (per 100,000 population)	7,194	7,712	7,808	8,130			7,360			7,236	26	
	Emergency Hospitalisations - Older People (aged 65+, per 100,000 population)	7,188	7,289	7,217	7,176			6,913			6,824	24	
	Multiple Emergency Hospitalisations - Older People (65+, 2 or more within year, per 100,000 population)	4,523	4,927	4,982	4,991			5,209			5,001	18	
	Delayed Discharge - Excess Days Older People Spent in Hospital (aged 75+, per 1,000 population)	654	310	587	718			484		836	748	16	
	Hospital Re-admissions Within 28 Days (per 1,000 discharges)	112	142	164	141	145		107		100	102	32	

1.4 Life Expectancy & Mortality		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Life Expectancy Age - Males (at birth)	76.9	76.6	76.2	75.4	76.0		76.6			76.5	23	
	Life Expectancy Age - Females (at birth)	80.7	80.7	80.6	80.3	80.0		80.8			80.7	23	
	Healthy Life Expectancy - Males (expected years lived in 'good' health)	62.2	62.8	62.5	61.3			60.9			60.4	17	
	Healthy Life Expectancy - Females (expected years lived in 'good' health)	61.6	62.4	62.7	59.6			61.8			61.1	21	
	Deaths in Children - Aged 1-15 Years (per 100,000 population)	7.1	7.1	4.7	4.7			10.7			10.1	3	
	Deaths - Aged 15-44 Years (per 100,000 population)	131	123	133	144			116			117	25	
	Early Deaths (<75 years, per 100,000 population)	424	437	478	510			438			450	25	
	Deaths - All Ages (per 100,000 population)	1,171	1,188	1,201	1,269			1,166			1,181	23	

Yellow shading = multiple year aggregate (average over 2 – 5 years)

MMR = Measles, Mumps & Rubella; COPD = Chronic Obstructive Pulmonary Disease; CHD = Coronary Heart Disease

2. Community Resilience & Care Experience

2.1 Poverty		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Child Poverty Rate (after Housing costs)	26.1%	25.5%	25.4%	28.3%			22.0%		24.9%	23.9%	30	
	Children Registered for Free School Meals (primary 4 & above, as % of all pupils P4 & above)	20.4%	18.1%	21.4%				16.9%			17.5%	28	
	Children & Young People in Most Income Deprived Quintile (aged 0-25)	27.8%	27.6%	27.8%				19.8%			19.7%	26	
	Rent Arrears (as % of rent due in the year)	9.1%	10.1%	9.6%	10.7%	11.5%		10.7%		8.7%	9.6%	20	
	Crisis Grant Decisions Within 1 Day	86.8%	96.3%	97.5%	96.8%			93.8%		92.4%	93.3%	18	
	Community Care Grant Decisions Within 15 Days	98.5%	99.5%	99.8%	96.5%			84.5%		88.5%	85.8%	12	
	Scottish Welfare Fund Budget Spent	79.7%	114.2%	94.8%	108.4%	126.8%		100.0%		149.4%	131.7%	18	
	Discretionary Housing Payments Funding Spent	75.1%	106.5%	80.8%	87.4%	89.4%		96.0%		100.5%	94.4%	16	

2.2 Crime		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Drug Crimes (per 10,000 population)	51.2	62.5	61.4	55.3			64.8			50.6	22	
	Breach of the Peace (per 10,000 population)	102.3	105.5	96.5				92.1			90.9	23	
	Vandalism (per 10,000 population)	91.6	101.1	98.3	82.5			68.2			70.1	28	
	Violent Crimes (per 10,000 population)	20.8	22.7	27.1				17.1			16.4	31	
	Common Assault (per 10,000 population)	118.5	130.0	110.7	115.1			95.2			106.4	24	
	Domestic Abuse Incidents (per 10,000 population)	136.2	151.5	157.5	146.5			119.4			118.3	29	
	Attempted Murder & Serious Assault (per 10,000 population)	9.9	11.1	12.1	8.0			6.4			7.0	27	
	Young People Hospitalised Due to Assault (aged 15-25, per 100,000 population)	117.0	113.0	73.8	42.1			92.0			79.2	6	
	Children & Young People in Most Crime Deprived Quintile (aged 0-25)	25.7%	25.6%	25.5%				20.1%			20.1%	28	

Yellow shading = multiple year aggregate (average over 2 – 5 years)

2.3 Alcohol & Substance Misuse		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Alcohol-related Hospitalisations (per 100,000 population)	592	580	581	640			614			611	19	
	Alcohol-related Hospitalisations - Young People (aged 11-25, per 100,000 population)	193	211	165	147			270			255	2	
	Alcohol-related Deaths (per 100,000 population)	16.1	19.4	18.6	17.7			20.8			21.1	14	
	Drug-related Hospitalisations (per 100,000 population)	206	268	310	338			233			228	29	
	Drug-related Hospitalisations - Young People (aged 11-25, per 100,000 population)	187	198	159	145			174			168	8	
	Drug-related Deaths (per 100,000 population)	21.6	32.3	21.5	33.1			25.4			25.2	26	
	Maternities with Drug Use (per 1,000 maternities)	12.3	20.5	22.3	18.4			16.7			16.6	21	
	Smoking-attributable Hospitalisations (aged 35+, per 100,000 population)	1,249	1,232	1,147	937			1,490			1,264	8	
	Smoking-attributable Deaths (aged 35+, per 100,000 population)	317	317	324	289			289			270	24	
	Smoking During Pregnancy (% of those with known smoking status)	18.8%	22.9%	21.4%	18.8%			13.9%			12.9%	29	

2.4 Mental Health		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Mental Wellbeing Score - Females	49.2	49.4	49.3				49.7			49.4	23	
	Mental Wellbeing Score - Males	49.5	49.8	50.4				49.7			49.5	8	
	Suicide Rate - All Ages (per 100,000 population)	19.1	17.4	18.4	16.5			16.0			14.1	26	
	Suicide Rate - Females (per 100,000 population)	11.2	9.0	10.1	9.4			7.3			7.1	27	
	Suicide Rate - Males (per 100,000 population)	27.1	25.9	26.6	23.6			20.9			21.2	22	
	Suicide Rate - Young People (aged 11-25, per 100,000 population)	18.5	20.9	16.3	9.4			10.8			11.1	12	
	Population Prescribed Drugs for Anxiety/Depression/Psychosis	21.9%	21.8%	20.9%	22.0%			19.3%			20.1%	26	
	Psychiatric Patient Hospitalisations (per 100,000 population)	335	303	291	265			243			231	22	

Yellow shading = multiple year aggregate (average over 2 – 5 years)

2.5 Children & Young People's Care		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Children on the Child Protection Register (per 1,000 children under 16)	4.1	2.7	4.8	4.6			2.9			2.3	31	
	Child Protection Re-registrations Within 18 Months	19.0%	13.0%	8.1%	13.3%			7.0%		6.8%	8.0%	27	
	Children Looked After by Local Authority (per 1,000 children 0-17 years)	20.8	18.4	24.8	27.0			14.1			12.9	31	
	Care Experienced Children Looked After in the Community	93.0%	93.1%	93.7%	95.1%			92.5%		90.9%	89.8%	1	
	Care Experienced Children with More than 1 Placement in the Last Year	22.2%	23.8%	16.7%	14.8%			16.8%		18.1%	15.9%	12	

2.6 Adult & Older People's Care		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Older People with Long-term Needs Receiving Care at Home (aged 65+)	73.6%	73.8%	76.1%	72.3%	71.1%		67.3%		62.1%	61.5%	4	
	Adult Care Inspection Gradings (% 'good' or better)	97.1%	97.1%	97.4%	91.7%	82.0%		81.3%		77.0%	75.0%	6	
	Adults Agreeing 'Support Improved or Maintained Quality of Life' (biennial)		82.3%		85.7%			80.0%		77.4%	78.1%	3	
	Adults Agreeing they are 'Supported to Live as Independently as Possible' (biennial)		85.1%		72.1%			80.8%		75.8%	78.8%	30	
	Adults Agreeing they 'Had a Say in How Support was Provided' (biennial)		75.4%		72.1%			75.4%		72.6%	70.6%	16	
	Unpaid Carers who 'Feel Supported to Continue in their Caring Role' (biennial)		30.9%		23.8%			34.3%		28.1%	29.7%	32	





























Yellow shading = multiple year aggregate (average over 2 – 5 years)

3. Attainment, Jobs & Economy

3.1 Education & Attainment		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Early Years Inspection Gradings (% 'good' or better, funded provision)	94.4%	100.0%	94.7%	88.9%	84.2%		89.4%		92.8%	90.1%	31	
	School Attendance - All Pupils (biennial)	92.9%		92.9%		91.0%		92.0%		90.0%	90.2%	8	
	School Attendance - Looked After Children (biennial)	89.5%		89.9%				88.6%		88.4%	87.9%	5	
	Pupils Achieving Expected CfE Level - Literacy (primary 1, 4 & 7)	71.2%	N/A	59.6%	63.3%	69.6%		70.5%		73.6%	72.7%	22	
	Pupils Achieving Expected CfE Level - Numeracy (primary 1, 4 & 7)	76.8%	N/A	68.6%	71.7%	72.4%		77.9%		82.1%	79.6%	30	
	Literacy Attainment Gap (% difference between P1, 4 & 7 pupils from least & most deprived areas)	22.4%	N/A	20.7%	19.3%	15.8%		21.3%		21.1%	20.5%	4	
	Numeracy Attainment Gap ((% difference between P1, 4 & 7 pupils from least & most deprived areas)	17.7%	N/A	13.0%	15.6%	17.1%		17.8%		17.2%	17.0%	14	
	Pupil Attainment - Most Deprived Areas (average tariff score, deprivation quintile 1)	516	522	544	607	521		691		670	658	24	
	Pupil Attainment - All Pupils (average tariff score)	774	744	830	878	765		972		975	915	32	
3.2 Employability & Labour Market		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	School Leavers Entering Positive Destinations (education, training or employment)	94.2%	96.5%	95.9%	96.5%			95.5%		96.0%	95.7%	10	
	16-19 Year-old Participation Rate (education, training or employment)	90.1%	89.3%	90.0%	90.7%	91.6%		92.4%		94.8%	94.3%	31	
	Unemployment Rate - Young People (16-24 years)	6.2%	6.6%	9.9%	6.3%	4.5%		5.0%		3.6%	3.5%	28	
	Unemployment Rate - All Working Age (16-64 years)	4.2%	4.2%	6.6%	4.9%	3.7%		4.5%		3.0%	3.2%	25	
	Unemployed People Assisted into Work via Council Employability Programmes	10.0%	14.6%	9.0%	39.3%	21.0%		17.4%		17.7%	12.9%	9	

Yellow shading = multiple year aggregate (average over 2 – 5 years)

CfE = Curriculum for Excellence

3.3 Business & Economy		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Business Gateway Startups (per 10,000 population)	23.0	20.4	17.9	15.5	17.3		14.4		16.2	14.3	14	
	Town Vacancy Rate (vacant retail units as % of total - Alloa town centre only)	12.4%	7.5%	13.6%	18.6%	22.7%		12.5%		11.5%	12.0%	32	
	Average Weeks to Process Commercial Planning Applications	7.6	6.3	6.5	7.2	9.3		11.7		13.4	12.0	6	
	Immediately Available Employment Land (% of land allocated for employment in Local Development Plan)	5.3%	68.5%	68.5%	68.0%	26.1%		27.2%		26.6%	22.8%	16	
	Invoices Paid by Council Within 30 Days	89.9%	92.2%	94.8%	87.7%	88.6%		92.2%		90.5%	90.6%	25	
	Council Procurement Spend with Local Businesses	15.6%	19.7%	23.4%	22.7%	23.3%		21.5%		21.3%	29.6%	22	
	Gross Value Added (per head of population)	£20,798	£21,110	£20,062	£21,498			£23,945		£19,240	£25,758	18	

Yellow shading = multiple year aggregate (average over 2 – 5 years)

























4. Climate & Environment

































4.1 Active Travel & Road Safety		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Active Travel to School	64.2%	64.3%	65.9%	66.1%	65.3%		50.8%			50.2%	2	
	Active Travel to Work	6.5%	6.3%	9.5%				15.2%			16.9%	24	
	Driving Under the Influence (per 10,000 population)	9.1	11.4	12.3	13.6			14.8			14.2	20	
	Road Traffic Accident Casualties (per 100,000 population)	53.7	60.5	58.0	57.0			57.3			54.7	17	
	A Class Roads to be Considered for Treatment	24.3%	24.8%	26.5%	26.9%	27.1%		25.0%		23.2%	27.4%	18	
	B Class Roads to be Considered for Treatment	22.2%	18.0%	18.5%	19.0%	24.7%		20.0%		26.5%	31.5%	12	
	C Class Roads to be Considered for Treatment	30.4%	29.0%	27.4%	27.0%	26.3%		30.0%		31.2%	32.7%	8	
	Unclassified Roads to be Considered for Treatment	40.2%	43.0%	43.2%	40.8%	40.6%		42.0%		31.7%	36.4%	22	

4.2 Energy Efficiency & Emissions		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Council Dwellings Meeting EESSH criteria	72.8%	84.2%	85.3%	62.3%			100.0%		93.6%	82.8%	24	
	CO ₂ Emissions - All (tonnes per capita)	10.5	10.2	9.4	9.2			6.2		4.5	5.1	28	
	CO ₂ Emissions - Within Local Authority Scope (tonnes per capita)	7.3	6.9	6.2	6.4			5.4		4.0	4.6	29	
	CO ₂ Emissions - From Transport (tonnes per capita)	20.2	20.0	16.6	18.3			21.3		18.7	26.8	7	
	CO ₂ Emissions - From Electricity (tonnes per capita)	51.0	45.0	41.1	36.7			42.2		44.1	46.1	4	
	CO ₂ Emissions - From Gas (tonnes per capita)	41.5	48.3	48.2	41.5			52.8		64.3	57.2	4	
	Asthma Hospitalisations (per 100,000 population)	96.5	93.8	73.8	70.7			75.8			68.4	19	
	Child Asthma Hospitalisations (0-15 years, per 100,000 population)	153.7	116.3	81.1	104.7			118.6			112.0	18	

Yellow shading = multiple year aggregate (average over 2 – 5 years)

EESSH = Energy Efficiency Standard for Social Housing; CO₂ = Carbon Dioxide; SHQS = Scottish Housing Quality Standard













4.3 Recycling & Outdoor Spaces		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Household Waste Composted or Recycled	56.3%	55.4%	48.6%	50.0%	51.0%		50.0%		49.0%	43.3%	10	
	Street Cleanliness Score (% 'acceptable')	92.9%	95.1%	89.6%	90.4%	96.5%		89.7%		92.7%	90.6%	3	
	Satisfaction with Refuse Collection	71.7%	64.0%	64.3%	65.0%	73.3%		76.0%		84.7%	78.0%	25	
	Satisfaction with Street Cleaning	56.6%	55.0%	63.3%	65.0%	66.3%		58.7%		63.2%	58.3%	9	
	Satisfaction with Parks & Open Spaces	82.7%	84.0%	87.4%	88.0%	85.0%		87.3%		86.9%	87.3%	24	
	Population Within 500 Metres of Derelict Site	28.5%	27.5%	N/A	27.5%	25.5%		27.2%			26.6%	21	

















4.4 Neighbourhoods & Amenities		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Adults Rating Neighbourhood as 'Very Good Place to Live'	55.8%	55.7%	60.1%				57.0%			59.1%	20	
	Children & Young People in Most Access Deprived Quintile (aged 0-25)	14.3%	14.4%	14.5%				20.5%			20.8%	6	
	Satisfaction with Sports Facilities	69.7%	66.3%	57.7%	50.3%	36.7%		72.3%		68.5%	71.0%	32	
	Satisfaction with Libraries	73.6%	69.2%	65.6%	65.0%	63.0%		74.0%		63.9%	71.0%	26	
	Properties with Superfast Broadband	94.0%	94.8%	95.8%	98.2%	98.8%		94.1%		98.1%	95.5%	5	
	Council Dwellings Meeting all SHQS criteria	97.7%	96.1%	79.2%	59.9%	39.3%		100.0%		79.7%	70.9%	23	
	Average Working Days to Complete Non-emergency Housing Repairs	6.22	7.16	4.24	4.90	5.41		7.71		7.07	9.68	1	
	Single Adult Dwellings	38.7%	38.9%	39.9%	40.6%	40.9%		38.3%			38.5%	29	





















Yellow shading = multiple year aggregate (average over 2 – 5 years)

EESH = Energy Efficiency Standard for Social Housing; CO₂ = Carbon Dioxide; SHQS = Scottish Housing Quality Standard

5. Resources & Assets

5.1 Workforce		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Average Sickness Absence Days per Teacher	8.5	10.0	7.1	8.7	7.6		7.9		6.2	6.8	26	
	Average Sickness Absence days per Local Government Employee (excluding Teachers)	15.0	13.5	10.1	14.9	16.7		12.2		13.8	13.2	31	
	Gender Pay Gap (Council employees)	1.3%	1.3%	0.9%	2.1%	1.0%		0.0%		1.9%	2.5%	10	

5.2 Physical Assets & Revenues		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Operational Buildings Suitable for Current Use	79.7%	80.0%	80.0%	91.4%	91.4%		85.0%		88.3%	86.1%	9	
	Council Buildings in Satisfactory Condition (by floor area)	97.6%	97.7%	97.7%	97.5%	97.5%		95.0%		91.6%	89.7%	3	
	Rent Loss due to Void (empty) Properties	1.14%	0.45%	0.94%	0.66%	1.02%		0.90%		1.31%	1.71%	9	
	Council Tax Collected Within Year (as % of income due)	95.9%	95.7%	94.8%	96.2%	96.9%		96.3%		97.0%	96.2%	15	

5.3 Financial Sustainability		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Useable Reserves (as % of budgeted net revenue)	16.0%	17.5%	24.8%	27.0%	22.5%		24.4%		22.4%	24.5%	19	
	Uncommitted General Fund Balance (as % of budgeted net revenue)	3.8%	4.8%	4.8%	4.3%	2.2%		3.5%		2.0%	3.2%	20	
	Cost/Revenue Ratio - General Fund (financing costs to net revenue stream)	8.3%	5.5%	4.7%	3.7%	3.0%		5.9%		4.8%	5.4%	7	
	Cost/Revenue Ratio - Housing Revenue Account (financing costs to net revenue stream)	14.9%	9.7%	8.8%	7.3%	7.2%		16.1%		24.6%	21.4%	1	
	Outturn Expenditure (actual as % of budgeted)	97.9%	96.0%	93.1%	93.0%	96.5%		98.3%		97.3%	98.6%	22	

Yellow shading = multiple year aggregate (average over 2 – 5 years)

Financial values are 'real' costs, using HM Treasury deflators to cancel out inflation on historical figures based on 22/23 prices

5.4 Service Costs & Efficiency		18/19	19/20	20/21	21/22	22/23	Trend	Target	Status	Family	Scotland	Rank	Quartile
	Cost of Refuse Collection (per premise)	£69	£66	£48	£54	£58	↓	£51	⚠️	£75	£79	5	■■■■
	Cost of Refuse Disposal (per premise)	£114	£117	£116	£119	£108	↓	£112	✅	£101	£100	20	■■□□
	Cost of Street Cleaning (per 1,000 population)	£11,629	£11,845	£12,998	£17,125	£15,076	↑	£14,860	✅	£16,537	£16,068	17	■■□□
	Cost of Parks & Open Spaces (per 1,000 population)	£15,475	£21,568	£15,102	£19,609	£18,064	↑	£18,374	✅	£20,688	£23,311	10	■■■
	Cost of Road Maintenance (per kilometre)	£20,604	£19,047	£13,723	£10,217	£14,449	↓	£10,955	⚠️	£18,240	£12,844	18	■■■
	Cost per Local Planning Application	£2,956	£3,145	£3,784	£3,588	£4,055	↑	£4,341	✅	£5,374	£5,538	5	■■■■
	Cost of Economic Development & Tourism (per 1,000 population)	£40,511	£38,458	£39,902	£79,349	£84,303	↑	£71,944	⚠️	£77,173	£109,349	11	■■■
	Cost of Trading Standards (per 1,000 population)	£3,113	£2,902	£2,001	£1,367	£1,766	↓	£4,721	✅	£6,501	£7,063	1	■■■■
	Cost of Environmental Health (per 1,000 population)	£12,518	£12,560	£14,442	£11,741	£11,758	↓	£15,032	✅	£12,081	£15,239	8	■■■■
	Cost of Older People's Home Care (per hour, aged 65+)	£16.69	£14.17	£17.42	£17.26	£17.95	↑	£24.01	✅	£29.28	£31.85	2	■■■■
	Cost of Older People's Residential Care (per resident per week, aged 65+)	£685	£718	£948	£801	£570	↓	£648	✅	£634	£684	8	■■■■
	Cost of Services for Looked After Children in Residential Settings (per child per week)	£2,827	£2,318	£2,993	£5,052		↑	£3,719	⚠️	£4,828	£4,974	19	■■□□
	Cost of Services for Looked After Children in Community Settings (per child per week)	£428	£358	£350	£408		↔️	£408	✅	£392	£429	14	■■□□
	Cost per Pre-school Education Registration	£6,688	£8,523	£10,427	£11,790	£12,904	↑	£10,291	⚠️	£10,201	£11,008	26	■□□□
	Cost per Primary School Pupil	£5,611	£6,157	£6,435	£7,082	£6,946	↑	£6,337	⚠️	£6,947	£6,871	17	■■□□
	Cost per Secondary School Pupil	£9,261	£9,575	£9,248	£8,981	£9,064	↔️	£7,920	⚠️	£8,252	£8,498	24	■■□□
	Cost of Sports Facilities (per visit)	£0.85	£0.93	£18.39	£5.18	£3.35	↑	£6.44	✅	£4.30	£4.89	10	■■■
	Cost of Libraries (per visit)	£0.51	£0.72	£2.01	£2.32	£2.61	↑	£2.90	✅	£3.05	£2.81	12	■■■
	Cost of Support Services (as % of total General Fund expenditure)	7.2%	6.1%	5.7%	5.8%	5.2%	↓	4.5%	⚠️	3.9%	4.0%	28	■□□□
	Cost of Council Tax Collection (per dwelling)	£4.09	£3.92	£4.46	£3.95	£5.27	↑	£7.05	✅	£7.17	£6.84	9	■■■■

Yellow shading = multiple year aggregate (average over 2 – 5 years)

Financial values are 'real' costs, using HM Treasury deflators to cancel out inflation on historical figures based on 22/23 prices

Report to: Audit and Scrutiny Committee

Date of Meeting: 18th April 2024

Subject: Homeless Performance Update

Report by: Strategic Director (Place)

1.0 Purpose

- 1.1. This report is to provide an update to the Committee on Homelessness presentation rates and performance in managing such presentations.
- 1.2. A further paper on planned Homeless Prevention activity will be brought to Audit and Scrutiny Committee later in the year.

2.0 Recommendations

- 2.1. It is recommended that the Committee:
 - Notes the performance information contained whilst commenting and challenging as appropriate.
 - Notes that to September 2023 the national statistics show an increase across Scotland in all key homeless indicators.
 - Notes that homeless presentation rates in Clackmannanshire in 2023/24 have remained at a similar level to those in 2022-23.
 - Notes that despite high presentation rates the proportion of households in temporary accommodation across Clackmannanshire is below the national average.
 - Note that the length of time which people have to spend in temporary accommodation within Clackmannanshire is below the national average.
 - Note the increased pressures and demands on the service and the plan to provide members with an update on homeless prevention activity at the first Housing Performance Meeting to be held following recess.

3.0 Considerations

- 3.1. The Scottish Government's national statistics publication for Homelessness in Scotland in 2022-23 showed that Clackmannanshire Council has the third highest rate of application by population in Scotland.
- 3.2. This is not a new development; Clackmannanshire has been amongst the highest presentation rates for as long as the current statistical records, beginning in 2002, show. Indeed, in the period 2004-2006

Clackmannanshire had the highest rate in Scotland at more than double the national average for homeless presentation.

- 3.3. There are many variables at play and it is difficult to determine why application rates are higher in Clackmannanshire. Comparisons between different authority areas are not always possible given differing recording and intake methodologies rather than the stated reason for the homeless application.
- 3.4. Many areas with pockets of deprivation and insufficient affordable housing, like Clackmannanshire, suffer from high levels of homelessness but Clackmannanshire remains at the high end of the scale. Clackmannanshire Council's Homeless Service has been, and remains, particularly accessible and we are confident that the figures collected in Clackmannanshire are accurate and that all homeless applicants are correctly identified and appropriately recorded.
- 3.5. Numbers of applications have dropped over the years, from a peak of 1,157 in 2005/6 to a low of 459 in 2016/17. In 2022/23, 593 applications were received and a similar figure of 589 applications have been received in the year to date from 1st April 2023 to 1st March 2024 (Appendix 1 – Table 1).
- 3.6. The most common reasons for homelessness presentations in Clackmannanshire are 'asked to leave' (19%) most commonly by family members, and 'relationship breakdown' (28.5%) (Appendix 1 Table 3). This is in line with the national position (Appendix 1 Table 3a).
- 3.7. Other areas of concern include the fleeing of non-domestic violence (6.2%) and within household violent or abusive disputes (6%) as illustrated in the tables provided. Further research is required to examine these issues and the Council and partners overall approach in interventions in this area.
- 3.8. The relatively high volume of applications does place a strain on the authority with respect to the provision of temporary accommodation. The appendix to this report reflects this position, but also illustrates that the potential impact is mitigated to some extent with above average performance in the time taken to resolve applications (when compared to the national average for 2022-23). For example, despite presentation rates higher than the national average, the proportion of households in temporary accommodation is below the national average.

4.0 Key Performance in Homelessness

- 4.1. Appendix 1 provides performance overview information relevant to Clackmannanshire Council's current homelessness position.
- 4.2. The Scottish Government's national statistics publication for Homelessness in Scotland for this current financial year 2023-24 will not be made available until later in the calendar year, comparison with other local authorities nationally is not then available at this time.
- 4.3. The Scottish Government published the statistics bulletin Homelessness in Scotland: update to 30 September 2023, providing mid-year homelessness information for Scotland (Appendix 1: Table 2). These latest figures show

that homelessness is a growing challenge for all local authorities. This is largely due to issues such as the high cost of living, and pressures on the housing system nationally in terms of availability, accessibility and affordability of housing.

- 4.4. Nationally, there have been increases across all key homelessness indicators:
- The number of live/open cases has increased by 10% to 30,724. These are people/households that local authorities have accepted a homelessness duty to, who are waiting on an offer of permanent accommodation.
 - The number of new homelessness applications in the 12 months to 30 September 2023 increased by 7% nationally.
 - The number of households in temporary accommodation in Scotland increased by 8% to 15,625.
 - The number of children in temporary accommodation in Scotland also increased by 8% to 9,860.
- 4.5. The Council had 345 live homeless cases as of 14th March 2024, with 43 cases under-offer. This number of live cases is a 7.5% increase from the 321 cases at 2022/23 year end. Work has been done to increase the staffing resource within this area following approval gained at Council in June 2023 to recruit to positions of Housing Officers and although this has not reduced the overall caseload it has reduced down the number of cases being managed by each staff member and allowed valuable time to be afforded to in person homeless tenancy visits, a key role of the Housing Officer.
- 4.6. At time of writing this report there are 142 households in temporary accommodation, this compares to 127 households at 2022/23 year end equating to a near 12% increase. 33 current households have children, the majority of households are single male adults (Appendix 1 – Table 4). All households with children are staying in self contained flats within Clackmannanshire, none are in B&B style accommodation.
- 4.7. In terms of average length of stay in temporary accommodation, the national average for the 12 months to 30 September 2023 was 216 days. In Clackmannanshire the average duration of stay is 150 days.
- 4.8. Average homeless case duration is not covered in detail in the Scottish Government's mid-year report. Our average case duration in 2022-23 (the time taken from assessment to closure of application) was 200 days with 58% of those persons being found homeless then rehoused in local authority stock and 17% with our RSL partners. The national average at 2022/23 was 266 days.
- 4.9. Performance management of all steps in the homelessness journey is critical to the success of the whole system, and ensuring that the delicate balance between having sufficient suitable temporary accommodation without impeding on availability of destination homes is a challenge each day for our staff.

5.0 Prevention Activity

- 5.1. The service has limited capacity to focus on strategic homeless intervention activity and to review, the related, Rapid Rehousing Transition Plan (RRTP). Progress on implementation of the RRTP actions has been limited due to a lack of available resources and those resources having been redirected to Covid related activities during the pandemic. The primary focus, at this time, is to focus on statutory requirements relating to the Strategic Housing Investment Plan (SHIP) and Housing Need and Demand Assessment (HNDA).
- 5.2. It is proposed that during the recess, possible prevention activities are further examined with colleagues, primarily in the People Directorate including the Family Wellbeing Partnership, a briefing for members on what may be deliverable and actionable could then be held at the first Housing Performance Meeting to be scheduled after recess.
- 5.3. In brief some of the prevention considerations may include –
 - exploring opportunities to work collaboratively with other service areas, the third sector and the local employability partnership to target funding where it can best help to support early prevention and intervention. The reasons for homeless presentations highlighted in sections 3.6 and 3.7 are areas of practice that our collective intervention activities need to focus on.
 - architectural changes to managed temporary accommodation blocks. This would involve increasing the occupation density of those blocks by splitting existing units into a greater number of smaller, self-contained, units. Work is required with a range of specialist advisers to explore the viability of this option.
 - setting up of new tenancies for homeless persons leaving temporary accommodation but who do not meet the exacting requirements to qualify for grant assistance from the Scottish Welfare Funds. This group often lack the financial means to set up a home and this can delay their move from temporary accommodation and have a detrimental impact upon tenancy sustainment, increasing the potential for repeat homelessness. The service is considering the guidance relating to the Rapid Re-housing Transition Plan (RRTP) grant fund to understand if this could be enacted to address this issue. If possible, this might create an opportunity for the Council to work with third sector furniture recycling services and, thus, assist with the community wealth building agenda.
 - recruitment to key positions within the Strategic Housing and Housing Support teams in line with the approved Housing Restructure. Delivery of money advice services will be a key focus for the team.

6.0 Unsuitable Accommodation Order (UAO)

- 6.1. The Homeless Persons (Unsuitable Accommodation) (Scotland) Order 2014 (UAO) came into force in 2014 and set out types of homeless accommodation deemed as unsuitable for families with children, or pregnant woman. Examples of unsuitable accommodation included: B&Bs, hostels, shared accommodation, or accommodation outwith the local authority area. The Council is deemed to have breached the order if a household is in unsuitable accommodation for more than 7 nights.
- 6.2. In 2020 the order was extended to apply to all homeless households. Due to the Covid-19 response implementation was delayed until 30 September 2021.
- 6.3. Prior to lockdown Clackmannanshire Council did not have any households in B&B or hostels. We had a small number of single applicants staying in shared flats in Stirling, who were moved back to Clackmannanshire as quickly as possible. Since March 2020 we have stopped this accommodation being used as shared, with only one household placed in each flat. We have continued to work extremely hard to ensure children or pregnant applicants are not placed in unsuitable accommodation.
- 6.4. At February 2024, the Council had 23 households in temporary accommodation outwith the local authority area (13 of these are self contained flats which are only unsuitable due to being outwith the area) and 4 households in unsuitable accommodation within the area. (Appendix 1 – Table 5). The use of unsuitable accommodation is at the highest it has been this year with a 58% increase in the 6 months from September 2023 to February 2024. The pressures noted in section 8.2 have contributed to this increase.
- 6.5. The service has discussed the “outwith area” matter with the Scottish Government arguing that the indicator would unnecessarily penalise small authorities such as Clackmannanshire, and would suggest poor performance where none existed. Larger Scottish authorities could displace an individual applicant by as much as 200km without breaching this test.
- 6.6. It was proposed that a more appropriate test would focus on the applicant’s access to support and family networks, work and travel links, one of the reasons why there is little temporary accommodation in more remote parts of Clackmannanshire. The Scottish Government were not persuaded by our proposals and, consequently, our breach of the Unsuitable Accommodation Order continues to be reported to the Scottish Housing Regulator as part of our Annual Assurance Statement submissions to the Regulator, the most recent of these provided on 31st October 2023. In the year to 30 September 2023, there were 4,305 breaches of the Unsuitable Accommodation Order by 25 local authorities.
- 6.7. As part of the Engagement Plan for 2023-2024 the Regulator visited the authority in December 2023 and met with the Housing team to discuss the challenges faced in complying with the UAO and our pressures more generally in managing homeless caseload. Whilst the Regulator was satisfied that sufficient assurance was able to be provided in respect of the manner in which the authority manages homelessness full and formal

feedback is yet to be provided. Given the scale of the problem we can expect that the Engagement Plan for 2024-25 will include for continued assessment of our management of homelessness.

- 6.8. A detailed analysis of Clackmannanshire's approach to homelessness accommodation provision and applicant's discharge to permanent accommodation was included in our Rapid Rehousing Transition Plan, presented to Council back in March 2019. It was determined that the Council's needs based allocations policy, and that of our partner Registered Social Landlords (RSLs), played a positive part in reducing homelessness by offering an alternate route to accommodation for people with a range of housing needs. The evidence suggested that the housing system in Clackmannanshire was working well but suffered from a significant shortage of affordable housing. Little has changed in the time period from then until now.
- 6.9. The above finding creates a dilemma; with insufficient permanent accommodation to meet needs the demand for temporary accommodation grows. Removing existing stock to increase the number of homeless accommodation units only exacerbates the shortage of permanent accommodation. The service currently let 66% of void properties to homeless households, this has increased year on year from 47% in 2019/20. Increasing this percentage further would adversely affect the number of mainstream properties available for take up by those moving from homeless temporary accommodation to a mainstream tenancy.
- 6.10. There is a clear need to increase the numbers of affordable housing units within Clackmannanshire. There are of course other avenues which can be explored to help reduce homelessness demand and the service will seek to bring these forward as part of a future paper on Homeless Prevention activity, there is however no doubt that a continued focus to increase the number of housing units available to the authority must be maintained.

7.0 Accommodation & Process Review

- 7.1. As detailed above we have real challenges with temporary accommodation provision.
- 7.2. There are currently a large number of Void including Off The Shelf (OTS) buy back properties awaiting refurbishment works. Approval gained at Council in late June 2023 allowed for additional financial and external contractor resource capacity to be made available to address the issue with aim of driving down the number of empty properties carried.
- 7.3. Progress in this area has been slower than originally anticipated and this has impacted on our ability to allocate properties to those who require them, however, we are confident that notable improvement will be evident by the end of the first quarter of the new financial year. We will commit to bring an update on void property and OTS buy back performance to June Committee.
- 7.4. Reporting of on all areas of housing performance against the outcomes of the Social Housing Charter will be provided to the Scottish Housing

Regulator via our Annual Return of Charter , this is required by 31st May 2024, the service aim is to bring this report to Council ahead of submission.

- 7.5. The Service continues to monitor the local housing market for properties which might boost our own stock of suitable accommodation, in 2023/24 we increased by 100% the number of properties purchased from the market from 20 units to 40 units in year. As part of the HRA Capital Budget for 2024/25 (approved by Council in February 2024) there is provision for purchase of a further 40 units within financial year 2024/25.
- 7.6. Owing to complex Housing Benefit subsidy rules, the Council's ownership of its own temporary accommodation remains, by a significant margin, the most financially viable delivery method.
- 7.7. Use of non-Council owned accommodation results in a subsidy payment loss from DWP with that loss showing within the Partnership&Performance (P&P) Service budgets. The recent increase in use of accommodation out with area impacts upon P&P's ability to meet its savings targets.

8.0 Additional Pressures

- 8.1. Homelessness is a growing challenge for all local authorities. This is largely due to issues such as the high cost of living, and pressures on the housing system nationally in relation to availability, accessibility and affordability of housing.
- 8.2. Other factors have impacted our ability to provide housing; the presence of RAAC found within a small proportion of the councils housing stock, the temporary re-location of our gypsy travelling community from Westhaugh to within our domestic housing stock and the necessity to find suitable accommodation for refugees fleeing the war in Ukraine have all added increased pressure on housing supply at a time when it is in high demand.
- 8.3. Recent cuts made to the budget for the delivery of the Affordable Housing Supply Programme (AHSP) make reaching the Scottish Governments target of 110,000 affordable homes to be built nationally by 2032 an extremely challenging one.
- 8.4. Construction industry supply chain disruption and external contractor pricing (which although stabilising) has remained high and has settled at post covid inflation levels. This calls into question the affordability of new build housing development with tender prices for these works returning high and in some instances above the benchmark threshold set by the Scottish Government for providing affordable housing supply grant funding. The slow progress of development does not help to tackle increasing waiting list demand.
- 8.5. The service continue to work with the Scottish Government and our local RSL partners to try to deliver new housing supply in line with the programme outlined within the Strategic Housing Investment Plan 2024-29 agreed at Council in November 2023.
- 8.6. Changes to the private sector rent cap from 1st April 2024 may lead to rising private sector rent costs with a number of tenants at risk of becoming homeless. There is also the potential for some private landlords to leave the

market if an acceptable return from rents cannot be achieved and this contributing to a reduction in the number of properties available for private let.

- 8.7. The Scottish Governments removal of the “local connection” test and suspension of the referral process between local authorities has not as yet impacted significantly on homeless presentation numbers with more movement from within the county to other local authority areas than there has been into the area. In most cases where presentations have been made this has been for emergency overnight temporary accommodation only with no follow up application then made for permanent housing within the County. The service continues to liaise closely with neighbouring local authorities in this matter.

9.0 Sustainability Implications

- 9.1. None

10.0 Resource Implications

- 10.1. Financial Details

- 10.2. 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

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

Yes

- 10.4. Staffing

11.0 Exempt Reports

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

11.2. Declarations

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

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

- Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all
- Our families; children and young people will have the best possible start in life
- Women and girls will be confident and aspirational, and achieve their full potential
- Our communities will be resilient and empowered so that they can thrive and flourish

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

12.0 Equalities Impact

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

Yes

13.0 Legality

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

12.0 Appendices

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

Appendix 1 – Homeless Performance Data

13.0 Background Papers

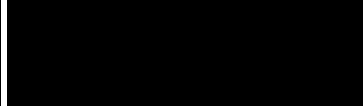
13.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

Yes (please list the documents below)

Author(s)

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Alex Gilbert	Senior Housing Officer	5117

Approved by

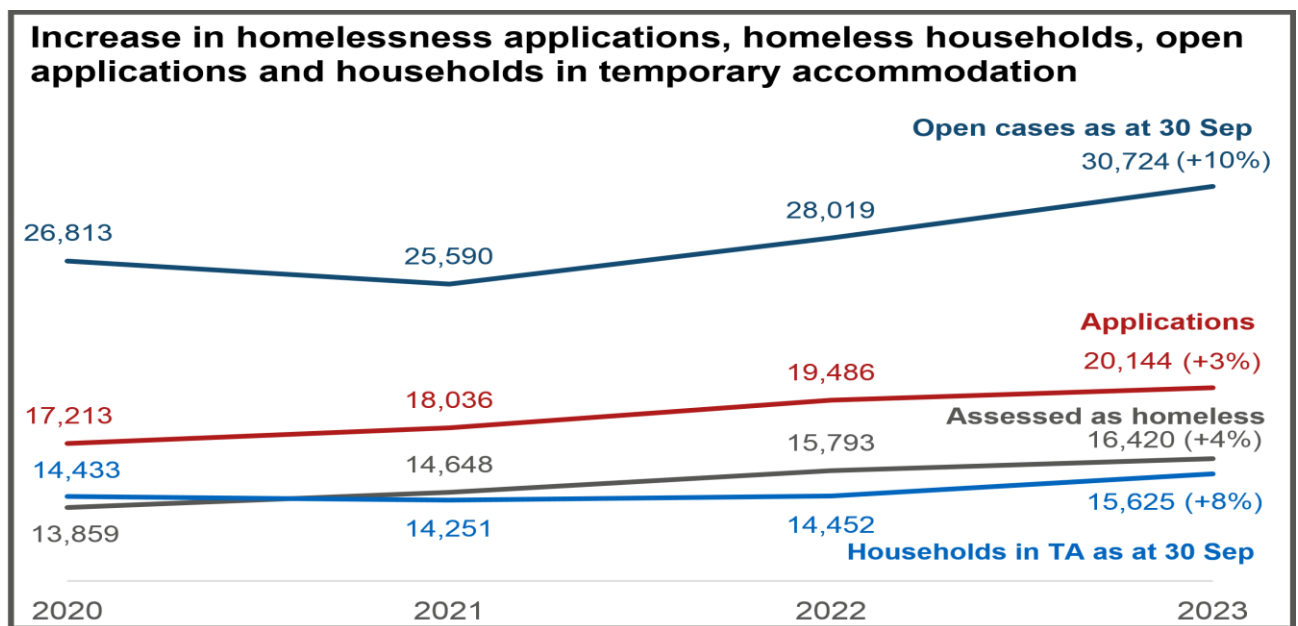
NAME	DESIGNATION	SIGNATURE
Pete Leonard	Strategic Director Place	

Appendix 1 – Homeless Performance Data – March 2024

Table 1: Number of Homelessness Applications 2014-2024

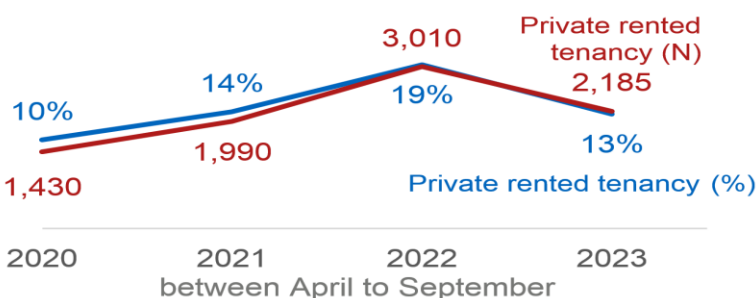
2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24 to date
457	472	459	515	553	523	502	551	593	589

Table 2: Scottish Government published statistical bulletin Homelessness in Scotland: update to 30 September 2023, mid-year homelessness information for Scotland.

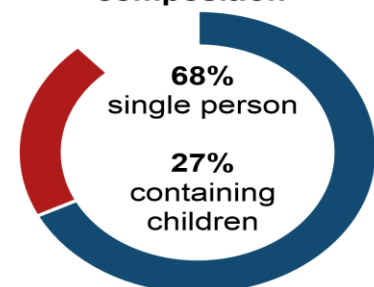


9,860 children in temporary accommodation as at 30 Sep 2023, an 8% increase compared to as at 30 Sep 2022 (9,125).

Decrease in number and proportion of households becoming homeless from private rented tenancy, likely due to legislation



Homeless household composition



Rough sleeping

1,408 applicants reported rough sleeping during the previous three months (7% of all applications)

888 applicants reported rough sleeping the night before (4% of all applications)



82% of unintentionally homeless households secured settled accommodation

Table 3: Number and Reasons for Homeless Presentations – Clackmannanshire Council 2023-24 to date.

Reason for Application	2021-2022	2022-2023	2023-2024 to date
Applicant terminated secure accommodation	2	9	5
Asked to leave	135	145	115
Discharge from prison / hospital / care / other institution	20	34	25
Dispute within household / relationship breakdown: non-violent	170	159	169
Dispute within household: violent or abusive	41	48	35
Emergency (fire, flood, storm, closing order from Environmental Health etc.)	0	1	4
Fleeing non-domestic violence	37	28	37
Forced division and sale of matrimonial home	2	1	6
Harassment	31	25	30
Loss of service / tied accommodation	3	4	6
Other action by landlord resulting in the termination of the tenancy	41	31	36
Other reason for leaving accommodation / household	38	53	63
Other reason for loss of accommodation	16	20	22
Overcrowding	3	10	9
Termination of tenancy / mortgage due to rent arrears / default on payments	12	25	27

Table 3a: Percentage and Reasons for Homeless Presentations – Clackmannanshire Council and Scotland 2022-23.

Reason for Application	2021-22		2022-23	
	Clacks	Scotland	Clacks	Scotland
Applicant terminated secure accommodation	0%	2%	2%	2%
Asked to leave	25%	26%	24%	25%
Discharge from prison / hospital / care / other institution	4%	5%	6%	5%
Dispute within household / relationship breakdown: non-violent	31%	21%	27%	21%
Dispute within household: violent or abusive	7%	14%	8%	12%
Emergency (fire, flood, storm, closing order from Environmental Health etc.)	0%	0%	0%	1%
Fleeing non-domestic violence	7%	4%	5%	4%
Forced division and sale of matrimonial home	0%	0%	0%	1%
Harassment	6%	3%	4%	2%
Loss of service / tied accommodation	1%	1%	1%	1%
Other action by landlord resulting in the termination of the tenancy	7%	7%	5%	9%
Other reason for leaving accommodation / household	7%	8%	9%	8%
Other reason for loss of accommodation	3%	6%	3%	6%
Overcrowding	1%	2%	2%	2%
Termination of tenancy / mortgage due to rent arrears / default on payments	2%	2%	4%	2%

Table 4: Households In Temporary Accommodation as at 1st March 2024

Children in Temporary Accommodation:

Household with Children	33
Household Without Children	109

Full breakdown:

Row Labels	Count of HL1_Household_Type
Couple with children	5
Couple without children	4
Other with children	3
Other without children	2
Single parent: Female	18
Single parent: Male	7
Single Person: Female	28
Single Person: Male	75
Grand Total	142

Table 5: Households in Unsuitable Accommodation as at February 2024.

	Stirling (self contained flat)	Stirling (B&B)	Falkirk (B&B)	Kirkcaldy (B&B)	Alloa (B&B)	Total
Jul-23	12	4	0	1		17
Aug-23	9	2	0	1		12
Sep-23	11	6	0	1		18
Oct-23	12	4	0	1		17
Nov-23	12	3	0	1		16
Dec-23	12	4	0	2	1	19
Jan-24	12	6	1	1	1	21
Feb-24	13	5	5	0	4	27

Report to : Audit & Scrutiny Committee

Date of Meeting: 18th April 2024

Subject: Staff Survey 2023

Report by: Strategic Director, Partnership & Performance

1.0 Purpose

- 1.1. This report provides the Audit & Scrutiny Committee with details of the 2023 Council-wide Staff Survey, and gives further information as to how results will be communicated, and used to inform future work.

2.0 Recommendations

- 2.1. That Committee notes the report, commenting and challenging as appropriate.

3.0 Considerations

- 3.1. Clackmannanshire Council undertook its most recent staff survey in November to December 2023.
- 3.2. Over this period, 787 responses were received, giving a council wide response rate of 32%. This represents a 6 percentage point increase on the last survey undertaken in 2021.
- 3.3. In support of increasing uptake, managers at all levels were provided with a management toolkit consisting of frequently asked questions, toolbox talk scripts, and a promotional materials pack for their individual areas.
- 3.4. Additionally, regular reminders about the survey were issued via management cascade, all staff emails and the clacks.gov.uk/staff site, in addition to paper copies being issued to various Council sites, and home addresses (for those on maternity or long term sickness leave). Lastly, all members of staff with access to a PC were issued with a personalised invitation to complete the survey, via email, from the Chief Executive.
- 3.5. The survey report (attached at Appendix A), provides detail on the engagement levels of our employees, both at an organisational and directorate level. Additional analysis is provided for each survey question asked, with comparative data provided from the 2018 - 2021 survey results where available and relevant.

- 3.6. For 2023, the overall staff engagement level for the organisation is 67%, which is a 1 percentage point reduction from the 2021 survey level of 68%.
- 3.7. Overall, engagement in the organisation has risen by 4 percentage points from 2018, where this baseline for engagement was first established.
- 3.8. Feedback from staff is most positive with regards to having a sense of achievement for the work they undertake, and being treated with dignity and respect (at a Council wide level).
- 3.9. However, views become more mixed with consideration to themes such as feeling valued and supported (55% positive response rate), and being given the opportunity to make decision relating their roles (66%).
- 3.10. Of particular note is a reduction in mental health across the Council workforce, with 52% of respondents rating their mental health from 'fair', to 'very poor'.
- 3.11. In terms of more generalised (free text) feedback, there were clear themes amongst the 436 comments received. These focussed on internal communications (20%), IT services (15%), leadership and visibility (10%) and staff wellbeing (8%).
- 3.12. The full range of feedback is included within the Staff Survey report, which is attached at Appendix A.

4.0 Next Steps

- 4.1. The results outlined at Annex A of this report will be pivotal in supporting ongoing work to develop the Council's approach to themes such as employee health and wellbeing, internal communications, and leadership development.
- 4.2. In particular, the results of this survey will be instrumental in feeding the development of the Council's Strategic Workforce Plan 2025-29 in addition to further development of the target operating model (TOM).
- 4.3. We also recognise the importance of feedback to staff and trade unions on these results. As such, a range of work will be undertaken in the coming months to ensure that the Council recognises the input of staff, and makes use of the valuable feedback provided. This will include:
 - Staff / Trade Union Forum
 - SLF & TLF sessions to feedback results and seek management input
 - Internal communications thanking staff for their input, trailing results, and outlining the way forward.

5.0 Sustainability Implications

- 5.1. None.

6.0 Resource Implications

6.1. *Financial Details*

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

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

6.4. *Staffing*

7.0 Exempt Reports

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

7.0 Declarations

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

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

- Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all
- Our families; children and young people will have the best possible start in life
- Women and girls will be confident and aspirational, and achieve their full potential
- Our communities will be resilient and empowered so that they can thrive and flourish

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

8.0 Equalities Impact

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

9.0 Legality

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

10.0 Appendices

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

Appendix A - Staff Survey Report 2023

11.0 Background Papers

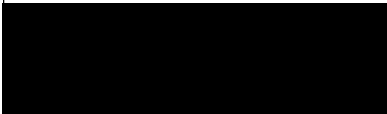
11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

Yes (please list the documents below) No

Author(s)

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Approved by

NAME	DESIGNATION	SIGNATURE
Stuart Crickmar	Strategic Director – Partnership and Performance	



**Clackmannanshire
Council**

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Comhairle Siorrachd
Chlach Mhanann



Staff Survey Report

2023

1.0 Introduction

Our Survey Approach

- 1.1 This survey presents the results of the 2023 Council-wide staff survey, the first of a new set of staff surveys utilising a refreshed question set.
- 1.2 The survey includes several questions which have been maintained from previous surveys (2018-2021)¹. Specifically, 5 questions are asked to allow us to create a staff engagement index, which provides a useful insight into the overall engagement of Council staff (from the year 2018 to date). In addition, the survey asked employees to provide their views on a number of themes; their work, their health and wellbeing, and communication.
- 1.3 In administering the survey, a combined web-based and postal survey were used. The survey was issued on 30 October 2023 and closed on 8 December 2023. For the first time the survey was managed entirely by the Council's Workforce Development & Learning team, and was anonymous and confidential. All survey communications made it clear that responses could not be attributed to any specific staff member. There were also further steps taken in design to ensure the anonymity of all employees.
- 1.4 Paper surveys were returned via ballot boxes at various Council locations, or through secure internal mail. Web responses were collated through a secure online survey platform, accessible only to members of the Workforce Development & Learning team.
- 1.5 Communication undertaken both prior to, and during the survey period was robust (so as to promote the survey as widely as possible). This included the creation of posters, QR codes, toolbox talk scripts, regular articles for the online intranet and personalised emails / letters from the Chief Executive. In addition, all managers were provided with a communications toolkit including a range of assets for use.

¹ A full set of tabular results is included within this report at **ANNEX A**

Survey Responses

- 1.6 From 2,467 surveys issued to Council employees, a total of 787 responses were received – equivalent to an overall response rate of 32%. This response rate compares favourably when compared to the last staff survey undertaken (26% in 2021).
- 1.7 Overall, the response rate of 32% is strong for a survey of this kind and size (see **figure 1**). Providing additional context is **figure 2** of this report, which presents an overview of survey respondents from across Council directorates.

Figure 1: Survey Response

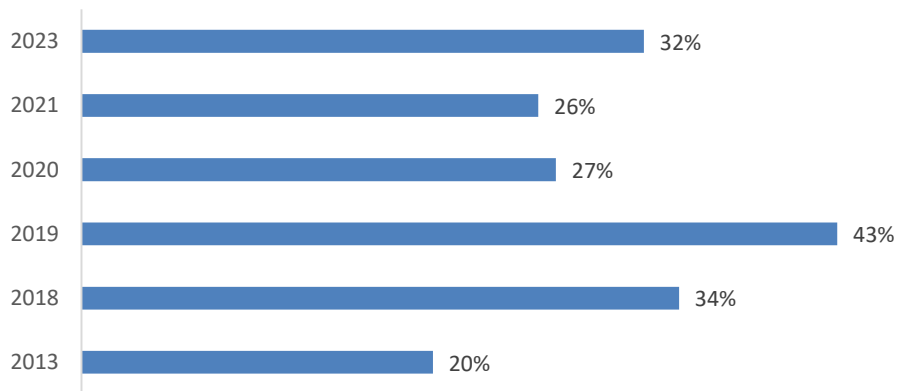


Figure 2: Profile of survey respondents (n=787)

Directorate	Number	%
HSCP	90	11%
P&P	70	9%
People	438	56%
Place	153	19%
Prefer not to say/No response	36	5%

This report

- 1.8 The remainder of this report sets out key findings across the main survey themes, including comparisons with previous surveys where relevant and available. All figures are rounded up or down to the nearest whole number. Similarly, aggregated figures presented in the report text (such as the combined percentage of ‘strongly agree’ and ‘agree’ responses) may not sum to results presented in figures and tables due to rounding.
- 1.9 It should be noted that no figures are available for 2022, as no Council-wide survey was undertaken during this year.
- 1.10 Following approval of this report, work will continue to analyse results in conjunction with staff and Trade Unions, so as to make use of the valuable feedback which has been provided (see S3.3 of this report for further information).
- 1.11 This approach will mirror and build upon work undertaken to date, which has seen the outputs of the 2021 Council-wide staff survey form the foundation for the Council’s Interim Workforce Strategy (2023-25). For further context, the outputs of this 2021 survey were directly influential in the development of work with:
- A refresh of the Council’s induction programme (ongoing);
 - The creation and delivery of a new staff performance management system; and
 - Development of further staff wellbeing initiatives and resources.

Survey Themes

1.12 The 2023 survey asked for employee's views on a range of issues relating to their work and workplace, across the following themes:

- My work;
- My health and wellbeing; and
- Communication.

Employee Engagement

1.13 The 2023 survey asked employees to consider a series of five statements, designed to provide an aggregated 'employee engagement' score for the organisation. These questions mirror the question set from the 2018-2021 surveys, providing a useful benchmark of overall engagement with the organisation.

Figure 3: Overall Staff Engagement (aggregated)

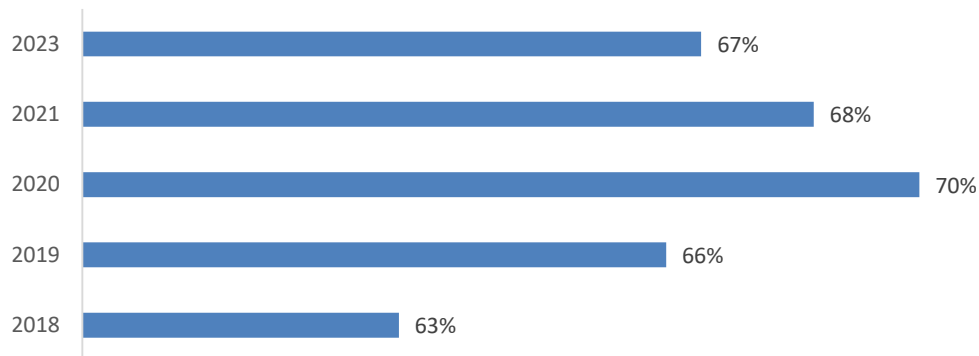
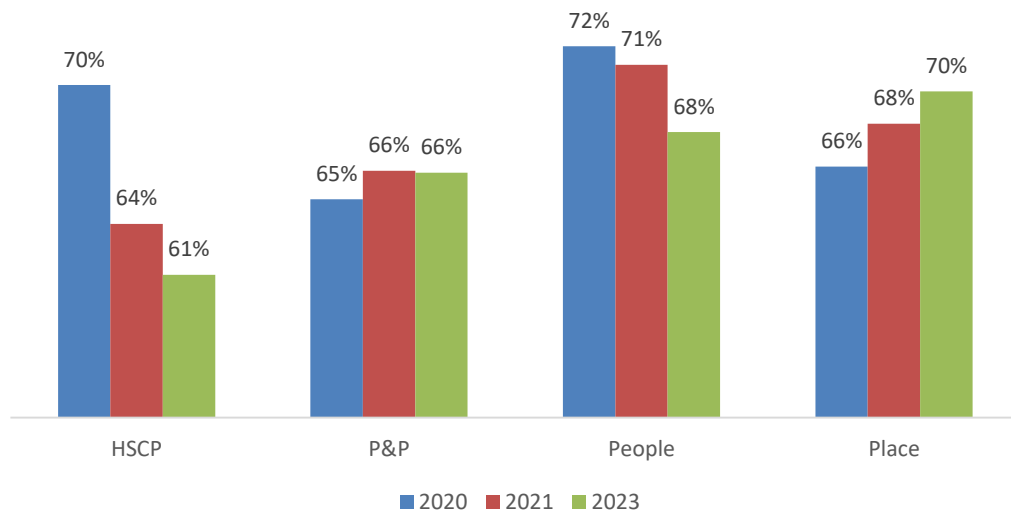


Figure 4: Engagement by Directorate (2020 – 2023)



- 1.14 Views from the engagement questions are most positive in relation to employees being treated with dignity and respect, and for feeling a sense of achievement in the work they undertake:
- I feel that I am treated with dignity and respect in my team – 74% agree
 - I feel a sense of achievement for the work I do – 72%
- 1.15 Views are more divided when considering the other engagement indicators, including being given opportunities to make decisions relating to their role, and being clear about how they contribute to the organisation’s goals.
- I am given the opportunity to makes decisions relating to my role – 66%
 - I am clear about how I contribute to the organisation’s goals – 67%
- 1.16 As with the last Council-wide survey (2021), views are less favourable with regards to staff feeling valued for the work they undertake, with just over half of respondents (55%) responding positive on this measure. This is similar to the 2021 result of 57%. Of note, is that a significant portion of free text comments (see S.2.43) reflect a lack of general communication with staff, which may be contributory to this specific ‘feeling valued’ question, and responses provided.
- 1.17 Overall, responses to the engagement indicator questions have taken an average 2 percentage point drop from the last Council-wide survey. Views across directorate areas remain broadly consistent to the headline figures, with overall results on a Council-wide basis showing a slight decline in overall positivity (see **figures 5 & 6**).

Figure 5: Employee Engagement Scores – 2018 to 2023



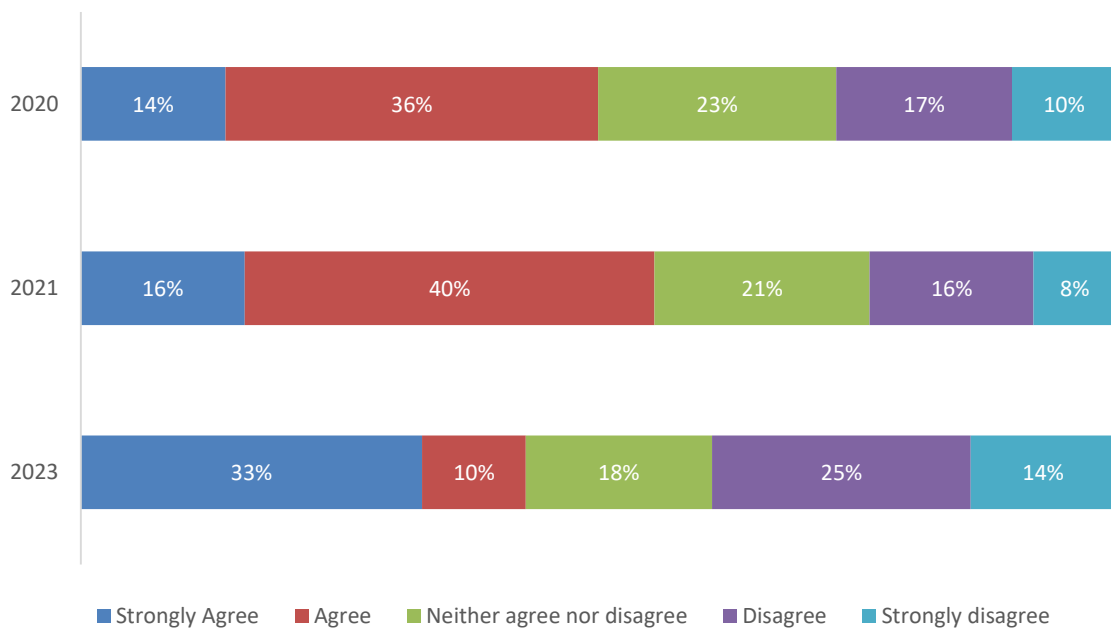
Figure 6: 2023 Employee engagement by directorate (agreement with statements)

Directorate	I am clear about how I contribute to the Organisation's goals	I feel that I am treated with dignity and respect within my team	I feel a sense of achievement for the work I do	I feel valued for the work I do	I am given the opportunity to make decisions relating to my role
HSCP	58%	72%	68%	48%	60%
P&P	64%	70%	69%	60%	67%
People	68%	75%	73%	56%	67%
Place	69%	78%	76%	58%	71%

My Work

1.18 The survey asked employees a range of questions relating to 'my work', which provided information on statements relating to aspects of their working life including learning and development, health and safety, and having the tools needed to undertake one's job effectively.

Figure 7: I have all the tools I need to do my job effectively

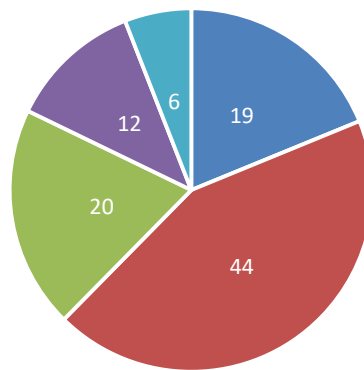


1.19 In terms of having the right tools to undertake their roles, employees are somewhat mixed in their responses (see **figure 7**). Whilst 43% of employees responded positively (either strongly agree or agree) to this question, 38% of respondents responded negatively (either disagree, or strongly disagree).

1.20 Overall, this score of 43% represents an 13-percentage point drop from the 2021 survey (56%). Free text survey responses may give an insight into the reasons for this decline, particularly where ongoing issues with IT equipment are consistently noted in feedback (see S2.46).

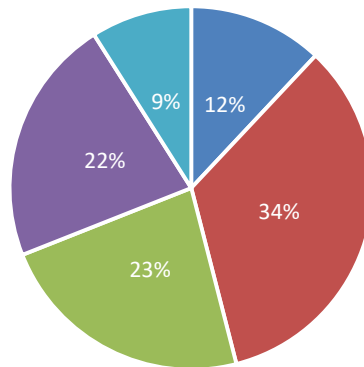
Figure 8: I am given access to (and time to access) learning & development opportunities

I am given access to L&D Opportunities



■ Strongly Agree ■ Agree ■ Neither agree no disagree ■ Disagree ■ Strongly disagree

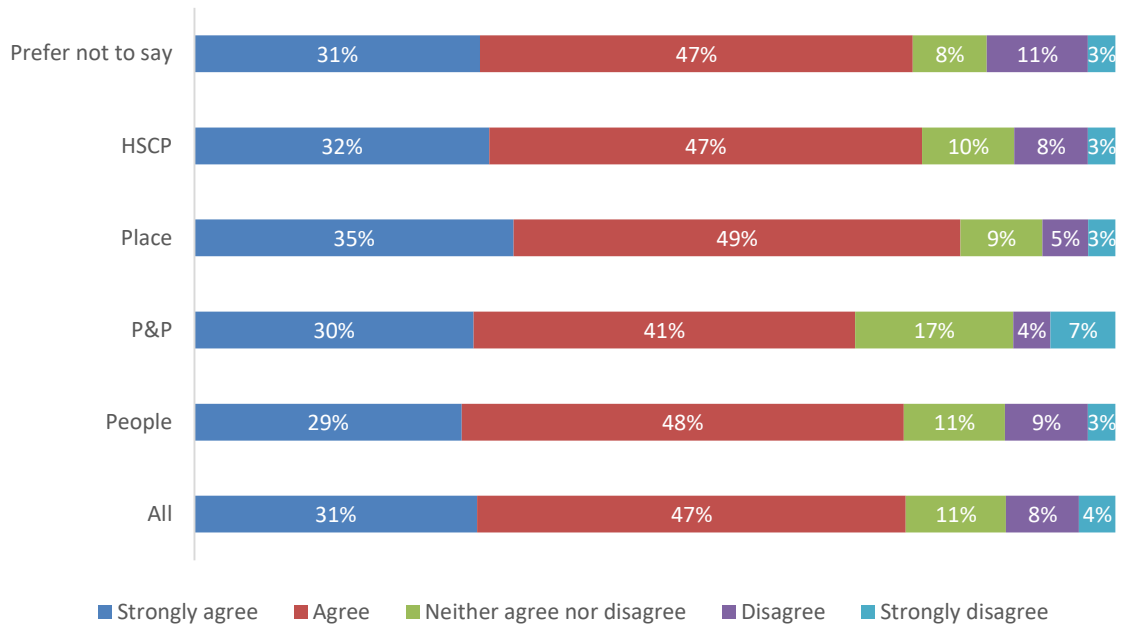
I have time to access L&D opportunities



■ Strongly Agree ■ Agree ■ Neither agree nor disagree ■ Disagree ■ Strongly disagree

1.21 Survey findings at **figure 8** indicate that the majority of employees (63%) are given access to learning and development opportunities, however having time to access these opportunities is challenging, with 46% of employees responding positively. Responses across directorate areas are also largely consistent in responses to these questions.

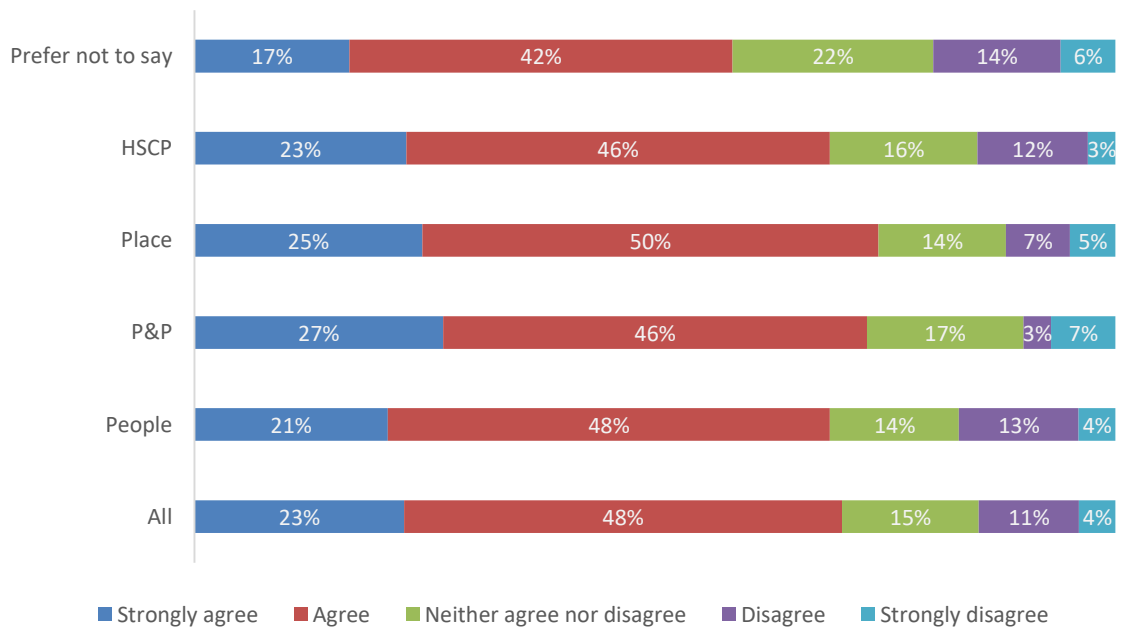
Figure 9: I feel confident in raising issues or dangers where I see them



1.22 Employees, in the majority, are confident in raising issues or dangers where they see them (78%). This question was included to provide a baseline quantitative figure which will be used to support developments in health and safety culture within the organisation.

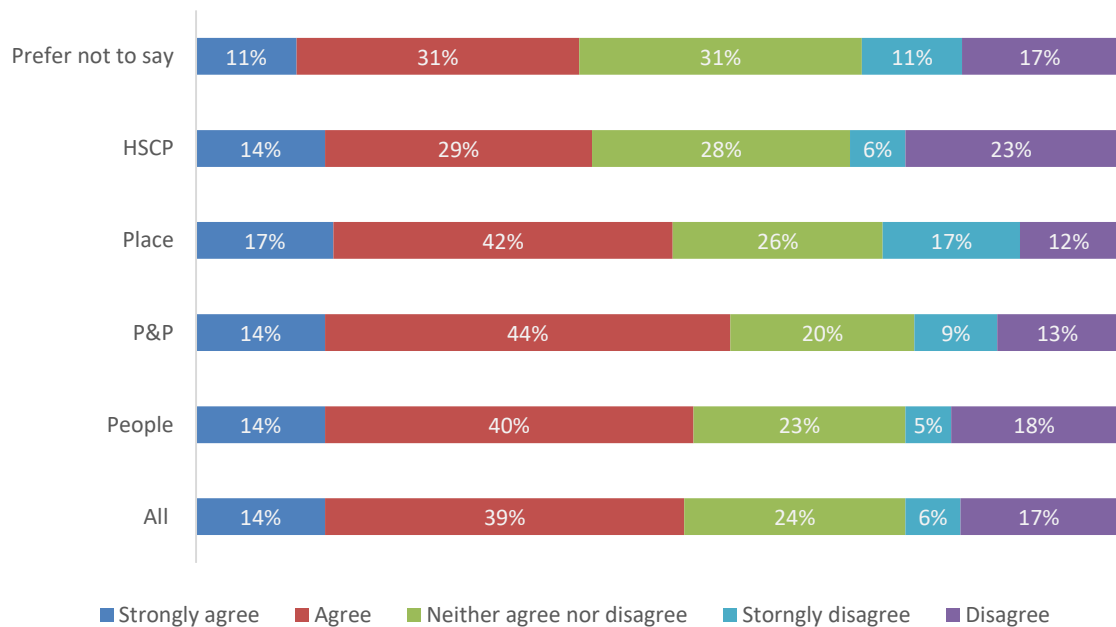
1.23 In terms of directorate responses, the Place directorate are most positive in their response to this question (84%), with P&P being less confident (although still in the majority) with a positive response level of 71%.

Figure 10: I feel safe to voice ideas, or suggest new ways of working



1.24 In the majority, employees responded positively to the question of whether they feel safe to voice ideas, or suggest new ways of working (71%), with relative consistency across all directorate areas.

Figure 11: I receive feedback or acknowledgement on issues raised or highlighted



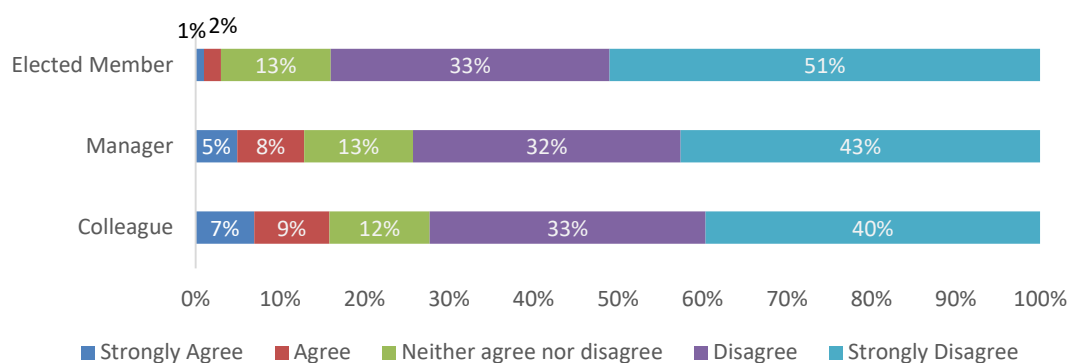
1.25 Just over half of employees (53%) responded positively when asked if they received feedback or acknowledgement on issues raised, with a high level of apathy (e.g. neither agree nor disagree) to this question (24%). In terms of directorate feedback, there are statistical variations, with health and Social Care Partnership staff being less confident in their response when compared to other areas (43% positive response level).

1.26 Where there is general confidence in raising issues (see **figure 9**), combined with less positive responses to receiving feedback, this may point to a need for managers to ‘close the loop’ on any feedback or issues which staff raise. This is also reflected in the free text comments, where a lack of communication with staff is also highlighted (see S2.44).

Bullying & Harassment

- 1.27 The 2023 Council-wide survey asked the same question in relation to bullying and harassment in three different variations covering staff, managers, and Elected Members. The following feedback was received.

Figure 12: I have experienced bullying & harassment from a colleague, manager, or Elected Member



- 1.28 From the feedback received across these questions, a total of 127 respondents had experienced bullying & harassment from a colleague, 98 from a manager, and 24 from an Elected Member (see **figure 13**).

Figure 13: Bullying & harassment as a % of Council Population

Aspect	No.	% of headcount
Colleagues	127	5%
Managers	98	4%
Elected Members	24	1%

- 1.29 Overall, 7% of employees (or 176 respondents) have experienced bullying and harassment from either a colleague, manager or Elected Member (or a combination of either), with the highest proportion experiencing bullying and harassment from a colleague.
- 1.30 Whilst this does not give an accurate figure of *all employees* who have experienced bullying and harassment, it does provide an indicative figure which compares well to past survey results where a similar question has been asked².

² The 2019 Council-wide survey noted that 15% of respondents had experienced bullying or harassment, which was a 3 percentage point drop from the 2018 figure of 18%. Questions relating to bullying and harassment were not included within the 2020 or 2021 survey question set, due to a focus on how the COVID-19 pandemic impacted upon staff.

Flexible Working

1.31 In conjunction with the Scottish social organisation Flexibility Works, the 2023 Council-wide survey asked several questions in relation to flexible working across directorates. The aim being to provide useful feedback ahead of a 2024 assessment of how embedded flexible working is across directorates, and the barriers to further implementing flexible working initiatives.

1.32 This work is being undertaken in recognition of the benefits which flexible working can have not only on the culture of an organisation, but on wider areas such as:

- Employee engagement;
- Productivity;
- Reduced sickness absence;
- Improved mental health and wellbeing; and
- Attraction of quality candidates to the Council.

Figure 14: Do you work flexibly at the moment?

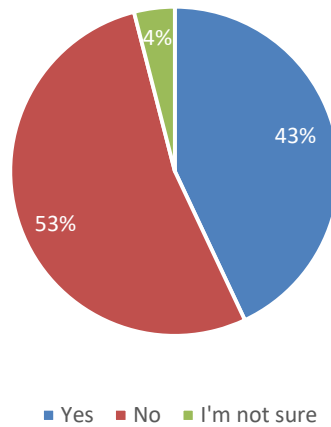
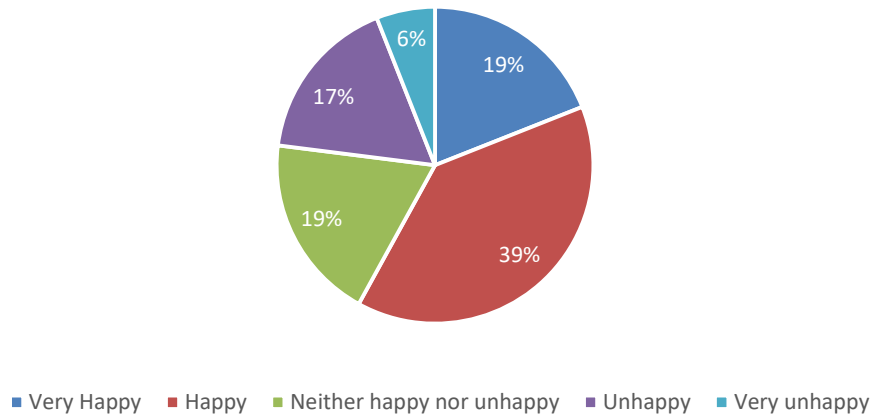


Figure 15: How happy are you with your work life balance?

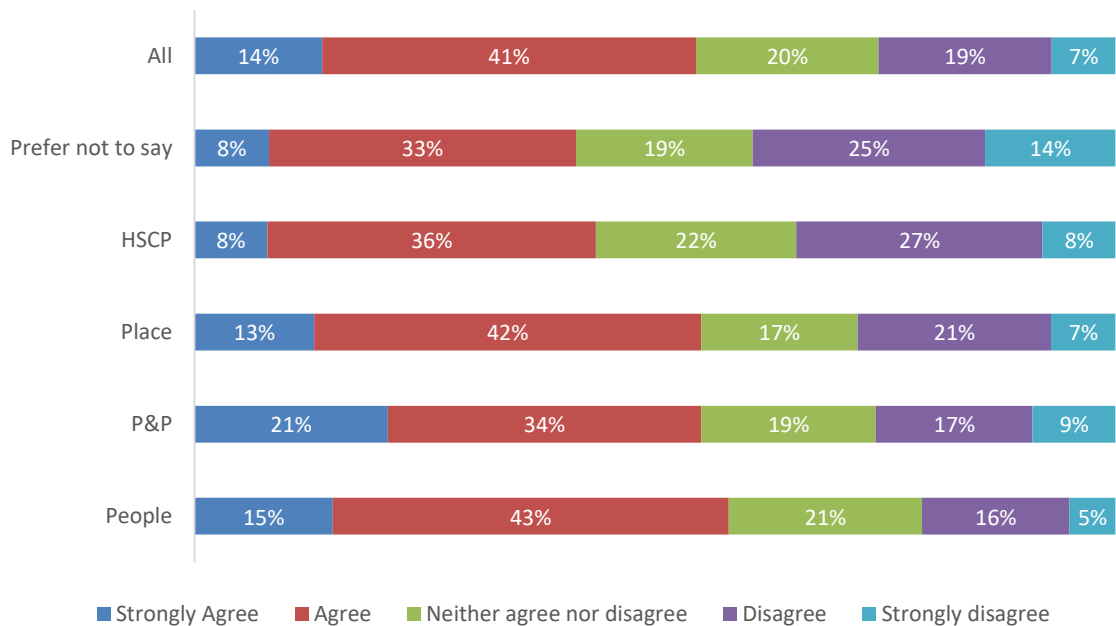


1.33 The majority of staff (or 58%) are either very happy, or happy with their current work life balance, with a relatively similar percentage (53%) of staff working flexibly at the moment. It is expected that as work moves forward with Flexibility Works further insights will become available as to how the Council can address perceived issues, or identify new opportunities, with flexible working.

Communication

1.34 The 2023 Council-wide survey asked employees for their views on communication, covering both team-based and Council-wide communication, visibility of leaders and utilisation of the Constructive Conversations process.

Figure 16: I am kept up to date about what is happening in my team, and round the organisation



1.35 In terms of general communication, 55% of all staff responded positively. There are also variations across directorates with regards to this question, with the HSCP scoring lowest (44% positive response rate), and the People Directorate scoring the highest (58%).

1.36 Overall, responses to this question highlight the need for further exploration of how the Council communicates with its staff members, particularly on a Council-wide basis. This is compounded by the findings with regards to staff having contact with their manager (see **figure 17**). With the majority of staff (69%) responding positively, this may mean that team contact and communication is viewed more favourably to Council-wide communication across directorates.

1.37 However, it must be acknowledged that with regards to contact with their manager, there has been a 3 percentage point drop in positive responses from the COVID-19 wellbeing survey, undertaken in summer 2020.

Figure 17: I feel I have enough contact with my manager / supervisor / chargehand

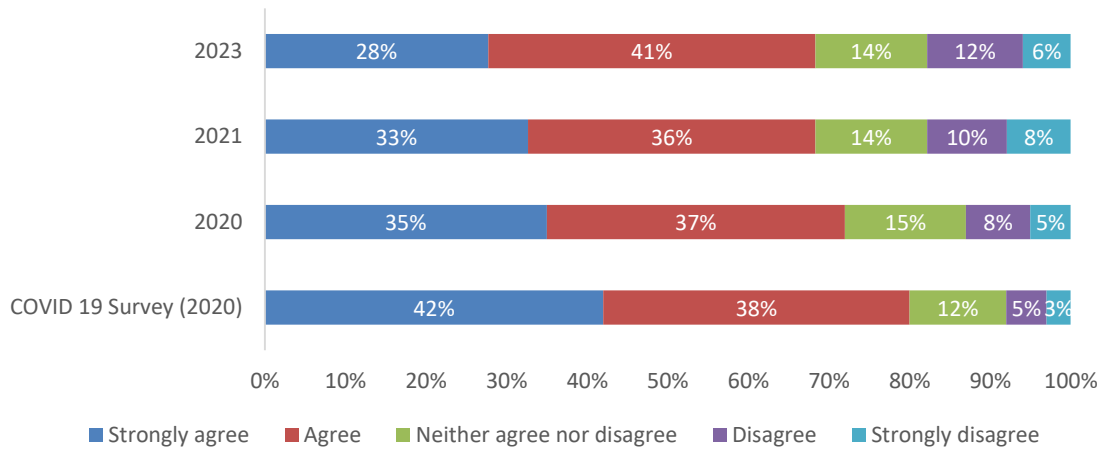
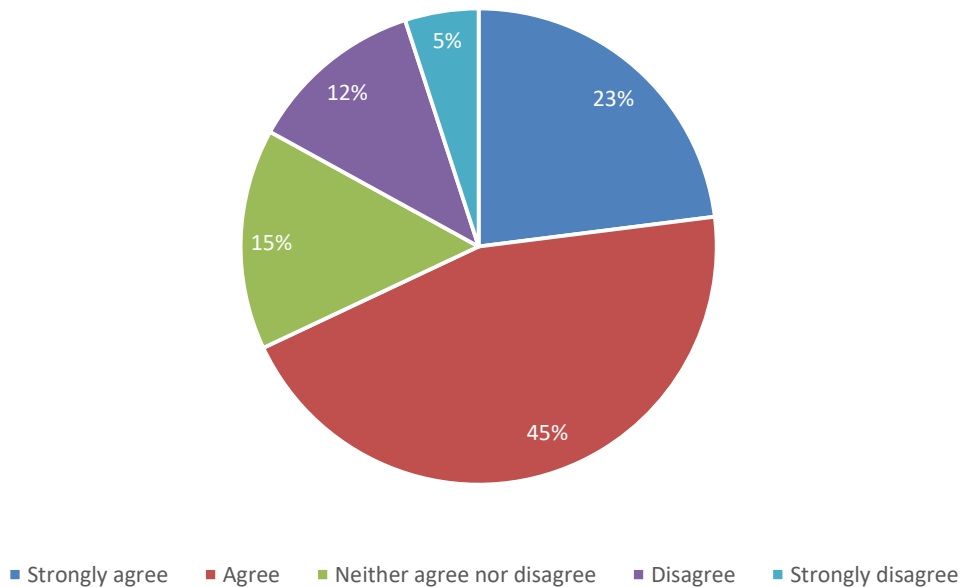
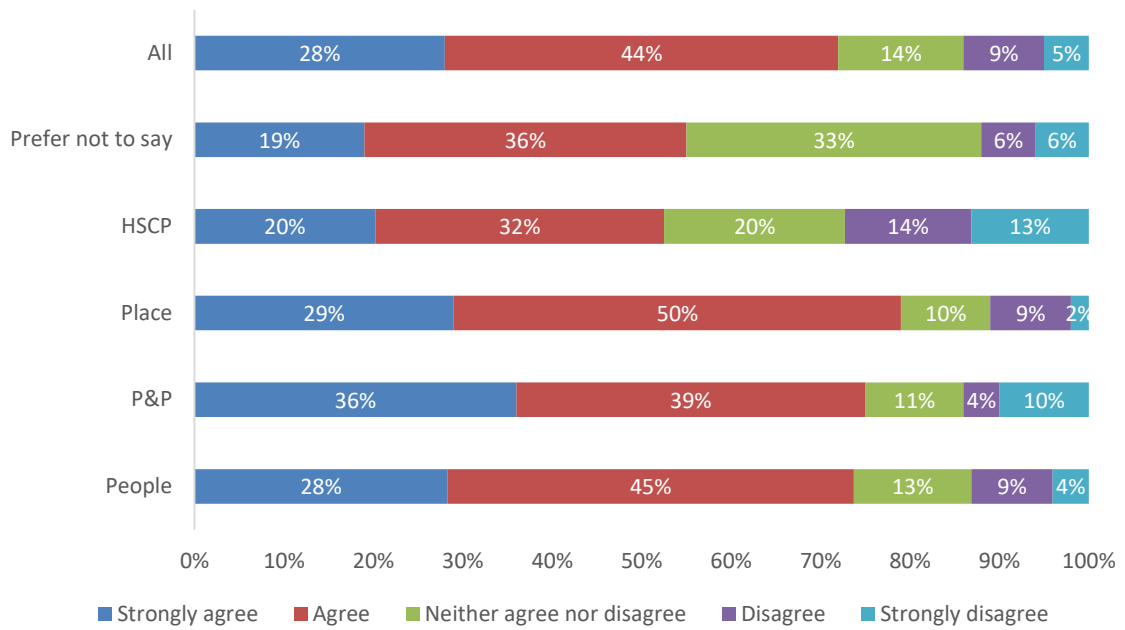


Figure 18: My team communicate well together



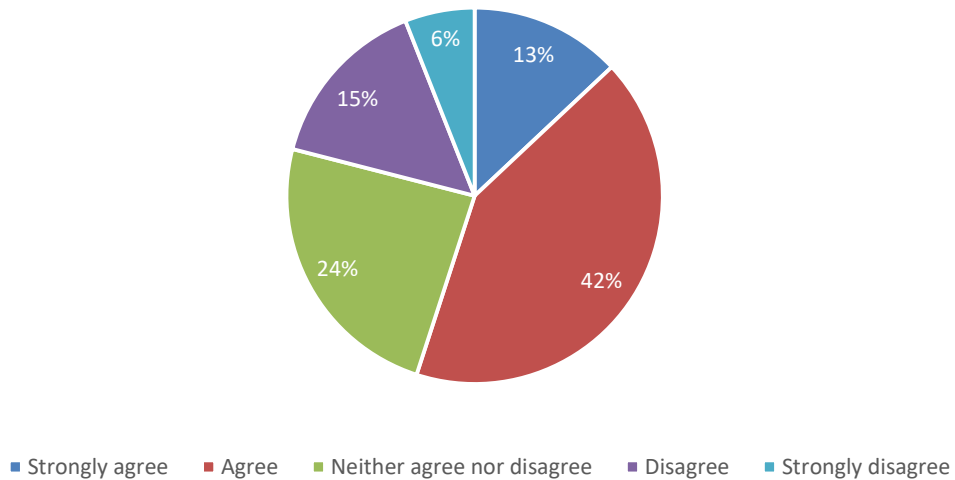
1.38 Aligned to the question focusing on contact with managers, was whether teams communicate well together (see figure 18). Findings show that the majority of staff (68%) agree that their team communicate well together, which sits as complimentary to most staff indicating that they have enough contact with their manager (with good communication being a foundational building block of a positive and inclusive organisational culture).

Figure 19: Leaders in my area are visible, and I know who they are



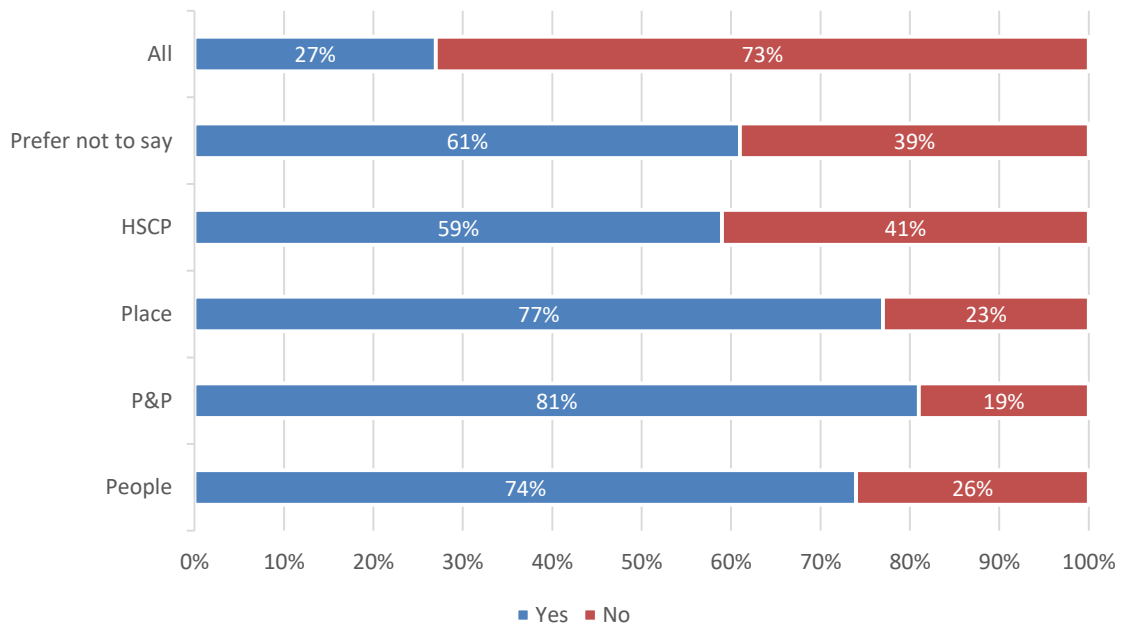
1.39 Overall, 72% of respondents feel that leaders in their area are visible, and they know who they are. There are however variations across Directorates, with the HSCP responding lower on for this question (52%).

Figure 20: I have access to information about what’s happening around the Council at my place of work



1.40 The question of having access to information (at **figure 20**), sits as complimentary to the question outlined at **figure 16** concerning being kept up to date about what is happening in the organisation. Overall, 55% of employees feel they can access information about what’s happening within the organisation (the intention of this question being to highlight how easy, or otherwise, information is to access across all Council workplaces).

Figure 21: My manager has had a Constructive Conversations meeting with me (or my team)

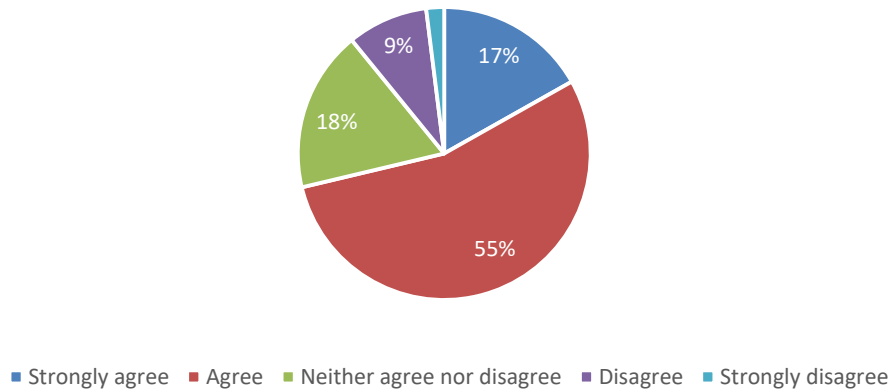


- 1.41 The Constructive Conversations process is the Council’s method of managing staff performance. Launched in 2023, the this process places an emphasis on the regularity and quality of conversations between staff and managers (rather than following a snapshot process at a fixed point in time).
- 1.42 Results from the question presented at **figure 21** show that Council-wide, 74% of employees have had a Constructive Conversations meeting with their manager. However, it must be emphasised that this is only a percentage of *respondents*, rather than a full per headcount figure for the Council.

Health & Wellbeing

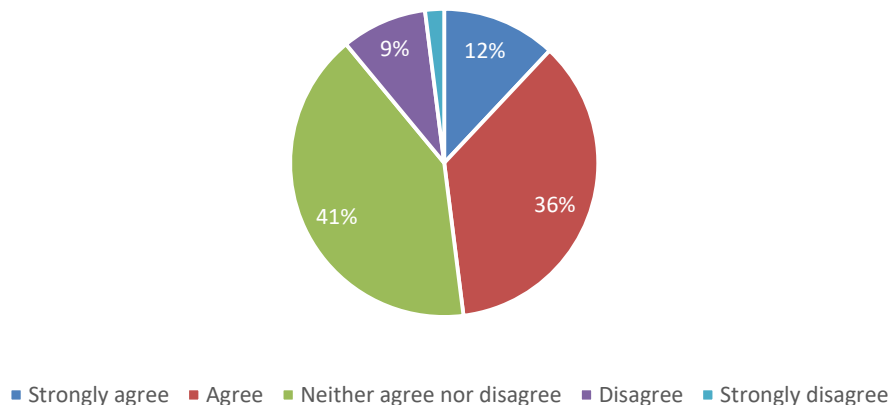
- 1.43 The survey asked a range of questions with regards to health and wellbeing, recognising the importance of having staff who are physically and mentally well as being a core indicator of having a positive organisational culture, and the Council being a good place to work. The results are presented below.

Figure 22: I know where to find support for my health, safety and wellbeing



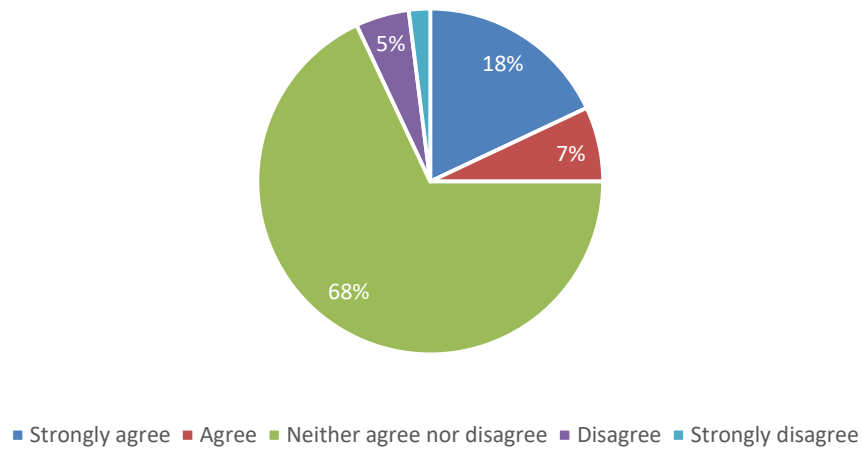
- 1.44 Survey findings indicate that the majority of employees (72%) know where to find support for their health, safety and wellbeing, with no significant statistical variations across Directorate areas. 11% of respondents indicated that they did not know where to find supports. Of interest is that 18% of respondents were apathetic to this question, which may indicate that these employees have yet to have cause to look for supports.

Figure 23: I am able to easily access wellbeing supports once I have found them



- 1.45 Survey findings indicate the minority of employees (48%) have been easily able to access wellbeing supports once they have found them. This may indicate difficulties with either accessing systems, information, or raising referrals via line management.

Figure 24: The wellbeing supports I have accessed have been useful



1.46 Unlike other survey questions, when asked whether wellbeing supports have been useful, a majority portion of respondents (68%) were apathetic in their response. This may indicate that a significant proportion of respondents have not had cause to access the variety of wellbeing supports currently offered by the Council, or that further work is required to promote what is currently available.

Figure 25: How would you rate you mental wellbeing right now?

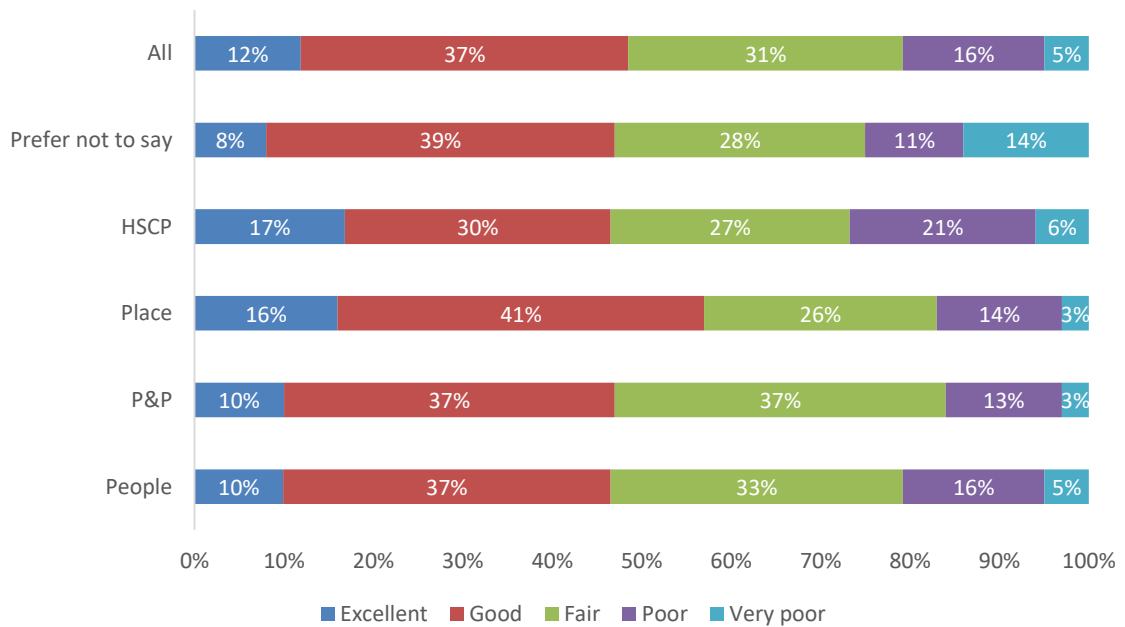
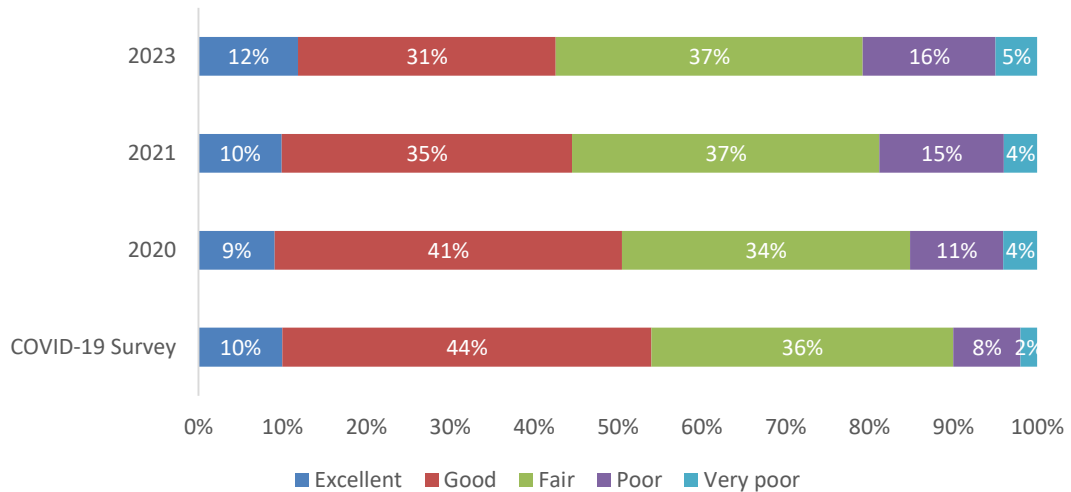


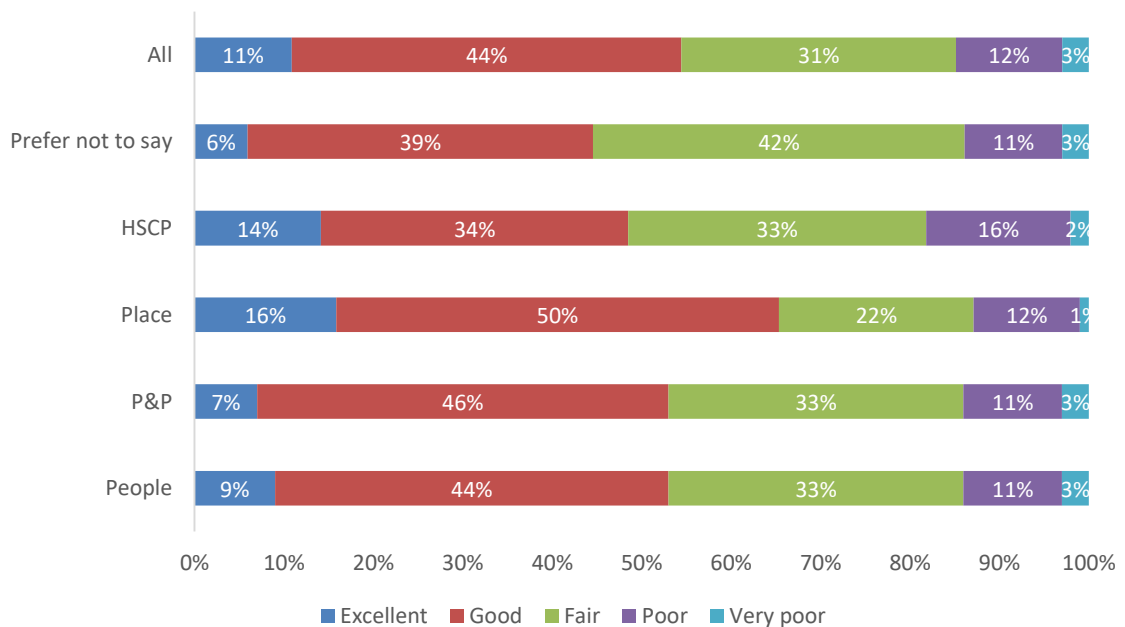
Figure 26: Rating of mental health (year on year trends)



1.47 Overall, 52% of employees who responded to the survey rated their mental health as from 'fair' to 'very poor'. (see figure 25). Results are consistent in the main across directorates, with the Place Directorate having the most positive responses, with 57% of staff rating their mental health as 'excellent' or 'good'.

1.48 When reviewing the mental health of employees on an annual basis, as per figure 26, there has been a 5 percentage point drop in employees rating their mental health as either 'excellent' or 'good'. As a consequence, those rating their mental health as either 'poor' or 'very poor' has increased by 11 percentage points on a Council-wide basis.

Figure 27: How would you rate your physical wellbeing right now?

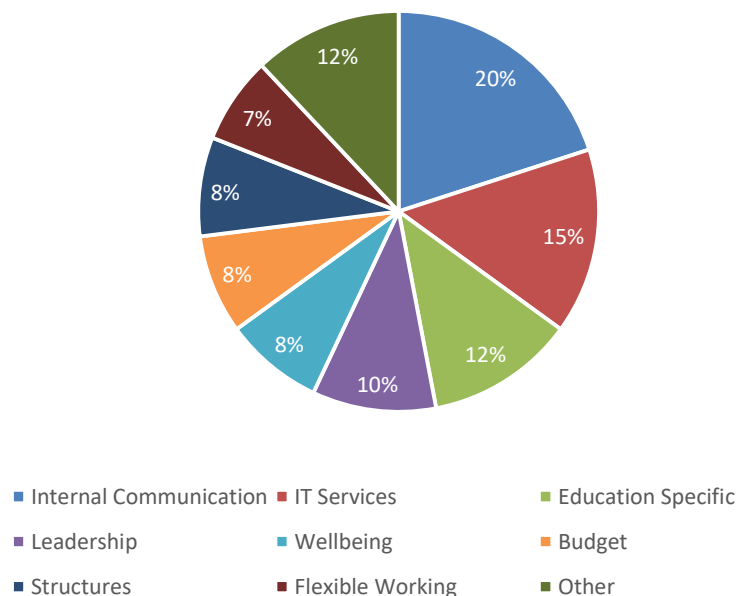


- 1.49 55% of respondents have rated their physical wellbeing as being ‘excellent’ or ‘good’ (see **figure 27**). As with the mental health indicator, the Place Directorate has relatively higher positive responses to this question, with 66% of employees rating their physical health as ‘excellent’ or ‘good’.
- 1.50 Overall, responses to survey questions around both mental and physical wellbeing show the importance of both continuing, and developing wellbeing supports for staff. As such, the continuation of the Healthy Working Lives group will be critical in developing new supports which not only seek to address issues where they become apparent but take a preventative approach which will ensure the positive physical and mental wellbeing of staff across all directorates.

Other Comments

- 1.51 The survey also gave employees the opportunity to add any further written comments regarding their wellbeing, their work, or communication. These were collected over two questions, namely ‘Do you have any suggestions which would improve working in your team or the wider Council’, and ‘Do you have any further comments’.
- 1.52 All free text responses to the questions were read, and themed accordingly. A total of 436 valid free comments were received across all Directorate areas³. **Figure 28** below shows the prevalence of survey themes in the free text responses received.

Figure 28: Free text responses by theme



³ Comments were deemed ‘invalid’ where they included no substantive content, e.g. ‘n/a’, ‘No’, or ‘no comment’.

- 1.53 20% of comments related to **internal communications**, with a focus on the need for further communication with staff, more regular consultation, and further visibility of leaders and managers (on a Council-wide basis).
- 1.54 Comments may point to a need to develop Council-wide communication as a means to ensuring that staff are listened to, and valued for the work they undertake. In addition, comments reflect a perception that a lack of communication and engagement has contributed to a decrease in overall staff wellbeing, particularly with regards to mental health.
- 1.55 The regularity of communication was also raised, with staff commenting on the need for regular, more formal conversation with leadership from across the Council, so as to better understand decisions, and increase overall staff morale.
- 1.56 Comments regarding **provision of IT** (15% of overall comments) focussed on perceived challenges with accessing systems, and wider system down-time. Staff commented that ongoing challenges were impacting on productivity, and the ability to be effective when hybrid working (such as working from home, or within communities).
- 1.57 In addition, comments were received regarding the challenges of addressing IT issues, with a lack of communication, and difficulty of receiving a response to queries being a regular theme across comments received.
- 1.58 Comments around **leadership** (10% of overall comments) focussed on the need for more regular contact, meetings, and updates from management, and are reflected across all Council directorates. In particular, comments were received which related to the increased pace of change, and ongoing restructures impacting on staff morale (particularly where there is an associated lack of communication and update).
- 1.59 Respondents also commented critically on the availability of management, with a lack of regular meetings, or supervision being a contributing factor to uncertainty within roles, and a reduction in wellbeing.
- 1.60 General comments on **staff wellbeing** focussed on a perceived fall in staff morale within the Council, which may be reflective of feedback received with regards to being 'valued for the work I undertake' (see **figure 6** of this report).
- 1.61 Further comments with regards to wellbeing demonstrate positivity towards team based relations and working, however this is contrasted by comments on wider Council communication, lack of resources, and financial constraint being contributory to feelings of confusion, or low morale.

What Next?

- 2.0 Whilst there is some variation in employment engagement across directorates, survey data indicates that overall engagement is more likely to be linked to an employee’s views on specific aspects of their work (e.g. equipment or communication), rather than the directorate or team they work in, their current working environment or their length of employment with the Council.
- 2.1 Specifically, survey analysis has identified the following key drivers of engagement, and as such provides an insight into possible areas where performance should be maintained, with areas where potential performance improvement should be considered.

Figure 29: Drivers of engagement

Areas correlating with positive employee engagement (potential areas to maintain performance)
I feel that I am treated with dignity and respect within my team
I feel as sense of achievement for the work I do
I feel confident in raising issues or dangers where I see them
Areas correlating to less positive engagement (potential improvement areas)
I feel valued for the work I do
I have the tools I need to do my job effectively
I receive feedback or acknowledgement on issues raised or highlighted
I am kept up to date about what is happening in my team, and around the organisation

- 2.2 Moving forward it is essential that these results are discussed and communicated across a range of channels, both to address perceived challenges and acknowledge the input and time which staff have given to creating this important feedback.
- 2.3 As such, a series of events and forums will be taken forward including:
- Staff / Trade Union Staff Survey Forum (to analyse and make recommendations for development)
 - SLF / TLF⁴ sessions to feedback results and seek input from management
 - Internal communication of results across various channels including but not limited to Intranet and CONNECTED magazine articles, toolbox talk feedback, and video based feedback.

⁴ SLF – Senior Leadership Forum / TLF – Team Leaders Forum

ANNEX A: FULL TABULAR RESULTS

MY WORK

	AGREE	DISAGREE	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I am given the opportunity to make decisions relating to my role	66%	18%	20%	46%	16%	13%	5%
I feel valued for the work I do	55%	28%	18%	37%	17%	19%	9%
I feel a sense of achievement for the work I do	73%	13%	26%	47%	14%	9%	4%
I feel that I am treated with dignity and respect within my team	75%	12%	31%	44%	14%	8%	4%
I am clear about how I contribute to the organisation's goals	66%	10%	19%	47%	23%	8%	2%
I have all the tools I need to do my job effectively	43%	39%	10%	33%	18%	25%	14%
I am given access to learning and development opportunities within my role	63%	18%	19%	44%	20%	12%	6%
I am given the time to access learning and development opportunities	46%	31%	12%	34%	23%	22%	9%
I feel confident in raising issues or dangers where I see them	78%	12%	31%	47%	11%	8%	4%
I feel safe to voice ideas, or suggest new ways of working	71%	15%	23%	48%	15%	11%	4%
I receive feedback or acknowledgement on issues raised or highlighted	53%	23%	14%	39%	24%	17%	6%
I have experienced bullying and harassment from a colleague	16%	73%	7%	9%	12%	33%	40%
I have experienced bullying and harassment from a manager	13%	75%	5%	8%	13%	32%	43%
I have experienced bullying and harassment from an Elected Member	3%	84%	1%	2%	13%	33%	51%

FLEXIBLE WORKING

Flexible working is when you have some choice and control over when, where and how much you work, to help you balance your work and home life. There are lots of different types of flexible working e.g. hybrid working, part time hours and being able to change your start and finish times. For frontline workers, flexible working also includes things like being able to swap shifts and having an input to rotas

	YES	NO	Not sure
Based on this description, do you work flexibly at the moment?	43%	53%	4%

	Very happy	Happy	Neither happy nor unhappy	Unhappy	Very unhappy
How happy are you with your current work life balance?	19%	39%	19%	17%	6%

COMMUNICATION

	AGREE	DISAGREE	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I am kept up to date with what is happening in my team, and around the organisation	55%	26%	14%	41%	20%	19%	7%
I have enough contact with my manager / supervisor / chargehand	69%	18%	28%	41%	14%	12%	6%
My team communicate well together	68%	17%	23%	45%	15%	12%	5%
Leaders in my area are visible, and I know who they are	72%	14%	28%	44%	14%	9%	5%
I have access to information about what's happening around the Council at my place of work	55%	21%	13%	42%	24%	15%	6%

COMMUNICATION (CONT)

	Yes	No
My manager has had a Constructive Conversation meeting with me (or my team)	73%	27%

	Yes	No
Are you familiar with the Council's vision and values?	73%	27%

HEALTH & WELLBEING

	AGREE	DISAGREE	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I know where to find support for my health, safety, and wellbeing	72%	11%	17%	55%	18%	9%	2%
I am able to easily access wellbeing supports once I have found them	48%	11%	12%	36%	41%	9%	2%
The wellbeing support I have accessed have been useful	25%	7%	7%	18%	68%	5%	2%

	Excellent	Good	Fair	Poor	Very poor
How would you rate your mental health right now?	12%	37%	31%	16%	5%
How would you rate your physical wellbeing right now?	11%	44%	31%	12%	3%

CLACKMANNANSHIRE COUNCIL

Report to: Audit and Scrutiny Committee

Date of Meeting: 18th April 2024

Subject: Health & Safety Strategy and Wellbeing Strategy Updates

Report by: Health & Safety Manager

1.0 Purpose

- 1.1. This report provide progress updates on the Health & Safety Strategy, agreed by Council on 6th October 2022, and the Wellbeing Strategy, agreed by Council on 1st December 2022.

2.0 Recommendations

- 2.1. Committee is asked to note the report, commenting and challenging as appropriate.

3.0 Considerations

- 3.1. The Council has a legal duty to ensure the health and safety of its employees and anyone who comes into contact with the services we provide as well as ensuring no person comes to harm. This helps prevent loss or damage to property, disruption due to incidents and claims being made against the Council. Increasingly this includes looking after employee's physical and mental wellbeing as well as more traditional elements. This is reflected in the two strategies developed.
- 3.2. The Health & Safety Team have lead and co-ordinated efforts to implement both strategies.
- 3.3. Meetings were held with all Senior Managers across the Council in January 2023 to ensure that they were fully aware of both strategies and were taking actions to support implementation within their respective area.
- 3.4. Regular reports are provided to Senior Leadership Group on key areas.
- 3.5. Overall, significant progress has been made towards the implementation of both strategies. There has been some delays to progress for the Wellbeing Strategy as a result of several of the Healthy Working Lives Group leaving over the last 18 months. Work is underway to revitalise the group to ensure that this work can continue.
- 3.6. A key challenge in continuing progress with the strategies is ensuring that sufficient resources are available to support the work required. The capacity of management to engage in the actions outlined in both strategies is a key risk in being able to fully deliver the expected outcomes.

4.0 Sustainability Implications

4.1. None Noted.

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** (Please double click on the check box)

Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all

Our families; children and young people will have the best possible start in life

Women and girls will be confident and aspirational, and achieve their full potential

Our communities will be resilient and empowered so that they can thrive and flourish

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

Health & Safety Policy

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: Health & Safety Strategy progress
- Appendix 2: Wellbeing Strategy progress

11.0 Background Papers

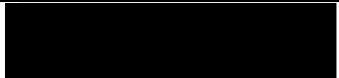
11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

Yes (please list the documents below) No

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Seonaid Scott	Health & Safety Manager	x 2174

Approved by

NAME	DESIGNATION	SIGNATURE
Stuart Crickmar	Strategic Director Partnerships and Performance	

✔ Progress in line with expectation

⚠ Some progress but not as much as expected.

● No/Minimal progress

Theme 1: Leadership & Management					
Objective	KPI	Success indicator	Owner	Status	Commentary
1.1 Maintaining and strengthening an effective communication system through the Council's management structure	Record of corporate and service health and safety meetings, publication of health and safety briefings. Number of Toolbox talks delivered at service levels.	Meetings are being held and accurate minutes are kept and published. Toolbox talks are recorded and uptake reported through the SLG and published on the Council intranet.	Senior Managers /H&S Team	⚠ ⚠	14 meetings recorded between April – October 2023 695 toolbox talks have been undertaken, 553 between October 2022-March 2023 and 142 between April – October 2023.
1.2 Demonstrating that Health and Safety management is integrated in all business decisions.	Inclusion of health and safety consideration as part of the decision making process.	Documented evidence that health and safety is being considered e.g. where there is a planned reduction in staff have H&S considerations been considered and risks identified.	SLG / Senior Managers	⚠	Council Committee template proposed change to be considered by SLG
1.3 Maintaining regular reviews of health and safety performance.	Health and safety audit programme in place including thematic audits of service areas.	Successful completion of audit programme. Two thematic audits per year and publication of all completed health and safety management audit findings.	H&S Team	✔	All audits completed over 2022/23. Risk profiling ongoing to inform future Audit programme
1.4 Ensuring appropriate resources are provided for the effective management of health and safety.	Inclusion of appropriate health and safety considerations as part of the budget setting process.	Evidence of resource allocation for compliance with health and safety legislation.	SLG	-	Annual only – expected March 2024.
1.5 Ensuring all staff receive appropriate Health and Safety induction and training.	All new staff complete the health and safety induction programme.	Records of completed training are up to date and reported to management.	Line Mangers / H&S Team	⚠	6 completed in HR&WD and HSCP as trial. Full roll out in line with wider Corporate Induction programme.
1.6 Ensuring strategic health and safety aims are communicated and embedded throughout the Council.	Strategy communicated across Council on approval.	Strategy is communicated to all staff via health and safety briefings. Engage with staff during premises and site visits to ensure cascaded, understood and is being effectively implemented.	SLG/ Line managers /H&S Team	✔	Article in Connected. Meetings held with all Senior Managers.
1.7 Develop communications plan in conjunction with Communications Team to ensure ongoing delivery of key health and safety messages	No of Comms campaigns delivered	Health and Safety messages communicated to all levels of the organisation using the most effective channels	Comms Team / H&S Team	⚠	H&S are working with Comms colleagues in the development of a plan which is expected to be finalised in April 2024.

✔ Progress in line with expectation

⚠ Some progress but not as much as expected.

● No/Minimal progress

Theme 2: Competence					
Objective	KPI	Success indicator	Owner	Status	Commentary
2.1 Ensuring we have competent staff who ensure all policies and procedures are up to date and reflect best practice.	Development of health and safety competency matrix for each job role.	Progressive implementation of competency matrix. Up to date policies, procedures and risk assessments in place.	H&S Team / Senior Managers	- ✔	Expected early 2024 H&S Policies are regularly updated in line with our policy group schedule. Risk assessment are routinely updated and now recorded on Evotix.
2.2 Making sure internal policies, procedures, guidance and advice are understood and easily accessible to staff and, where applicable, visitors and contractors.	Development and deployment of learning and development tools and information sources suited to the needs of all levels of staff within the Council. Clear improvement in the results of the Behavioural Safety Culture Study.	Increased understanding and wide spread use of the learning and information resources provided. Regular reporting of toolbox talks and uptake of mandatory core H&S training to SLG. This will include the use of Clacks Academy and bespoke tools for hard to reach staff. Improvements in results of Behavioural Safety Culture Study, completed biennially. Aim to reach Proactive level by 2024.	H&S Team / Line Managers	⚠ -	Regular reporting is now in place. Mandatory training uptake only 25% The Behavioural Safety Culture Study is undertaken on a biennial basis and will be undertaken again with calendar year 2024.
2.3 Ensuring staff are aware of how to they can access competent and professional advice.	Level of contact established between staff and the Health and Safety Team.	Increased contact with Health and Safety Team from staff at all levels within the Council. Promotional Campaign of who the H&S Team are, their role and how they can be contacted.	H&S Team	✔ ✔	H&S Officers support and engage with managers across all portfolios. Article appearing in Spring Connected magazine.
2.4 Using appropriate risk management/ risk assessment techniques across all service areas.	Level of use of the health and safety risk management tools and forms provided by the Health & Safety Team	Increase in the number of appropriate forms used and submitted to the H&S Team. Increased use of technological solutions such as Evotix Assure.	Senior Managers	✔	Risk Assessments, COSHH Assessments, and DSE Assessments are being recorded on Evotix
2.5 Ensuring comprehensive training programs and opportunities are available to staff to ensure they develop the right skills and knowledge.	Number of appropriate Health & Safety courses available to staff.	Increased take up of health and safety training opportunities in all formats i.e. e-learning, classroom based learning and blended learning formats.	H&S Team / Line Managers	⚠	HAVS, Clinical Waste, Ladder, Fire Warden, First Aid, Premises Duty Holder, Mental Health and IOSH Managing Safely provided.

✔ Progress in line with expectation

⚠ Some progress but not as much as expected.

● No/Minimal progress

Theme 3: Risk Management					
Objective	KPI	Success indicator	Owner	Status	Commentary
3.1 Systematically identifying all hazards across the Council.	Risk assessment programme developed and in place.	Year on year increase in the number of risk assessments documented with their findings implemented appropriately.	Line Managers	⚠	A total of 1267 Risk assessment have been undertaken, 553 have been confirmed and are in place with 714 in the process of being reviewed.
3.2 Ensuring that health and safety is always an integral part of the planning and review processes at Council and directorate/service area levels.	Documented evidence of the inclusion of relevant health and safety matters e.g. Bipartite minutes, TU Management, Executive H&S, Operational H&S, Budget discussions	Evidence of the positive impact health and safety considerations have made during the processes.	SLG	✔	H&S is a standing item on all Bipartite, TU/Management meetings. The Council also has in place the Executive Health and Safety Forum and the Operational Health and Safety Forum. Work ongoing to ensure relevant attendance at these including HSCP.
3.3 Ensuring the effective implementation of the Council's fire safety policy in all premises	Implementation of actions from fire risk assessment programme for all Council owned buildings.	Fire risk assessment findings/recommendations effectively implemented. Escalation process in place for any continued non-compliance	Premises Duty Holders / Property Team / H&S Team	⚠	24 actions recorded – 11 completed and 2 in progress. 11 not started.
3.4 Developing a suite of lagging / leading health and safety performance indicators.	Suite of indicators developed.	Staged introduction of indicators based on service area maturity levels.	H&S Team / Senior Managers	-	Expected September 2024
3.5 Ensuring a robust Health and Safety Audit programme is in place	Areas audited according to audit plan.	Year on year increase in audit and inspection activity carried out by managers. Year on year improvement in audit outcomes measured with the audit finding implemented by the agreed time scale.	Line Managers H&S Team / Line Managers	⚠	1 Audit completed. Risk profiling in progress which is the first step in setting up the self-audit programme.
3.6 Improving reporting, recording and investigation of accidents, incidents and near misses.	All incidents are reported timeously and investigated.	Levels of reporting & investigation increased. No adverse outcomes from enforcement agency follow-up.	Senior Managers	⚠	Incidents reported – 1634. Within 5 days – 1525 (93.3%). Investigated – 1151 (70.4%). No adverse outcomes from HSE follow-up.

✔ Progress in line with expectation

⚠ Some progress but not as much as expected.

● No/Minimal progress

Theme 4: Health & Wellbeing					
Objective	KPI	Success indicator	Owner	Status	Commentary
4.1 Promoting and encouraging participation and support initiatives that enhance occupational health and wellbeing for staff.	Greater awareness amongst staff of occupational health and wellbeing issues.	Reduction in reporting of occupational health and wellbeing issues. Increased uptake in wellbeing initiatives.	Senior Managers	-	Expected early 2024 through information from OH and HWL group activities.
4.2 Implementing the measures outlined in the Mental Health & Wellbeing Strategy.	Increased competence in supporting mental ill-health related issues	Increase in managers and staff trained to support mental ill health.	H&S Team	⚠	202/297 managers trained.
4.3 Promoting and maintaining a Healthy Working Lives programme	Activities and promotions aimed at the health and wellbeing of staff	Increase in employees taking up activities to support their health and wellbeing.	H&S Team	⚠	Weekly walking sessions continue with low numbers. Mental Health Day promotion. Smoking cessation clinics offered at Kilncraigs and Kelliebank. 6 Alcohol Awareness sessions offered to all staff. Work ongoing to re-establish the HWL group following several members leaving the Council.

✔ Progress in line with expectation

⚠ Some progress but not as much as expected.

● No/Minimal progress

Theme 5: Collaborative and Partnership Working					
Objective	KPI	Success indicator	Owner	Status	Commentary
5.1 Developing initiatives to encourage collaborative/partnership working with key stakeholders, partners and union colleagues.	Progress made with joint working between employee representatives, management and the Health and Safety team.	Effective joint inspections, task based risk assessments and health and safety initiatives. Number and frequency to be agreed.	TUs / H&S Team	-	Expected May 2024. Gaps in capacity from all groups have prevented earlier implementation. Continuing discussions about operational issues.
5.2 Ensuring appropriate and effective communication channels exist for the dissemination of all health and safety information.	Increased take up of available health and safety resources.	Greater health and safety awareness throughout the workforce, evidenced through health and safety management audits, risk assessment reviews and training outcomes. Improved performance in Behavioural Safety Culture Study.	H&S Team / Comms Team	-	The Behavioural Safety Culture Study is undertaken on a biennial basis and will be undertaken again with calendar year 2024..
5.3 Developing occupational health and safety system in accordance with HSE H&S management system (HSG65) principles.	Quarterly update reports and annual meetings with managers.	Increased awareness and ownership of safety system evidenced, evidenced through health and safety management audits, risk assessment reviews etc.	H&S Team / Strategic Directors / Senior Managers	-	Expected early 2024 now that routine tasks being undertaken on Evotix.
5.4 Identify, develop, implement and embed technological solutions to improve compliance monitoring and reporting arrangements	Solutions reduce burden of compliance monitoring.	Evidence of improved compliance recorded through systems such as Evotix.	H&S Team	✔	Progress on Risk Assessments, COSHH assessments, DSE self-assessments now able to be monitored on Evotix. Others to follow.
5.5 Maintaining effective and efficient management and control of contractors within our premises and on our work sites.	All contractors engaged by the Council have been subject to a health and safety management system /competency assessment evaluation.	All contractor HS documentation evaluated prior to the commencement of work and the results published on Evotix. Effective co-operation and consultation maintain with contractors regarding Council expectations.	Senior Managers	-	Expected late 2024. Some safeguards already in place through Procurement processes.

✔ Progress in line with expectation

⚠ Some progress but not as much as expected.

● No/Minimal progress

Objective 1: Promote and improve positive mental health and wellbeing for all employees

Priorities	Actions	Indicators of Success	Owner	Status	Commentary
1.1 Improve employees awareness of mental health and wellbeing	Programme of mental health awareness training in place for managers and staff	<ul style="list-style-type: none"> Number of staff attending training 	H&S team / Senior Manager	✔	202 out of 297 managers trained. Employee programme commencing April 2024
1.2 Promote and support good lifestyle choices, and support employees to better manage their psychological wellbeing and build resilience	Continue to develop and promote good lifestyle choices activities through the Healthy Working Lives group.	<ul style="list-style-type: none"> Number of activities held, and staff engagement in activities. 	Healthy Working Lives Group.	●	A number of key personnel on the HWL group have left – action being taken to revitalise the group. Smoking cessation clinics, alcohol awareness training introduced and existing supports still available and promoted.
1.3 Ensure health promotion and health checks are in place to support employees stay healthy and identify early signs of serious health issues.	Continue to offer health promotion activities and routine health checks for employees across a variety of Council sites.	<ul style="list-style-type: none"> Number of staff engaging in routine health checks. 	Healthy Working Lives Group	⚠	Health checks are available to staff through NHS. Uptake is low and work will be progressed to raise awareness in order to increase uptake.
1.4 Promote and support employees' financial wellbeing	Offer opportunities to employees to become more aware of, and better manage, their finances.	<ul style="list-style-type: none"> Number of opportunities and programmes offered. Number of staff accessing opportunities 	Healthy Working Lives Group	⚠	Regular pension/AVCs webinars are available for staff. In addition preparing for retirement course are offered across the Council. Online support through staff benefits and employee assistance portals to help staff manage their money.

✔ Progress in line with expectation

⚠ Some progress but not as much as expected.

● No/Minimal progress

Objective 2: Promote an open and supportive leadership culture where mental health and wellbeing issues can be raised and dealt with effectively.

Priorities	Actions	Indicators of Success	Owner	Status	Commentary
2.1 Ensuring managers have the skills to support an open leadership culture	Continue to ensure that suitable training is provided for managers at all levels to change the leadership culture.	<ul style="list-style-type: none"> Numbers trained Improved outcomes in Staff Survey. 	SLG & HR&WD	⚠	Ongoing leadership development opportunities. Staff survey results declined (see separate report).
2.2 Ensuring opportunities are created where mental health and wellbeing can be discussed.	Revamp of PRD/121 process to ensure wellbeing covered as part of these discussions.	<ul style="list-style-type: none"> Revised PRD/121 process developed and implemented. 	SLG & HR&WD	✔	Constructive Conversations launched May 2023.

Objective 3: Ensure effective and consistent wellbeing communication to help identify and tackle organisational issues that negatively affect mental health and wellbeing within teams.

3.1 Improve wellbeing Communication	Develop and implement a clear wellbeing communication plan, including a more interactive staff wellbeing hub and opportunities to engage hard to reach groups and those working from home.	<ul style="list-style-type: none"> Wellbeing communication plan in place and actions completed. 	H&S and Communications Teams	●	Plan to be developed in conjunction with plan for H&S strategy.
3.2 Enhance Wellbeing Engagement	Collect feedback from staff about wellbeing activities and act on this.	<ul style="list-style-type: none"> Improved results in staff wellbeing questions within staff survey 	Healthy Working Lives Group / HR&WD	●	Results in the 2023 staff survey show that mental and physical wellbeing has decreased since 2021

✔ Progress in line with expectation

⚠ Some progress but not as much as expected.

● No/Minimal progress

Objective 4: Adopt and implement a more proactive approach to managing work related stress.					
Priorities	Actions	Indicators of Success	Owner	Status	Commentary
4.1 Ensuring sources of work related stress are identified; stress risk assessments carried out and outcomes of risk assessments are acted upon.	Carry out team based stress risk assessments to identify the likely sources of stress and ensure suitable control measures are put in place, and regularly reviewed and updated	<ul style="list-style-type: none"> Number of stress risk assessments and actions completed 	H&S Team. Senior & Line managers, Team leaders.	⚠	1 team risk assessment carried out and action plan developed. Tool being developed on Evotix to support further roll out.
4.2 Manage organisational and staff changes in a manner that does not lead to stress	Communicate and promote the Council's Change Protocol to all managers and team leaders, and ensure it is followed.	<ul style="list-style-type: none"> Increased understanding and compliance with the change protocol. 	SLG / HR & WD	✔	Ongoing engagement with services as they seek to restructure.
Objective 5: Provide employees experiencing mental health and wellbeing problems with access to professional assistance and support					
5.1 Provide occupational health support, employee assistance programme and other relevant support	Increase awareness and understanding of the benefits of the wide range of supports available to staff.	<ul style="list-style-type: none"> Increased uptake in programmes we can monitor Staff survey results indicate better awareness of support. 	Healthy Working Lives Group	✔	969 OH appointments and 67 EAP contacts April – Dec 2023. Staff survey shows 72% of employees know how to access support.
Objective 6: Reduce barriers to employment and support employees who have experienced, or are experiencing, mental health and wellbeing problems/issues.					
6.1 Put in place supportive arrangements and promote good rehabilitation practices	Ensure relevant HR policies and procedures are in place and used appropriately by managers.	<ul style="list-style-type: none"> Number of employees who have, or experiencing mental health, kept in work. 	HR & WD / Line Managers.	✔	Maximising Attendance Policy & Procedure reviewed June 2023.

Report to: Audit & Scrutiny Committee

Date of Meeting: 18 April 2024

Subject: External Quality Assessment of Internal Audit

Report by: Internal Audit Manager

1.0 Purpose

1.1 This report provides the findings arising from a recent External Quality Assessment of the Internal Audit section's compliance with Public Sector Internal Audit Standards.

2.0 Recommendations

2.1 It is recommended that the Committee:

- (1) notes the findings and action plan arising from the External Quality Assessment;
- (2) takes reassurance from the overall conclusion that Clackmannanshire Council Internal Audit section fully conforms with Public Sector Internal Audit Standards; and
- (3) records its thanks to the Chief Internal Auditor at Argyll and Bute Council for carrying out the assessment.

3.0 Background

3.1 Internal Audit seeks to operate in compliance with the requirements of the Public Sector Internal Audit Standards (PSIAS). PSIAS were first established in 2013 and updated in 2017, and apply to all Internal Audit service providers in the public sector. They have the following four objectives:

- to define the nature of Internal Auditing within the UK public sector;
- to set basic principles for carrying out Internal Audit in the UK public sector;
- to establish a framework for providing Internal Audit services, which add value to the organisation, leading to improved organisational processes and operations; and
- to establish the basis for the evaluation of Internal Audit performance and to drive improvement planning.

3.2 One of the requirements of PSIAS is that the Internal Audit Manager develops a Quality Assurance and Improvement Programme (QAIP) to enable evaluation of the section's conformance. This must include an annual self assessment and five yearly independent external assessment.

4.0 Compliance With Public Sector Internal Audit Standards

4.1 The Internal Audit Manager undertook a detailed self assessment against PSIAS in March 2023. This concluded that the Internal Audit team operates in compliance with the Standards.

4.2 The external quality assessment element of the Standards seeks to provide independent assurance on the level of compliance. To satisfy the requirement for five yearly external assessment, Clackmannanshire Council participates in a national review process established by the Scottish Local Authorities Chief Internal Auditors' Group. This allows Clackmannanshire Council to act as assessor, and to be assessed at no financial cost to any participants.

4.3 A previous external assessment was undertaken (in conjunction with Falkirk Council's Internal Audit service) by the Scottish Prison Service's (SPS) Head of Audit and Assurance, who concluded that the Council's Internal Audit section was broadly compliant with PSIAS (this is equivalent to 'Substantial Assurance'). While there were a number of recommendations raised in the report, these were designed to support continuous improvement rather than address any material non-compliance.

4.4 In line with the requirement, a further review was undertaken from November 2022 to January 2023 by the Chief Internal Auditor at Argyll and Bute Council.

4.5 The Standards comprise of 14 separate sections, which are detailed within the report. The reviewer has stated that the team fully conforms with 12 sections and generally conforms with 2 sections. The report concludes, therefore, that Clackmannanshire Council's Internal Audit team fully conforms with the Standards. This is a positive outcome and provides the Audit and Scrutiny Committee with independent assurance in line with the requirements of the Scheme of Delegation.

4.6 As well as providing assurance on compliance with the Standards, the external quality assessment process helps drive continuous improvement. 10 recommendations have been made in the report to improve or add additional supportive processes to promote the Standards. There are three main areas for improvement highlighted in the report and a further seven areas for consideration / implementation which have been graded as 'routine'.

4.7 A copy of the report is at Appendix 1.

5.0 Conclusions

5.1 PSIAS require a five yearly independent external quality assessment of compliance. This has been undertaken by the Chief Internal Auditor at Argyll and Bute Council, who has concluded that Clackmannanshire Council Internal Audit section fully conforms with the Standards.

6.0 Sustainability Implications

6.1 None Noted.

7.0 Resource Implications

Financial Details

7.1 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

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

Staffing

7.3 No implications other than those set out in the report.

8.0 Exempt Reports

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

9.0 Declarations

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

- (1) **Our Priorities** (Please double click on the check box)
- Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all
- Our families; children and young people will have the best possible start in life
- Women and girls will be confident and aspirational, and achieve their full potential
- Our communities will be resilient and empowered so that they can thrive and flourish

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

10.0 Equalities Impact

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

Yes No Not applicable

11.0 Legality

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

12.0 Appendices

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

Appendix 1: External Quality Assessment 2 of Clackmannanshire Council's Internal Audit Service

13.0 Background Papers

- 13.1 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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Isabel Wright	Internal Audit Manager	01324 506342

Approved by

NAME	DESIGNATION	SIGNATURE
Stuart Crickmar	Strategic Director Partnerships and Performance	

EXTERNAL QUALITY ASSESSMENT 2

OF



**Clackmannanshire
Council**

www.clacks.gov.uk

Comhairle Siorrachd
Chlach Mhanann

CLACKMANNANSHIRE COUNCIL'S INTERNAL AUDIT SERVICE

Report Recipients:

Cllr J Rennie, Chair of the Audit and Scrutiny Committee
Cllr D Coyne, Vice Chair of the Audit and Scrutiny Committee
Nikki Bridle, Chief Executive
Stuart Crickmar, Strategic Director (Partnership and Performance)

EXECUTIVE SUMMARY

Isabel Wright, Internal Audit, Risk, and Corporate Fraud Manager –
Shared Service – Falkirk Council

1. INTRODUCTION

- 1.1 The mandatory Public Sector Internal Audit Standards (PSIAS), initially published in April 2013 and updated in March 2017, apply to all internal audit service providers in the UK public sector. To supplement the PSIAS, and provide specific guidance surrounding its application within a local government setting, the Chartered Institute of Public Finance and Accountancy (CIPFA) compiled a Local Government Application Note, last updated in 2019.
- 1.2 The objectives of the PSIAS are:
- to define the nature of internal auditing within the UK public sector;
 - to set basic principles for carrying out internal audit services;
 - to establish a framework for providing internal audit services, which add value to the organisation, leading to improved organisational processes and operations;
 - to establish the basis for the evaluation of internal audit performance; and
 - to drive improvement planning.
- 1.3 The PSIAS require the Chief Audit Executive (the Internal Audit, Risk, and Corporate Fraud Manager in Falkirk Council who provides the service in Clackmannanshire Council and is known as the Internal Audit Manager in that Council (IAM)) to develop and maintain a quality assurance and improvement programme (QAIP) that covers all aspects of the internal audit activity. The QAIP must include both periodic internal self-assessments and five-yearly external assessments. The external assessments must be carried out by a qualified, independent assessor from outwith the organisation, and enable evaluation of the internal audit activity's conformance with the PSIAS, including the Mission of Internal Audit, Definition of Internal Auditing and Code of Ethics. In addition, the QAIP should also assess the efficiency and effectiveness of the internal audit activity and identify opportunities for improvement.
- 1.4 To assist its members in meeting the five-yearly external assessment requirement, the Scottish Local Authorities Chief Internal Auditors' Group (SLACIAG) established a collaborative system of formal peer reviews. This approach not only assists with ensuring that independent assessors, and their teams, have appropriate knowledge and experience of the local government internal audit environment but also removes the financial burden from councils associated with procuring these services externally. The independence of assessors was considered when allocating assessment teams to councils participating in the peer review process, ensuring that, amongst other governing principles, local authorities with perceived/known conflicts of interest could not review one another. At the outset, assessors were required to formally declare any interests so that these could be appropriately addressed during the allocation process. Argyll & Bute Council was selected to carry out the external assessment of Clackmannanshire.
- 1.5 To support the peer review process, SLACIAG developed a comprehensive External Quality Assessment (EQA) framework, including an EQA Checklist for Assessing





EXECUTIVE SUMMARY

Conformance with the PSIAS and the Local Government Application Note (EQA Checklist) and a key Stakeholder Questionnaire proforma. Argyll & Bute Council's Internal Audit service has carried out the external assessment of Clackmannanshire Council's Internal Audit service utilising this framework.

- 1.6 This report provides a high level summary of requirements for each standard per the PSIAS and CIPFA Local Government Application Note and details findings, conclusions and recommendations from the external assessment. This assessment has involved discussions with key members of staff, including the Chief Audit Executive, review of the most recent self-assessment carried out utilising the EQA Checklist and consideration of other relevant supporting documentation/information (Evidence Pack) including working paper files and completed stakeholder questionnaires. A comprehensive list of supporting documentation/information and completed stakeholder questionnaires considered as part of the assessment can be found at appendices B and C respectively.
- 1.7 The Assessor would like to thank the IAM for the further information that was provided via interview and on request and for access to the Internal Audit Team member(s) – this all enabled a smooth and efficient audit process. Thanks is also extended to all who gave up their time to complete the stakeholder questionnaires and to be interviewed – this enhanced the quality of the audit, allowing a fuller picture of the Internal Audit Service to be obtained and thus a more accurate assessment.
- 1.8 In terms of context the Internal Audit Service at Clackmannanshire Council is managed and delivered through a shared service agreement with Falkirk Council. The current agreement is for one year ending on 31 March 2024. Clackmannanshire Council employ one full time Internal Auditor who co-ordinates their work through the IAM at Falkirk Council.

2. OVERALL CONCLUSION

2.1 The overall conclusion of the external assessment is that Clackmannanshire Council's Internal Audit service **fully conforms** with the PSIAS. We have made 10 recommendations as a result of our assessment. A number are made to improve or add additional supportive processes to promote the Standards contained within the PSIAS. A full summary of assessment, per assessment area, can be found at Appendix A. A summary of totals is as follows:

	Fully Conforms 	Generally Conforms 	Partially Conforms 	Does Not Conform 
TOTALS	12	2	0	0

2.2 There are three main areas for improvement highlighted in the report and a further seven areas for consideration/implementation and which we have graded as 'routine' as follows:

- All audit recommendations which have not been uploaded onto the Pentana system be added as a matter of priority in order to appropriately monitor progress at a corporate level within the Council.
- The Monitoring Officer of Clackmannanshire Council should arrange for the IAM to routinely obtain access to any reports relating to fraud and any other irregularity to enable the IAM build a better profile of potential risk and tailor audit resource where that is required.
- The IAM discuss the risks associated with the increase in 'limited assurance' opinions contained within Internal Audit reports with the Chief Executive, Section 95 Officer and the Strategic Director (Partnership & Performance) and consider, if this trend continues, that a narrative is recorded in the Annual Governance Statement (AGS).
- The Training Needs Analysis (TNA) prepared as a result of the exercise undertaken by the Audit and Scrutiny Committee to identify specific training and development issues be addressed within a reasonable timeframe.
- The IAM in consultation with the A&S Committee and Senior Management determine the most appropriate way of gauging client feedback of the service within Clackmannanshire Council.
- The IAM should be routinely provided with the agendas and minutes of senior management meetings in order to keep abreast of any emerging issues.
- A formal managerial protocol should be established in respect of the auditor employed at Clackmannanshire Council with the IAM at Falkirk Council. This should cover at the very least, Employee Conversations (Annual Performance Review), training, direct reporting lines, use of the IA resources on other non-audit work and the management of risks associated with that, to ensure that objectivity and independence can be fully demonstrated.
- A review of the file retention and disposal process in relation to internal audit files and documents requires to be undertaken and where appropriate, files out with any retention period, are disposed of in terms of the relevant policy in place. (This applies to be both manual and electronic records).

DETAILED FINDINGS AND RECOMMENDATIONS

- Whilst the Internal Audit Manual is available to all staff and comprehensively covers key business areas of the IA service. We noted that there have been minor changes in job titles and which the IAM is aware. The manual at the next scheduled review should be updated to reflect these and any other changes as required.
- The IAM should formally note any discussions that are taken regarding her Annual Report findings and what will be reflected in the AGS.

2.3 Full details of the assessment recommendations and management responses can be found in the Action Plan at Appendix D.

3. SECTION A – MISSION OF INTERNAL AUDIT AND CORE PRINCIPLES

The PSIAS state that the Mission of Internal Audit articulates what internal audit aspires to accomplish within an organisation, which is 'to enhance and protect organisational value by providing risk-based and objective assurance, advice and insight'.

Taken as a whole, the Core Principles for the Professional Practice of Internal Auditing, as set out in the PSIAS, articulate internal audit effectiveness. For an internal audit function to be considered effective, all Core Principles should be present and operating effectively. Failure to achieve any of the Core Principles would imply that an internal audit activity was not as effective as it could be in achieving the Mission of Internal Audit.

- 3.1 Evidence obtained from assessing conformance with other standards in the PSIAS has been used, along with specific consideration surrounding the achievement of the Core Principles, to conclude that the Internal Audit service at Clackmannanshire **fully conforms** with accomplishing the Mission of Internal Audit as detailed above.

4. SECTION B – DEFINITION OF INTERNAL AUDITING

The PSIAS state that internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.

- 4.1 Evidence obtained from assessing conformance with other standards in the PSIAS has been used to conclude that the Internal Audit service at Clackmannanshire Council **fully conforms** with the definition of Internal Auditing as detailed above. The main reason for this assessment has been the review of the activities, approach and status of the Internal Audit service throughout the independent review. Completed Stakeholder Questionnaires on the whole support this conclusion.
- 4.2 The Internal Audit service has not been approached to perform additional consulting activity; however, the Internal Audit Charter makes provision for the possibility of the service carrying out such work and specifies the parameters for accepting consulting engagements. Internal Audit, however, do respond to audit enquiries and members of the team have sat on working groups recently.
- 4.3 The Internal Audit service has in place an Internal Audit Charter and the definition of Internal Auditing included in this document mirrors the PSIAS definition. Furthermore, the Internal Audit Plan takes into account the PSIAS requirements, ensuring that the plan of work aligns to PSIAS.

5. SECTION C – CODE OF ETHICS

The PSIAS state that the purpose of the Institute of Internal Auditor's Code of Ethics is to promote an ethical culture in the profession of internal auditing. A code of ethics is necessary and appropriate for the profession of internal auditing, founded as it is on the trust placed in its objective assurance about risk management, control and governance.

Internal auditors in UK public sector organisations must conform to the Code of Ethics as set out in the PSIAS. If individual internal auditors have membership of another professional body then he or she must also comply with the relevant requirements of that organisation.

- 5.1 Evidence obtained from assessing conformance with other standards in the PSIAS have been used to conclude that Clackmannanshire Council's Internal Audit service

fully conforms with the requirement to comply with the Code of Ethics. The following standards have been considered in particular:

The Attribute Standards -

- 1000 – Purpose Authority and Responsibility,
- 1100 – Independence and Objectivity, and
- 1200 – Proficiency and Due Professional Care.

The Performance Standards -

- 2000 – Managing the Internal Audit Activity and
- 2300 – Performing the Engagement.

5.2 Completed Stakeholder Questionnaires also largely support the conclusion. In addition, the Audit Charter was reviewed and confirmed as being in line with good practice, adhering to the guidance.

6. SECTION D – ATTRIBUTE STANDARDS

Attribute Standards apply to organisations and to individual internal auditors providing the internal audit service in a local authority.

6.1 1000 - Purpose, Authority, and Responsibility

The PSIAS state that the purpose, authority and responsibility of the internal audit activity must be formally defined in an Internal Audit Charter, consistent with the Mission of Internal Audit and the mandatory elements of the International Professional Practices Framework. The chief audit executive must periodically review the internal audit charter and present it to senior management and the board for approval. The internal audit charter must also:

- *define the terms ‘board’ and ‘senior management’ for the purposes of internal audit activity;*
- *cover the arrangements for appropriate resourcing;*
- *define the role of internal audit in any fraud-related work; and*
- *describe safeguards to limit impairments of independence or objectivity if internal audit or the chief audit executive undertakes non-audit activities.*

6.1.1 Clackmannanshire Council’s Internal Audit Charter is periodically reviewed, with the most recent review taking place in August 2022. The requirements referred to above are adhered to in the Charter, and the Charter was approved by the A&S Committee on 25 August 2022.

6.1.2 Having considered the findings above, it has been concluded that the Internal Audit service at Clackmannanshire Council **fully conforms** with Standard 1000 on Purpose, Authority and Responsibility.

6.2 1100 - Independence and Objectivity

The internal audit activity must be independent and internal auditors must be objective in performing their work. Various aspects of independence and objectivity are covered in this standard as well as 1200, including reporting functional lines of the CAE, the relationship between the CAE and the board and any impairment to individual internal auditor's objectivity or independence. Reporting and management arrangements must be put in place that preserve the CAE's independence and objectivity, in particular with regard to the principle that the CAE must be independent of the audited activities.

- 6.2.1 The IAM reports functionally to the A&S Committee and administratively to the Strategic Director (Partnership and Performance), who attends the Council's Strategic Management Team. The IAM has direct and unrestricted access to the Chief Executive and the Chair of the A&S Committee, however, through the completed Stakeholder Questionnaires, there seems to be inconsistent views in relation to this option/avenue for the IAM. **See Appendix D – Action 1.** Whilst these reporting and access arrangements are clearly defined in the Internal Audit Charter and other relevant audit and organisational documents as are safeguards to limit impairment of independence or objectivity, this needs to be clearly understood by all of the key stakeholders. This is likely to be a training issue but will need to be addressed so that all relevant Officers and Members are aware of the rights of reporting, access and discussions that the IAM may have during the course of their work and/or should any aspect require escalation. It therefore may be helpful to progress the training and development plan, which is in place, for the Committee.
- 6.2.2 In support of organisational independence, the IAM attends A&S Committee meetings to present all internal audit reports (including, for example, the Internal Audit Charter, Annual Report, Internal Audit Plan and reports from the planned audits) to Elected Members. The reports are submitted in the IAM name.
- 6.2.3 The IAM has operational responsibility for Corporate Fraud and Risk within Falkirk Council but does not have any of these responsibilities in their role within the shared service within Clackmannanshire Council. This is communicated to stakeholders via the Internal Audit Charter.
- 6.2.4 Clackmannanshire Council's Internal Audit service **fully conforms** with Standard 1100 on Independence and Objectivity.

6.3 1200 - Proficiency and Due Professional Care

The CAE must be professionally qualified, suitably experienced and responsible, in accordance with the organisation's human resources processes, for recruiting appropriate staff. He or she is responsible for ensuring that up-to-date job descriptions exist, reflecting roles and responsibilities, and that person specifications define the required qualifications, competencies, skills, experience and personal attributes.

The CAE should periodically assess individual auditors' skills and competencies against those set out in the relevant job descriptions and person specifications. Any training or development needs identified should be included in an appropriate ongoing development programme that is recorded and regularly reviewed and monitored. In addition, all internal auditors have a personal responsibility to undertake a programme of continuing professional development (CPD) to maintain and develop their competence. This may be fulfilled through requirements set by professional bodies or through the organisation's own appraisal and development programme. Auditors should maintain a record of such professional training and development activities.

The internal audit activity should be appropriately resourced to meet its objectives. It should have appropriate numbers of staff in terms of grades, qualifications, personal attributes and experience or have access to appropriate resources in order to meet its objectives and to comply with these standards. The PSIAS states that the CAE must

obtain competent advice and assistance if the activity is unable to perform all or part of an engagement.

- 6.3.1 The IAM is required to and does hold a relevant CCAB professional accountancy or IIA qualification, specifically, Chartered Member of the Institute of Internal Auditors (CMIIA), and is suitably experienced. The IAM is a member of SLACIAG and regularly attends and contributes to meetings. Clackmannanshire Council's Internal Audit service is represented on the two SLACIAG Sub-groups: the Computer Audit Sub-Group (CASG) and the Scottish Local Authorities Investigators Group (SLAIG). The IAM has a well-established background in the public sector and in particular internal audit. Questionnaires received from stakeholders have confirmed the opinion that the IAM is suitably experienced with 25 years of experience in public sector internal audit. Indeed, the shared service team have a good breadth of experience, qualifications and skills.
- 6.3.2 For the role of the one member of staff employed directly by Clackmannanshire Council's Internal Audit service, there is a job and person specification in place. The Joint Working Agreement (JWA) is for the equivalent of one person (and is made up of the time of these other five Falkirk staff) including the IAM. The Internal Audit service delivers internal audit services to the Council, IJB and Central Scotland Assessors. The team is well qualified with a training plan in place to address any skills gaps within the team.
- 6.3.3 The Internal Audit Team participate in a Performance Review and Development process within Clackmannanshire Council. Although, we understand that the title of this may soon change, the system of annual review will remain in place.
- 6.3.4 The IAM and Audit Team have specific CPD requirements to adhere to. Each Auditor is a member of a professional body and is required to maintain a CPD file and in terms of any annual declaration of compliance. The Internal Auditor employed directly by Clackmannanshire Council was recently selected for a random check of his CPD file by the Institute of Internal Audit and successfully passed review.
- 6.3.5 Clackmannanshire Council's Internal Audit service **fully conforms** with standard 1200 on Proficiency and Due Professional Care.

6.4 1300 - Quality Assurance and Improvement Programme

The PSIAS state that the Chief Audit Executive must develop and maintain a quality assurance and improvement programme (QAIP) that covers all aspects of the internal audit activity.

The QAIP must include both periodic internal self-assessments and five-yearly external assessments, carried out by a qualified, independent assessor from outside the organisation, and enable evaluation of the internal audit activity's conformance with the PSIAS, including the Definition of Internal Auditing and Code of Ethics. In addition, the QAIP should also assess the efficiency and effectiveness of the internal audit activity and identify opportunities for improvement.

The public sector requirement in the PSIAS states that results of the QAIP and progress against any improvement plans must be reported in the annual report.

- 6.4.1 Internal audit reports are reviewed by the IAM prior to issue and working papers are reviewed by the IAM and/or qualified and experienced staff.
- 6.4.2 We understand that post audit surveys have not been used in the past. Surveys are an acceptable way whereby they are issued to audit contacts after the completion of each audit in order to assess the performance and quality of reports. We noted that this process has not been a feature within Clackmannanshire Council and no monitoring of client satisfaction through questionnaires takes place at an audit review level. The use

of questionnaires is a common option used to assess performance and feedback from clients of internal audit on each assignment. However, I understand that satisfaction with the service is determined at a strategic level, through discussions with senior management. The IAM has outlined that her personal experience of the use of questionnaires has been limited in terms of value, I do, however, think that some form of continuous monitoring client satisfaction within the Council is required and should be considered in whatever format may be helpful in order to gauge that opinion. **See Appendix D – Action 2.**

- 6.4.3 Internal Audit monitor their development plan and the status of all development actions using a standard template. I was provided with a copy of the Training and Development plan for 2023/24 which provided a comprehensive view of all staff and their current and ongoing training and development needs. Furthermore, in terms of additional benchmarking across Scotland, the CIPFA Directors of Finance Performance Indicators are completed and submitted, this monitors two areas of audit performance,
- 6.4.4 An external assessment against Public Sector Internal Audit Standards was previously carried out by the Head of Audit and Assurance employed by the Scottish Prison Service and reported to the then Audit Committee in June 2018. The internal audit service was concluded as broadly demonstrating compliance with PSIAS requirements, whilst four areas were identified for improvement in this assessment, and a further four identified in the self-assessment, totalling eight areas for improvement. An action plan was developed to address these areas; we found that whilst the vast majority appeared to have been implemented, one out of the eight recommendations made at that time reflects one of our finding in paragraph 6.4.2 of this report.
- 6.4.5 Notwithstanding these potential areas for development, Clackmannanshire Council's Internal Audit service **fully conforms** with Standard 1300 on Quality Assurance and Improvement Programme.

7. SECTION E – PERFORMANCE STANDARDS

Performance Standards describe the nature of the internal audit services being provided and provide criteria against which the performance of an internal audit function can be measured.

7.1 2000 - Managing the Internal Audit Activity

The chief audit executive must effectively manage the internal audit activity to ensure it adds value to the organisation. The internal audit activity is effectively managed when it achieves the purpose and responsibility included in the internal audit charter, it conforms with the PSIAS, its individual members conform with the Code of Ethics and the PSIAS and it considers trends and emerging issues that could impact the organisation. The internal audit activity adds value to the organisation and its stakeholders when it considers strategies, objectives and risks; strives to offer ways to enhance governance, risk management, and control processes; and objectively provides relevant assurance.

- 7.1.1 An annual Internal Audit Plan is compiled by the IAM outlining the planned programme of work to be undertaken. Whilst the IAM does not attend strategic management team meetings or similar forums, she does meet with the Strategic Director (Partnership & Performance) regularly and should further discussion be required, has access to other senior staff. Given the joint service arrangement it can be more difficult to attend such meetings, however, the IAM should be provided with access to the agendas and minutes of these meetings in order to keep abreast of emerging issues. **See Appendix D – Action 3.**

- 7.1.2 The IAM directs the full time Auditor employed by Clackmannanshire Council in terms of the work and agreed audit plan. Such overview, direction and support normally extends to employee performance review input and views on any requests for staff to be deployed in any non-audit duties, which could affect audit independence. In order to clarify the managerial oversight and input of the IAM, I believe that a formal protocol covering normal oversight of staff be established to prevent any misunderstandings or Internal Audit staff resources being diverted without her input and agreement. **See Appendix D – Action 4**
- 7.1.3 Public sector bodies should only retain information relating to its work for specific periods of time and this also requires internal audit to comply with this legislation. From the information made available to me, such a review has not been undertaken to determine whether retention periods for information have been assessed and complied with; this compliance applies to electronic information as well as any traditional manual/paper files. In order to comply with file retention periods a review of all internal audit records should be undertaken and where these records have exceeded any disposal timeframes, they should be disposed of in accordance with any corporate guidance. **See Appendix D – Action 5**
- 7.1.4 The Council has an Internal Audit Manual which comprehensively covers key business activities of the section. We noted that there have been some minor changes in job titles which the IAM is fully aware. The manual at the next scheduled review should be updated to reflect these and any other changes as required. **See Appendix D – Action 6**
- 7.1.5 The A&S Committee agrees and endorses the Internal Audit Plan.
- 7.1.6 The Internal audit service reports on performance to the A&S Committee on at least a quarterly basis, including summaries of audit reports finalised and issued, and details of all internal audit activity since the last A&S Committee. Progress implementing audit recommendations and action taken to reduce and highlight the number of duplicate payments is reported six monthly. Performance against agreed performance indicators is provided as part of the annual assurance work and confirmed via the Progress Reports which reflect all internal audit activity.
- 7.1.7 Clackmannanshire Council's Internal Audit service **fully conforms** with Standard 2000 on Managing the Internal Audit Activity.

7.2 2100 - Nature of Work

The internal audit activity must evaluate and contribute to the improvement of the organisation's governance, risk management, and control processes using a systematic, disciplined, and risk-based approach. Internal audit credibility and value are enhanced when auditors are proactive and their evaluations offer new insights and consider future impact.

More specifically, the internal audit activity must assess and make appropriate recommendations to improve the organisation's governance processes, evaluate the effectiveness and contribute to the improvement of risk management processes and assist the organisation in maintaining effective controls by evaluating their efficiency and effectiveness and promoting continuous improvement.

- 7.2.1 Audit work regularly focuses on areas of governance such as robustness of policies and procedures, performance reporting (which focuses on the achievement of strategic objectives), budget monitoring (financial information), and compliance with relevant legislation.

- 7.2.2 An audit assessing compliance with the Council's risk management arrangements is approached in the context of other reviews. We understand that the last internal audit review of risk management was undertaken in 2021/22 and reported in May 2022. I am advised that the IAM liaises with the Risk Co-ordinator at Clackmannanshire Council and this helps to build and maintain a picture of any changes to the risk environment which may change the risk profile of the Council and, subsequently, areas for audit focus.
- 7.2.3 Controls are assessed through the internal audit plan and through considerations on individual assignments.
- 7.2.4 Fraud risks and knowledge of any previous and ongoing matters relevant to the overall risk picture need to be available to the IAM in consideration of identifying where resources should be focused. We noted that the IAM does not routinely receive copies of any fraud, theft or irregularity reports which whilst not directly part of her remit, are nevertheless important in terms of overall organisational risk awareness. This helps to assess the control environment and the development of good controls in relation to reducing the risk of fraud or other irregularity. **See Appendix D – Action 7**
- 7.2.5 Clackmannanshire Council's Internal Audit service **generally conforms** with Standard 2100 on Nature of Work.

7.3 2200 - Engagement Planning

Internal auditors must develop and document a plan for each engagement, including the engagement's objectives, scope, timing and resource allocations. The plan must consider the organisation's strategies, objectives and risks relevant to the engagement.

The CIPFA Local Government Application note states that for each engagement, a brief should be prepared, discussed and agreed with relevant managers. The brief should establish the objectives, scope and timing for the assignment and its resource and reporting requirements. Audit work should be undertaken using a risk-based audit approach.

- 7.3.1 Terms of Reference planning documents are in place which include objectives, scope, timing, resources allocated and consideration of the organisation's strategies, objectives and risks relevant to the engagement. The final Terms of Reference document is agreed with the relevant Director or other senior officer.
- 7.3.4 Clackmannanshire Council's Internal Audit service **fully conforms** with Standard 2200 on Engagement Planning.

7.4 2300 - Performing the Engagement

Internal auditors must identify, analyse, evaluate and document sufficient information to achieve the engagement's objectives.

At each stage of the audit, auditors should consider what specific work needs to be conducted and evidence needs to be gathered to achieve the engagement objectives and support an independent and objective audit opinion. Systems should be in place to ensure that auditors obtain and record, within the working papers, sufficient evidence to support their conclusions, professional judgements and recommendations. Working papers should always be sufficiently complete and detailed to enable an experienced internal auditor with no previous connection with the audit to ascertain what work was performed, re-perform it if necessary and support the conclusions reached. The CAE should also specify how long all audit documentation should be retained, whether held on paper or electronically. All audit work should be subject to an appropriate internal quality review process.

Internal auditors must be alert to the possibility of intentional wrongdoing, errors and

omissions, poor value for money, failure to comply with management policy and conflicts of interest when performing their individual audits. They must also have sufficient knowledge to identify indicators that fraud or corruption may have been committed.

- 7.4.1 The Internal Audit Manual sets out the procedure in relation to undertaking a planned audit, including preparing working papers and setting up working paper files.
- 7.4.2 Electronic engagement records are kept in a restricted folder held on the system server. ICT are responsible for the security controls, and the IAM is responsible for specifying who should have access to this via permission being set up.
- 7.4.3 Working papers and Internal Control Questionnaires have been standardised. These detail the test of control, the work performed, results, conclusion, issues raised and risk.
- 7.4.4 A standard template is also utilised for the IAM performing a review of the file – a Management Review Schedule (MRS), where any questions the IAM or reviewing staff member may have are noted for the auditor to answer.
- 7.4.5 Clackmannanshire Council's Internal Audit service **fully conforms** with Standard 2300 on Performing the Engagement.

7.5 2400 - Communicating Results

The basic aims of every internal audit report should be to:

- *give an opinion on the risk and controls of the area under review, building up to the annual opinion on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control;*
- *prompt management to implement the agreed actions for change leading to improvement in the control environment and performance; and*
- *provide a formal record of points arising from the audit and, where appropriate, of agreements reached with management, together with appropriate timescales.*

Each report should include the scope and purpose of the audit to help the reader to understand the extent, or limitations, of the assurance(s) provided by the report. During the course of the audit, key issues should be brought to the attention of the relevant manager to enable them to take corrective action and to avoid surprises at the closure stage. Before issuing the final report, the internal auditor should normally discuss the contents with the appropriate levels of management to confirm the factual accuracy, to seek comments and to confirm the agreed management actions. A draft report is useful for this purpose. Recommendations should be prioritised according to risk. The recommendations and the resultant management action plans should be agreed prior to the issue of the final report. Any areas of disagreement between the internal auditor and management that cannot be resolved by discussion should be recorded in the action plan and the residual risk highlighted. Those weaknesses giving rise to significant risks that are not agreed should be brought to the attention of a more senior level of management and the board.

As set out in the PSIAS, the CAE must deliver an annual internal audit opinion and report that can be used by the organisation to inform its annual governance statement. This must include the annual internal audit opinion concluding on the overall adequacy and effectiveness of the organisation's governance, risk and control framework, a summary of the audit work from which the opinion is derived (including reliance placed on work by other assurance bodies); and a statement of conformance with the PSIAS

and the results of the internal audit QAIP.

- 7.5.1 Each report issued by Internal Audit outlines the auditors' conclusions and significant issues identified. Reviews which identify significant or serious control weaknesses form part of the annual reporting and formal opinion reached in terms of the control environment.
- 7.5.2 As part of the standard audit approach, the team member carrying out the audit will have a feedback meeting with the key audit contact to discuss the arising issues. There will also be iterative communication with the key contact to clear the audit report. These communications are primarily made by e-mail or via Microsoft Teams.
- 7.5.3 With regards to handling disagreements, it is rare that a manager would not implement a recommendation. Internal Audit always aim to find common ground in relation to recommendations and implementation. In instances of unresolvable disagreement, the report would highlight that agreement could not be reached and the potential risk to the organisation. This would be reported to the A&S Committee.
- 7.5.4 We understand that the IAM discusses the Annual Governance Statement (AGS) preparation with Strategic Director (Partnership & Performance). This is an opportunity for the IAM to escalate or raise specific issues which may need to be reflected in the AGS and which have arisen from the work of the Internal Audit team in that specific financial year. Whilst we were not able to review any communications of such meetings(s) we believe that it would be helpful that a formal note be kept of the meeting going forward to evidence that the discussions have taken place and where any matters which the IAM believes need reflected within the AGS, this is clearly outlined in the note and retained by the IAM. **See Appendix D – Action 8.** I noted that there has been a recent trend in internal audit reports which have been marked as 'limited assurance' and understand that this has been discussed and is being monitored, both at an individual audit basis but also within the senior management of the Council. Whilst we are satisfied that such issues have been identified and monitored effectively, the IAM may need to consider the need to raise any such further trend within the AGS, making specific reference to the reviews. **See Appendix D – Action 9**
- 7.5.5 Clackmannanshire Council's Internal Audit service **fully conforms** with Standard 2400 on Communicating Results.

7.6 2500 - Monitoring Progress

The PSIAS place responsibility for monitoring progress with the CAE to ensure that management actions have been effectively implemented or, if not, that senior management have accepted the risk of not taking action. The CAE must, therefore, implement a follow-up process for ensuring the effective implementation of audit results or ensuring senior management are aware of the consequences of not implementing an action point and are prepared to accept the risk of such consequences occurring. The results of this process should be communicated to the board. The CAE should develop escalation procedures for cases where agreed actions have not been effectively implemented by the date agreed. These procedures should ensure that the risks of not taking action have been understood and accepted at a sufficiently senior management level. The effective involvement of the board in the follow-up process is critical to ensuring that it works. The CAE should consider revising the internal audit opinion in light of findings from the follow-up process. The findings of follow-up reviews should inform the planning of future audit work.

- 7.6.1 Whilst there is a comprehensive follow up process in place, this involves agreed recommendations contained within internal audit reports being provided to a member of staff outwith internal audit who then uploads the information onto the 'Pentana' system. This allows responsible officers across the Council the opportunity to update

progress against the agreed completion dates contained within the action plans of the internal audit reports. However, we identified that whilst this process was in place for audit recommendation monitoring, the member of staff outwith internal audit had left the Council, this resulted in a significant backlog of audit recommendations not being uploaded onto the Pentana system. This has resulted in a delay in the monitoring and reporting of progress in relation to those items affected by the backlog. Whilst we understand that progress is being made to address the backlog and indeed may now be complete, it is our responsibility to highlight this within the report. **See Appendix D – Action 10**

- 7.6.2 Progress with actions is reported to the A&S Committee on a quarterly basis. Follow-up results are also taken into account and referred to in the annual report.
- 7.6.3 Clackmannanshire Council's Internal Audit service **generally conforms** with Standard 2500 on Monitoring Progress.

7.7 2600 - Communicating the Acceptance of Risks


















When the chief audit executive concludes that management has accepted a level of risk that may be unacceptable to the organisation, they must discuss the matter with senior management. If the chief audit executive determines that the matter has not been resolved, they must communicate the matter to the board. It is not the responsibility of the chief audit executive to resolve the risk.


- 7.7.1 The IAM has unrestricted access to the Chief Executive and Chair of the A&S Committee and can provide assurance that, should it be required, she can escalate issues directly to them and also of other senior staff should that be required. The IAM also attends meetings with the key point of contact, within Clackmannanshire Council, specifically, the Strategic Director (Partnership & Performance) and has access to other senior management as required. This provides the opportunity to escalate any issues, problems or concerns that require to be addressed, if these were to be identified.
- 7.7.2 All audit reports are taken to the A&S Committee.
- 7.7.3 The IAM contributes to the annual governance statement and the annual audit opinion is reported to the A&S Committee.
- 7.7.4 Clackmannanshire Council's Internal Audit service **fully conforms** to the Standard on Communicating the Acceptance of Risk.

Paul Macaskill BA FCPFA CMIIA

Chief Internal Auditor
Argyll and Bute Council
11th March 2024

APPENDIX A – SUMMARY OF ASSESSMENT

REF	PAGE No.	ASSESSMENT AREA	Fully Conforms 	Generally Conforms 	Partially Conforms 	Does Not Conform 
Section A	6	Mission of Internal Audit and Core Principles				
Section B	6	Definition of Internal Auditing				
Section C	6	Code of Ethics				
Section D	7	ATTRIBUTE STANDARDS				
1000	7	Purpose, Authority and Responsibility				
1100	7	Independence and Objectivity				
1200	8	Proficiency and Due Professional Care				
1300	9	Quality Assurance and Improvement Programme				
Section E	10	PERFORMANCE STANDARDS				
2000	10	Managing the internal Audit Activity				
2100	11	Nature of Work				
2200	12	Engagement Planning				
2300	12	Performing the Engagement				
2400	13	Communicating Results				
2500	14	Monitoring Progress				

2600	14	Communicating the Acceptance of Risks				
TOTALS			12	2	0	0

APPENDIX B – EVIDENCE PACK

The following represent the main sources of evidence that were considered in the course of the review:

- Minutes and papers from A&S Committee
- Audit Manual and Charter
- Stakeholder Questionnaires
- Interviews with the IAM and members of the audit team
- Job Descriptions
- Code of Conduct
- Training and Development Plan
- Evidence of qualification
- Organisational chart
- CPD records
- Prior EQA report
- Audit Plan Consultation
- Assurance Mapping
- Audit Universe
- Audit Plan
- A sample of audit files
- Contract Documentation
- Annual Housekeeping Documentation
- Annual Feedback Survey Documentation

APPENDIX C – STAKEHOLDER QUESTIONNAIRES

Stakeholder questionnaires were completed by the following key members of staff and Elected Members:

- Cllr J Rennie, Chair of the A&S Committee
- Cllr D Coyne, Vice-Chair of the A&S Committee
- Nikki Bridle, Chief Executive
- Stuart Crickmar, Strategic Director (Partnership and Performance)

APPENDIX D – ACTION PLAN

No.	Para	Recommendation	Management Response	Responsible Officer / Agreed Completion Date
1	6.2.1	The Training Needs Analysis (TNA) prepared as a result of the exercise undertaken by the Committee to identify specific training and development issues be addressed within a reasonable timeframe.	The dates for delivery of the TNA were agreed by Council as per the schedule in the report of December 2023. These will be scheduled and delivered by 30 June 2024.	Strategic Director (Partnership & Performance) 30 June 2024
2	6.4.2	The IAM in consultation with the A&S Committee and Senior Management determine the most appropriate way of gauging client feedback of the service within Clackmannanshire Council.	Options will be explored and we will look to introduce ways of gauging client feedback. This will involve sample testing auditees during the year.	Internal Audit Manager 30 June 2024
3	7.1.1	The IAM should be routinely provided with the agendas and minutes of senior management meetings in order to keep abreast of any emerging issues.	The minutes and agenda for Senior Leadership Group (SLG) and Extended Senior Leadership Group (ESLG) will be provided.	Strategic Director (Partnership & Performance) 31 March 2024
4	7.1.2	A formal managerial protocol should be established in respect of the auditor employed at Clackmannanshire Council with the IAM at Falkirk Council – This should cover at the very least, Employee Conversations (Annual Performance Review), training, direct reporting lines, use of the IA resources on other non-audit work and the management of risks associated with that, to ensure that objectivity and independence can be fully demonstrated.	Agreed.	Strategic Director (Partnership & Performance) 30 April 2024
5	7.1.3	A review of the file retention and disposal process in relation to internal audit files and documents requires to be undertaken and where appropriate, files out with any retention period, are disposed of in terms of the relevant policy in place. (This applies to both manual	Agreed. This was already on the self-assessment Action Plan and the exercise is underway.	Internal Audit Manager 30 April 2024

No.	Para	Recommendation	Management Response	Responsible Officer / Agreed Completion Date
		and electronic records).		
6	7.1.5	Whilst the Internal Audit Manual is available to all staff and comprehensively covers key business areas of the IA service. We noted that there have been minor changes in job titles and which the IAM is aware. The manual at the next scheduled review should be updated to reflect these and any other changes as required.	Agreed. This was already on the self-assessment Action Plan to take forward. Only minor changes are required. This will be reported to the Audit and Scrutiny Committee.	Internal Audit Manager 30 September 2024.
7	7.2.4	The Monitoring Officer of Clackmannanshire Council should arrange for the IAM to routinely obtain access to any reports relating to fraud and any other irregularity in order that the IAM can build up a better profile of potential risk and tailor audit resource where that is required.	Agreed.	Monitoring Officer 31 March 2024
8	7.5.4	The IAM should formally note any discussions that are taken regarding her Annual Report findings and what will be reflected in the AGS.	Agreed.	Internal Audit Manager 30 September 2024
9	7.5.4	The IAM discuss the risks associated with the increase in 'limited assurance' opinions contained within Internal Audit reports with the Chief Executive, Section 95 Officer and the Strategic Director (Partnership & Performance) and consider, if this trend continues, that a narrative is recorded in the AGS.	Agreed. These discussions are already underway. The Internal Audit service will work with Senior Officers to advise on key improvements required. The Chief Executive has confirmed that this issue has been escalated and discussed accordingly with SLG and ESLG.	Internal Audit Manager 30 September 2024
10	7.6.1	All audit recommendations which have not been uploaded onto the Pentana system be added as a matter of priority in order to appropriately monitor progress at a corporate level.	Agreed. This is an ongoing task that requires a wider pool of staff to be trained.	Strategic Director, Partnership & Performance

No.	Para	Recommendation	Management Response	Responsible Officer / Agreed Completion Date
				30 June 2024

Critical		Significant		Routine	
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SCOTTISH LOCAL AUTHORITIES

Chief Internal Auditors' Group

EXTERNAL QUALITY ASSESSMENT 2

OF



**Clackmannanshire
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Comhairle Siorrachd
Chlach Mhanann

CLACKMANNANSHIRE COUNCIL'S INTERNAL AUDIT SERVICE

Report Recipients:

Cllr J Rennie, Chair of the Audit and Scrutiny Committee

Cllr D Coyne, Vice Chair of the Audit and Scrutiny Committee

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EXECUTIVE SUMMARY

1. INTRODUCTION

- 1.1 The mandatory Public Sector Internal Audit Standards (PSIAS), initially published in April 2013 and updated in March 2017, apply to all internal audit service providers in the UK public sector. To supplement the PSIAS, and provide specific guidance surrounding its application within a local government setting, the Chartered Institute of Public Finance and Accountancy (CIPFA) compiled a Local Government Application Note, last updated in 2019.
- 1.2 The objectives of the PSIAS are:
- to define the nature of internal auditing within the UK public sector;
 - to set basic principles for carrying out internal audit services;
 - to establish a framework for providing internal audit services, which add value to the organisation, leading to improved organisational processes and operations;
 - to establish the basis for the evaluation of internal audit performance; and
 - to drive improvement planning.
- 1.3 The PSIAS require the Chief Audit Executive (the Internal Audit, Risk, and Corporate Fraud Manager in Falkirk Council who provides the service in Clackmannanshire Council and is known as the Internal Audit Manager in that Council (IAM)) to develop and maintain a quality assurance and improvement programme (QAIP) that covers all aspects of the internal audit activity. The QAIP must include both periodic internal self-assessments and five-yearly external assessments. The external assessments must be carried out by a qualified, independent assessor from outwith the organisation, and enable evaluation of the internal audit activity's conformance with the PSIAS, including the Mission of Internal Audit, Definition of Internal Auditing and Code of Ethics. In addition, the QAIP should also assess the efficiency and effectiveness of the internal audit activity and identify opportunities for improvement.
- 1.4 To assist its members in meeting the five-yearly external assessment requirement, the Scottish Local Authorities Chief Internal Auditors' Group (SLACIAG) established a collaborative system of formal peer reviews. This approach not only assists with ensuring that independent assessors, and their teams, have appropriate knowledge and experience of the local government internal audit environment but also removes the financial burden from councils associated with procuring these services externally. The independence of assessors was considered when allocating assessment teams to councils participating in the peer review process, ensuring that, amongst other governing principles, local authorities with perceived/known conflicts of interest could not review one another. At the outset, assessors were required to formally declare any interests so that these could be appropriately addressed during the allocation process. Argyll & Bute Council was selected to carry out the external assessment of Clackmannanshire.
- 1.5 To support the peer review process, SLACIAG developed a comprehensive External Quality Assessment (EQA) framework, including an EQA Checklist for Assessing Conformance with the PSIAS and the Local Government Application Note (EQA Checklist) and a key Stakeholder Questionnaire proforma. Argyll & Bute Council's Internal Audit service has carried out the external assessment of Clackmannanshire Council's Internal Audit service utilising this framework.
- 1.6 This report provides a high level summary of requirements for each standard per the PSIAS and CIPFA Local Government Application Note and details findings, conclusions and recommendations from the external assessment. This assessment has involved

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discussions with key members of staff, including the Chief Audit Executive, review of the most recent self-assessment carried out utilising the EQA Checklist and consideration of other relevant supporting documentation/information (Evidence Pack) including working paper files and completed stakeholder questionnaires. A comprehensive list of supporting documentation/information and completed stakeholder questionnaires considered as part of the assessment can be found at appendices B and C respectively.

- 1.7 The Assessor would like to thank the IAM for the further information that was provided via interview and on request and for access to the Internal Audit Team member(s) – this all enabled a smooth and efficient audit process. Thanks is also extended to all who gave up their time to complete the stakeholder questionnaires and to be interviewed – this enhanced the quality of the audit, allowing a fuller picture of the Internal Audit Service to be obtained and thus a more accurate assessment.
- 1.8 In terms of context the Internal Audit Service at Clackmannanshire Council is managed and delivered through a shared service agreement with Falkirk Council. The current agreement is for one year ending on 31 March 2024. Clackmannanshire Council employ one full time Internal Auditor who co-ordinates their work through the IAM at Falkirk Council.

2. OVERALL CONCLUSION

2.1 The overall conclusion of the external assessment is that Clackmannanshire Council's Internal Audit service **fully conforms** with the PSIAS. We have made 10 recommendations as a result of our assessment. A number are made to improve or add additional supportive processes to promote the Standards contained within the PSIAS. A full summary of assessment, per assessment area, can be found at Appendix A. A summary of totals is as follows:

	Fully Conforms 	Generally Conforms 	Partially Conforms 	Does Not Conform 
TOTALS	12	2	0	0

2.2 There are three main areas for improvement highlighted in the report and a further seven areas for consideration/implementation and which we have graded as 'routine' as follows:

- All audit recommendations which have not been uploaded onto the Pentana system be added as a matter of priority in order to appropriately monitor progress at a corporate level within the Council.
- The Monitoring Officer of Clackmannanshire Council should arrange for the IAM to routinely obtain access to any reports relating to fraud and any other irregularity to enable the IAM build a better profile of potential risk and tailor audit resource where that is required.
- The IAM discuss the risks associated with the increase in 'limited assurance' opinions contained within Internal Audit reports with the Chief Executive, Section 95 Officer and the Strategic Director (Partnership & Performance) and consider, if this trend continues, that a narrative is recorded in the Annual Governance Statement (AGS).
- The Training Needs Analysis (TNA) prepared as a result of the exercise undertaken by the Audit and Scrutiny Committee to identify specific training and development issues be addressed within a reasonable timeframe.
- The IAM in consultation with the A&S Committee and Senior Management determine the most appropriate way of gauging client feedback of the service within Clackmannanshire Council.
- The IAM should be routinely provided with the agendas and minutes of senior management meetings in order to keep abreast of any emerging issues.
- A formal managerial protocol should be established in respect of the auditor employed at Clackmannanshire Council with the IAM at Falkirk Council. This should cover at the very least, Employee Conversations (Annual Performance Review), training, direct reporting lines, use of the IA resources on other non-audit work and the management of risks associated with that, to ensure that objectivity and independence can be fully demonstrated.
- A review of the file retention and disposal process in relation to internal audit files and documents requires to be undertaken and where appropriate, files out with any retention period, are disposed of in terms of the relevant policy in place. (This applies to be both manual and electronic records).

DETAILED FINDINGS AND RECOMMENDATIONS

- Whilst the Internal Audit Manual is available to all staff and comprehensively covers key business areas of the IA service. We noted that there have been minor changes in job titles and which the IAM is aware. The manual at the next scheduled review should be updated to reflect these and any other changes as required.
- The IAM should formally note any discussions that are taken regarding her Annual Report findings and what will be reflected in the AGS.

2.3 Full details of the assessment recommendations and management responses can be found in the Action Plan at Appendix D.

3. SECTION A – MISSION OF INTERNAL AUDIT AND CORE PRINCIPLES

The PSIAS state that the Mission of Internal Audit articulates what internal audit aspires to accomplish within an organisation, which is ‘to enhance and protect organisational value by providing risk-based and objective assurance, advice and insight’.

Taken as a whole, the Core Principles for the Professional Practice of Internal Auditing, as set out in the PSIAS, articulate internal audit effectiveness. For an internal audit function to be considered effective, all Core Principles should be present and operating effectively. Failure to achieve any of the Core Principles would imply that an internal audit activity was not as effective as it could be in achieving the Mission of Internal Audit.

- 3.1 Evidence obtained from assessing conformance with other standards in the PSIAS has been used, along with specific consideration surrounding the achievement of the Core Principles, to conclude that the Internal Audit service at Clackmannanshire **fully conforms** with accomplishing the Mission of Internal Audit as detailed above.

4. SECTION B – DEFINITION OF INTERNAL AUDITING

The PSIAS state that internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation’s operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.

- 4.1 Evidence obtained from assessing conformance with other standards in the PSIAS has been used to conclude that the Internal Audit service at Clackmannanshire Council **fully conforms** with the definition of Internal Auditing as detailed above. The main reason for this assessment has been the review of the activities, approach and status of the Internal Audit service throughout the independent review. Completed Stakeholder Questionnaires on the whole support this conclusion.
- 4.2 The Internal Audit service has not been approached to perform additional consulting activity; however, the Internal Audit Charter makes provision for the possibility of the service carrying out such work and specifies the parameters for accepting consulting engagements. Internal Audit, however, do respond to audit enquiries and members of the team have sat on working groups recently.
- 4.3 The Internal Audit service has in place an Internal Audit Charter and the definition of Internal Auditing included in this document mirrors the PSIAS definition. Furthermore, the Internal Audit Plan takes into account the PSIAS requirements, ensuring that the plan of work aligns to PSIAS.

5. SECTION C – CODE OF ETHICS

The PSIAS state that the purpose of the Institute of Internal Auditor’s Code of Ethics is to promote an ethical culture in the profession of internal auditing. A code of ethics is necessary and appropriate for the profession of internal auditing, founded as it is on the trust placed in its objective assurance about risk management, control and governance.

Internal auditors in UK public sector organisations must conform to the Code of Ethics as set out in the PSIAS. If individual internal auditors have membership of another professional body then he or she must also comply with the relevant requirements of that organisation.

- 5.1 Evidence obtained from assessing conformance with other standards in the PSIAS have been used to conclude that Clackmannanshire Council’s Internal Audit service **fully conforms** with the requirement to comply with the Code of Ethics. The following standards have been considered in particular:

The Attribute Standards -

- 1000 – Purpose Authority and Responsibility,
- 1100 – Independence and Objectivity, and
- 1200 – Proficiency and Due Professional Care.

The Performance Standards -

- 2000 – Managing the Internal Audit Activity and
- 2300 – Performing the Engagement.

5.2 Completed Stakeholder Questionnaires also largely support the conclusion. In addition, the Audit Charter was reviewed and confirmed as being in line with good practice, adhering to the guidance.

6. SECTION D – ATTRIBUTE STANDARDS

Attribute Standards apply to organisations and to individual internal auditors providing the internal audit service in a local authority.

6.1 1000 - Purpose, Authority, and Responsibility

The PSIAS state that the purpose, authority and responsibility of the internal audit activity must be formally defined in an Internal Audit Charter, consistent with the Mission of Internal Audit and the mandatory elements of the International Professional Practices Framework. The chief audit executive must periodically review the internal audit charter and present it to senior management and the board for approval. The internal audit charter must also:

- *define the terms ‘board’ and ‘senior management’ for the purposes of internal audit activity;*
- *cover the arrangements for appropriate resourcing;*
- *define the role of internal audit in any fraud-related work; and*
- *describe safeguards to limit impairments of independence or objectivity if internal audit or the chief audit executive undertakes non-audit activities.*

6.1.1 Clackmannanshire Council’s Internal Audit Charter is periodically reviewed, with the most recent review taking place in August 2022. The requirements referred to above are adhered to in the Charter, and the Charter was approved by the A&S Committee on 25 August 2022.

6.1.2 Having considered the findings above, it has been concluded that the Internal Audit service at Clackmannanshire Council **fully conforms** with Standard 1000 on Purpose, Authority and Responsibility.

6.2 1100 - Independence and Objectivity

The internal audit activity must be independent and internal auditors must be objective in performing their work. Various aspects of independence and objectivity are covered in this standard as well as 1200, including reporting functional lines of the CAE, the relationship between the CAE and the board and any impairment to individual internal auditor’s objectivity or independence. Reporting and management arrangements must be put in place that preserve the CAE’s independence and objectivity, in particular with regard to the principle that the CAE must be independent of the audited activities.

- 6.2.1 The IAM reports functionally to the A&S Committee and administratively to the Strategic Director (Partnership and Performance), who attends the Council's Strategic Management Team. The IAM has direct and unrestricted access to the Chief Executive and the Chair of the A&S Committee, however, through the completed Stakeholder Questionnaires, there seems to be inconsistent views in relation to this option/avenue for the IAM. **See Appendix D – Action 1.** Whilst these reporting and access arrangements are clearly defined in the Internal Audit Charter and other relevant audit and organisational documents as are safeguards to limit impairment of independence or objectivity, this needs to be clearly understood by all of the key stakeholders. This is likely to be a training issue but will need to be addressed so that all relevant Officers and Members are aware of the rights of reporting, access and discussions that the IAM may have during the course of their work and/or should any aspect require escalation. It therefore may be helpful to progress the training and development plan, which is in place, for the Committee.
- 6.2.2 In support of organisational independence, the IAM attends A&S Committee meetings to present all internal audit reports (including, for example, the Internal Audit Charter, Annual Report, Internal Audit Plan and reports from the planned audits) to Elected Members. The reports are submitted in the IAM name.
- 6.2.3 The IAM has operational responsibility for Corporate Fraud and Risk within Falkirk Council but does not have any of these responsibilities in their role within the shared service within Clackmannanshire Council. This is communicated to stakeholders via the Internal Audit Charter.
- 6.2.4 Clackmannanshire Council's Internal Audit service **fully conforms** with Standard 1100 on Independence and Objectivity.

6.3 1200 - Proficiency and Due Professional Care

The CAE must be professionally qualified, suitably experienced and responsible, in accordance with the organisation's human resources processes, for recruiting appropriate staff. He or she is responsible for ensuring that up-to-date job descriptions exist, reflecting roles and responsibilities, and that person specifications define the required qualifications, competencies, skills, experience and personal attributes.

The CAE should periodically assess individual auditors' skills and competencies against those set out in the relevant job descriptions and person specifications. Any training or development needs identified should be included in an appropriate ongoing development programme that is recorded and regularly reviewed and monitored. In addition, all internal auditors have a personal responsibility to undertake a programme of continuing professional development (CPD) to maintain and develop their competence. This may be fulfilled through requirements set by professional bodies or through the organisation's own appraisal and development programme. Auditors should maintain a record of such professional training and development activities.

The internal audit activity should be appropriately resourced to meet its objectives. It should have appropriate numbers of staff in terms of grades, qualifications, personal attributes and experience or have access to appropriate resources in order to meet its objectives and to comply with these standards. The PSIAS states that the CAE must obtain competent advice and assistance if the activity is unable to perform all or part of an engagement.

- 6.3.1 The IAM is required to and does hold a relevant CCAB professional accountancy or IIA qualification, specifically, Chartered Member of the Institute of Internal Auditors (CMIIA), and is suitably experienced. The IAM is a member of SLACIAG and regularly attends and contributes to meetings. Clackmannanshire Council's Internal Audit service is represented on the two SLACIAG Sub-groups: the Computer Audit Sub-Group (CASG) and the Scottish Local Authorities Investigators Group (SLAIG). The IAM has a well-

established background in the public sector and in particular internal audit. Questionnaires received from stakeholders have confirmed the opinion that the IAM is suitably experienced with 25 years of experience in public sector internal audit. Indeed, the shared service team have a good breadth of experience, qualifications and skills.

- 6.3.2 For the role of the one member of staff employed directly by Clackmannanshire Council's Internal Audit service, there is a job and person specification in place. The Joint Working Agreement (JWA) is for the equivalent of one person (and is made up of the time of these other five Falkirk staff) including the IAM. The Internal Audit service delivers internal audit services to the Council, IJB and Central Scotland Assessors. The team is well qualified with a training plan in place to address any skills gaps within the team.
- 6.3.3 The Internal Audit Team participate in a Performance Review and Development process within Clackmannanshire Council. Although, we understand that the title of this may soon change, the system of annual review will remain in place.
- 6.3.4 The IAM and Audit Team have specific CPD requirements to adhere to. Each Auditor is a member of a professional body and is required to maintain a CPD file and in terms of any annual declaration of compliance. The Internal Auditor employed directly by Clackmannanshire Council was recently selected for a random check of his CPD file by the Institute of Internal Audit and successfully passed review.
- 6.3.5 Clackmannanshire Council's Internal Audit service **fully conforms** with standard 1200 on Proficiency and Due Professional Care.

6.4 1300 - Quality Assurance and Improvement Programme

The PSIAS state that the Chief Audit Executive must develop and maintain a quality assurance and improvement programme (QAIP) that covers all aspects of the internal audit activity.

The QAIP must include both periodic internal self-assessments and five-yearly external assessments, carried out by a qualified, independent assessor from outside the organisation, and enable evaluation of the internal audit activity's conformance with the PSIAS, including the Definition of Internal Auditing and Code of Ethics. In addition, the QAIP should also assess the efficiency and effectiveness of the internal audit activity and identify opportunities for improvement.

The public sector requirement in the PSIAS states that results of the QAIP and progress against any improvement plans must be reported in the annual report.

- 6.4.1 Internal audit reports are reviewed by the IAM prior to issue and working papers are reviewed by the IAM and/or qualified and experienced staff.
- 6.4.2 We understand that post audit surveys have not been used in the past. Surveys are an acceptable way whereby they are issued to audit contacts after the completion of each audit in order to assess the performance and quality of reports. We noted that this process has not been a feature within Clackmannanshire Council and no monitoring of client satisfaction through questionnaires takes place at an audit review level. The use of questionnaires is a common option used to assess performance and feedback from clients of internal audit on each assignment. However, I understand that satisfaction with the service is determined at a strategic level, through discussions with senior management. The IAM has outlined that her personal experience of the use of questionnaires has been limited in terms of value, I do, however, think that some form of continuous monitoring client satisfaction within the Council is required and should be considered in whatever format may be helpful in order to gauge that opinion. **See Appendix D – Action 2.**
- 6.4.3 Internal Audit monitor their development plan and the status of all development actions using a standard template. I was provided with a copy of the Training and Development

plan for 2023/24 which provided a comprehensive view of all staff and their current and ongoing training and development needs. Furthermore, in terms of additional benchmarking across Scotland, the CIPFA Directors of Finance Performance Indicators are completed and submitted, this monitors two areas of audit performance,

- 6.4.4 An external assessment against Public Sector Internal Audit Standards was previously carried out by the Head of Audit and Assurance employed by the Scottish Prison Service and reported to the then Audit Committee in June 2018. The internal audit service was concluded as broadly demonstrating compliance with PSIAS requirements, whilst four areas were identified for improvement in this assessment, and a further four identified in the self-assessment, totalling eight areas for improvement. An action plan was developed to address these areas; we found that whilst the vast majority appeared to have been implemented, one out of the eight recommendations made at that time reflects one of our findings in paragraph 6.4.2 of this report.
- 6.4.5 Notwithstanding these potential areas for development, Clackmannanshire Council's Internal Audit service **fully conforms** with Standard 1300 on Quality Assurance and Improvement Programme.

7. SECTION E – PERFORMANCE STANDARDS

Performance Standards describe the nature of the internal audit services being provided and provide criteria against which the performance of an internal audit function can be measured.

7.1 2000 - Managing the Internal Audit Activity

The chief audit executive must effectively manage the internal audit activity to ensure it adds value to the organisation. The internal audit activity is effectively managed when it achieves the purpose and responsibility included in the internal audit charter, it conforms with the PSIAS, its individual members conform with the Code of Ethics and the PSIAS and it considers trends and emerging issues that could impact the organisation. The internal audit activity adds value to the organisation and its stakeholders when it considers strategies, objectives and risks; strives to offer ways to enhance governance, risk management, and control processes; and objectively provides relevant assurance.

- 7.1.1 An annual Internal Audit Plan is compiled by the IAM outlining the planned programme of work to be undertaken. Whilst the IAM does not attend strategic management team meetings or similar forums, she does meet with the Strategic Director (Partnership & Performance) regularly and should further discussion be required, has access to other senior staff. Given the joint service arrangement it can be more difficult to attend such meetings, however, the IAM should be provided with access to the agendas and minutes of these meetings in order to keep abreast of emerging issues. **See Appendix D – Action 3.**
- 7.1.2 The IAM directs the full time Auditor employed by Clackmannanshire Council in terms of the work and agreed audit plan. Such overview, direction and support normally extends to employee performance review input and views on any requests for staff to be deployed in any non-audit duties, which could affect audit independence. In order to clarify the managerial oversight and input of the IAM, I believe that a formal protocol covering normal oversight of staff be established to prevent any misunderstandings or Internal Audit staff resources being diverted without her input and agreement. **See Appendix D – Action 4**
- 7.1.3 Public sector bodies should only retain information relating to its work for specific periods of time and this also requires internal audit to comply with this legislation. From the information made available to me, such a review has not been undertaken to determine

whether retention periods for information have been assessed and complied with; this compliance applies to electronic information as well as any traditional manual/paper files. In order to comply with file retention periods a review of all internal audit records should be undertaken and where these records have exceeded any disposal timeframes, they should be disposed of in accordance with any corporate guidance. **See Appendix D – Action 5**

- 7.1.4 The Council has an Internal Audit Manual which comprehensively covers key business activities of the section. We noted that there have been some minor changes in job titles which the IAM is fully aware. The manual at the next scheduled review should be updated to reflect these and any other changes as required. **See Appendix D – Action 6**
- 7.1.5 The A&S Committee agrees and endorses the Internal Audit Plan.
- 7.1.6 The Internal audit service reports on performance to the A&S Committee on at least a quarterly basis, including summaries of audit reports finalised and issued, and details of all internal audit activity since the last A&S Committee. Progress implementing audit recommendations and action taken to reduce and highlight the number of duplicate payments is reported six monthly. Performance against agreed performance indicators is provided as part of the annual assurance work and confirmed via the Progress Reports which reflect all internal audit activity.
- 7.1.7 Clackmannanshire Council's Internal Audit service **fully conforms** with Standard 2000 on Managing the Internal Audit Activity.

7.2 2100 - Nature of Work

The internal audit activity must evaluate and contribute to the improvement of the organisation's governance, risk management, and control processes using a systematic, disciplined, and risk-based approach. Internal audit credibility and value are enhanced when auditors are proactive and their evaluations offer new insights and consider future impact.

More specifically, the internal audit activity must assess and make appropriate recommendations to improve the organisation's governance processes, evaluate the effectiveness and contribute to the improvement of risk management processes and assist the organisation in maintaining effective controls by evaluating their efficiency and effectiveness and promoting continuous improvement.

- 7.2.1 Audit work regularly focuses on areas of governance such as robustness of policies and procedures, performance reporting (which focuses on the achievement of strategic objectives), budget monitoring (financial information), and compliance with relevant legislation.
- 7.2.2 An audit assessing compliance with the Council's risk management arrangements is approached in the context of other reviews. We understand that the last internal audit review of risk management was undertaken in 2021/22 and reported in May 2022. I am advised that the IAM liaises with the Risk Co-ordinator at Clackmannanshire Council and this helps to build and maintain a picture of any changes to the risk environment which may change the risk profile of the Council and, subsequently, areas for audit focus.
- 7.2.3 Controls are assessed through the internal audit plan and through considerations on individual assignments.
- 7.2.4 Fraud risks and knowledge of any previous and ongoing matters relevant to the overall risk picture need to be available to the IAM in consideration of identifying where resources should be focused. We noted that the IAM does not routinely receive copies

of any fraud, theft or irregularity reports which whilst not directly part of her remit, are nevertheless important in terms of overall organisational risk awareness. This helps to assess the control environment and the development of good controls in relation to reducing the risk of fraud or other irregularity. **See Appendix D – Action 7**

- 7.2.5 Clackmannanshire Council's Internal Audit service **generally conforms** with Standard 2100 on Nature of Work.

7.3 2200 - Engagement Planning

Internal auditors must develop and document a plan for each engagement, including the engagement's objectives, scope, timing and resource allocations. The plan must consider the organisation's strategies, objectives and risks relevant to the engagement.

The CIPFA Local Government Application note states that for each engagement, a brief should be prepared, discussed and agreed with relevant managers. The brief should establish the objectives, scope and timing for the assignment and its resource and reporting requirements. Audit work should be undertaken using a risk-based audit approach.

- 7.3.1 Terms of Reference planning documents are in place which include objectives, scope, timing, resources allocated and consideration of the organisation's strategies, objectives and risks relevant to the engagement. The final Terms of Reference document is agreed with the relevant Director or other senior officer.
- 7.3.4 Clackmannanshire Council's Internal Audit service **fully conforms** with Standard 2200 on Engagement Planning.

7.4 2300 - Performing the Engagement

Internal auditors must identify, analyse, evaluate and document sufficient information to achieve the engagement's objectives.

At each stage of the audit, auditors should consider what specific work needs to be conducted and evidence needs to be gathered to achieve the engagement objectives and support an independent and objective audit opinion. Systems should be in place to ensure that auditors obtain and record, within the working papers, sufficient evidence to support their conclusions, professional judgements and recommendations. Working papers should always be sufficiently complete and detailed to enable an experienced internal auditor with no previous connection with the audit to ascertain what work was performed, re-perform it if necessary and support the conclusions reached. The CAE should also specify how long all audit documentation should be retained, whether held on paper or electronically. All audit work should be subject to an appropriate internal quality review process.

Internal auditors must be alert to the possibility of intentional wrongdoing, errors and omissions, poor value for money, failure to comply with management policy and conflicts of interest when performing their individual audits. They must also have sufficient knowledge to identify indicators that fraud or corruption may have been committed.

- 7.4.1 The Internal Audit Manual sets out the procedure in relation to undertaking a planned audit, including preparing working papers and setting up working paper files.
- 7.4.2 Electronic engagement records are kept in a restricted folder held on the system server. ICT are responsible for the security controls, and the IAM is responsible for specifying who should have access to this via permission being set up.
- 7.4.3 Working papers and Internal Control Questionnaires have been standardised. These detail the test of control, the work performed, results, conclusion, issues raised and risk.

- 7.4.4 A standard template is also utilised for the IAM performing a review of the file – a Management Review Schedule (MRS), where any questions the IAM or reviewing staff member may have are noted for the auditor to answer.
- 7.4.5 Clackmannanshire Council's Internal Audit service **fully conforms** with Standard 2300 on Performing the Engagement.

7.5 2400 - Communicating Results

The basic aims of every internal audit report should be to:

- give an opinion on the risk and controls of the area under review, building up to the annual opinion on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control;*
- prompt management to implement the agreed actions for change leading to improvement in the control environment and performance; and*
- provide a formal record of points arising from the audit and, where appropriate, of agreements reached with management, together with appropriate timescales.*

Each report should include the scope and purpose of the audit to help the reader to understand the extent, or limitations, of the assurance(s) provided by the report. During the course of the audit, key issues should be brought to the attention of the relevant manager to enable them to take corrective action and to avoid surprises at the closure stage. Before issuing the final report, the internal auditor should normally discuss the contents with the appropriate levels of management to confirm the factual accuracy, to seek comments and to confirm the agreed management actions. A draft report is useful for this purpose. Recommendations should be prioritised according to risk. The recommendations and the resultant management action plans should be agreed prior to the issue of the final report. Any areas of disagreement between the internal auditor and management that cannot be resolved by discussion should be recorded in the action plan and the residual risk highlighted. Those weaknesses giving rise to significant risks that are not agreed should be brought to the attention of a more senior level of management and the board.

As set out in the PSIAS, the CAE must deliver an annual internal audit opinion and report that can be used by the organisation to inform its annual governance statement. This must include the annual internal audit opinion concluding on the overall adequacy and effectiveness of the organisation's governance, risk and control framework, a summary of the audit work from which the opinion is derived (including reliance placed on work by other assurance bodies); and a statement of conformance with the PSIAS and the results of the internal audit QAIP.

- 7.5.1 Each report issued by Internal Audit outlines the auditors' conclusions and significant issues identified. Reviews which identify significant or serious control weaknesses form part of the annual reporting and formal opinion reached in terms of the control environment.
- 7.5.2 As part of the standard audit approach, the team member carrying out the audit will have a feedback meeting with the key audit contact to discuss the arising issues. There will also be iterative communication with the key contact to clear the audit report. These communications are primarily made by e-mail or via Microsoft Teams.
- 7.5.3 With regards to handling disagreements, it is rare that a manager would not implement a recommendation. Internal Audit always aim to find common ground in relation to recommendations and implementation. In instances of unresolvable disagreement, the report would highlight that agreement could not be reached and the potential risk to the organisation. This would be reported to the A&S Committee.

- 7.5.4 We understand that the IAM discusses the Annual Governance Statement (AGS) preparation with Strategic Director (Partnership & Performance). This is an opportunity for the IAM to escalate or raise specific issues which may need to be reflected in the AGS and which have arisen from the work of the Internal Audit team in that specific financial year. Whilst we were not able to review any communications of such meetings(s) we believe that it would be helpful that a formal note be kept of the meeting going forward to evidence that the discussions have taken place and where any matters which the IAM believes need reflected within the AGS, this is clearly outlined in the note and retained by the IAM. **See Appendix D – Action 8.** I noted that there has been a recent trend in internal audit reports which have been marked as ‘limited assurance’ and understand that this has been discussed and is being monitored, both at an individual audit basis but also within the senior management of the Council. Whilst we are satisfied that such issues have been identified and monitored effectively, the IAM may need to consider the need to raise any such further trend within the AGS, making specific reference to the reviews. **See Appendix D – Action 9**
- 7.5.5 Clackmannanshire Council’s Internal Audit service **fully conforms** with Standard 2400 on Communicating Results.

7.6 2500 - Monitoring Progress

The PSIAS place responsibility for monitoring progress with the CAE to ensure that management actions have been effectively implemented or, if not, that senior management have accepted the risk of not taking action. The CAE must, therefore, implement a follow-up process for ensuring the effective implementation of audit results or ensuring senior management are aware of the consequences of not implementing an action point and are prepared to accept the risk of such consequences occurring. The results of this process should be communicated to the board. The CAE should develop escalation procedures for cases where agreed actions have not been effectively implemented by the date agreed. These procedures should ensure that the risks of not taking action have been understood and accepted at a sufficiently senior management level. The effective involvement of the board in the follow-up process is critical to ensuring that it works. The CAE should consider revising the internal audit opinion in light of findings from the follow-up process. The findings of follow-up reviews should inform the planning of future audit work.

- 7.6.1 Whilst there is a comprehensive follow up process in place, this involves agreed recommendations contained within internal audit reports being provided to a member of staff outwith internal audit who then uploads the information onto the ‘Pentana’ system. This allows responsible officers across the Council the opportunity to update progress against the agreed completion dates contained within the action plans of the internal audit reports. However, we identified that whilst this process was in place for audit recommendation monitoring, the member of staff outwith internal audit had left the Council, this resulted in a significant backlog of audit recommendations not being uploaded onto the Pentana system. This has resulted in a delay in the monitoring and reporting of progress in relation to those items affected by the backlog. Whilst we understand that progress is being made to address the backlog and indeed may now be complete, it is our responsibility to highlight this within the report. **See Appendix D – Action 10**
- 7.6.2 Progress with actions is reported to the A&S Committee on a quarterly basis. Follow-up results are also taken into account and referred to in the annual report.
- 7.6.3 Clackmannanshire Council’s Internal Audit service **generally conforms** with Standard 2500 on Monitoring Progress.

7.7 2600 - Communicating the Acceptance of Risks

When the chief audit executive concludes that management has accepted a level of risk


















that may be unacceptable to the organisation, they must discuss the matter with senior management. If the chief audit executive determines that the matter has not been resolved, they must communicate the matter to the board. It is not the responsibility of the chief audit executive to resolve the risk.

- 7.7.1 The IAM has unrestricted access to the Chief Executive and Chair of the A&S Committee and can provide assurance that, should it be required, she can escalate issues directly to them and also of other senior staff should that be required. The IAM also attends meetings with the key point of contact, within Clackmannanshire Council, specifically, the Strategic Director (Partnership & Performance) and has access to other senior management as required. This provides the opportunity to escalate any issues, problems or concerns that require to be addressed, if these were to be identified.
- 7.7.2 All audit reports are taken to the A&S Committee.
- 7.7.3 The IAM contributes to the annual governance statement and the annual audit opinion is reported to the A&S Committee.
- 7.7.4 Clackmannanshire Council's Internal Audit service **fully conforms** to the Standard on Communicating the Acceptance of Risk.

Paul Macaskill BA FCPFA CMIIA

Chief Internal Auditor
Argyll and Bute Council
11th March 2024

APPENDIX A – SUMMARY OF ASSESSMENT

REF	PAGE No.	ASSESSMENT AREA	Fully Conforms 	Generally Conforms 	Partially Conforms 	Does Not Conform 
Section A	6	Mission of Internal Audit and Core Principles				
Section B	6	Definition of Internal Auditing				
Section C	6	Code of Ethics				
Section D	7	ATTRIBUTE STANDARDS				
1000	7	Purpose, Authority and Responsibility				
1100	7	Independence and Objectivity				
1200	8	Proficiency and Due Professional Care				
1300	9	Quality Assurance and Improvement Programme				
Section E	10	PERFORMANCE STANDARDS				
2000	10	Managing the internal Audit Activity				
2100	11	Nature of Work				
2200	12	Engagement Planning				
2300	12	Performing the Engagement				
2400	13	Communicating Results				
2500	14	Monitoring Progress				

2600	14	Communicating the Acceptance of Risks				
TOTALS			12	2	0	0

APPENDIX B – EVIDENCE PACK

The following represent the main sources of evidence that were considered in the course of the review:

- Minutes and papers from A&S Committee
- Audit Manual and Charter
- Stakeholder Questionnaires
- Interviews with the IAM and members of the audit team
- Job Descriptions
- Code of Conduct
- Training and Development Plan
- Evidence of qualification
- Organisational chart
- CPD records
- Prior EQA report
- Audit Plan Consultation
- Assurance Mapping
- Audit Universe
- Audit Plan
- A sample of audit files
- Contract Documentation
- Annual Housekeeping Documentation
- Annual Feedback Survey Documentation

APPENDIX C – STAKEHOLDER QUESTIONNAIRES

Stakeholder questionnaires were completed by the following key members of staff and Elected Members:

- Cllr J Rennie, Chair of the A&S Committee
- Cllr D Coyne, Vice-Chair of the A&S Committee
- Nikki Bridle, Chief Executive
- Stuart Crickmar, Strategic Director (Partnership and Performance)

APPENDIX D – ACTION PLAN

No.	Para	Recommendation	Management Response	Responsible Officer / Agreed Completion Date
1	6.2.1	The Training Needs Analysis (TNA) prepared as a result of the exercise undertaken by the Committee to identify specific training and development issues be addressed within a reasonable timeframe.	The dates for delivery of the TNA were agreed by Council as per the schedule in the report of December 2023. These will be scheduled and delivered by 30 June 2024.	Strategic Director (Partnership & Performance) 30 June 2024
2	6.4.2	The IAM in consultation with the A&S Committee and Senior Management determine the most appropriate way of gauging client feedback of the service within Clackmannanshire Council.	Options will be explored and we will look to introduce ways of gauging client feedback. This will involve sample testing auditees during the year.	Internal Audit Manager 30 June 2024
3	7.1.1	The IAM should be routinely provided with the agendas and minutes of senior management meetings in order to keep abreast of any emerging issues.	The minutes and agenda for Senior Leadership Group (SLG) and Extended Senior Leadership Group (ESLG) will be provided.	Strategic Director (Partnership & Performance) 31 March 2024
4	7.1.2	A formal managerial protocol should be established in respect of the auditor employed at Clackmannanshire Council with the IAM at Falkirk Council – This should cover at the very least, Employee Conversations (Annual Performance Review), training, direct reporting lines, use of the IA resources on other non-audit work and the management of risks associated with that, to ensure that objectivity and independence can be fully demonstrated.	Agreed.	Strategic Director (Partnership & Performance) 30 April 2024
5	7.1.3	A review of the file retention and disposal process in relation to internal audit files and documents requires to be undertaken and where appropriate, files out with any retention period, are disposed of in terms of the relevant policy in place. (This applies to both manual and electronic records).	Agreed. This was already on the self-assessment Action Plan and the exercise is underway.	Internal Audit Manager 30 April 2024

No.	Para	Recommendation	Management Response	Responsible Officer / Agreed Completion Date
6	7.1.5	Whilst the Internal Audit Manual is available to all staff and comprehensively covers key business areas of the IA service. We noted that there have been minor changes in job titles and which the IAM is aware. The manual at the next scheduled review should be updated to reflect these and any other changes as required.	Agreed. This was already on the self-assessment Action Plan to take forward. Only minor changes are required. This will be reported to the Audit and Scrutiny Committee.	Internal Audit Manager 30 September 2024.
7	7.2.4	The Monitoring Officer of Clackmannanshire Council should arrange for the IAM to routinely obtain access to any reports relating to fraud and any other irregularity in order that the IAM can build up a better profile of potential risk and tailor audit resource where that is required.	Agreed.	Monitoring Officer 31 March 2024
8	7.5.4	The IAM should formally note any discussions that are taken regarding her Annual Report findings and what will be reflected in the AGS.	Agreed.	Internal Audit Manager 30 September 2024
9	7.5.4	The IAM discuss the risks associated with the increase in 'limited assurance' opinions contained within Internal Audit reports with the Chief Executive, Section 95 Officer and the Strategic Director (Partnership & Performance) and consider, if this trend continues, that a narrative is recorded in the AGS.	Agreed. These discussions are already underway. The Internal Audit service will work with Senior Officers to advise on key improvements required. The Chief Executive has confirmed that this issue has been escalated and discussed accordingly with SLG and ESLG.	Internal Audit Manager 30 September 2024
10	7.6.1	All audit recommendations which have not been uploaded onto the Pentana system be added as a matter of priority in order to appropriately monitor progress at a corporate level.	Agreed. This is an ongoing task that requires a wider pool of staff to be trained.	Strategic Director, Partnership & Performance 30 June 2024

	Critical		Significant		Routine
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CLACKMANNANSHIRE COUNCIL

Report to: Audit & Scrutiny Committee

Date of Meeting: 18 April 2024

Subject: Internal Audit Progress Report

Report by: Internal Audit Manager

1.0 Purpose

1.1 This report provides an update on progress with completion of the 2023/24 Internal Audit Plan.

2.0 Recommendations

2.1 It is recommended that the Committee notes the progress being made with completion of the 2023/24 Internal Audit Plan.

3.0 Progress with Completion of the 2023/24 Internal Audit Plan

3.1 The 2023/24 Internal Audit Plan was agreed by Audit Committee on [20 April 2023](#). It set out 16 assignment areas to be completed by the team during the year. This includes 11 audit reports to be issued to Clackmannanshire Council (those 11 audit reports do not include those assignments or reports undertaken and issued to the Clackmannanshire and Stirling Integration Joint Board, Central Scotland Valuation Joint Board, or the Public Sector Internal Audit Standards: External Assessment). Of these 11 audit reports:

- 5 audit reports have been completed to final report stage (4 of which have been reported to Elected Members at previous meetings of this Committee) as part of our annual and committed assignment programmes of work;
- 2 reviews are in progress and will be completed as part of the 2023/24 programme of work. These include pieces of work that are at draft report stage or are at fieldwork stage; and
- 4 are yet to be started. We anticipate deferring these audit reviews into the 2024/25 Internal Audit Plan.

3.2 A summary of progress is set out at Appendix 1. Details on the scope of, and findings arising, from the 1 review finalised since the last Committee in March are at Appendix 2. The assurance is provided in line with the definitions at Appendix 3.

3.3 Internal Audit are continuing to experience delays in confirming audit findings with auditees / Directorates which has meant it has proven difficult to clear audit reports within agreed timeframes. This is due to backlog recovery, staff turnover, and delays in filling vacancies within the Council. As part of the

2022/23 internal audit annual assurance work the Senior Leadership Group had undertaken to monitor these issues to ensure improvement, however, there has been no signs of improvement in 2023/24.

- 3.4 In overall terms, the programme of work will not be completed within the agreed time allocation, but it should be recognised that there are issues outwith the Internal Audit team’s control which impact on the ability to meet or exceed performance.
- 3.5 As part of our 2023/24 continuous auditing programme, Internal Audit has undertaken an additional data matching exercise relating to suppliers. This was to ensure there has been no unnecessary duplication of supplier records (which can increase the risk of duplicate payments, potentially leading to financial loss).
- 3.6 We also reviewed matches between Payroll (employee) data and suppliers, therefore, indicating if the Council is buying goods or services from a supplier owned or run by a member of staff. In relation to these “related party transactions”, the Code of Practice on Local Authority Accounting “seeks to ensure disclosure of transactions with individuals or organisations linked to Clackmannanshire Council where there is actual or perceived opportunity to control / exert influence”. This check could also help to identify where any supplier payments have been fraudulently changed to those of an employee. Review of these matches should eliminate instances of possible fraud, ensure that any related party transactions have been disclosed, and reduce the error of duplicate payments being made.
- 3.7 Work has been completed and all matches have been issued to the Payroll and Creditors sections to review and take relevant action if necessary. The outcomes will be reported at an upcoming Audit Committee.

4.0 Conclusions

- 4.1 2023/24 Internal Audit work will contribute to a balanced and evidenced based year end opinion on arrangements for risk management, governance, and control. The programme of work will not, however, be completed within the agreed time allocation. It should be recognised that there are issues outwith the Internal Audit team’s control which impact on the ability to meet or exceed performance.

5.0 Sustainability Implications

- 5.1 None Noted.

6.0 Resource Implications

Financial Details

- 6.1 The full financial implications of the recommendations are set out in the report. This includes a reference to full life cycle costs where appropriate. Yes
- 6.2 Finance have been consulted and have agreed the financial implications as set out in the report. Yes

Staffing

6.3 No implications other than those set out in the report.

7.0 Exempt Reports

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

8.0 Declarations

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

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

Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all

Our families; children and young people will have the best possible start in life

Women and girls will be confident and aspirational, and achieve their full potential

Our communities will be resilient and empowered so that they can thrive and flourish

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

9.0 Equalities Impact

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

Yes No N/a

10.0 Legality

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

11.0 Appendices

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

- Appendix 1: Internal Audit Plan 2023/24 Progress at 9 April 2024
- Appendix 2: Internal Audit Plan 2023/24 Assignment Outcomes Summary of Key Findings from Assignments Complete to Final Report Not Previously Reported to Committee
- Appendix 3: Definition of Internal Audit Assurance Categories

12.0 Background Papers

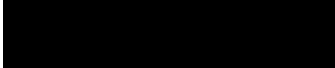
12.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

Yes (please list the documents below) No

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Isabel Wright	Internal Audit Manager	01324 506342

Approved by

NAME	DESIGNATION	SIGNATURE
Stuart Crickmar	Strategic Director Partnerships and Performance	

INTERNAL AUDIT PLAN 2023/24

Progress at 9 April 2024

	Client / Directorate	Assignment	Status
Annually Recurring Assignments			
1.	All Directorates	National Fraud Initiative	Ongoing
2.	All Directorates	Continuous Auditing	Ongoing
3.	Place	Climate Change Act Public Body Duties Audit	Final Report Issued
4.	All Directorates	Consultancy Work	Ongoing
5.	All Directorates	Work on Recommendations Outstanding	Ongoing
6.	Internal Audit	Public Sector Internal Audit Standards: External Assessment	Final Report Issued
Committed Assignments			
7.	Partnership and Performance / All Directorates	IT and Information Security Governance	Not Started
8.	People / All Directorates	Purchase Order Arrangements at Clackmannanshire for Adult Social Care	Final Report Issued
9.	Partnership and Performance / People	Leisure Income Follow Up Review	Final Report Issued
10.	Partnership and Performance / All Directorates	Freedom of Information Requests	Final Report Issued
11.	All Directorates	Care Home Residents Monies	Final Report Issued
12.	Partnership and Performance / All Directorates	Overtime Arrangements	In Progress

	Client / Directorate	Assignment	Status
13.	Place / Partnership and Performance	Energy Bills Support Scheme (EBSS)	Not Started
14.	People	School Admissions Policy	Not Started
15.	Partnership and Performance / All Directorates	Use of Purchase Cards	In Progress
16.	Partnership and Performance / All Directorates	Community Benefits	Not Started
Other Client Work			
17.	Clackmannanshire and Stirling Integration Joint Board	The Internal Audit Plan for 2023/24 was presented to the IJB Audit and Risk Committee on 28 June 2023.	In Progress
18.	Central Scotland Valuation Joint Board	The Internal Audit Plan for 2023/24 was presented to the Central Scotland Valuation Joint Board on 30 June 2023.	In Progress

INTERNAL AUDIT PLAN 2023/24 ASSIGNMENT OUTCOMES

Summary of Key Findings from Reviews Complete to Final Report
Not Previously Reported to Committee

Review	Directorate	Assurance
Freedom of Information Requests	Partnership and Performance	Substantial / Limited Assurance
Scope	Final Report Executive Summary	
<p>The Freedom of Information (FOI) (Scotland) Act 2002 (the Act) gives the public a right of access to recorded information of any age held by Scottish public authorities. Any person who requests information is entitled to receive it within 20 working days.</p> <p>Certain types of information may, however, be regarded as exempt from disclosure, and a refusal of request issued instead to the applicant. This includes:</p> <ul style="list-style-type: none"> • Personal data; • Commercially sensitive information; • Legal documents and court proceeding records; and • Information which may endanger the health and safety of an individual if disclosed. <p>For a request to be valid under the Act, it must:</p> <ul style="list-style-type: none"> • be submitted in writing (e.g. letter, email, or online form) or in another permanent form which is capable of being used for subsequent reference (e.g. voice mail message – providing the message is retained); • state the name of the applicant and an address for correspondence; and • clearly describe the information requested. <p>The Act details what enforcements are available to the Scottish Information Commissioner (SIC) if there are any breaches in the Act. The first stage is an 'information notice' where the SIC may give notice in writing requiring information to confirm compliance with the Act. If at this point the SIC is satisfied that the Authority has failed to comply the SIC issue an 'enforcement notice' requiring the Authority to take steps as specified in the 'enforcement notice' for complying. Failure to comply with both notices mentioned above could result in the SIC writing to the Court of Session resulting in possible financial fines. There have been</p>	<p>Applicants do not have to specifically mention the Act or direct their request to a designated member of staff. All FOI requests are logged onto a database which was designed and built in-house. This system documents the date, time the request was logged, and responses given. There are templates stored in the database which are used depending on the response required. The database also calculates the response deadline and issues reminder emails to the assigned Monitoring Officer.</p> <p>FOI Monitoring Officers are allocated at Service level within each Directorate, who are responsible for opening and closing FOIs on the in-house database system. They also manage the generic mailbox. Investigating Officers are members of staff who have access to the information requested, and are delegated by the Monitoring Officers to provide the appropriate information to them in order to answer the request. The Governance Team consists of two Governance Officers, reporting to the Senior Governance Officer. They provide advice and support to the Services for all FOI matters and also administer the database.</p> <p>All staff consulted during the review were clear about their roles and responsibilities which is reflected in Governance team role profiles, however, there is scope to further improve the role profiles of the Monitoring Officers.</p> <p>From the review of the in-house database and the information generated / recorded once FOI requests are received, we are content that there are robust controls in place to receipt and monitor FOIs. During the period April 2022 to November 2023 the Council received 1,985 FOI requests. Responses to these requests generated an additional 50 reviews of the way in which the request was handled and / or review of the response provided, and 16 appeals to the SIC.</p> <p>There are adequate guidance documents from Scottish Executive, and the Council's own 'Basic Guidance' document to manage the FOI process. We found that staff are complying with the guidance, however, there are no Council specific FOI policies in place; there is sufficient information on FOI requests and how they are treated, however, a lack of Operating Procedures detailing how the Monitoring Officers and Governance team work together, specifically, around the follow up of delayed / unanswered responses. Although staff are complying with the guidance, it was found that there are no procedures detailing actions and responsibilities for following up on outstanding requests.</p> <p>A sample of 48 FOI requests were reviewed to assess compliance with the relevant guidance. All were found to be correctly logged on the database and allocated to the appropriate Monitoring Officer in a timely manner. There is a full audit trail for each request on the system noting time and date of each interaction. There were, however, significant issues highlighted with response times. The testing found 46% of requests were not answered within the statutory time frames. If the number of unanswered requests and reviews are not addressed the Council could receive an enforcement notice from the SIC. We recommend action is taken to improve the number of FOI request and reviews answered within the statutory timeframe of 20 working days to ensure no requests remain unanswered. This could be achieved through additional scrutiny of outstanding requests / reviews on the database, as well as additional reporting by the Governance team to the Senior Leadership Group.</p> <p>The Governance Officer updates the Pentana performance management system with monthly figures on a range of areas, including the number of FOI requests received, and the number of FOI requests for which a response was made on time. Pentana does not have a separate column showing the number of requests not answered with the time frame, however, a simple subtraction of the numbers received and numbers answered on time does give this figure. No separate reports are issued to the Senior Leadership Group for discussion. We recommend that the monthly figures are distributed and discussed at the Senior Leadership Group, with action taken where required in relation to delayed and no responses. Inconsistencies were also found when reporting quarterly performance to the Scottish Information Commissioner (SIC) for publication on their website, compared to what was recorded on the database.</p>	

no decision notices issued for the Council.	Training is available to staff, albeit this is not mandatory for staff with only 15 employees completing the eLearning module in the year to March 2023. We also recommend that FOI training is made mandatory to all staff.
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DEFINITION OF INTERNAL AUDIT ASSURANCE CATEGORIES

Level of Assurance	Definition
Substantial assurance	Largely satisfactory risk, control, and governance systems are in place. There is, however, some scope for improvement as current arrangements could undermine the achievement of objectives or leave them vulnerable to error or abuse.
Limited assurance	Risk, control, and governance systems have some satisfactory aspects. There are, however, some significant weaknesses likely to undermine the achievement of objectives and leave them vulnerable to an unacceptable risk of error or abuse.
No assurance	The systems for risk, control, and governance are ineffectively designed and operated. Objectives are not being achieved and the risk of serious error or abuse is unacceptable. Significant improvements are required.

Report to: Audit and Scrutiny Committee

Date of Meeting: 18th April 2024

Subject: Exceptions from the Application of Contract Standing Orders

Report by Strategic Director Partnership & Performance

1.0 Purpose

- 1.1 It is a requirement of Contract Standing Orders that exceptions should be reported to the next available Audit & Scrutiny Committee. The purpose of this paper therefore is to provide detail on any Exceptions to Contract Standing Orders submitted in the previous quarter.

2.0 Recommendations

- 2.1 The Committee is asked to note the report, commenting and challenging as appropriate

3.0 Considerations

- 3.1 Contract Standing Orders (CSO's) apply to all contracts entered into by Council officers. In some circumstances however, exceptions may be granted.
- 3.2 The appropriate senior manager must record their reasons in writing in the form of an exception report for a decision, which must be submitted to the Strategic Director, Partnership and Performance, for consideration.

The Strategic Director is required to consult with the Chief Finance Officer (S95) and Procurement Manager before taking any action that binds the Council. It is a requirement that any such exception shall be reported retrospectively in full to the next Audit & Scrutiny Committee, including the reasons that fully justify the exception. A summary of CSO exemptions will also be provided as part of the Annual Procurement report to the Audit & Scrutiny Committee.

- 3.3 Two exceptions were considered since the last report in March 2024
- 3.3.1 To permit the direct appointment of Skitech Systems to supply replacement artificial ski slope matting over a period of 2 financial years to the value of £46,000.

The basis of the exception request is that, in terms of Contract Standing Orders section 6 (8) The purchase of goods or materials, the execution of

works or supply of services for which the procurement officer considers that no genuine competition can be obtained

Reference 2/6/2129

Granted

Based on the information provided the exception was granted as there is no other UK provider of the specific matting required for the ski slope (style, size) and without replacing the worn matting the quality of the ski slope experience would diminish and the volume of customers would decline reducing the income generation potential of the venue. The alternative would be to change the whole slope's existing matting at a much greater expense to the Council..

Conditions

A Procurement Form 2 should be completed and authorised for this requirement

A Purchase order should be raised to cover the requirement

The Award should be published in Public Contracts Scotland

- 3.3.2 To permit the appointment of all current DPS operators (Lots 1 and 2) to Supply school and other passenger transport service] over a further 12 month period to the value of £1,267,835 (190 school days).

The basis of the exception request is that, in terms of Contract Standing Orders section 6 (7) There is a genuinely justifiable case to use an existing contractor/supplier to maintain continuity of supply or site experience

Reference 2/6/2123

Granted

Based on the information provided the recommendation was approved.

The reason for the request was two-fold. The staff member who undertakes the tendering process is going to be absent from February to May 2024 due to unplanned surgery. The tendering for school transport and the implementation of the contracts once the tender has been awarded is a complex process. For ASN pupils the transport is personalised as it needs to meet the needs of the pupils. Pupils build up a relationship with taxi drivers and even the type of vehicle, they require support to transition for any change, this transition takes place during June and if the award of the tender is delayed the transition timetable could not be met, impacting on young people.

The second reason is was currently due to the impact of historically high levels of inflation and interest rates the experience from re tendering in other local authorities is that the market is very volatile and the number of operators is limited and due to the recent high levels of inflation operators were asking for high prices to protect themselves against future price increases. It is predicted that by the beginning of 2025, inflation and interest rates will have decreased and this may assist the Council in obtaining better value by delaying the retendering. The current contract has no provision for automatic

uplifts. Although an exceptional uplift was agreed for large bus operators in 2022, no awards have been made since then. All current operators of both large buses and Taxis/Private Hire companies have been contacted and have all agreed to continue with their contracts until July 2025, subject to approval of the extension.

Conditions

Procurement Form 2 should be completed and authorised for this requirement
Purchase orders should be raised to cover the period requested for all the contracted suppliers on the DPS

The award notice in Public Contracts Scotland should be revised

4.0 Sustainability Implications

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

5.0 Resource Implications

5.1 Financial Details - there are no direct implications for the Council's budget arising from this report

8.2 Staffing - there are no direct implications for the Council's establishment arising from this report

6.0 Exempt Reports

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

7.0 Declarations

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

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

Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all
Our families; children and young people will have the best possible start in life
Women and girls will be confident and aspirational, and achieve their full potential
Our communities will be resilient and empowered so that they can thrive & flourish

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

Contract Standing Orders

Financial Regulations

8.0 Equalities Impact

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

N/A

9.0 Legality

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

10.0 Appendices

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

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)

No (please list the documents below)

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Derek Barr	Procurement Manager	2017

Approved by

NAME	DESIGNATION	SIGNATURE
Stuart Crickmar	Strategic Director Partnership & Performance	