



**Clackmannanshire
Council**

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Comhairle Siorrachd
Chlach Mhanann

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

Audit and Scrutiny Committee

Thursday 6 February 2025 at 9.30 am

**The meeting will be held in
Council Chambers, Kilncraigs, Alloa**



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.

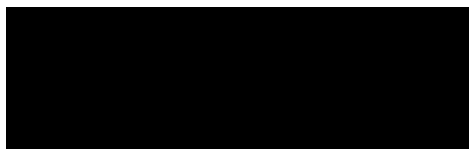
Members of the public are welcome to attend our Council and Committee meetings to see how decisions are made.

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29 January 2025

A MEETING of the AUDIT AND SCRUTINY COMMITTEE will be held in COUNCIL CHAMBERS, KILNCRAIGS, ALLOA on THURSDAY 5 FEBRUARY 2025 at 9.30 am.



**Chris Alliston
Strategic Director (Partnership and Performance)**

B U S I N E S S

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| 1. | Apologies | -- |
| 2. | Declaration of Interests
Members should declare any financial or non-financial interests they have in any item on this agenda, identifying the relevant agenda item and the nature of their interest in accordance with the Councillors' Code of Conduct. A Declaration of Interest form should be completed and passed to the Committee Officer. | -- |
| 3. | Confirm Minutes of Meetings of the Audit and Scrutiny Committee held On 12 December 2024 (Copy herewith) | 07 |

Audit and Finance

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| 4. | Corporate Risk Register– report by the Senior Manager, Performance and Transformation (Copy herewith) | 13 |
| 5. | Internal Audit Progress Report - report by the Internal Audit Manager (Copy herewith) | 27 |
| 6. | Internal Audit Actions – Progress Report – report by the Strategic Director, Partnership and Performance (Copy herewith) | 37 |

Scrutiny

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| 7. | Clackmannanshire and Stirling Integration Joint Board Annual Performance Report 2023-2024 – report by the Head of Strategic Planning and Health Improvement (Copy herewith) | 91 |
| 8. | External Audit Recommendations: Progress Report – report by the Strategy and Performance Adviser (Copy herewith) | 137 |
| 9. | Partnership and Performance: 2024-2025 Half Year Business Plan Update – report by the Strategic Director, Partnership and Performance (Copy herewith) | 151 |

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10. Interim Report – People Community Wellbeing Plan 2024-25 – report by the Strategic Director, People (Copy herewith)	175
11. Place: 2023-2024 Year End Business Plan Report – report by the Strategic Director, Place (Copy herewith)	231
12. Public Bodies Climate Change Report Duty (PBCCRD): Clackmannanshire Council Annual Report 2023-24 Internal Audit – report by the Strategic Director, Place (Copy herewith)	253
13. Environmental Health: Official Food Control Progress Report – report by the Strategic Director, Place (Copy herewith)	297

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 in Council
Chambers, Kilncraigs, Alloa on THURSDAY 12 DECEMBER 2024 at 9.30 AM.**

PRESENT

Councillor Janine Rennie (Chair)
Councillor Donald Balsillie (S) (Teams from 10.41am)
Councillor Martha Benny
Councillor Denis Coyne
Councillor Kenneth Earle
Councillor Scott Harrison (S)
Councillor Bryan Quinn

IN ATTENDANCE

Chris Alliston, Strategic Director (Partnership & Performance)
Helena Arthur, Solicitor, Legal and Governance (Partnership & Performance) (Depute Clerk to the Committee)
Kevin Wells, Strategic Director (Place)
Lorraine Sanda, Strategic Director (People)
Sharon Robertson, Chief Social Work Officer (People)
Cherie Jarvie, Senior Manager, Partnership and Transformation (Partnership & Performance)
Lindsay Sim, Chief Finance Officer (Partnership & Performance)
Wendy Forrest, Head of Strategic Planning & Health Improvement
Nicola Mack, Chief Accountant (Partnership & Performance)
Lesley Baillie, Strategy & Performance Adviser (Partnership & Performance)
Alison Davidson, Economic Development Team Leader (Place)
Ali Hair, Senior Manager HR (Partnership & Performance)
Sarah Langsford, Senior Manager HR (Partnership and Performance)
Andrew Buchanan, Housing Operations Manager (Place) (Teams)
Melanie Moore, Committee Services, Legal and Governance (Partnership & Performance) (Minute)
Gillian White, Committee Services, Legal and Governance (Partnership & Performance)

ON TEAMS

Colin Bruce, Chief Education Officer (People)
Adrienne Aitken, Senior Manager, ELC and Early Years (People)
Margaret Lewis, Senior Manager, Care and Protection (People)
Michael Boyle, Improving Outcomes Business Manager (People)
Scott McDonald, Senior Manager, Justice Services (People) (Teams)
Johan Roddie, Senior Manager, Permanence (People)
Dale Bell, Solicitor, Legal & Governance (Partnership & Performance)
Gillian Scott, Senior Manager, Early Intervention (People)
Isabel Wright, Internal Audit Manager, Falkirk Council
Sarah McPhee, Senior Internal Auditor, Falkirk Council
Euan Murray, Chief Finance Officer, Clackmannanshire & Stirling Health and Social Care Partnership

AS(24)77 APOLOGIES

Apologies for absence were received from Councillor Phil Fairlie, Councillor Ellen Forson and Councillor William Keogh. Councillor Scott Harrison was substituting for Councillor Ellen Forson and Councillor Donald Balsillie was substituting for Councillor Phil Fairlie.

AS(24)78 DECLARATIONS OF INTEREST

None.

**AS(24)79 MINUTE OF AUDIT AND SCRUTINY COMMITTEE HELD ON
24 OCTOBER 2024**

The minutes of the meeting of the Audit and Scrutiny Committee held on Thursday 24 October 2024 were submitted for approval.

Decision

Councillor Coyne noted on page 10 at the bottom of the page mentioned that “15 members remained present” this should read “5 members remained present”. With the amendment to the minutes, the minutes of the meeting of the Audit and Scrutiny Committee held on Thursday 24 October 2024 were agreed as a correct record by the Committee.

**AS(24)80 COUNCIL FINANCIAL PERFORMANCE 2024/25 AS AT SEPTEMBER
2024**

The report, submitted by the Chief Finance Officer, provided an update on the financial performance for the Council, as at September 2024, in respect of: the General Fund (GF) revenue and capital spend and the achievement of savings for the current financial year 2024/25 and the Clackmannanshire element of the Stirling & Clackmannanshire Health and Social Care Partnership (H&SCP) revenue spend.

Motion

That the Committee agrees the recommendations 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:

1. The General Fund revenue forecasted overspend of £0.054m for the year to 31 March 2025;
2. The Clackmannanshire element of the Health and Social Care Partnership (H&SCP) forecasted overspend of £6.093m, for the year to 31 March 2025;
3. The balances of earmarked reserves held and used to date and remaining balances;
4. The General Fund Capital Programme forecasted to underspend by £(5.512)m, with proposed carry forward of £4.971m; and
5. The progress to date in delivering the £5.383m approved savings programme, currently forecast to achieve £4.841m, 90%, as at 31 March 2025.

Councillor Scott Harrison arrived during the above item (10.06 am)

AS(24)81 HRA FINANCIAL PERFORMANCE 2024/25 AS AT SEPTEMBER 2024

The report, submitted by the Chief Finance Officer, provided an update on the financial performance, as at September 2024, in respect of the Housing Revenue Account (HRA) revenue and capital spend, for the financial year, 2024/25.

Motion

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

Moved by Councillor Janine Rennie. Seconded by Councillor Martha Benny.

Decision

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

1. The HRA revenue forecasted surplus of £(4.288)m which is £(1.347)m greater than budgeted for the year to 31 March 2025;
2. The HRA Capital programme forecasted underspend of £(3.689)m, and
3. Note the adjustments to the HRA Revenue and Capital budgets approved by Council at the meeting on 28 November (para 5.3).

AS(24)82 ANNUAL REPORT TO THE CHIEF SOCIAL WORK OFFICER 2023-2024

The report, submitted by the Chief Social Work Officer, presented the Chief Social Work Officer (CSWO) Annual Report reflecting the reporting period 1 April 2023 to 31 March 2024 (attached as Appendix 1).

Motion

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

Moved by Councillor Janine Rennie. Seconded by Councillor Kenneth Earle.

Decision

Having scrutinised the report the Committee agreed to:

1. Note and endorse the content of the Chief Social Work Officer Annual Report 2023-24;
2. Approve its submission to the Office of the Chief Social Work Officer Advisor to the Scottish Government.

**AS(24)83 HSCP – CLACKMANNANSHIRE LOCALITY PERFORMANCE REPORT
2024/25 Q1 & Q2 (APRIL TO SEPTEMBER)**

The report, submitted by the Head of Strategic Planning and Health Improvement, highlighted the work and performance of the Clackmannanshire and Stirling Health and Social Care Partnership in relation to performance for the locality of Clackmannanshire.

Motion

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

Moved by Councillor Janine Rennie. Seconded by Councillor Kenneth Earle.

Decision

The Committee agreed to:

1. Note the paper and the continuing work being undertaken across Clackmannanshire;
2. Note the performance of Clackmannanshire Locality with the Clackmannanshire & Stirling HSCP.

AS(24)84 ECONOMIC DEVELOPMENT UPDATE

The report, submitted by the Strategic Director, Place, updated Committee on the range of work being undertaken within the Economic Development Team and to highlight the collaborative and partnership working across both internal and external services, demonstrating how these activities align with Council priorities and contribute to strategic outcomes. (Team structure, Case studies, employability data (including feedback on Clackmannanshire Works service). UK Shared Prosperity Fund information and an Employability System map are provided in Appendices 1-5).

Motion

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

Moved by Councillor Janine Rennie. Seconded by Councillor Bryan Quinn.

Decision

Having commented on the report and provided feedback on activity, outcome and work being undertaken, the Committee agreed to note the contents of the report.

In line with Standing Order 10.23, the Chair adjourned the meeting at 11.27 am for a short comfort break. When the meeting resumed at 11.42 am, 6 members were present. Councillor Earle left during the break and Councillor Balsillie joined the meeting on MS Teams.

AS(24)85 COMMUNITY EMPOWERMENT ACT ANNUAL REPORT (PARTICIPATION REQUESTS AND ASSET TRANSFER) AND PARTICIPATORY BUDGETING PERFORMANCE REPORT

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, outlined the Council's performance against its Participatory Budgeting ambition. The report details the activities for the Council for the reporting year 1 April 2023 – 31 March 2024.

Motion

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

Moved by Councillor Janine Rennie. Seconded by Councillor Martha Benny.

Decision

The Committee agreed to note the report and accompanying appendices.

AS(24)86 ANNUAL COMPLAINTS REPORT 2024/24

The report, submitted by the Senior Manager, Legal and Governance, presented an overview of performance in relation to complaints handling during the year 2023/24.

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 performance of Council services in handling complaints.

AS(24)87 INTERIM WORKFORCE STRATEGY UPDATE

The report, submitted by the Senior Manager, HR and Workforce Development (Acting), provided Committee with a progress update on the actions contained within the agreed Interim Workforce Strategy 2023-25.

Motion

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

Moved by Councillor Janine Rennie. Seconded by Councillor Coyne.

Decision

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

AS(24)88 REDEPLOYMENT UPDATE

The report, submitted by the Senior Manager, HR and Workforce Development (Acting), provided the Committee with an update on progress regarding the revised Redeployment process which was agreed by Council in November 2023.

Motion

That the Committee agrees the recommendations 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)89 AUDIT & SCRUTINY COMMITTEE ANNUAL REPORT FOLLOW UP

This report, submitted by the Strategic Director, Partnership and Performance, presented to Committee the 2023/2024 Audit and Scrutiny Annual Report.

The Strategic Director, Partnership and Performance advised that there were a couple of errors within the report. At 3.5 on page 186 was put in error and on 8.1 in the appendix on page 195 should read quarterly.

Motion

That the Committee agrees the recommendations 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, also agreed to submit its Annual Report 2023/2024 (Appendix A) to the next available Council meeting for comment, challenge and approval.

Ends 12:36hrs

Report to Audit & Scrutiny Committee

Date of Meeting: 6th February 2025

Subject: Corporate Risk Register

Report by: Senior Manager, Partnership & Transformation

1.0 Purpose

- 1.1. This report provides Committee with the 2024/25 quarter 3 update on Clackmannanshire Council's Corporate Risk Register (Appendix A).

2.0 Recommendations

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

3.0 Considerations

3.1. Purpose of Risk Management

- 3.1.1. The Council has set out key priorities in the Local Outcomes Improvement Plan (LOIP) and Be the Future programme. To effectively plan how goals will be achieved, we must also consider the internal and external challenges with the potential to prevent or hinder their achievement. An effective risk approach ensures we are aware of such factors and, where appropriate, take action to mitigate risks to ensure the success of its initiatives.
- 3.1.2. The purpose of risk management is not to prevent activities from taking place, but to ensure all relevant factors are taken into account in planning and implementation so the best possible outcomes are realised. On a daily basis, Council officers and services deal with a wide variety of operational risks to individuals, communities and internal processes. However, the corporate risk approach must take a more strategic view and consider short-, medium- and long-term implications, as well as (often complex) interdependencies.
- 3.1.3. The impact of the pandemic, energy and cost of living crises, and other global events on Council services and the local community has been significant, and risk management remains critical to ongoing response and recovery planning. The hierarchy of registers from team, service, directorate and partnership up to the corporate register should ensure holistic oversight of significant issues that must be managed at each level. In addition, in relation to Civil Contingencies and Incident Management, risk assessment has been critical in supporting the Council to respond and manage service provision safely.

3.2. Corporate Risk Management Process

- 3.2.1. The corporate risk register is owned by the Senior Leadership Group, and the Strategic Director – Partnership & Performance is responsible for the corporate risk approach. All employees have responsibilities in managing risks, as do Elected Members in their remit of strategic planning, decision-making, resource allocation, scrutiny and challenge. The Council follows a systematic process, reporting corporate and service risks to Committee on a regular basis. The process is assessed via internal and external governance mechanisms, and peer-reviewed by other authorities and partners.
- 3.2.2. Each quarterly review involves ‘environmental scanning’ of information from internal and external sources to inform discussions with a range of individuals and groups. Issues are considered by the Corporate Risk & Integrity Forum (including risk owners and/or delegated officers) to:
- Review changes and developments in existing corporate and service risks;
 - Assess emerging externally-identified risks for potential local relevance;
 - Evaluate emerging internally-identified risks (Int. Audit/self-assessed); and
 - Consider significant risks, or those with cross-service implications, for escalation to the corporate level, or demotion if severity has reduced.
- 3.2.3. It is impossible to remove all risk from our operations as most functions have inherent risks, as do most changes. Moreover, not changing would expose us to other risks, such as failing to comply with new legislation, develop our workforce/practices, or take advantage of new opportunities, collaborations and innovations. The aim, therefore, is not to be ‘risk averse’ but ‘risk aware’.
- 3.2.4. We identify our approach to managing each risk as:
- Treat: we will take action to reduce the risk;
Tolerate: actions within our control are complete and plans in place;
Transfer: the risk will be passed to another party, such as insurers; or
Terminate: the activity that is causing the risk will be ceased.

3.3. Current Risk Profile & Development Activity

- 3.3.1. Mitigation efforts continue across the range of risks, either to reduce the likelihood of risks materialising, or responding to reduce the impacts, often related to worsening external factors. Particular attention is being focussed on the 3 risks escalated at the half year stage, relating to new duties under the UN Convention on the Rights of the Child (UNCRC), condition of the school estate, and Reinforced Autoclaved Aerated Concrete (RAAC). In this review, scores for Workforce Planning and Climate Change have increased, with reasons and remedial actions provided in the detailed updates.
- 3.3.2. The Risk Management Strategy delivery plan (presented to Committee in August) continues to be rolled out to enhance the organisation’s governance assurance and risk maturity. This includes 24/25 actions around training and engagement on risk and the Pentana performance management system. A new Pentana self-assessment process has been piloted around UNCRC, with the aim of further roll-out to other assessments, such as the Public Service Improvement Framework. Work is also ongoing to improve integration with other risk handling and governance mechanisms, including Internal Audit, the Annual Governance Statement, and Best Value audits.

4.0 Sustainability Implications

4.1. *No direct sustainability implications arising from this report.*

5.0 Resource Implications

5.1. *Financial Details – No direct financial implications arising from the 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 in the report. Yes ☒

5.4. *Staffing – 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

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

Complies with relevant Council Policies ☒

8.0 Equalities Impact

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

9.0 Legality

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

10.0 Appendices

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

Appendix A – Corporate Risk Register

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 ☒

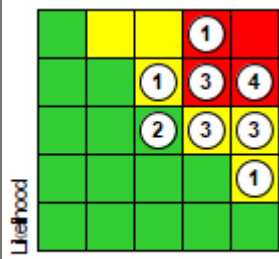
Author(s)

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

Approved by



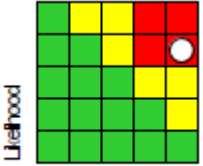
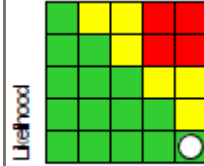
NAME	DESIGNATION	SIGNATURE
Cherie Jarvie	Senior Manager, Partnership & Transformation	
Chris Alliston	Strategic Director, Partnership and Performance	



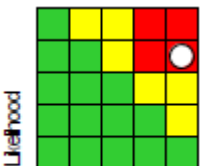
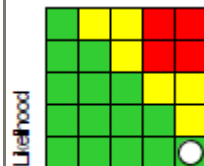
Appendix A - Corporate Risk Register



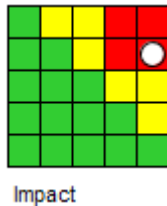
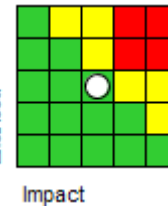
Summary of Changes	Score Distribution
<p>At the end of quarter 3, 2024/25 (out of a total of 18 risks):</p> <p>Status</p> <ul style="list-style-type: none"> • 8 risks are red (increase from 7 previous report - 2024/25 half year) • 8 risks are amber (previously 9) • 2 risks are green (same as previous - often demoted unless ongoing scrutiny needed) <p>Approach</p> <ul style="list-style-type: none"> • 13 risks are being Treated (same as previous) • 5 risks must be Tolerated (same as previous) <p>Change in Scores Since Last Review</p> <ul style="list-style-type: none"> • The scores for 2 risks have increased (see below) • 18 risks remain the same • No risks have increased/reduced or been added to/removed from the register 	 <p>Lifehood</p> <p>Impact</p>



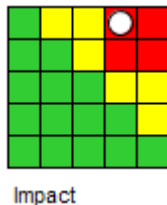
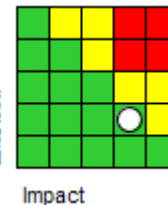
Code	Title (see risk details for expanded abbreviations)	Score	Status	Approach	Change
COU CRR 008	Insufficient Financial Resilience	20		Treat	
COU CRR 005	Impact of Poverty, Inequality & Changing Demographics	20		Treat	
COU CRR 046	IT System Failure	20		Treat	
COU CRR 050	Supply Chain & Labour Market Disruption	20		Tolerate	
COU CRR 012	Health & Safety Breach	20		Treat	
COU CRR 047	Inadequate Workforce Planning	16		Treat	
COU CRR 033	Major Governance Failure	16		Treat	
COU CRR 009	Information Not Managed Effectively	16		Treat	
COU CRR 049	Continued Contribution to Climate Change	15		Treat	
COU CRR 040	Failure of Public Utility Supply	15		Tolerate	
COU CRR 052	Failure to Comply with UNCRC	15		Treat	
COU CRR 054	Conflicting Needs Around Management of RAAC	12		Treat	
COU CRR 053	School Estate Condition Disrupts Education Provision	12		Treat	
COU CRR 031	Failure to Prepare for Severe Weather Events	12		Tolerate	
COU CRR 022	Public Health Emergency	12		Tolerate	
COU CRR 034	Insufficient Pace & Scale of Organisational Transformation	10		Treat	
COU CRR 011	Harm to Child(ren)	9		Treat	
COU CRR 023	Industrial Unrest	9		Tolerate	



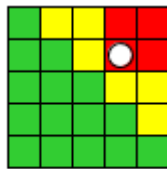
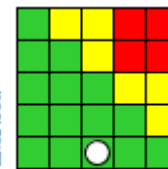
Approach Treat



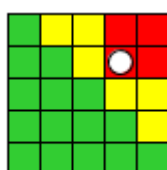
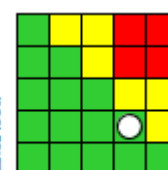
		Insufficient Financial Resilience	Senior Manager Finance & Revenues		Current Score	20	Target Score	5
Risk	The Council does not have a balanced budget to meet essential service demands, customer needs, or external agendas.				<div><div>Likelihood</div><div>Impact</div></div>		<div><div>Likelihood</div><div>Impact</div></div>	
Potential Impact	Reputational and legal implications and severe, extended loss of service provision. Possibility of Alliance, Health & Social Care and other partners also experiencing budget pressures contributes to potential impact, given the interdependencies.							
Note	The budget for 2024/25 was approved in March reflecting a balanced position and including savings to be achieved during the year. Due to the use of reserves and cash savings to balance the 24/25 budget, the budget gap for 25/26 has been estimated at £13m. This year's budget process is already progressing to take forward savings through transformation and other areas previously identified. The budget gap is also subject to the settlement funding from Scottish Government which will be known towards the end of the year. The reduction in score does not represent a material change in the projected budget gap but alignment with the revised risk guidance in reflecting that the balanced 24/25 budget means the risk will not materialise within this financial year.							
Related Actions	Audit of 2022/23 Accounts by Audit Scotland		COU EXA 223	Existing Controls	Budget Strategy & Monitoring			
	Use the agreed strategic change framework and organisational design principles to implement a whole organisation redesign		EXA BVA 1A0		Contract Standing Orders			
	Balance the drive for savings with the need for sufficient officer time and skills to support change and consider how to make more use of external assistance to support improvement		EXA BVA 4F0		Financial Regulations			



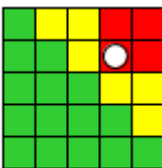
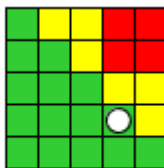
		Impact of Poverty, Inequality & Changing Demographics	Chief Executive		Current Score	20	Target Score	5
Risk	Services are not appropriately redesigned based on changing needs in relation to the ageing population, health, complexity of care or socio-economic factors, specifically poor outcomes associated with welfare reform, poverty and/or inequality and wider impacts associated with the cost of living crisis.				<div><div>Likelihood</div><div>Impact</div></div>		<div><div>Likelihood</div><div>Impact</div></div>	
Potential Impact	Inappropriate allocation of resources & assets, misalignment of corporate objectives to need, inability to demonstrate Best Value, and possible financial and reputational consequences of responding to unplanned situations.							
Note	The LOIP and Health & Care Strategic Plan set out partnership outcomes to strengthen community & place-based services. Key priorities are to reduce children living in poverty, develop inclusive growth and empower families & communities. Relevant actions include City Region Deal, Community Wellbeing & Community Wealth Building, as well as data analysis to inform decision-making and Poverty Impact Assessments. The risk score takes into account EU withdrawal, pandemic impacts, recent Child Poverty statistics and the cost of living crisis.							
Related Actions	Clackmannanshire Alliance Local Outcomes Improvement Plan 2017-27		CPP LOI	Existing Controls	Customer Consultation & Engagement			
	Implement Health & Care Partnership Strategic Delivery Plan		CRR HSC SDP		Budget Strategy & Monitoring			



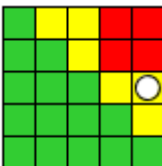
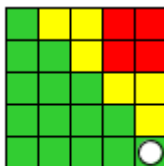
		IT System Failure	Senior Manager Partnership & Transformation		Current Score	20	Target Score	9
Risk	Full or partial loss of network/hardware/software/telecoms technologies (temporary or prolonged) due to cyber attack/other emergency, failure to manage maintenance/backups/suppliers/contracts, or lack of investment in systems/staff/training (i.e. failure of IT services to uphold priorities of Confidentiality, Integrity and Availability).							
Potential Impact	Financial impact from loss of productivity, service disruption (inc. statutory/vulnerable groups), inability to communicate, harm to staff/customers (access to records/Potentially Violent Persons register) & legal/regulatory/reputational implications.							
Note	A number of recent global issues and cyber incidents means this remains a high risk. Work is ongoing to raise awareness across the workforce of cyber risks and mitigations. The Council is also investing in ICT infrastructure and security as part of its Digital Transformation Strategy & roadmap. This will introduce security policies and tools, cloud hosted services, retire/replace legacy systems, invest in modern technology to support delivery, future ways of working & Digital Transformation ambitions. Implementation of MS365 has begun and will improve the stability and security of systems.							
Related Actions	Develop & deliver the Council's Digital Transformation Strategy			CRR P&P IT1	Existing Controls	Business Continuity Plans		
	Complete actions from IT Asset Management Plan			CRR P&P IT2		Service Level Agreements & Contracts		



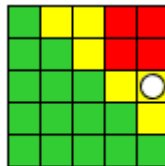

		Health & Safety Breach	Chief Executive		Current Score	20	Target Score	8
Risk	Incident or statutory breach results in injury or death of staff member or customer due to lack of awareness or non-compliance with policies and procedures. Incidents may also arise from third parties actions, outwith Council control.							
Potential Impact	The effects on individuals and their families, financial penalties (including Health & Safety Executive intervention fees), criminal proceedings, adverse publicity, increased insurance or damage to Council assets.							
Note	Progress is being made on ensuring that the basic foundations are in place, but we are still experiencing pockets where there is a fundamental lack of understanding of manager responsibilities which leaves the risk as high.							
Related Actions	Revised Health & Safety Strategy & Actions Plan			CRR P&P HR1	Existing Controls	Health & Safety Management System		
	Governance improvement actions across all services			CRR P&P LG1		Health & Safety Corporate Training Programme		



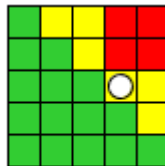
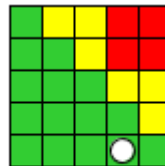
		Inadequate Workforce Planning	Strategic Director - Partnership & Performance			Current Score	16	Target Score	3
Risk	Due to lack of workforce planning the Council fails to ensure sufficient capacity/resource to deliver key Council service or fails to adequately develop its workforce to ensure that skills, knowledge and structures are appropriate, sustainable financially viable and compatible with our corporate vision.					 Likelihood Impact		 Likelihood Impact	
Potential Impact	Loss of key staff from posts identified as single points of failure, including statutory officers, leading to inability to delivery key functions and lack of adequate professional advice to Council Officers/Elected Members.								
Note	Failure to implement sufficient or proper workforce planning controls (at both service and strategic level) risks loss of key staff from posts identified as single points of dependency, failure to address the challenges of an ageing workforce, and failure to upskill current staff to meet current / future demands. This may lead to an inability to deliver key / statutory functions or provide adequate professional advice to Officers / Elected members.								
Related Actions	Develop & implement the strategic workforce plan 2022-25			CRR P&P HR4	Existing Controls	Strategic Workforce Plan			



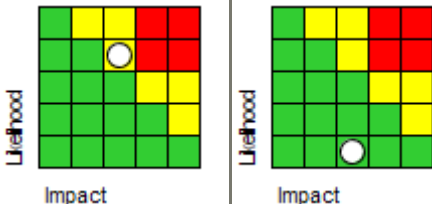
		Major Governance Failure	Strategic Director - Partnership & Performance			Current Score	16	Target Score	8
Risk	A significant failure of compliance with statutory duties through non-adherence to and/or lack of awareness or understanding of law, contract standing orders, scheme of delegation or financial regulations.					 Likelihood Impact		 Likelihood Impact	
Potential Impact	Significant reputational damage, injury or loss of life, legal action, financial loss or disruption to service delivery and challenge by third parties. Staffing changes and re-design reaffirm need to closely monitor & manage compliance with statutory requirements & good practice.								
Note	The Corporate Risk & Integrity Forum discuss governance & compliance on a quarterly basis. Mandatory training to officers to be carried out over the next few months. Scrutiny training was provided to Audit & Scrutiny Committee in Jun-23 and other Elected Members in Nov-23. Additional Governance training is currently in development and will shortly be added to the mandatory training suite for completion by all staff on an annual basis as concerns remain regarding breach of governance and the law.								
Related Actions	Annual Internal Audit & Fraud Programme			COU IAF	Existing Controls	Scheme of Delegation			
	Governance improvement actions across all services			CRR P&P LG1		Governance & Audit Processes			
	Addition of Governance to annual mandatory training suite			CRR P&P LG3		Committee Structures & Remits			



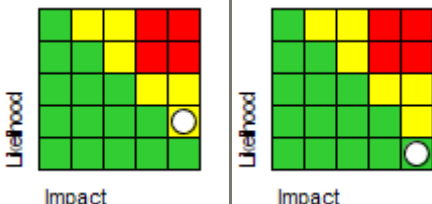
		Information Not Managed Effectively	Senior Manager - Legal & Governance			Current Score	16	Target Score	8
Risk	Information is not protected, managed or used effectively due to lack of compliance with information sharing, data protection, records management or IT principles/protocols, potentially leading to data breaches, inefficiency/duplication and strategic/performance management decisions based on poor quality/inaccurate business intelligence.					<div><div><div>Livelihood</div><div></div><div>Impact</div></div><div><div>Livelihood</div><div></div><div>Impact</div></div></div>			
Potential Impact	Legal/reputational/financial implications from breaches (regulators being the ICO and SIC can impose monetary penalties and enforcement notices), inefficiencies costing time/money, non-completion of (possibly statutory) duties. Loss of productivity, impacting morale, or misinformed decision-making if information not available/used.								
Note	Review of records / retention plans is well underway but report from Keeper of Records for Scotland will require additional work and support across the Council. The risk is still likely due to cyber essential accreditation still being outstanding. Work continues around opportunities from MS365. The review of Data Protection policies and partnership sharing agreements are well underway with a solicitor undertaken training in Data Protection. Issues around FOI handling will also require significant work by all directorates. The number of staff completing training is still low and as information governance training is not mandatory, manager support is essential.								
Related Actions	Develop & deliver the Council's Digital Transformation Strategy			CRR P&P IT1	Existing Controls	Data Sharing Agreements			
						GDPR Guidance & Training			



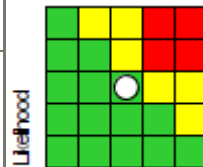
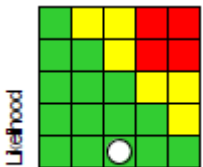
		Continued Contribution to Climate Change	Strategic Director - Place			Current Score	15	Target Score	5
Risk	The Council fails to play its part in addressing the climate emergency, such as by not adapting to climate change, reducing waste and travel, making available resources, using/promoting sustainable practices, materials & technologies or failing to act as an ambassador for national & international good practice as it emerges.					<div><div><div>Livelihood</div><div></div><div>Impact</div></div><div><div>Livelihood</div><div></div><div>Impact</div></div></div>			
Potential Impact	Worsening environmental impacts including flooding (see Severe Weather risk), increased fuel poverty (with health/social impacts), missed efficiency savings/economic opportunities and poorer air quality. Reputational impacts of not supporting national/international policy, and legal implications of not meeting targets or demonstrating progress.								
Note	Initiatives are progressing around assets, housing, energy, food, waste, technology & transport, with Climate Emergency and community forums supporting strategy development. The City Deal International Environment Centre proposal will place Clackmannanshire at the forefront of Scotland's mitigation efforts. Score increased based on Scottish National Adaptation Plan (2024-29): "Scotland faces high and growing risks from climate change, including a projected 75% loss in habitat suitability for key upland species by 2100, up to a 40% rise in flood damages by 2080, and significant threats to infrastructure, biodiversity, and public health, underscoring the urgent need for coordinated adaptation efforts and resilience measures".								
Related Actions	Climate Change Strategy and Climate Emergency Action Plan			PLC 213 101	Existing Controls	Local Biodiversity Action Plan			
	Develop routemap to compliance with EESSH2 for all Council Housing stock.			PLC 213 104		Regional Energy Masterplan			
	Deliver CRD programme in line with delivery plan/financial profile			PLC 213 111		Sustainable Food Growing Strategy			

		Failure to Comply with UNCRC	Chief Executive	Current Score	15	Target Score	
Risk	Lack of cross-service action to implement requirements of the UN Convention on the Rights of the Child results in poor staff awareness and/or lack of process review to ensure children’s rights are upheld across all aspects of service delivery			<div><div></div><div>Impact</div></div> <div><div></div><div>Impact</div></div>			
Potential Impact	Failure to act in a child’s best interests, possibly exacerbating inequalities for vulnerable individuals/groups, or failure to demonstrate corporate commitment, with associated legal, financial & reputational implications of a regulatory breach						
Note	The UNCRC (United Nations Convention on the Rights of the Child) (Incorporation) (Scotland) Act 2024 became law on the 16th of July. The Act expects that Scottish public bodies act in a child’s best interests in all matters that affect them, ensuring their voices are heard, and that upholding children’s rights is evident across all public service delivery. A short life working group has been established to look at key work strands, including staff development/awareness, Youth Voice, child-friendly complaints and policy development. Guidance from the Scottish Government, SPSO (Scottish Public Services Ombudsman) and the Improvement Service is being followed, and the Council will be required to document and evidence steps towards implementation in a report to the Scottish Government in March 2025.						
Related Actions	Carry out ‘How Ready are You?’ audit to check compliance & identify priority actions		CRR COU CR1	Existing Controls	Equalities Impact Assessment		
	Implement Child Friendly Complaints process (no later than 31-Mar-25)		CRR COU CR2		Team Leader/Senior Manager Forum		
	Communicate UNCRC duties to staff, customers & partners to raise awareness of implications		CRR PPL ED1		Youth Voice Forum		



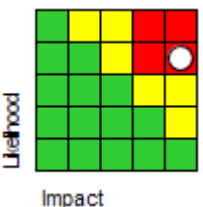



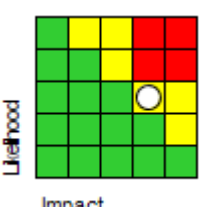
		Conflicting Needs Around Management of RAAC	Strategic Director - Place	Current Score	12	Target Score	4
Risk	Potential deterioration of buildings with RAAC (Reinforced Autoclaved Aerated Concrete) into unsafe structures, requiring options appraisal that addresses both strategic implications (financial, assets and duty of care for residents), and the needs of individuals directly affected by uncertainty and other personal impacts, including financial			<div><div></div><div>Impact</div></div> <div><div></div><div>Impact</div></div>			
Potential Impact	Domestic properties become uninhabitable, increasing voids & pressure demand on housing/homelessness services, with affordable housing already in high demand & short supply. Unbudgeted financial cost to housing services, community impacts and reputational damage through activism & negative media publicity.						
Note	Ongoing works across domestic estate being undertaken by structural engineers. Options appraisal currently in development to assess forward actions (to Council in Jan-2025). Continued engagement with residents and relevant sector organisations when information is available. A Project Co-ordinator is in place to progress the necessary programme and 'maintain and monitor' regime continues throughout affected blocks. In communication with structural engineer to prepare for next phase of more extensive assessment of tenanted blocks, resident engagement will begin once more information known.						
Related Actions	Focused resource to manage the RAAC survey programme, communications and resident support actions		PLC DRR 003	Existing Controls	Scottish Government RAAC Cross-sector Working Group		
	Housing service leads part of Scottish Government RAAC Cross Sector Working Group		PLC DRR 004		RAAC Survey Programme Housing Need & Demand Assessment		



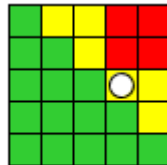
		School Estate Condition Disrupts Education Provision	Senior Manager - Property			Current Score	12	Target Score	3
Risk	Failure to adequately invest in the school estate results in degradation in the condition of establishments below acceptable standards for continuation of service delivery, requiring displacement into alternative accommodation								
Potential Impact	Health & Safety implications, unusable assets, disruption to learning & attainment, workforce & financial capacity to manage transport & temporary accommodation, reputational & legal implications relating to provision of statutory function								
Note	Recent condition survey highlights 5 schools categorised as poor condition. Although they remain safe and wind/water-tight, investment is required to improve their standard as it is the Council's expectation that all schools are categorised as at least "Good" on external survey. Without future-proofing, continued degradation may require relocation to other facilities (possibly at a critical point in the academic calendar), with learning & attainment impacts felt more acutely by learners for whom routine and consistency are more crucial factors (such as some with special educational needs).								
Related Actions	Seek Council approval to focus investment on the identified schools (graded as "Poor")			CRR PLC PT1	Existing Controls	Property Asset Management Strategy			
	Carry out options appraisal on the full learning estate			CRR PLC PT2		Condition Surveys (Hollis Report)			



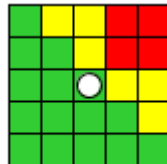
		Insufficient Pace & Scale of Organisational Transformation	Chief Executive			Current Score	10	Target Score	5
Risk	The Council fails to proactively drive the fundamental redesign of services and organisational planning/development with the speed required to address the funding gap due to ineffective change management.								
Potential Impact	Failure to maintain the required level of provision for statutory services. The corporate business improvement programme does not establish sustainable service delivery and a sustainable cost base for the future.								
Note	Governance of the Capital Plan is in place with regular meetings to take place with the project leads to monitor milestones, resources, risks etc. and to put in place appropriate measures for reporting and monitoring. There are now consistent and standardised project updates for the Be the Future board with a benefits realisation plan to be developed. A forward plan for Be the Future updates to Council and Be the Future Agenda items to be tabled is being developed. Key messages from the programme are to be circulated and a detailed communication and engagement strategy is in development.								
Related Actions	Be the Future Transformation Programme			COU TRN	Existing Controls	Be the Future Board			

		Harm to Child(ren)	Strategic Director - People		Current Score	9	Target Score	3	
Risk	A lack of capacity, stability or skillset in key roles reduces the Council's ability to fulfil statutory requirements and intervene to prevent the serious harm to a child/children.								
Potential Impact	Effects of injury or death on individual, family, friends & staff members, reputational & legal implications, with associated costs, as well as impact of reputational damage & negative publicity on morale, workforce development and sustainability.								
Note	Robust internal controls ensure appropriate staffing, leadership & assurance, including quarterly reports to Chief Officer Group and Child Protection Committee (CPC), regular review of CPC Risk Register and prioritisation of child protection work. There is an annual intense/robust Child Protection training programme for Newly Qualified Social Workers to ensure qualified staff have the skillset/confidence/competence to fulfil statutory requirements. We have successfully recruited team leaders & senior practitioners (part of Children's Services re-design) to build resilience and skill in the workforce. Vacant posts are recruited to in a timely manner and council specific/multi-agency training is in place, including implementation of the Forth Valley SCIM team (Scottish Child Interview Model). The e-IRD system allows agencies to respond in real time to those at risk of harm for timely assessments and interventions. While this risk has reached a green status, its significant nature means it is felt appropriate for constant review via the corporate register.								
Related Actions	Children's Services Plan 2021-24			PPL CHC CSP	Existing Controls	Child Protection Procedures			
	Clackmannanshire's Promise Plan 2023-26			PPL CHC PRO		Public Protection Chief Officers Group			
						Child Protection Committee			

Approach Tolerate

		Supply Chain & Labour Market Disruption	Chief Executive	Current Score	20	Existing Controls
Risk		Disruption to UK supply chains & labour markets as a result of EU withdrawal, increasing costs & delays in sourcing goods (particularly in construction), already materialising and could continue for an extended period or escalate				Service Level Agreements & Contracts
Potential Effect		The Council could fail to recruit or retain staff with the required knowledge & experience, and/or be subject to direct or third-party impacts if suppliers are unable to source goods/materials or staff to fulfil contractual obligations				Recruitment & Retention Policy
Note		Impact and Likelihood remain unchanged. Ongoing pressures on supply chain impacted by Supply issues due to overseas conflicts affecting in particularly food inflation also availability of Skilled staff with key suppliers. Brexit still impacting plus recruitment difficulties particularly for key roles internally and the availability of skilled staff internally				Procurement Processes & Procedures
		Failure of Public Utility Supply	Strategic Director - Partnership & Performance	Current Score	15	Existing Controls
Risk		Sustained loss of gas, electricity, water and communications over a significant area due to failure of a provider's infrastructure as a result of a local or national event.				Business Continuity Plans
Potential Effect		Fatality, injury or health risk, requirement to evacuate & find alternative accommodation, including for vulnerable people. Disruption to businesses, with potentially large costs, and impact on contact with health, care and emergency services.				Major Incident Procedures
Note		Ongoing monitoring and liaison with utility companies over the risks. National power outage plans have been developed at local, regional and national level. Community plans are in place and there is ongoing communication with our vulnerable customers on being included on the Priority Risk Register for all utility providers. We have direct Input into the UK NPO working group				Emergency Response Plan
		Failure to Prepare for Severe Weather Events	Strategic Director - Place	Current Score	12	Existing Controls
Risk		Inability to respond to severe weather events due to lack of appropriate planning & equipment (e.g. 4x4 vehicles). Most likely flooding from rain/coastal surge, winter weather or heatwave (increasing frequency & severity due to climate change).				Business Continuity Plans
Potential Effect		Widespread community dislocation (including possible risk to life), damage to property, businesses, roads & utility infrastructure (inc. telecoms & power), or inability of staff to get to workplace. Impact on delivery, reputation & finances, and increased workload in numerous services to support communities, including clearing roads and core paths (e.g. from fallen trees & other debris).				Winter & Flood Management Plan
Note		Controls are in place for monitoring and action as required. A new severe weather framework has been developed. Community Resilience teams in place in areas of high risk. Ongoing liaison and discussion with Met Office and SEPA, looking at the long term impacts of climate change				Forth Valley Local Resilience Partnership

		Public Health Emergency	Chief Executive	Current Score	12	Existing Controls
Risk	Significant numbers of Council staff and customers become ill due to the occurrence of a public health emergency, such as a flu pandemic, with spread potentially exacerbated through failure to vaccinate or follow hygiene protocols.					Business Continuity Plans
Potential Effect	Short- & long-term health implications for public & staff (inc. absence if ill or caring for others). Disruption to support & front-line services, inc. to already vulnerable groups. Consideration required of minimal service provision requirements.					Pandemic Flu Plan
Note	Continue to work at local, regional and national level on developing plans. Procedures and plans in place for dealing with those most affected including identified vulnerable residents. While pandemic impacts are still being felt and a number of issues require ongoing monitoring and management, the revised risk guidance means the likelihood/proximity of this risk can now be downgraded.					Major Incident Procedures

		Industrial Unrest	Chief Executive	Current Score	9	Existing Controls
Risk	Industrial action by Council staff, partners or suppliers arises, normally in relation to local or national budget-related changes to terms and conditions, or restructuring.					Business Continuity Plans
Potential Effect	Immediate effects on service delivery & those dependent on services, with financial and reputational damage, and residual impact on staff morale & productivity. In case of partners/suppliers may have to support or reduce activity/service delivery.					Trade Union Communications Protocol
Note	Negotiations are ongoing at national level for 24/25 however no settled position has been reached and there is the potential for increased industrial unrest. UNISON have a mandate for industrial action for waste although fell short for staff supporting schools. Strike action was suspended whilst members are balloted on updated pay offer although we understand that UNISON are recommending the offer is rejected, AN offer fro 24/25 is to be made to SNCT and Chief Officer groups.					Forth Valley Local Resilience Partnership

Report to: Audit & Scrutiny Committee

Date of Meeting: 06 February 2025

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 2024/25 Internal Audit Plan.

2.0 Recommendations

- 2.1 It is recommended that the Committee notes:

- (1) the progress being made with completion of the 2024/25 Internal Audit Plan;
- (2) the additional audit work undertaken in Adult Social Care which may impact on completion of the 2024/25 Internal Audit Plan; and
- (3) the action taken to kickstart the National Fraud Initiative 2024/25 Exercise, with future updates being provided to this Committee.

3.0 Progress with Completion of the 2024/25 Internal Audit Plan

Assignments

- 3.1 The 2024/25 Internal Audit Plan was agreed by Audit and Scrutiny Committee on [13 June 2024](#). It set out fifteen assignment areas to be completed by the team during the year. This includes nine audit reports to be issued to Clackmannanshire Council (those nine audit reports do not include those assignments or reports undertaken and issued to the Clackmannanshire and Stirling Integration Joint Board or the Central Scotland Valuation Joint Board). Of these nine audit reports:

- four audit reports have been completed to final report stage (as part of our committed assignment programmes of work). These include:
 - School Admissions;
 - IT and Information Security Governance;
 - Climate Change Act Public Body Duties Audit; and
 - Asbestos Management Arrangements.
- one audit review is currently in progress and will be reported to a future Audit and Scrutiny Committee; and

- four have not been started.
- 3.2 A summary of 2024/25 progress is set out at Appendix 1. Details on the scope of, and findings arising, from the two reviews finalised since the last Committee is at Appendix 2. The assurance is provided in line with the definitions at Appendix 3.
- Additional Work (in year)**
- 3.3 There has been additional audit work undertaken (and ongoing) in Adult Social Care following a request from the Clackmannanshire and Stirling Health and Social Care Partnership and Integration Joint Board's Chief Finance Officer. This may have an impact on capacity to complete the remaining audits in the Internal Audit Plan for 2024/25. This additional work has been undertaken by Internal Audit, in conjunction with Clackmannanshire Council's Payroll Section. Outcomes will be reported to the next Audit and Scrutiny Committee.
- National Fraud Initiative 2024/25 Exercise**
- 3.4 As Committee is aware, the Council participates in the National Fraud Initiative (NFI). This helps detect and prevent fraud and error by matching data sets across public bodies. The initiative runs every two years. Once matches have been released and published on the NFI website it is the responsibility of the allocated individuals in each service to review the matches, and assess and record any outcomes if appropriate. As with previous NFI exercises, priority is given to matches defined as 'high risk'.
- 3.5 In August 2024, [Audit Scotland reported](#) that NFI savings and outcomes have increased from £14.9 million in 2020/21 to £21.5 million in 2022/23. NFI figures include detected fraud, error, overpayments, and recoveries, as well as estimated future losses that have been prevented. The national exercise can only be completed satisfactorily with buy in from services to allocate suitably qualified individuals to assess each match and record the appropriate outcomes; there is a resource commitment required from services and the key contacts (Internal Audit) during this time. Audit Scotland has advised in the report that an appropriate level of resource should be made available to deliver NFI activities, especially during a time of ongoing financial pressure.
- 3.6 The 2024/25 matches have been released around six weeks earlier in response to public bodies requests for more timely receipt of matches. To make a positive difference to the Council's ability to reduce the amount of fraud / overpayments, a programme of training has been undertaken in November and December 2024 by Internal Audit and Falkirk Council's Corporate Fraud Team staff in readiness for the 2024/25 NFI exercise. This was conducted to educate new participants in what is required, and also to act as a refresher to existing staff with the aim of maximising the results from the matches. Feedback from staff has confirmed that they found it useful and believe they are better prepared to review the matches.
- 3.7 The Internal Audit Manager will report progress / outcomes in future updates to this Committee.

4.0 Conclusions

- 4.1 2024/25 Internal Audit work will contribute to a balanced and evidence based year-end opinion on arrangements for risk management, governance, and control. The Internal Audit Manager does, however, anticipate that there will be an impact on completion of the 2024/25 Internal Audit Plan due to the additional work underway in Adult Social Care.
- 4.2 Audit work will be sufficient to allow the Internal Audit Manager to provide an opinion on the adequacy and effectiveness of internal controls at year-end.

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**

9.0 Equalities Impact

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

Yes ☐ No ☐

10.0 Legality

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

11.0 Appendices

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

- Appendix 1: Internal Audit Plan 2024/25 Progress at 15 January 2025
- Appendix 2: Internal Audit Plan 2024/25 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
Chris Alliston	Strategic Director Partnership and Performance	

INTERNAL AUDIT PLAN 2024/25

Progress at 15 January 2025

	Client / Directorate	Assignment	Status
Annually Recurring Assignments			
1.	All Directorates	National Fraud Initiative	Ongoing A programme of training has been undertaken by Falkirk Council's Internal Audit and Corporate Fraud Team staff in readiness for the 2024 NFI matches. This was conducted to educate staff in maximising the results from the matches.
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: Self Assessment	Ongoing
7.	All Directorates	Validation Work Requests	Ongoing
Committed Assignments			
8.	Partnership and Performance / All Directorates	IT and Information Security Governance	Final Report Issued
9.	People	School Admissions Policy	Final Report Issued
10.	Partnership and Performance / All Directorates	Community Benefits	Not Started

	Client / Directorate	Assignment	Status
11.	Partnership and Performance / People	Follow Up of the Review of Leisure Banking	In Progress
12.	People / All Directorates	Follow Up of the Review of Purchase Order Arrangements at Clackmannanshire for Adult Social Care	Not Started
13.	All Directorates	Follow Up of Grade 1 Recommendations	Not Started
14.	Partnership and Performance / All Directorates	Capital Arrangements	Not Started
15.	Place / All Directorates	Asbestos Management Arrangements	Final Report Issued
Other Client Work			
16.	Clackmannanshire and Stirling Integration Joint Board	The Internal Audit Plan for 2024/25 was presented to the IJB Audit and Risk Committee on 26 June 2024.	In Progress Additional work has been undertaken (and ongoing) in Adult Social Care by Internal Audit, in conjunction with Clackmannanshire Council's Payroll Section. Outcomes will be reported to the next Audit and Scrutiny Committee.
17.	Central Scotland Valuation Joint Board	The Internal Audit Plan for 2024/25 was presented to the Central Scotland Valuation Joint Board on 28 June 2024.	In Progress

INTERNAL AUDIT PLAN 2024/25 ASSIGNMENT OUTCOMES

**Summary of Key Findings from Reviews Complete to Final Report
Not Previously Reported to Committee**

Review	Directorate	Assurance
Climate Change Act Public Body Duties Audit	Place	Limited Assurance
Scope	Final Report Executive Summary	
<p>We undertook validation work on the Council's Public Body Climate Change Duties (PBCCD) 2023/24 Annual Report.</p> <p>The Climate Change (Scotland) Act 2009 (the Act) introduced the requirement for public bodies to report on their climate change duties.</p> <p>In line with the timescales from the Act, the Council's annual report had to be submitted to the Sustainable Scotland Network (SSN) by 30 November 2024.</p> <p>Our work focused on reviewing the reporting arrangements and the accuracy of the information in the report.</p> <p>Our previous review in 2023 of the 2022/23 Public Sector Change Duties Annual Report reported that there were considerable delays in receiving the information and final report resulting in the submission noting it was 'pending Internal Audit validation'. There was also some ambiguity around who compiled the data, resulting in several amendments being made.</p>	<p>To ensure consistency of returns across public bodies, the Annual Report format is a standard template split into five areas:</p> <ul style="list-style-type: none"> • Profile of Reporting Body; • Governance, Management, and Strategy; • Corporate Emissions, Targets, and Project Data; • Adaption; and • Procurement. <p>The return is made up of the completion of a checklist, which confirms that the information has been validated by the organisation's Internal Audit section. Our work, therefore, focused on reviewing the reporting arrangements and the accuracy of the information included in the report.</p> <p>Unfortunately there have again been delays this year in Internal Audit receiving the supporting information from responsible officers and also the final Public Bodies Climate Change report. The report was, however, submitted to the SSN by the deadline of 30 November.</p> <p>Internal Audit have also found that the recommendations from last year have been partially addressed, with the following two recommendations remaining outstanding and requiring further action:</p> <ul style="list-style-type: none"> • a PBCCD annual report compilation timetable should be developed with the final report completed and ready for Internal Audit validation one month before the submission deadline; and • a central record should be held by the Climate Emergency Working Group identifying what information was provided by which officer. <p>In addition, during our current work we identified various additional required actions relating to the Council's climate change governance, management, and strategy arrangements. These involved updating the Council Travel Plan and having it approved by the Council in an appropriate timeframe; reporting waste emissions figures consistently on the return; developing a timetable to allow the final report to be completed one month prior to submission; a central record identifying what information was provided by which officer; and investigating the development of a tool to help capture carbon data to calculate project emissions savings.</p> <p>We, therefore, were able to provide Limited Assurance on the Council's reporting arrangements and the accuracy of the information set out in each section of the Annual Report.</p> <p>It is anticipated that the Energy and Sustainability Strategy Officer will report on Climate Change Duties to the Council as soon as it can be tabled. This will include recommendations based upon the findings from this audit.</p>	

Appendix 2

Review	Directorate	Assurance
Asbestos Management Arrangements	Place / All Directorates	Limited Assurance
Scope	Final Report Executive Summary	
<p>The focus of this review was to assess the Council's compliance with Asbestos Regulations by ensuring that corporate controls established for asbestos management arrangements including policies, procedures, guidance, and training are in place. In addition, this review tested operational controls for monitoring and inspection procedures to ensure they are operating effectively and complying with corporate policies and procedures, as well as asbestos regulations.</p> <p>The UK Health Security Asbestos General Information Guidance states that: "Asbestos is a general name given to several naturally occurring fibrous minerals that have crystallised to form fibres. Asbestos fibres do not dissolve in water or evaporate, they are resistant to heat, fire, chemical and biological degradation, and are mechanically strong. The properties of asbestos made it an ideal material for use in a number of products, including insulation material for buildings, boilers and pipes, floor tiles, and insulating board to protect buildings against fire."</p> <p>The guidance also states: "All forms of asbestos fibres in the air are hazardous as they can induce cancer following inhalation exposure. Breathing in high concentrations of asbestos for a long period of time mainly affects the lungs, causing a disease called asbestosis where breathing becomes difficult, and the heart enlarges. Asbestosis may take decades to develop where sufferers are at an increased risk of cancer."</p> <p>Due to the risks to health following inhalation exposure to asbestos, the importation of asbestos has been banned in the UK since 1999. The Control of Asbestos Regulations 2012 (the Regulations) set minimum standards for the protection of employees from risks related to exposure to asbestos. Employers should also take account of people not directly employed by them, but who could be affected by work being done on asbestos (including employees of other employers, people occupying buildings, members of the public etc).</p> <p>The Council's Management of Asbestos Policy (MAP) was last updated in October 2023 and approved by the Executive Health and Safety Committee on 5 February 2024.</p>	<p>The Management of Asbestos Policy (MAP) states that: Clackmannanshire Council has a duty of care to ensure employees and other parties who have access to council premises and properties are not exposed to the harmful effects of asbestos. The Council acknowledges the health hazards arising from exposure to asbestos and will protect employees and any other persons potentially exposed as far as is reasonably practicable. This will be achieved by minimising exposure through the management of asbestos-containing materials in all Council-owned premises in line with the Control of Asbestos Regulations 2012.</p> <p>Corporate roles and responsibilities have been clearly set out in the Council's MAP. The Policy reflects the requirements defined in the Control of Asbestos Regulations 2012. The Premises Duty Holder¹ (PDH) Guidance includes a section on asbestos setting out specific roles and responsibilities. The Guidance was developed in 2018, and we have recommended that this should be reviewed to ensure it is up to date and clearly reflects the role of the PDH.</p> <p>We reviewed the arrangements in place to ensure compliance with the MAP. We identified areas of compliance with the Policy including:</p> <ul style="list-style-type: none"> Asbestos building surveys were carried out by an appropriately accredited company. Asbestos Management Surveys and Asbestos Management Plans are completed for Council owned operational premises. Removal of asbestos is carried out by a qualified contractor. The Health and Safety Team carry out audits on buildings which include checking to see whether there is an Asbestos Management Plan on site and that Asbestos Registers are getting signed by all visiting contractors. <p>We also identified Asbestos Management Policy non compliance weaknesses and made recommendations in relation to the following:</p> <ul style="list-style-type: none"> There is no formally appointed Asbestos Duty Holder. A depute is in position and is fulfilling the role. Not all Council owned premises have asbestos management arrangements in place. There is no Council Asbestos Management Plan in place setting out how the risks identified from asbestos will be managed. There is no Asbestos Incident Operational Contingency Plan within the Council's emergency planning arrangements. Asbestos awareness training has not been delivered to relevant staff since July 2022. <p>We reviewed the asbestos management arrangements and PDH asbestos responsibilities in place at a sample of Council premises. This review assessed compliance with the MAP and the PDH Guidance. We identified weaknesses and made recommendations in relation to the following:</p> <ul style="list-style-type: none"> Not all PDHs had formally accepted their role or had undertaken Premises Duty Holder training. A lack of awareness of PDHs regarding the location of asbestos containing materials and the emergency procedures to be followed if they are disturbed. Premises Risk Assessments were not always in place, and if in place, did not always contain asbestos risk and related mitigating controls. Asbestos Clearance to Work Registers were not always completed by contractors prior to works being undertaken. <p>Eight recommendations have been accepted, with some aspects already implemented or underway.</p>	

¹ The Premises Duty Holder is an officer who is formally appointed by the Chief Executive to manage the Health and Safety Risks within a specific building(s). This role includes the management and control of Asbestos.

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 & Scrutiny Committee

Date of Meeting: 06th February 2025

Subject: Internal Audit Actions – Progress Report

Report by: Strategic Director: Partnership and Performance

1.0 Purpose

- 1.1. The purpose of this report is to provide the Audit & Scrutiny Committee with a progress update on actions arising from previous Internal Audit reports.

2.0 Recommendations

Committee is asked to:

- 2.1. Note, comment on and challenge the report.

3.0 Considerations

- 3.1. This report provides Committee with a further progress update on Internal Audit actions identified from previous audits.
- 3.2. Significant organisational change, the pandemic response, increasing demand on services and reduction in resources as a result of budget constraints, have previously impacted on the progression of a number of actions identified through Internal Audit reports.
- 3.3. During the period since the last report to Committee there has been significant improvements in progressing actions.
- 3.4. New actions are also included in the report which have arisen as a result of the completion of further Internal Audit assignments.
- 3.5. Efforts continue across all Directorate to ensure identified and agreed internal audit actions are being progressed/updated.
- 3.6. Progress on outstanding actions is now a standing agenda item for both the Strategic Leader Group and Extended Strategic Leadership Group with Directors also asked to ensure it is considered at their Senior Management Team meetings.

- 3.7. A summary of ongoing progress is outlined in Appendix 1.
- 3.8. Appendix 2 provides a fuller overview of progress against Internal Audit reports, as well as an update against each action where progress is ongoing. It should be noted that these are manager assessments. Should Internal Audit identify any variances as part of verification works, these will be reported to Committee.
- 3.9. Ongoing updates will continue to be provided on a regular basis.

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

- 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**

Complies with relevant Council Policies ☒

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 – Internal Audit Actions – Progress Summary

Appendix 2 - Full List of Internal Audit Actions – Pentana Extract

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
Chris Alliston	Strategic Director – Partnership and Performance	2184

Approved by

NAME	DESIGNATION	SIGNATURE
Chris Alliston	Strategic Director – Partnership and Performance	

Appendix 1: Internal Audit Actions – Progress Summary






Portfolio	Code	Internal Audit	Assurance Level	Actions Identified from Internal Audit	Note
P&P	IAF A04 SDB	Sundry Debtors	N/A	6	2 actions completed, 4 actions remaining to be completed out with target.
P&P	IAF A16 HRC	Housing Rent Collections and Arrears Management 19/20	Substantial	3	2 actions now complete, 1 action remaining to be completed out with target.
P&P	IAF A07 CRM	Corporate Risk Management Arrangements	Substantial	8	7 actions complete, 1 action remaining to be completed out with target.
Place	IAF A06 FMM	Fleet Management and Monitoring Arrangements	N/A	13	10 actions complete, 3 actions remaining to be completed out with target.
P&P	IAF SMO	Use and Control of Social Media	Substantial	3	1 action complete, 2 actions remaining to be completed out with target.
Various	IAF A14 LBN	Leisure Banking	N/A	7	All actions complete.
Place	IAF A15 CFM	Procurement – Contract Monitoring – Facilities Management Repairs and Maintenance 21/22	N/A	6	All actions complete.
Various	IAF A09 BSC	Building Security 2023	Limited	45	36 actions now complete, 9 actions remaining to be completed out with target.
Various	IAF A13 PSA	Physical Income Security Arrangements	Limited	36	30 actions completed, 6 actions remaining to be completed out with target.
Place	IAF A15 RSG	Refugee Scheme Governance	Substantial	4	3 actions complete, 1 action to be completed out with target.

P&P	IAF A16 SSB	Supplier Set up and Supplier Bank Account Changes 22/23	Limited	14	8 Actions completed, 6 actions remaining to be completed outwith target.
Place	IAF A08 CCD	Public Body Climate Change Duties (PBCCD) 2022/23 Annual Report	Limited	11	4 actions complete, 7 actions remaining to be completed out with target.
P&P	IAF A09 FOI	Freedom of Information Requests	Substantial / Limited assurance	7	5 actions complete, 2 actions remaining to be completed out with target.
People	IAF A09 LBF	Leisure Banking Follow Up	N/A	10	9 Actions have been completed, 1 action to be completed out with target.
HSCP	IAF A09 APO	Adult Social Care Purchase Order Arrangements	No assurance	18	5 actions complete, 13 actions to be completed out with target.
HSCP	IAF A11 CHM	Care Home Residents Monies	Limited	8	6 actions complete, 2 actions to be completed out with target.
ALL	IAF A14 OVR (new)	Overtime Arrangements	No Assurance	28	20 actions complete, 8 actions to be completed out with target.
P&P	IAF A15 UPC (new)	Use of Purchase Cards	Limited Assurance	12	11 Actions completed, 1 actions to be completed out with target.
People	IAF A09 SEA (new)	School Enrolment/Admissions Policy	Limited Assurance	8	3 Actions completed, 5 actions to be completed out with target
P&P	NEW – to be uploaded to Pentana	IT and Information Security Governance	Limited Assurance	8	










HSCP	NEW – to be uploaded to Pentana	Adult Social Care Staff Potential Overpayments	N/A	11	
Place	NEW – to be uploaded to Pentana	Asbestos Management Arrangements	Limited Assurance	8	











Internal Audit Progress Report (Generated 17.01.2025)

APPENDIX 2

ACTION STATUS KEY	
	Already Complete
	Cancelled
	Will Complete Outwith Target
	Will Complete Within Target
	Will Fail to Complete

Summary – All Audits







Code	Audit	Assurance Level	Status	Date Completed
IAF A04 SDB	Sundry Debtors	Assurance Not Applicable		
IAF A16 HRC	Housing Rent Collection & Arrears Management	Substantial Assurance		
IAF A07 CRM	Corporate Risk Management Arrangements	Substantial Assurance		
IAF A06 FMM	Fleet Management & Monitoring Arrangements	Substantial/Limited Assurance		
IAF A10 SMD	Use & Control of Social Media	Substantial Assurance		
IAF A14 LBN	Leisure Banking	Assurance Not Applicable		21-Nov-2024
IAF A15 CFM	Procurement - Contract Monitoring - Facilities Management Repairs & Maintenance	Assurance Not Applicable		14-Oct-2024
IAF A09 BSC	Building Security	Limited Assurance		
IAF A13 PSA	Physical Income Security Arrangements	Limited Assurance		

Code	Audit	Assurance Level	Status	Date Completed
IAF A15 RSG	Refugee Scheme Governance	Substantial Assurance		
IAF A16 SSB	Supplier Set Up & Supplier Bank Account Changes	Limited Assurance		
IAF A08 CCD	Public Body Climate Change Duties 2022/23 Annual Report	Limited Assurance		
IAF A09 FOI	Freedom of Information Requests	Substantial/Limited Assurance		
IAF A09 LBF	Leisure Banking Follow Up	Assurance Not Applicable		
IAF A10 APO	Adult Social Care Purchase Order Arrangements	No Assurance		
IAF A11 CHM	Care Home Residents' Monies	Limited Assurance		
IAF A14 OVR	Overtime Arrangements	No Assurance		
IAF A15 UPC	Use of Purchase Cards	Limited Assurance		
IAF A09 SEA	School Enrolment/Admissions Policy	Limited Assurance		

IAF A04 SDB

Sundry Debtors

Assurance Not Applicable



Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF SDB 001	Revenues and the Corporate Management Team should agree the steps to be followed to clarify Revenues and Service staff roles and responsibilities for the sundry debt process.	Service Manager Revenues and Strategy to arrange meeting with Depute Chief Executive and Head of Housing and Community Safety, to discuss report findings in context of current organisational redesign.			31-Oct-2017	Complete as part of revenues restructure finalised in April 2024	Lindsay Sim
IAF SDB 002	Written procedures should be prepared setting out the process for: • the creation or amendment of debtor accounts; • the raising of a debtor invoice; • cancelling a debtor invoice; and • identifying accounts for write off.	Pending outcome of Recommendation 1. Develop procedures and processes identified.			31-Mar-2018	Processes being checked to confirm action is complete.	Lindsay Sim
IAF SDB 003	The authorisation arrangements when creating or amending debtor accounts, and raising or cancelling a debtor invoice, should be reviewed.	Pending outcome of Recommendation 1. Revenue will consider as part of ongoing engagement work with Services.			31-Mar-2018	Processes being checked to confirm action is complete.	Lindsay Sim
IAF SDB 004	Consideration should be given to introducing a debtor set up and amendment form	Pending outcome of Recommendation 1. Revenue will consider as part of ongoing engagement work with Services.			31-Dec-2018	This has been considered but not taken forward. Services can create a debtor account and will have all the information required to do so. No additional value seen in creating a form.	Lindsay Sim
IAF SDB 005	An Authorised Signatory List should be established for requests to cancel sundry debtor invoices	Pending outcome of Recommendation 1. Engage with Procurement Manager to review current authorised signatory process to accommodate			31-Dec-2018	Processes being checked to confirm action is complete.	Lindsay Sim
IAF SDB 006	Services should be reminded to provide adequate supporting documentation when creating or amending debtor accounts, and	Pending outcome of Recommendation 1. Revenue will consider as part of ongoing			31-Mar-2018	Processes being checked to confirm action is complete.	Lindsay Sim


Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	raising or cancelling debtor invoices. The functionality within Tech One should be utilised to enable supporting documentation to be stored electronically.	engagement work with Services and Tech One team.					

IAF A16 HRC

Housing Rent Collection & Arrears Management

Substantial Assurance


Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF HRC 001	The Revenues Team have no up to date written procedures in place for some of their key processes. This includes: raising charges and annual billing; identifying, recording, and allocating payments received; reconciliations; management of suspense accounts; issuing accounts to Sheriff Officers; and identifying and processing write-offs. The Housing Rent Collection and Arrears Management roles and responsibilities of the Revenues Team, Accountancy Services or Housing Services are not formally recorded. This could be recorded in written procedures and referred to in a formal Rent Management Policy.	Written procedures to be prepared for written for key Housing Rent Collection and Arrears processes. To include: reconciliations, management of suspense accounts, issuing accounts to Sheriff Officers, write offs, raising charges and annual billing, identifying, recording and allocating payments received.			31-Aug-2020	Written procedures have been completed and saved to a central file.	Ben Watson
IAF HRC 002	A control sheet should be introduced to record the completion of each of the key stages of the annual billing process. This should also be used to record the details of the Revenues Team sample checking.	An annual billing control sheets will be produced and used to record the key stages of the annual billing process including checking accounts and sign off and will record officers involved			31-Aug-2020	Action Complete	Ben Watson



Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF HRC 003	The Corporate Debt Recovery and Write Off Policy records that Revenues have the 'authority to write-off debts up to the value of £20 "if all avenues for recovery have been exhausted and the debt is more than 2 financial years old'. There are a number of accounts that fall into this category and these should be actioned. In addition, accounts with arrears less than £50 are not passed to the Sheriff Officers for collection. This de minimis level should be included in the Policy (when it is next reviewed) and the procedural instructions	In accordance with the Corporate Debt Recovery and Write Off Policy Revenues will write off debts up to the value of £20. The minimum level of debt on accounts that will be passed to the Sheriff Officers will be included in the next annual update of the Corporate Debt Recovery and Write Off Policy			31-Aug-2020	Policy has not yet been reviewed. Will incorporate into next review due by June 2025.	Ben Watson



IAF A07 CRM



Corporate Risk Management Arrangements


Substantial Assurance





Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF CRM 001	The Risk Management Strategy (and associated guidance) should be reviewed and updated by the Strategic Director - Partnership and Performance. Thereafter, the revised documentation should be submitted to the Strategic Leadership Group and Audit Committee for approval. On completion of the approval process, the revised Strategy (and associated guidance) should be disseminated to all staff and elected Members. The Audit Committee must ensure that the Strategy revision, approval, and dissemination process is undertaken	The review and updating of the Risk Management Strategy will form part of the Partnership & Performance Business Plan for 2021/22 and the Audit Committee forward plan.			15-Jun-2023	A new Risk Management Strategy was approved by Council in October 2023.	Chris Alliston




Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	in a timely manner, and challenge the Strategic Director – Partnership and Performance on any delays.						
IAF CRM 002	Quarterly meetings of the Corporate Risk and Integrity Forum should be recommenced, and the Corporate Risk Log reviewed at each meeting.	Quarterly meetings of the Corporate Risk and Integrity Forum will recommence. The Risk and Integrity Forum forms an important part of the Council's approach to risk. The Extended Senior Leadership Group (ESLG) meets fortnightly and the agenda is prepared by the Chief Executive. Regular quarterly meetings of the Forum will be scheduled to meetings of the ESLG.			31-Aug-2021	Completed - quarterly meetings resumed in May-22.	Nikki Bridle
IAF CRM 003	The Strategic Director - Partnership and Performance should complete a Training Needs Analysis to identify the level and type of risk management training required by each category of staff (and elected Members). Thereafter, a Training Programme should be developed and implemented to satisfy all identified needs. In addition, the content of the online 'Risk Analysis' training module should be reviewed and updated to ensure that there is greater alignment with the Risk Management Strategy (and associated guidance). Thereafter, all staff should be required to complete the module on an annual basis. Finally, the format of the corporate Induction Programme checklist should be amended to mandate the issue of the Risk Management Strategy to, and completion of the 'Risk Analysis' training module by, new starts.	A training needs analysis process will be undertaken to understand the training requirements for staffing groups - the revised risk strategy will help inform this work. Outputs of this analysis will feed into the annual council wide TNA should there be budget implications, and to ensure a planned approach to delivery.			28-Feb-2022	TNA completed during initial phase of strategy development. Stand-alone risk training not appropriate for all and will have less impact than existing mandatory training contextualised around specific, directly relevant risks (e.g. health & safety, data protection, etc.). The strategy outlines existing arrangements and development actions for the key groups of: Pentana Superusers (who support risk recording), senior managers (to revisit accreditation following turnover) and Elected Members (see below). Training is delivered via existing resource and insurance contract 'risk control days', and a proportionate approach will minimise budget implications. Facilitated sessions are a more productive and efficient alternative to generic theoretical training as they combine the collective expertise of central support and service colleagues to actively focus on applying risk management principles to the real challenges being faced, resulting in the	Alastair Hair






Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
						tangible outputs of risk logs and mitigation plans.	
IAF CRM 004	The Strategic Director - Partnership and Performance should complete a Training Needs Analysis to identify the level and type of risk management training required by each category of staff (and elected Members). Thereafter, a Training Programme should be developed and implemented to satisfy all identified needs. In addition, the content of the online 'Risk Analysis' training module should be reviewed and updated to ensure that there is greater alignment with the Risk Management Strategy (and associated guidance). Thereafter, all staff should be required to complete the module on an annual basis. Finally, the format of the corporate Induction Programme checklist should be amended to mandate the issue of the Risk Management Strategy to, and completion of the 'Risk Analysis' training module by, new starts.	Training for elected members on risk will be identified and delivered. A training needs analysis process will be undertaken to understand the training requirements.			31-Oct-2021	While wider training needs analysis/programmes are ongoing, specific training on risk & scrutiny has been offered to all Elected Members. The majority of Audit & Scrutiny Committee attended in Jun-23 and two dates were offered in Nov-23, but the officer does not have the authority to compel Members to attend, and there are often valid reasons. Additional/repeat sessions will be offered.	Lee Robertson
IAF CRM 005	The Strategic Director - Partnership and Performance should complete a Training Needs Analysis to identify the level and type of risk management training required by each category of staff (and elected Members). Thereafter, a Training Programme should be developed and implemented to satisfy all identified needs. In addition, the content of the online 'Risk Analysis' training module should be reviewed and updated to ensure that there is greater alignment with the Risk Management Strategy	The review of the risk analysis training module on Clacks Academy will take place after the approval of the revised risk strategy.			30-Sep-2023	General risk management training is not appropriate for all staff (though training in relation to specific corporate risks is already mandatory). Content has been defined, aligned to the risk strategy, and support requested in updating on Clacks Academy. The module will be targeted at managers, project/functional/thematic leads, and other relevant officers.	Judi Richardson

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	(and associated guidance). Thereafter, all staff should be required to complete the module on an annual basis. Finally, the format of the corporate Induction Programme checklist should be amended to mandate the issue of the Risk Management Strategy to, and completion of the 'Risk Analysis' training module by, new starts.						
IAF CRM 006	The Strategic Director - Partnership and Performance should complete a Training Needs Analysis to identify the level and type of risk management training required by each category of staff (and elected Members). Thereafter, a Training Programme should be developed and implemented to satisfy all identified needs. In addition, the content of the online 'Risk Analysis' training module should be reviewed and updated to ensure that there is greater alignment with the Risk Management Strategy (and associated guidance). Thereafter, all staff should be required to complete the module on an annual basis. Finally, the format of the corporate Induction Programme checklist should be amended to mandate the issue of the Risk Management Strategy to, and completion of the 'Risk Analysis' training module by, new starts.	Mandatory training is provided for via the Corporate Learning & Development Policy, and establishes a minimum standard for the wellbeing and safety of all staff. As such, the agreed risk TNA process, and revised risk strategy will help establish whether risk analysis training is appropriate for all staff and the most appropriate vehicle for delivery. It is not general practice to physically issue a strategy to staff, and as such alternative provision will be made through highlighting risk management, and relevant locations of strategies via the corporate induction process. Additionally, part of the corporate induction process includes mandatory training, and as such this will be considered in line with the review of 'risk analysis' training.			31-Dec-2021	The strategy delivery plan includes actions to ensure risk management is embedded in induction and leadership development, whether as a stand-alone topic, or as part of the toolkit for managing other explicit risks. There is an additional action to create an intranet page to ensure all key corporate governance strategies, guidance and templates are accessible to staff in a single location.	Alastair Hair
IAF CRM 007	All Risk Owners should provide a risk management progress update via the Pentana Performance Management System on a quarterly basis. Risk Owners who fail to provide such an update should be asked to fully	Consideration will be given to how the revised risk management process will impact on Committee reporting.			31-Aug-2021	The Corporate Risk & Integrity Forum Terms of Reference and reporting process have been revised to support improved engagement (agreed by the forum and SLG in May-22). More detailed update reports inform forum	Lee Robertson

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	explain reasons for the delay to the Strategic Leadership Group, and to confirm the action which is currently being taken to manage the risk.					discussions, which subsequently inform the cyclical review of corporate risks, though there are still issues with non-compliance, particularly in the use of the Pentana system. Failure to review is highlighted via the forum update on Strategic Risk Management and the revised strategy includes performance indicators to monitor compliance with the range of corporate governance and risk management controls.	
IAF CRM 008	The Council's standard Committee report template should be amended to include a specific section on the risks associated with any proposed policy or course of action.	The standard report contains several headings which require report authors to consider financial, legal and equalities considerations amongst others. It is considered that risk should be addressed as part of the "considerations" section of the report and the report writing guidance will be updated accordingly so that the importance of covering risk (where that applies) in Council and Committee papers is highlighted.			31-Aug-2021	The approval section has become fragmented through incremental amendments by individual functions. The risk strategy delivery plan includes an action which extends this recommendation into a more holistic review to modernise & integrate the template as a whole. This will be in conjunction with additional actions to improve both quantification of risks (where possible) and assessment of policy/project benefits. This will ensure reports more explicitly state, not only the risks, resource & governance implications, but also positive impacts, realisation of benefits and evidencing of actions & mitigations improving outcomes for communities. (Action is superseded by a more extensive review in the risk strategy year 2 action plan)	Lee Robertson


Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF FMM 001	The Fleet Asset Management Plan should be reviewed and updated by the Fleet Services Team Leader. Thereafter, the revised plan should be submitted to Committee for approval.	The Fleet Asset Management Plan will be reviewed and updated, and thereafter submitted to Committee for approval. Further discussions are required with senior Officers.			31-Dec-2022	The asset management plan is in progress and will be submitted to the Committee for approval once complete. Uncertainty on the future direction of alternate fuelled vehicles and associated budget requirement has delayed the completion of the document. The document will be complete and submitted 2025.	Kevin Philliben
IAF FMM 002	The Driving at Work Policy should be reviewed and updated by the Fleet Services Team Leader, in conjunction with the Health and Safety Manager. Thereafter, the revised policy should be submitted to the Executive Health and Safety Committee for approval.	The Driving at Work Policy has recently been reviewed and will be put forward to Council at the next meeting.			31-Oct-2022	This Policy has been updated and currently going through the policy group. The policy was returned with numerous queries from Union officials, a special policy group meeting is to be arranged to discuss further.	Kevin Philliben
IAF FMM 011	An officer independent to the vehicle disposal process should carry out checks on actual vehicles sold at auction to disposals on the Fleet Management System to ensure that vehicles are not being sold privately.	Consideration will be given to ensure this is carried out by an independent officer.			30-Sep-2022	An agreement in place with the service provider where an electronic login can be issued to any officer which will allow them to view all vehicles belonging to the Council going through auction.	Iain McDonald
IAF FMM 013	Fleet Services should consider the introduction of a more robust performance evaluation and reporting framework. This includes the agreement of Fleet Services KPIs, management information, and reporting.	Consideration will be given to what Fleet Services KPIs can be introduced, and to the development of management information and reporting on the recently introduced Fleet Management System.			31-Mar-2023	Fleet Services monthly report to Senior manager is being produced to include management information relating to MOT pass rate, Driver Infringements, tyre usage, fuel usage, vehicle idling, avoidable repairs etc. This Was delayed due to the introduction of the new Fleet Management software and suit of reporting modules. Monthly one to ones is held between me and the Senior Manager where performance of the department is discussed. Marked as 80% complete until first report issued, further discussion with Senior Manager to take place re content of report.	Kevin Philliben

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF SMD 001	The points relating to the content of the Social Media Policy and Guidelines should be considered when it is next updated.	Policy and Guidelines recognised as requiring revision during review of Communications Strategy. These points will be considered as part of these projects and incorporated if appropriate. Action Due date is as per new Communications Strategy Action Plan.			31-Dec-2022	Work underway to refresh the Social Media Policy and guidelines is underway. Efforts to complete this work in the Summer 2024 was impacted with staff diverted to support the Elections in July, however we anticipate good progress to be made over the Autumn 24. Internal Audit recommendations are being reviewed as part of the process. With a final draft to be shared before Christmas.	Karen Payton
IAF SMD 002	The content of the social media training module should be revised and updated to reflect the updated Policy and Guidelines.	Need for training to be updated recognised during review of Communications Strategy. Update to be included within new Communications Strategy Action Plan. Action Due date is as per new Communications Strategy Action Plan.			31-Dec-2022	A training programme will be identified for employees following the finalisation of the Social Media Policy. Consideration will be given to the development of a in house Clacks Academy module.	Karen Payton
IAF SMD 003	In reviewing the format and content of the comms highlight report consideration should be given to whether any additional corporate social media performance measures should be included.	Review of comms highlight report identified as necessary during review of Communications Strategy. Options for new format, content and frequency to be included within new Communications Strategy Action Plan. Action Due date is as per new Communications Strategy Action Plan.			31-Dec-2022	Communications no longer produces highlight reports as a result of capacity and resource limitations. Progress on significant campaigns is reported through business plan reporting.	Karen Payton


Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF LBN 002	Leisure Services staff job descriptions should be updated to ensure they reflect the revised guidance and in particular, daily recording of leisure income, secure storage, transfer, and banking responsibilities.	Job profiles will be reviewed and updated to reflect updated roles and responsibilities, and guidance			31-Jul-2022	Updated profiles in place for Facilities Support & Leisure Coordinator.	Alison Mackie
IAF LBN 004	No regular suspense account reconciliations by the Accountancy Team.	Regular suspense account reconciliations will be carried out by Accountancy.			31-Jul-2022	Action complete.	Helen Coleman
IAF LBN 005	During our visits we noted a number of issues specific to particular premises.	A review of revised guidance taking account of detailed premise specific findings will be undertaken.			31-Jul-2022	Any issue specific issues identified at leisure venues have been addressed in AF A09 LBF	
IAF LBN 006	In our view, management checks remain an important part of the internal control framework and need not be a time consuming process. As such, periodic management checks on income collection arrangements should be introduced. These checks should include reviewing cash handling arrangements; ensuring that correct procedures are being followed (e.g. receipts issued), that cashing up is taking place at the correct time (e.g. staff are not closing facilities early) and that this covers all tills. Management checks should be visible to as many staff as possible and a complete audit trail should be retained.	A review of revised guidance taking account of detailed premise specific findings will be undertaken.			31-Jul-2022	Management checks have been reinstated with Kilncraigs reception following reopening in March 24. Management checks have been implemented across the Sport & Leisure team including the recording of this.	
IAF LBN 007	Accountancy Team should consider what action (including formal write off) may be required to clear the long	Leisure Bank Suspense Account balance will be considered in line with the corporate write off policy			31-Jul-2022	External investigations are underway in relation to this matter and action will be taken regarding write off on conclusion	Helen Coleman




Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	standing balance on the Leisure Suspense Account						









IAF A15 CFM	Procurement - Contract Monitoring - Facilities Management Repairs & Maintenance	Assurance Not Applicable
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Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF CFM 002	Consideration should be given to building on existing finance system functionality through the inclusion of a contract reference field in the Tech One Finance System. Thereafter, regular system generated expenditure reports should be produced by all contract managers to monitor overall contract spend, with reports set up to capture variations in spend in excess of 10%.	The Tech One team will look at how this can be implemented.			31-Mar-2018	The contract module is still to be implemented and will be integral to finance system going forward. In the meantime the contract references are being manually added for contracts above 10k	Derek Barr

IAF A09 BSC	Building Security	Limited Assurance
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Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF BSC 002	Giving the findings arising from our visits to a sample of operational premises, consideration should be given to the adequacy of current security guidance. This should include the potential need for professional expertise to assist with the	Corporate Policy, Guidance and Training matters will be addressed by the Strategic Director for Partnership and Performance by September 2023.			30-Sep-2023	Ongoing work to complete action.	Chris Alliston

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	development of robust security standards (including the preparation of a Security Risk Assessment and Action Plan for key operational buildings).						
IAF BSC 003	A formal and comprehensive Building Security Incident Policy should be prepared. Once finalised, the Policy should be disseminated to relevant staff, with training provided if required.	A New system has been implemented and staff are being encouraged to log near miss incidents and non compliance issues. A draft Strategy was prepared immediately prior to the Covid-19 pandemic, however, this has not been completed due to staff abstraction. Police Scotland have agreed to assist with a security review, which will input to the draft strategy, which will be considered at the Risk and Integrity Forum in early 2023. It is anticipated that the strategy should be finalised by June 2023. Building Security Risk Assessments are being reviewed by Emergency Planning as part of a larger Scottish Government Initiative			30-Jun-2023	Short life working group lead by Karen Kirkwood has been set up.	Chris Alliston
IAF BSC 004	Corporate training requirements in relation to building security should be reviewed.	Premises Duty Holder training is scheduled to be undertaken in early 2023. Training is undertaken jointly between Health and Safety and Property Teams. A Corporate Training Programme will be developed by Strategic Director for Partnership and Performance once new guidance and standards are finalised.			30-Sep-2023	Training programme will be developed following finalisation of the policy/procedure. Training on the requirements for the Protect duties has been provided to relevant officers. Premises Duty Holder training has been implemented to relevant officers.	Chris Alliston
IAF BSC 011	Forthbank Roads Depot: The physical security of vehicle keys and equipment should be ensured at all times.	Forthbank Roads Depot: The physical security of vehicle keys and equipment should be ensured at all times.	1		16-Mar-2022	All keys are within the supervisor's office which is locked when he is not there.	Mike Reid


Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF BSC 012	Forthbank Roads Depot: A building security risk assessment should be undertaken, and a building security incident log should be in place to record the occurrence of security issues.	Forthbank Roads Depot: A building security risk assessment should be undertaken, and a building security incident log should be in place to record the occurrence of security issues.	2		31-May-2023	Depot is currently under review with a move to the Forthbank waste depot shortly. Existing building only used for storage and toilet facilities.	Mike Reid
IAF BSC 013	Alloa Town Hall: Ensure that when the building is open only doors that require to be operational are left open.	Alloa Town Hall: Ensure that when the building is open only doors that require to be operational are left open.	2		16-Mar-2022	Implemented	Stephen Morrison
IAF BSC 018	Ludgate House: A building security risk assessment should be undertaken, and a building security incident log should be in place to record the occurrence of security issues.	Ludgate House: A building security risk assessment should be undertaken, and a building security incident log should be in place to record the occurrence of security issues.	2		31-May-2023		
IAF BSC 031	Resource Centre Whins Road: The physical security of vehicle keys should be ensured at all times.	Resource Centre Whins Road: The physical security of vehicle keys should be ensured at all times.	1		16-Mar-2022		
IAF BSC 033	Resource Centre whins Road: A building security risk assessment should be undertaken, and a building security incident log should be in place to record the occurrence of security issues.	Resource Centre whins Road: A building security risk assessment should be undertaken, and a building security incident log should be in place to record the occurrence of security issues.	2		31-May-2023		
IAF BSC 038	Kilncraigs: Staff should be reminded to lock computers when not in use.	Kilncraigs: Staff should be reminded to lock computers when not in use.	2		16-Mar-2022	Cascade complete via article on Connect, action complete and ongoing.	Chris Alliston
IAF BSC 040	Kellibank Depot: A review of access on foot to the depot yard should be undertaken to assess whether this is adequate or could be feasibly restricted further.	Kellibank Depot: A review of access on foot to the depot yard should be undertaken to assess whether this is adequate or could be feasibly restricted further.	2		31-May-2023		Iain McDonald
IAF BSC 041	Kelliebank Depot: A building security risk assessment should be undertaken, and a building security incident log should be in place to	Kelliebank Depot: A building security risk assessment should be undertaken, and a building security incident log should be in place to	2		31-May-2023		Iain McDonald





Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	record the occurrence of security issues.	record the occurrence of security issues.					
IAF BSC 042	Employee pass access rights should be reviewed to ensure that employees only have access to buildings that they require.	Employee pass access rights should be reviewed to ensure that employees only have access to buildings that they require.	2		31-May-2023	A current review of all access rights across the council has been underway to reduce the number of properties individuals can access as well as reduce the number of 'individual permissions' within the Paxton system software.	Susan McIntyre
IAF BSC 044	Action is taken to implement the building security corporate recommendations which have been outstanding since 2019.	Action is taken to implement the building security corporate recommendations which have been outstanding since 2019.	1		31-May-2023	See previous actions and notes.	Chris Alliston




IAF A13 PSA








Physical Income Security Arrangements





Limited Assurance






Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF PSA 001	Written Cash Handling and Banking procedures should be developed and distributed to all cash handling sites within the Council. These procedures should consider the findings and recommendations made within this report and include arrangements for: • Cash Security. • Segregation of duties and management checks. • Cashing up and banking. Written Imprest Procedures should be developed and distributed to all Imprest holders. These Procedures should include: • Roles and responsibilities of Imprest Holders and deputes; • Purpose of Imprest fund and acceptable transaction; • Arrangements for distribution of funds; • Recording	Cash handling procedures will be issued at a corporate level.	2		30-Sep-2023	Some procedures are in place around cash handling and banking of cash within leisure sites and in relation to imprests. Target date for completion 31 March 2025.	Lindsay Sim


Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	Imprest transactions; and • Imprest reconciliation, management checks, replenishment and process for collecting funds. All written premises specific cash handling and Imprest written procedures should be based on the Corporate Procedures and should incorporate the findings and recommendations made in this report. For example, regular checking of cash floats, developing and maintenance of safe logs, and defining Imprest holders and responsible Officers.						
IAF PSA 002	Cash floats should be counted at the start and end of each shift. The checking of cash floats should be recorded in a log and signed by the responsible Officer. Regular management spot checks of float balances should be undertaken. These checks should be recorded.	Registrars Float will be kept in the locked petty cash tin in the safe until required, where it will then be checked.	2		31-Aug-2023	The Registrars Float is kept in a locked petty cash tin in the safe until it is required.	Agnes Leighton
IAF PSA 007	The transfer of cash from one person to another should be recorded by the signatures of both Officers involved. This record should be retained.	The process of signing at the time of distribution of the reimbursed Imprest will be reviewed and documented	2		30-Sep-2023	Complete	Ben Watson
IAF PSA 008	A management review should be undertaken to ensure that access to the cash office and safe is restricted for operational requirements. In addition, a register of authorised Officers with access to the safe should be developed.	A register of authorised officers who access the safe will be prepared and displayed in a prominent place.	2		31-Aug-2023	A register of authorised officers has been placed on the side of the Registrars safe.	Agnes Leighton
IAF PSA 010	A management review should be undertaken to ensure that access to the cash office and safe is restricted for operational requirements. In addition, a register of authorised Officers with access to the safe should be developed.	The Housing Officer and Repair Centre Advisor are the only people to have access to the safe at Kelliebank.	2		31-Aug-2023		Stuart Graham

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF PSA 011	The combination number of safes should be regularly changed or when a member of staff with knowledge of the combination leaves.	The combination number of the safes will be changed annually or when there is a change in staff, whichever is sooner.	2		31-Aug-2023	<p>Following the audit in 2023 actions were put into place including a safe contents sheet as well as a spreadsheet to track income and expenditure. This was carried out by Stuart Graham on behalf of HRA, Julie Russell and all actions completed. Since this time, the staff who have access to the safe have now moved from Kelliebank to Kilncraigs and no longer under the direct management of staff within Kelliebank. As such, the procedures put into place in July / August 2023 will now require amending by Julie Russell or her staff.</p> <p>Revenues – process to be reviewed and procedures to be completed by April 2025. Will update if there are leavers inbetween.</p>	Stuart Graham; Ben Watson
IAF PSA 012	An up-to-date contents log should be compiled and updated when income / items are deposited or removed from the safe and signed by the responsible Officers. This should be checked on a weekly basis. The safe should be locked throughout the day and only opened when depositing or withdrawing money / items.	A safe contents log will be prepared for all safes, which will be held in the locked safe. A record of monthly checks will also be documented.	2		31-Aug-2023	<p>A record of monthly checks is being used at the Registrars and a log of safe contents has been prepared.</p> <p>Revenues – process in place, log maintained in safe and updated.</p>	Stuart Graham; Kimberley Hamilton; Ben Watson; Agnes Leighton
IAF PSA 013	More than one person should be involved at cash up to ensure segregation of duties and checking what is to be banked is banked. A maximum value to be held in the cash drawers at any one time should be determined before secure transfer to the safe. This should be written in the Cash Handling Procedures along with	A second registrar will be available to ensure segregation of duties for banking. Also, a maximum of £300 will be held in the cash drawer before transfer to the safe.	1		31-Aug-2023	A second registrar is available at the daily banking duties. Amounts over £300 is transferred to the safe from the cash drawer.	Agnes Leighton

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	the safe limits which should not be exceeded.						
IAF PSA 027	The drawer used to hold monies should be locked at all times.	A lockable cabinet will be obtained to store the cash income securely throughout the day.	2		30-Sep-2023	A lockable cabinet is being used to store the cash securely throughout the day.	Agnes Leighton
IAF PSA 028	Consideration should be given to further restricting public access to the staff side of the reception area.	Public are restricted from accessing the staff side of the reception area. Due to the design of the office it is not possible to erect a door so a notice will be positioned stating "No Public Access".	2		30-Sep-2023	A 'No Public Access' sign is on display restricting the public from accessing the staff area of the Registrars work area.	Agnes Leighton
IAF PSA 030	The cupboard used to hold the Imprest fund should be locked at all times with the key held securely.	The petty cash will be stored in the safe, which will be locked at all times.	2		30-Aug-2023	The petty cash at the Registrars Office is now stored in the locked safe rather than the cupboard.	Agnes Leighton
IAF PSA 031	A list of Imprests and Imprest holders should be developed and provided to the Revenues Collections Team so reimbursement claims can be validated.	The Officer responsible for Imprest distribution now has access to the Council wide Imprest holder list.	1		31-Aug-2023	We now have a list of imprest holders, just finalising the written process. This will be implemented in January 2025.	Ben Watson
IAF PSA 032	Consideration should be given to having two Officers responsible for collecting the replenishment cash.	Two person cash collection will be in place for collecting the replenishment cash.	1		31-Aug-2023	This is already in place for one section of Revenues (SWF). Written procedures are being finalised as above and will be implemented from January 2025.	Ben Watson
IAF PSA 034	A review should be undertaken to identify the source and purpose of the unaccounted money held in the safe. This money should be banked if it is not required as cash.	The unaccounted cash of £2,240 was cash held on behalf of Team Leader – Corporate Accountancy. This was held for emergency cash during the early stages of the pandemic. This cash will be paid back into the bank.	1		31-Aug-2023	Complete. Held for emergency cash use during pandemic and sums repaid into bank.	Ben Watson
IAF PSA 035	Segregation of duties should be enforced in the operation of the Imprest. This should include independent checks of funds at the ordering and collection stage, monthly reconciliations, and random spot checks by management.	All cash handling will involve two people to ensure segregation of duties.	1		31-Aug-2023	Complete – confirmation required.	Ben Watson

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF RSG 001	The Strategic Director for Place should ensure that an update report is prepared and presented to the Council and include the latest position and progress of the Ukraine Displaced Persons Resettlement Scheme.	A progress report will be presented to the Audit and Scrutiny Committee on the latest position and progress of the Ukrainian Displaced Persons Resettlement Scheme.	3		31-Mar-2024	Report went to Audit & Scrutiny in June 2024. Please see https://www.clacks.gov.uk/document/meeting/295/1212/7912.pdf	Kevin Wells
IAF RSG 002	The Housing Support Team should conduct quarterly reconciliations between any income received and expenditure incurred in relation to Ukrainian refugee schemes.	Quarterly meeting schedule with the Service Accountant team to be set up to reconcile expenditure and income for the duration of the Ukraine project.	2		31-Mar-2024	Wilson Lees & Diane Oliver (Finance) are taking forward – in line with QRTL stats return to Scottish Government.	Wilson Lees
IAF RSG 003	The Housing Support Team should ensure that Written Cash Handling Imprest Procedures are developed and distributed to all responsible officers. These Procedures should include: • Roles and responsibilities of Imprest Holders and deposes; • Purpose of Imprest Fund and acceptable transactions; • Arrangements for distribution of funds; • Recording Imprest transactions and issue of receipts; and • Imprest reconciliation, management checks, replenishment and process for collecting and security of funds.	Cash handling and imprest procedure to be drafted and filed with Housing Support procedures. Staff to be made aware of the procedure and requirements to comply.	3		31-Mar-2024	Action all complete.	
IAF RSG 004	The Housing Support Team should ensure that the development and issue of reports to the Scottish Government (including financial income and expenditure data) is completed as quickly as possible.	The Housing Support team will monitor and comply with reporting deadlines to the Scottish Government	2		31-Mar-2024	Completed each QRTL basis in line with Scottish Government returns.	Wilson Lees



Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF SSB 001	Review to be undertaken on the TechOne System Administrator role to ensure that it is sufficiently resourced and responsibilities are clearly defined.	A review is undertaken of the System Administrator role to ensure that it is sufficiently resourced, and responsibilities are clearly defined.	1		30-Nov-2023	In progress, looking to reinstate systems developer role. Job profile going through evaluation, Target date - April 2025.	Lindsay Sim
IAF SSB 002	An Access Control Policy should be developed for TechOne.	Consideration will be given to developing an Access Control Policy.	1		31-Dec-2023	Process is in place that requires new users and existing users who need to change their access to complete a form that is signed by their line manager and submitted to the systems administrator. Policy to be prepared by systems developer once appointed. Target date - May 2025	Helen Coleman
IAF SSB 003	Regular reviews of user access levels should be introduced. For example, checks to ensure access is still required and at the appropriate level.	There is only one profile within TechOne which provides access to change supplier bank details which is currently allocated to three users. The Business Analyst, who sets up the new TechOne users and makes changes to existing TechOne user access, is aware of this specialist profile and the risks of allocating it to users.	1		31-Dec-2023	Checks to be introduced to ensure only those staff approved to change supplier details have that access. Target date - December 2024	Helen Coleman
IAF SSB 004	Consideration should be given to updating the New Supplier Guidance.	Updating the New Supplier Guidance will be considered.	3		30-Nov-2023	Guidance reviewed and revised checklist to be put in place. Target date - January 2025	Helen Coleman/Nicola Mack
IAF SSB 008	The issues arising from Internal Audit testing of changes made to suppliers in relation to supporting documentation should be addressed.	Agreed, guidance will be updated to state that full backup details are to be recorded.	3		30-Sep-2023	Change implemented in practice and guidance to be updated. Target date - January 2025	Helen Coleman/Nicola Mack






Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF SSB 014	In relation to bank account changes: The need for authorisation arrangements when creating or amending supplier details should be considered. Consideration should be given to requiring suppliers to provide their previous bank account details when requesting a bank account change. All supporting documentation in relation to bank account changes should be retained on the supplier record. The changes log spreadsheet should always detail the specific method of verification checks carried out including recording the phone number used to contact the supplier.	Recommendations will be considered as part of the review of the Supplier Account Update Guidance.	2		30-Sep-2023	Guidance to be reviewed and updated. Target - January 2025.	Helen Coleman/Nicola Mack





IAF A08 CCD

Public Body Climate Change Duties 2022/23 Annual Report


Limited Assurance

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF CCD 001	A Public Bodies Climate Change Duties (PBCCD) annual report compilation timetable should be developed, whereby the information required should be submitted by responsible Officers soon after the end of the reporting period year.	This will be added to the agenda of the Climate Emergency Working Group (CEWG), with work starting in April / May 2024 to compile the information for the 2023/24 return.	2		01-Apr-2024	This has been completed.	Kevin Wells
IAF CCD 002	A Public Bodies Climate Change Duties (PBCCD) annual report compilation timetable should be developed, whereby the information required should be submitted by	This will be added to the agenda of the Climate Emergency Working Group (CEWG), with work starting in April / May 2024 to compile the information for the 2023/24 return.	2		01-Apr-2024		Kevin Wells

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	responsible Officers soon after the end of the reporting period year.						
IAF CCD 003	The final report should be completed and ready for Internal Audit validation one month before the submission deadline.	The Climate Emergency Working Group will take responsibility for collecting the data and should report to the Climate Emergency Board at the end of August 2024.	2		07-Aug-2024	A final report has been compiled as at 4.10.24. Some waste data is still awaited but this is due to external bodies having to provide it. This is expected in late October which is still a month before the submission deadline. Three sections of the report have already been passed to Internal Audit for review.	Kevin Wells
IAF CCD 004	The final report should be completed and ready for Internal Audit validation one month before the submission deadline.	The Climate Emergency Working Group will take responsibility for collecting the data and should report to the Climate Emergency Board at the end of August 2024.	2		07-Aug-2024		Kevin Wells
IAF CCD 005	A central record should be held by the Climate Emergency Working Group identifying what information was provided by which Officer for the report. This should also include supporting documentation to evidence the information provided.	A list of information providers will be issued along with the completed return at time of validation. This list will also include any appropriate links to Committee Papers to justify submission.	2		30-Apr-2024	Complete. A complete central record is held in the J Drive.	Kevin Wells
IAF CCD 006	Future Public Bodies Climate Change Duties annual reports should be proof read and checked for spelling and grammatical errors prior to submission.	A check of figures and spelling was undertaken prior to submission of the final return.	2		01-Nov-2024	A proof read will take place prior to submission on 30 November 2024	Lawrence Hunter
IAF CCD 007	All of the Council's carbon reduction projects should involve a calculation of potential carbon savings as part of the project plan. Actual carbon savings realised from project implementation should also be quantified. These figures should be included in future Public Bodies Climate Change Duties annual reports.	Investigate if the Council reporting template can be amended to incorporate potential carbon savings on each project prior to approval from the Committee.	2		30-Apr-2024	Council services have been made aware of this requirement at Climate Emergency Board so this should be happening.. We have not been made aware of any new projects that would need to carry this out.	Kevin Wells

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF CCD 008	All of the Council's carbon reduction projects should involve a calculation of potential carbon savings as part of the project plan. Actual carbon savings realised from project implementation should also be quantified. These figures should be included in future Public Bodies Climate Change Duties annual reports.	The Climate Emergency Working Group and Climate Emergency Board will investigate what means is available to encourage and assist where possible with carbon savings data.	2		30-Apr-2024		Kevin Wells
IAF CCD 009	The compilation of the Public Bodies Climate Change Duties Annual Report should be included as an action / agenda item for the Climate Change Board / Emergency Working Group. This will aid the annual report completion as membership includes Team Leaders from Services that collect climate change data relating to the report.	The Public Bodies Climate Change Duties will be added to the agenda of the Climate Emergency Working Group (CEWG), with work to start in April / May 2024 to compile the information for the 2023/24 return.	3		30-Apr-2024	Complete. This is a standing agenda item on the Climate Emergency Board and Climate Emergency Working Group agendas.	Kevin Wells
IAF CCD 010	All report information anomalies identified should be investigated and the Public Bodies Climate Change Duties Annual Report amended / reissued to the Sustainable Scotland Network as a matter of urgency. This includes: • Corporate emissions; • Staff mileage figures; and • Boiler replacement figures.	Amendments identified will be submitted to Sustainable Scotland Network once Audit verification is agreed	1		31-Jan-2024	Actions completed and updates provided to SNN to their satisfaction	Lawrence Hunter
IAF CCD 011	Waste emissions figures should be compiled by the Team Leader, Waste and included in future returns.	Waste emissions figures will be reviewed and included in future returns.	2		30-Apr-2024	This will be received by the end of October 2024. This will be done, however currently still do not have a Waste Team Leader, Alan Salmond will complete this task.	Iain McDonald


Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF FOI 001	The Monitoring Officer role profiles are reviewed and amended to reflect their FOI duties.	Freedom of Information Monitoring Officers duties will be reviewed and recirculated. This will be accompanied by an offer of additional 1-2-1 training if required.	3	✅	30-Jul-2024	Complete. Profiles have been reviewed and shared with Monitoring Officers, further circulation will be completed via e-mail to Monitoring Officers and line managers with the request to acknowledge receipt. 1-2-1 training offer has been complete.	Evelyn Paterson
IAF FOI 002	An Operating Procedure is written to document the responsibilities of the Monitoring Officers and the Governance team, specifically the process of follow up on outstanding requests.	Guidance notes are due for review and will incorporate this recommendation.	3	⚠️	30-Jul-2024	Guidance notes have been prepared and are currently with the SIC.	Evelyn Paterson
IAF FOI 003	The current User Guide for the in house database should be reviewed and updated as appropriate.	The new system is now in use and a new user guide and user videos are already available. The Governance Team will review and update as appropriate.	3	✅	30-Apr-2024	In place and accessed via new FOI system	Evelyn Paterson
IAF FOI 004	FOI training is made mandatory to all staff.	This will be raised at the next available Senior Leadership Group to request permission to make the training mandatory as recommended.	3	⚠️	31-May-2024	Proposed amendment to corporate mandatory training programme will be tabled at SLG by March 2025.	Evelyn Paterson
IAF FOI 005	Action should be taken to improve the number of FOI requests and reviews answered within the statutory timeframe of 20 working days. No requests should remain unanswered.	A monthly report will be provided to the Extended Senior Leadership Group in the Pentana format to ensure that performance standards are achieved.	2	✅	30-Jun-2024	Reports are being received weekly by Directors regarding status of FOI/EIRs including those responded to on time. Governance Team are actively chasing overdue responses.	Evelyn Paterson
IAF FOI 006	Monthly figures uploaded to Pentana are distributed and discussed at Senior Leadership Group with action taken where required particularly in relation to delayed and no responses.	A monthly report will be provided to the Extended Senior Leadership Group in the Pentana format.	2	✅	30-Jun-2024	Currently figures reported to SIC are uploaded quarterly. Figures will be uploaded monthly.	Evelyn Paterson

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF FOI 007	The anomalies with the Scottish Information Commissioner (SIC) returns are investigated and addressed. Arrangements should be put in place to ensure that the accuracy of all future returns are checked prior to submission to SIC.	Some of the anomalies could be due to timing of reporting or the way the old system statistics were produced. The new system should make this clearer. This will be reviewed before the next set of statistics are issued.	2		31-May-2024	Complete. Review has been undertaken ahead of the statistics being issued.	Evelyn Paterson

IAF A09 LBF

Leisure Banking Follow Up


Assurance Not Applicable




Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF LBF 006	The Accountancy Team should consider what action (including formal write off) may be required to clear the long standing balance on the Leisure Suspense Account.	Measures will be put in place to reconcile the income monthly immediately.	1		31-Jan-2024	Monthly reconciliations are taking place. Action to clear the balance can only be taken forward once the police investigation has concluded.	Helen Coleman; Lindsay Sim


IAF A10 APO



Adult Social Care Purchase Order Arrangements





No Assurance



Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF APO 001	All Adult Care purchases should have an appropriately authorised Purchase Order raised on Techone by an officer with sufficient delegated authority and sent to the supplier in advance of payment. The Purchase Order should include the financial commitment as detailed in the care plans. Prior to payment, invoices	Clackmannanshire Council Senior Management agreed that: • Adult Care Purchase Orders should be issued / approved on Techone at the beginning of the year, with a 'call off' arrangement in place for ongoing spend once invoices are received with actual hours. The value of Purchase Orders should be based on: previous annual cost or the actual	1		31-May-2024	Part of BMU process improvement work (links to 012). This is likely to be longer term. Social Care is operationing on industry standard approach for social care payments, proforma are used to measure actual vs planned care to ensure only care provided is paid for. To deviate from this would require significant staffing capacity which is unaffordable at this time.	Ewan Murray; Lindsay Sim; David Williams





Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	should be received and matched to the Purchase Order.	budget for the type of care; or the care plan annual value; and • Purchase Orders should be raised before any invoices are received and if there is a contract the contract reference should also be noted.				Given the above a date when the action will be addressed cannot be provided.	
IAF APO 002	All Adult Care purchases should have an appropriately authorised Purchase Order raised on Techone by an officer with sufficient delegated authority and sent to the supplier in advance of payment. The Purchase Order should include the financial commitment as detailed in the care plans. Prior to payment, invoices should be received and matched to the Purchase Order.	The Health and Social Care Partnership Senior Management stated that: • The approved process within Clackmannanshire Council is to use Techone, however, it is acknowledged that social care purchasing within an integrated partnership involving Stirling Council and NHS Forth Valley requires consideration of a more flexible approach ensuring effective governance and control; and • Consideration be given to the 'pro-forma' process in place which is aligned to industry standard practice based on actual hours delivered on a 4 weekly programme of payments.	1		31-May-2024	Per 001 the acknowledged industry standard is a proform approach which is basis being used, subject to ongoing improvements to ensure control.	David Williams
IAF APO 003	All Adult Care purchases should have an appropriately authorised Purchase Order raised on Techone by an officer with sufficient delegated authority and sent to the supplier in advance of payment. The Purchase Order should include the financial commitment as detailed in the care plans. Prior to payment, invoices should be received and matched to the Purchase Order.	An improvement plan will be agreed by the Health and Social Care Partnership and Clackmannanshire Council Senior Management. The improvement plan will have measurable actions to address the adult social care commissioning and payment processes including the best use of current IT systems and assess further system development requirements to align with process requirements.	1		31-May-2024	Contract reference number - the information upload for Tech one is generated through FINCH. No technical IT support is available for FINCH to enable this to be changed.	David Williams
IAF APO 004	All Adult Care purchases should have an appropriately authorised Purchase Order raised on Techone by an officer with sufficient delegated authority and sent to the supplier in advance of	An improvement plan will be agreed by the Health and Social Care Partnership and Clackmannanshire Council Senior Management. The improvement plan will have	1		31-May-2024	To be considered within improvement plan. However initial assessment is it would take additional capacity to fully address recommendation and proforma basis be used for current time.	David Williams


Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	payment. The Purchase Order should include the financial commitment as detailed in the care plans. Prior to payment, invoices should be received and matched to the Purchase Order.	measurable actions to address the adult social care commissioning and payment processes including the best use of current IT systems and assess further system development requirements to align with process requirements.					
IAF APO 005	Care Plans should be in place for all adult care packages and should be retained in line with the Council's Retention Policy.	Health and Social Care Partnership Management advised that they are reasonably assured that care plans are routinely implemented on the basis that current systems ought not to permit progression to payment without this. However, a sample audit / data cleanse will be undertaken for assurance purposes. This will be repeated annually. Annual checking will be introduced to ensure that all care plans are in place. Health and Social Care Partnership Management advised that a modernised and fit for purpose Social Work recording system would streamline this process and ensure effective financial management based on individual care packages. A focus on this issue will be built into induction training to ensure processes and systems are understood and implemented properly from the outset of a member of staff's career within the Partnership. Quality Assurance (QA) processes and Key Performance Indicators (KPIs) to be developed and implemented to allow for routine reporting on performance in relation to care plans, work underway to devise KPIs dashboard. This will include "One Sheet" commissioning information.	2		31-May-2024	Interim Chief Officer is currently working on proposals for practice audit (including care plans) which may improve matters. Management response recognises the limitations of ASC recording system	David Williams

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF APO 006	All care plans should be regularly reviewed, and this should include approval of any ongoing financial commitments in line with the approving manager's delegated authority.	Health and Social Care Partnership Management advised that there needs to be a review of the levels of approval across systems as current arrangements do not align with delegated authority. Discussion required regarding the Council's Scheme of Delegation to ensure a transparent recognition of the role and function of across-Partners HSCP management team. A review will be undertaken of the Council's Scheme of Delegation to ensure that it includes the role and function of Health and Social Care Partnership Management Team and Officers. Thereafter the levels of approval on Adult Care Systems will be fully aligned to delegated authorities. Health and Social Care Partnership Management advised that following agreement on the process of ordering of packages of care going forward, a written standard operating procedure (SOP) for care managers and line managers would be developed. This will be disseminated accordingly with a requirement for a signed confirmation that each relevant staff member has read the procedure. The SOP will clarify the appropriate process for evidence of approval, e.g. amendment to the care plan or system to note approvals.	1		31-May-2024	Per 010 Interim CO has actioned revisions to approval levels for commissioning of care and Senior Resource Allocation Group (SRAG) now established for high tariff cases - SRAG first met 3 July 2024. This will need to align to Council s95 led work on revised SoD for council in due course. SOP for care managers and line managers still to be progressed.	David Williams
IAF APO 007	All care plans should be regularly reviewed, and this should include approval of any ongoing financial commitments in line with the approving manager's delegated authority.	A review and transformation of Adult Social Care processes is underway and will clarify statutory arrangements for reviews and case file audit, including financial commitments of care plans with the	1		31-Jul-2024	Reviews of care plans are underway in line with the implementation of the pan Clackmannanshire and Stirling IJB Self-directed Support and implementation of Right Care, Right Time. This is an ongoing process with no end point	David Williams

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
		aim of implementing a compliant care plan reviewing process.					
IAF APO 008	The manager approval and review of care plans should be defined in written procedures.	Adult Social Care Standard Operating Procedures will be developed and include processes for compiling, approving, and reviewing Care Plans.	2		30-Jun-2024	SOP for care managers and line managers still to be progressed and will be completed by end of year.	David Williams
IAF APO 009	Payments on Techone should only be approved by officers with sufficient delegated authority.	A review will be undertaken of the Council's Scheme of Delegation to ensure that it includes the role and function of Health and Social Care Partnership Management Team and Officers. Thereafter the levels of approval on Adult Care Systems will be fully aligned to delegated authorities.	1		31-May-2024	Council Scheme of Delegation element requires to sit with Council s95. Adult Social Care authorisation levels to commit to care have been reviewed and actioned. Adult Social Care payment approval authorisation levels under review and will be completed in October 2024.	Ewan Murray
IAF APO 010	Payments on Techone should only be approved by officers with sufficient delegated authority.	A review will be undertaken of the Council's Scheme of Delegation to ensure that it includes the role and function of Health and Social Care Partnership Management Team and Officers. Thereafter the levels of approval on Adult Care Systems will be fully aligned to delegated authorities.	1		31-May-2024	Interim Chief Officer actioned amendments to delegated authority levels for commissioning care on 23 May 2024. The Council review of SoD needs to reflect this and avoid conflation with authorisation for approval of payments.	Joanna MacDonald
IAF APO 011	Officers responsible for approving payments on Techone should have sufficient information in order to ensure only valid payments are made. For example, the service or goods have been provided and where appropriate these reconcile to a current contract.	Health and Social Care Partnership Management advised that a Resource Allocation Group (RAG) process for approval of Long Term Care is under development and expected to be implemented by the end of January 2024. This will include the process for budgetary and commissioning consideration. It would not be feasible nor practical to implement a similar process for Care at Home delivery given the volume of work and turnover of clients indicated	1		31-May-2024	RAG for LTC and SRAG for high tariff cases now established and this avoids the potential for packagesto be put in place without effective scrutiny and a direction to ensure appropriate use of TechOne. CO/CFO approval required for ad hoc CaH packages requests that require group 3 high-cost providers to be used due to lack of ability of usual group 1 and 2 providers to be used. BMU QA process to be developed.	Joanna MacDonald

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
		in this area. Explore ways of getting Manager assurance that appropriate checks had been undertaken. E.g. approval of care plan and actual costs incurred. Health and Social Care Partnership Management advised that there needs to agreement on an appropriate process for evidence of approval. Business Matching Unit (BMU) will develop a Quality Assurance process for reconciliation purposes.					
IAF APO 012	Officers responsible for approving payments on Techone should have sufficient information in order to ensure only valid payments are made. For example, the service or goods have been provided and where appropriate these reconcile to a current contract.	Health and Social Care Partnership Management advised that a Resource Allocation Group (RAG) process for approval of Long Term Care is under development and expected to be implemented by the end of January 2024. This will include the process for budgetary and commissioning consideration. It would not be feasible nor practical to implement a similar process for Care at Home delivery given the volume of work and turnover of clients indicated in this area. Explore ways of getting Manager assurance that appropriate checks had been undertaken. E.g. approval of care plan and actual costs incurred. Health and Social Care Partnership Management advised that there needs to agreement on an appropriate process for evidence of approval. Business Matching Unit (BMU) will develop a Quality Assurance process for reconciliation purposes.	1		31-May-2024	LTC RAG process in place. Quality Assurance process for reconciliation developed. The manager assurance element is really SDS outcome based assessment so links to systematic implementation of SDS policy - going to IJB June 24	David Williams
IAF APO 013	Consideration should be given to Adult Care Team Managers having access to real time budget information	Health and Social Care Partnership Management advised that Finance / budget meetings have now been	2		31-May-2024	Routine budget meetings established. Ongoing work in ensuring useful budget	David Williams




Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	when approving care plans. Prior to approval of care plans budgets should be checked to ensure they are sufficient to cover the projected financial costs	implemented with Locality Managers, however, the finance information available needs to be reviewed to ensure it has appropriate meaning at team level. Evidence of sufficient budget to enable care commitment will be built into the centralised HSCP resource allocation group (RAG) which is being put in place from January 2024.				information routinely available to managers.	
IAF APO 014	Consideration should be given to Adult Care Team Managers having access to real time budget information when approving care plans. Prior to approval of care plans budgets should be checked to ensure they are sufficient to cover the projected financial costs	Health and Social Care Partnership Management advised that Finance / budget meetings have now been implemented with Locality Managers, however, the finance information available needs to be reviewed to ensure it has appropriate meaning at team level. Evidence of sufficient budget to enable care commitment will be built into the centralised HSCP resource allocation group (RAG) which is being put in place from January 2024.	2		31-May-2024	Monthly budget review meetings in place (CFO will now attend periodically). Requested TechOne training for budget managers.	Lindsay Sim / Ewan Murry
IAF APO 015	Consideration should be given to Adult Care Team Managers having access to real time budget information when approving care plans. Prior to approval of care plans budgets should be checked to ensure they are sufficient to cover the projected financial costs	Health and Social Care Partnership Management advised that appropriate Tech One System Training to be provided to relevant managers.	2		30-Jun-2024	Staff cohort requiring Tech One training identified and training being planned.	Lindsay Sim
IAF APO 016	Adult Care Management should review non contract care and support expenditure to ensure compliance with the Care and Support Contract Standing Orders Exception Report.	These will be reviewed and action taken as appropriate.	1		31-May-2024		
IAF APO 017	Contracts should be put in place for care provider expenditure that meets Contract Standing Order thresholds.	A review of historical Adult Social Care spend will be undertaken to identify suppliers where no contracts	1		30-Jun-2024	Review by the service was undertaken in March 24 and fully noted any issues.	Derek Barr






Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
		are in place. Where no contracts were identified then procurement processes will be followed and contracts awarded. This review of supplier spend and contracts will be undertaken annually.				As per the agreed action this will be undertaken annually	
IAF APO 018	Contracts should be put in place for care provider expenditure that meets Contract Standing Order thresholds.	A review of historical Adult Social Care spend will be undertaken to identify suppliers where no contracts are in place. Where no contracts were identified then procurement processes will be followed and contracts awarded. This review of supplier spend and contracts will be undertaken annually.	1		30-Jun-2024	Review by the service was undertaken in March 24 and fully noted any issues. As per the agreed action this will be undertaken annually	David Williams

IAF A11 CHM

Care Home Residents' Monies

Limited Assurance






Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF CHM 001	To reduce the security risk, precise details of where and how to locate the imprest tin should not be disclosed in the Procedures.	The location of keys will be removed from the 'Step by Step' Guide.	2		29-Feb-2024	The location of the keys has been removed from the 'step by step' guide.	Kimberley Hamilton
IAF CHM 002	A written policy is created for withdrawing monies by residents (or relatives) for personal use and a formal process is created for closing a resident's account by a relative or Solicitor.	A 'Step by Step' Guide to be created covering withdrawal of monies. This will include a formal process for closing a resident's account.	3		31-Aug-2024	'Step by Step' guide has been created for withdrawal of monies and a formal process for closing residents account.	Kimberley Hamilton
IAF CHM 003	A different person distributes the cash from that who updates and reconciles the master spreadsheet, with regular management checks undertaken and recorded.	Business Support staff will continue to distribute cash and reconcile daily. The Manager / Senior staff will audit the master spreadsheet and counter sign balance checks.	2		30-Apr-2024		Caroline Bridgeman





Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF CHM 004	Training should be introduced to cover banking requirements and specifically cash and valuable security.	Training to be arranged by the Manager liaising with Business Support Manager.	3		31-Aug-2024	Business Support Manager has met with one of the employees to go over banking procedures. A written procedure for banking has been completed.	Caroline Bridgeman
IAF CHM 005	The Business Support Administrator role profile to be reviewed and updated as appropriate to reflect the responsibilities of handling residents monies and valuables.	Business Support role profile will be reviewed and updated as appropriate.	3		31-Aug-2024	Business Support Manager to update Business Support Job Profile Grade 4 in more detail for cash handling and valuables. Procedures have been reviewed and updated.	June Lang
IAF CHM 006	Items held in the valuables safe are witnessed / signed for by a relative or Solicitor. There should also be three monthly physical checks by management of the contents of this safe and to the contents list.	A form will be created to record three monthly management checks. Any valuables being deposited or withdrawn from the safe will require two signatures and a receipt issued.	2		30-Apr-2024	Form has been created to record three monthly checks and any valuables being deposited/withdrawn from safe requires two signatures and a receipt issued.	Caroline Bridgeman
IAF CHM 007	Receipts are issued and dated for all income received to ensure resident accounts are correctly updated and banking can be reconciled.	The Manager will remind all Senior staff to complete receipts for income received and adhere to the documented process.	2		30-Apr-2024	Manager has reminded all staff to complete receipts for all income received and adhere to the documented process.	Caroline Bridgeman
IAF CHM 008	A second independent person should undertake the banking, along with regular monthly ad hoc management checks to provide assurance that residents monies and valuables are being safely stored.	A 'Step by Step' Guide will be written to ensure all staff are completing receipts for income and that two signatures are required for holding valuables. Finance will double check all banking paperwork against the bank deposits. The Manager / Seniors to check the banking activity and counter sign the banking paperwork.	2		30-Apr-2024	A 'Step by Step' Guide has been written to ensure all staff are completing receipts for income and that two signatures are required for holding valuables. Finance will double check all banking paperwork against the bank deposits. The Manager / Seniors to check the banking activity and counter sign the banking paperwork.	Caroline Bridgeman

IAF A14 OVR




Overtime Arrangements





No Assurance




Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF OVR 001	The Overtime Authorisation Policy, Principles and Protocols should be reviewed and updated. The points relating to the review content of the OT Protocols should be considered when it is next updated.	The Overtime Protocols will be reviewed and engagement will take place with the Unions.	2		31-Oct-2024	Internal review of overtime protocol & policy undertaken within the Payroll team with guidance updated, and comms issued via CONNECT intranet.	Alastair Hair
IAF OVR 002	Service Management in conjunction with HR should develop one set of standard operational procedures for Overtime Arrangements detailing responsible Officer arrangements for approving, checking, and monitoring overtime.	Operational Procedures will be developed in line with review of the Overtime Protocols.	2		31-Oct-2024	HR Business Partner function liaising with service management on localised OT standard operational procedures. This will differ depending on regularity of OT use, but will be standardised and agreed with each area.	Alastair Hair
IAF OVR 003	The Working Time Regulations Guidance should be reviewed and updated to include any legislative changes that have occurred since the last update in 2020.	The Working Time Regulations Guidance will be reviewed and updated.	2		31-Oct-2024	Any change to Working Time Regulations will be included within the Policy Review Schedule. No changes to regulations to notes since 2020 as noted by IA.	Alastair Hair
IAF OVR 004	A review of the current approving manager and Payroll high level checking of overtime claims practices should be undertaken as a matter of priority so that it is more effective at identifying anomalies.	Communications will be developed and issued to line managers / authorised signatories regarding responsibilities and compliance with regulations. The iTrent system has previously been updated to prompt managers to delegate approval if they have no authorisation to do so. Audits are in place within the Payroll section for checking, however, there is no resource capacity to verify or check every entry of overtime to the system.	1		31-Jul-2024	Review of high level checking undertaken with new OT reports now being generated monthly and sent to all senior managers for checking. Additional information including graphical info circulated to director level (including volume, costs, hours etc). In terms of approving managers, OT claims now only accepted if submitted via authorised signatories, creating additional check in the OT process.	Alastair Hair
IAF OVR 005	Specific training is provided for overtime approving managers in relation to compliance with the overtime related Policies and the approving, monitoring, and management of overtime levels. Signed records of completion of training should be retained. This provides evidence of responsible	Overtime approval training will be developed and added to clacks academy / how to video can be added to the People Manager module in iTrent Communications will be developed and issued to line managers / authorised signatories regarding responsibilities and compliance with regulations.	1		31-Jul-2024	Training is provided to all new OT authorising signatories, with records recorded on the Clacks Academy. Longer term programme of training being planned within Payroll team to capture all OT authorising managers within the Council to ensure compliance, with training completion recorded on Clacks Academy.	Alastair Hair





Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	officers having read and understood overtime related policies and operational procedures.						
IAF OVR 006	More detailed management information should be issued to managers at an individual claim level to ensure more effective monitoring of Overtime Claims. Measures should be put in place to ensure there is evidence of management review of the data and that action is taken as a matter of priority to correct identified anomalies.	Management information reports will be scheduled to issue reports to appropriate managers on a monthly basis.	1		31-Jul-2024	Detailed, individual level management information now issued to senior managers on a monthly basis. Additional management information (including graphical information) circulated to Strategic Directors including raw data such as hours, costs, and other information allowing for granular analysis of OT claims.	Alastair Hair
IAF OVR 007	Management information relating to 'Overtime Levels per Directorate' should be regularly reported to the Extended Senior Leadership Group.	Management information reports will be tabled to Extended and Senior Leadership Groups on a quarterly basis.	1		31-Jul-2024	Directorate level management information now issued to senior managers on a monthly basis. Additional management information (including graphical information) circulated to Strategic Directors including raw data such as hours, costs, and other information allowing for granular analysis of OT claims	Alastair Hair
IAF OVR 008	Services should ensure that designated reporting managers on iTrent and managers approving overtime claims for Payroll Section processing should have sufficient delegated authority to approve overtime transactions and this should be reflected in authorisation levels on the authorised signatory list.	Directors will review the authorised signatory list to ensure it is appropriate and advise the Procurement Manager of any appropriate changes.	1		31-Jul-2024		Kevin Wells
IAF OVR 009	Services should ensure that designated reporting managers on iTrent and managers approving overtime claims for Payroll Section processing should have sufficient delegated authority to approve overtime transactions and this should	Directors will review the authorised signatory list to ensure it is appropriate and advise the Procurement Manager of any appropriate changes.	1		31-Jul-2024	In place.	David Williams

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	be reflected in authorisation levels on the authorised signatory list.						
IAF OVR 010	Services should ensure that designated reporting managers on iTrent and managers approving overtime claims for Payroll Section processing should have sufficient delegated authority to approve overtime transactions and this should be reflected in authorisation levels on the authorised signatory list.	Directors will review the authorised signatory list to ensure it is appropriate and advise the Procurement Manager of any appropriate changes.	1	✅	31-Jul-2024	Action confirmed by PSMT	Lorraine Sanda
IAF OVR 011	The requirement for employees to work overtime out with normal practice (Standby / Contractual, etc) will be reviewed and formally agreed in line with the Overtime Protocols.	The requirement for employees to work overtime (unless part of existing agreement or work is required urgently) should be approved in advance and evidence of this approval should be retained.	1	⚠️	30-Jun-2024		Kevin Wells
IAF OVR 012	The requirement for employees to work overtime out with normal practice (Standby / Contractual, etc) will be reviewed and formally agreed in line with the Overtime Protocols.	The requirement for employees to work overtime (unless part of existing agreement or work is required urgently) should be approved in advance and evidence of this approval should be retained.	1	✅	30-Jun-2024	Senior managers are routinely advised to ensure the need for overtime is reviewed and audit trail kept when approval is given. Overtime levels are also monitored by P&P SMT.	Chris Alliston
IAF OVR 013	The requirement for employees to work overtime out with normal practice (Standby / Contractual, etc) will be reviewed and formally agreed in line with the Overtime Protocols.	The requirement for employees to work overtime (unless part of existing agreement or work is required urgently) should be approved in advance and evidence of this approval should be retained.	1	✅	30-Jun-2024	In place.	David Williams
IAF OVR 014	The requirement for employees to work overtime out with normal practice (Standby / Contractual, etc) will be reviewed and formally agreed in line with the Overtime Protocols.	The requirement for employees to work overtime (unless part of existing agreement or work is required urgently) should be approved in advance and evidence of this approval should be retained.	1	✅	30-Jun-2024	Action Confirmed by PSMT	Lorraine Sanda
IAF OVR 015	A clear audit trail will be maintained detailing specific hours and duties	Approving Managers should ensure that an audit trail including supporting	1	⚠️	31-Jul-2024		Kevin Wells

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	undertaken for overtime and this will include a record of management checking and approval. The audit trail of overtime hours worked will be included in the communications to be developed for authorised signatories. The requirement for the audit trail of overtime hours worked will also be included in the training resource.	documentation is retained for overtime and additional payments and this includes validation checks.					
IAF OVR 016	A clear audit trail will be maintained detailing specific hours and duties undertaken for overtime and this will include a record of management checking and approval. The audit trail of overtime hours worked will be included in the communications to be developed for authorised signatories. The requirement for the audit trail of overtime hours worked will also be included in the training resource.	Approving Managers should ensure that an audit trail including supporting documentation is retained for overtime and additional payments and this includes validation checks.	1		31-Jul-2024	Senior managers are required to ensure audit trail is kept in relation to the approval for overtime and the need for it.	Chris Alliston
IAF OVR 017	A clear audit trail will be maintained detailing specific hours and duties undertaken for overtime and this will include a record of management checking and approval. The audit trail of overtime hours worked will be included in the communications to be developed for authorised signatories. The requirement for the audit trail of overtime hours worked will also be included in the training resource.	Approving Managers should ensure that an audit trail including supporting documentation is retained for overtime and additional payments and this includes validation checks.	1		31-Jul-2024	In place.	David Williams
IAF OVR 018	A clear audit trail will be maintained detailing specific hours and duties undertaken for overtime and this will include a record of management checking and approval. The audit trail of overtime hours worked will be included in the communications to be developed for authorised signatories. The requirement for the audit trail of	Approving Managers should ensure that an audit trail including supporting documentation is retained for overtime and additional payments and this includes validation checks.	1		31-Jul-2024	Action confirmed by PSMT	Lorraine Sanda

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	overtime hours worked will also be included in the training resource.						
IAF OVR 019	The overtime payment errors should be investigated, rectified, recovered, and monitoring measures put in place to ensure that they are not ongoing.	Overpayment errors identified by Internal Audit will be investigated, however, recovery of historical over payments may not be possible given the passage of time, plus these have been authorised as being correct. Where issues are identified that caused the overpayment will result in measures being put in place to ensure that the overpayment does not recur.	2		31-Jul-2024	OT Approvals are in place and in alignment with agreed line management structure and scheme of delegation.	Kevin Wells
IAF OVR 020	The overtime payment errors should be investigated, rectified, recovered, and monitoring measures put in place to ensure that they are not ongoing.	Overpayment errors identified by Internal Audit will be investigated, however, recovery of historical over payments may not be possible given the passage of time, plus these have been authorised as being correct. Where issues are identified that caused the overpayment will result in measures being put in place to ensure that the overpayment does not recur.	2		31-Jul-2024	Further investigation by Internal Audit has been agreed to quantify errors and recommend further actions.	David Williams
IAF OVR 021	The overtime payment errors should be investigated, rectified, recovered, and monitoring measures put in place to ensure that they are not ongoing.	Overpayment errors identified by Internal Audit will be investigated, however, recovery of historical over payments may not be possible given the passage of time, plus these have been authorised as being correct. Where issues are identified that caused the overpayment will result in measures being put in place to ensure that the overpayment does not recur.	2		31-Jul-2024	Action confirmed by PSMT	Lorraine Sanda
IAF OVR 022	Managers should monitor levels of employee overtime to ensure that hours worked is in compliance with the Working Time Regulations	Levels of overtime will be monitored through management Information reports which will be issued to appropriate managers on a monthly	2		30-Oct-2024		Kevin Wells

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	Guidance. If Employees voluntary agree to work more than the 48 hours weekly maximum then a signed "Opt-out agreement" should be completed and a copy submitted to HR.	basis. In addition, overtime levels will be monitored through management information reports tabled to Extended and Senior Leadership Groups on a quarterly basis. Working Time Regulations Guidance will be reviewed and the requirements of the updated guidance will be rolled out to all approving managers.					
IAF OVR 023	Managers should monitor levels of employee overtime to ensure that hours worked is in compliance with the Working Time Regulations Guidance. If Employees voluntary agree to work more than the 48 hours weekly maximum then a signed "Opt-out agreement" should be completed and a copy submitted to HR.	Levels of overtime will be monitored through management Information reports which will be issued to appropriate managers on a monthly basis. In addition, overtime levels will be monitored through management information reports tabled to Extended and Senior Leadership Groups on a quarterly basis. Working Time Regulations Guidance will be reviewed and the requirements of the updated guidance will be rolled out to all approving managers.	2		30-Oct-2024	P&P SMT regularly review overtime levels as part of management information reports regarding raw data are also provided to managers for scrutiny and review.	Chris Alliston
IAF OVR 024	Managers should monitor levels of employee overtime to ensure that hours worked is in compliance with the Working Time Regulations Guidance. If Employees voluntary agree to work more than the 48 hours weekly maximum then a signed "Opt-out agreement" should be completed and a copy submitted to HR.	Levels of overtime will be monitored through management Information reports which will be issued to appropriate managers on a monthly basis. In addition, overtime levels will be monitored through management information reports tabled to Extended and Senior Leadership Groups on a quarterly basis. Working Time Regulations Guidance will be reviewed and the requirements of the updated guidance will be rolled out to all approving managers.	2		30-Oct-2024	In place	David Williams
IAF OVR 024	Managers should monitor levels of employee overtime to ensure that hours worked is in compliance with the Working Time Regulations Guidance. If Employees voluntary	Levels of overtime will be monitored through management Information reports which will be issued to appropriate managers on a monthly basis. In addition, overtime levels will	2		30-Oct-2024	Action Confirmed by PSMT	Lorraine Sanda





Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	agree to work more than the 48 hours weekly maximum then a signed "Opt-out agreement" should be completed and a copy submitted to HR.	be monitored through management information reports tabled to Extended and Senior Leadership Groups on a quarterly basis. Working Time Regulations Guidance will be reviewed and the requirements of the updated guidance will be rolled out to all approving managers.					
IAF OVR 025	Where overtime is ongoing Section Management should review the requirements of their service on a regular basis to ensure that resources are sufficient in order to minimise the level of overtime payments.	Section managers will review the overtime levels and the requirements of their service on a regular basis to ensure resources are sufficient in order to minimise the level of overtime payments. Reviews of resources and overtime levels and resultant actions will be recorded	1		31-Jul-2024	P&P SMT regularly review overtime levels on a monthly basis. Complete	Chris Alliston
IAF OVR 026	Where overtime is ongoing Section Management should review the requirements of their service on a regular basis to ensure that resources are sufficient in order to minimise the level of overtime payments.	Section managers will review the overtime levels and the requirements of their service on a regular basis to ensure resources are sufficient in order to minimise the level of overtime payments. Reviews of resources and overtime levels and resultant actions will be recorded	1		31-Jul-2024	Requirements routinely reviewed including drivers of overtime requirements. However, this can only be planned so far as it is predictable and there is a legislative requirement to ensure safe staffing levels.	David Williams
IAF OVR 027	Where overtime is ongoing Section Management should review the requirements of their service on a regular basis to ensure that resources are sufficient in order to minimise the level of overtime payments.	Section managers will review the overtime levels and the requirements of their service on a regular basis to ensure resources are sufficient in order to minimise the level of overtime payments. Reviews of resources and overtime levels and resultant actions will be recorded	1		31-Jul-2024	Not aware of any OT errors in Environment.	Kevin Wells
IAF OVR 028	Where overtime is ongoing Section Management should review the requirements of their service on a regular basis to ensure that resources are sufficient in order to minimise the level of overtime payments.	Section managers will review the overtime levels and the requirements of their service on a regular basis to ensure resources are sufficient in order to minimise the level of overtime payments. Reviews of	1		31-Jul-2024	Instruction given to PSMT	Lorraine Sanda





Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
		resources and overtime levels and resultant actions will be recorded					





IAF A15 UPC

Use of Purchase Cards

Limited Assurance

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF UPC 001	Contingency arrangements should be established for the event of the Procurement Manager's absence. In addition, significant decisions in relation to purchase cards should be monitored by an independent officer.	Although the Procurement Manager is a "single point of dependency", two other officers have the same level of access to the Barclaycard Centre Suite system. A review of the process will be undertaken to establish and provide adequate contingency arrangements.	2		31-Dec-2024	These arrangements are in place, there are now two officers with the same access as the Procurement Manager and this has been robustly tested to ensure that these arrangements work.	Derek Barr
IAF UPC 002	Contingency arrangements should be established for the event of the Procurement Manager's absence. In addition, significant decisions in relation to purchase cards should be monitored by an independent officer.	Although the Procurement Manager is a "single point of dependency", two other officers have the same level of access to the Barclaycard Centre Suite system. A review of the process will be undertaken to establish and provide adequate contingency arrangements.	2		31-Dec-2024	Complete	Derek Barr
IAF UPC 003	The Purchase Card Policy and Procedures Guide should specify whether budget holders should be a line manager, a Head of Service, or a Director.	The Purchase Card Policy and Procedures Guide will be revised to ensure clarity.	3		31-Aug-2024	Complete issued to the web and cardholders to acknowledge receipt 100%	Derek Barr
IAF UPC 004	The identified issues regarding purchase card authorisation limits should be addressed: the limits should be checked on a quarterly basis; checks should be made to ensure that the limits revert to their normal amounts after any temporary	Whilst the purchase card authorisation limits are checked informally each month, formal checks will be undertaken on a quarterly basis as per the recommendation. Currently, line managers submit the requests for changes to limits and are	2		30-Sep-2024	Complete 100%	Derek Barr

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	changes; and line managers should be informed of any temporary changes to limits.	informed of any changes. They are also provided with a timetable on when the levels will revert to the original amounts. Alternatively, a revised delegated authority application is made to change these figures on a more permanent basis. Both sets of records of these changes will be improved going forward.					
IAF UPC 005	The three occasions where a cardholder's single transaction limit has been exceeded should be investigated.	These transactions will be investigated.	2		31-Aug-2024	Complete 100%	Derek Barr
IAF UPC 006	All cardholders should be reminded each month of the requirement for them to provide a completed transaction log and supporting documentation by the 10th of the month following the statement date. Consideration should also be given to amending the authorisation limits for cardholders to £0.00 (effectively blocking the purchase cards) where there has been a failure to provide the necessary documentation on time. The limits can be restored to their normal amounts when the documentation is provided.	Cardholders will be reminded each month (when the statements are issued) of the requirement for them to provide a completed transaction log and supporting documentation by the 10th of the month following the statement date. Consideration will also be given to amending the authorisation limits for cardholders to £0.00 (effectively blocking the purchase cards) where there has been a failure to provide the necessary documentation on time.	2		31-May-2024	Complete 100%	Derek Barr
IAF UPC 007	Consideration should be given to creating a list of approved suppliers for purchase card transactions.	Consideration was previously given to creating such a list, but due to cost and time requirements to create such a list this was not progressed.	3		13-May-2024	As stated in the final report Consideration was previously given to creating such a list, but due to cost and time requirements to create such a list this was not progressed and this will not be progressed. Complete 100%	Derek Barr
IAF UPC 008	Purchase card expenditure on travel and subsistence should be challenged by line managers authorising log sheets.	The Procurement Manager advised that they challenge travel and subsistence expenditure. Further guidance will be provided to cardholders and their line managers	2		31-Aug-2024	Complete further guidance issued to the web and cardholders to acknowledge receipt 100%	Derek Barr





Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
		as part of the Purchase Card Policy and Procedures Guide revision (at recommendation 2) to ensure greater clarity.					
IAF UPC 009	The purchase card payments to prohibited suppliers should be investigated.	The Procurement Manager reviews payments to these suppliers each month and they are challenged and investigated where appropriate. The Procurement Manager has agreed to review these transactions.	2		31-Aug-2024	This is ongoing but effectively complete it is challenged each month and has been challenged for a considerable time as noted at the audit. 100% complete	Derek Barr
IAF UPC 010	Reconciliations between the ledger and the bank account for purchase card transactions should be conducted each month.	To ensure that purchase card transactions are being reconciled to the bank account, a review will take place.	2		31-Dec-2024		Les Aitken
IAF UPC 012	The discrepancies between the Procurement Manager's data and the data that has been reported on the Council's website should be investigated.	There was an error in the Council website data which has now been rectified by the Procurement Manager and it matches the Procurement annual report figures. The difference between this data and that which was provided by the Procurement Manager (75 transactions with a cumulative value of £8,321.11) will be investigated.	2		31-Aug-2024	100% Complete	Derek Barr
IAF UPC 013	The points relating to purchase card rebates should be addressed: the reasons for the discrepancies in the rebate amounts should be ascertained; the purchase card rebate percentages for annual expenditure above £250,000 should be ascertained; the reasons for not qualifying in 2019/20 should be determined; records of all expected and actual purchase card rebates received for each year should be maintained; the 2021/22 purchase card rebate should be confirmed with Barclaycard; and the purchase card	The points relating to purchase card rebates will be addressed.	2		31-Aug-2024	Rebate received for 23-24	Derek Barr





Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
	rebate income that is generated for each year should be coded to the ledger and transaction reports that confirm the receipt of this income should be made available. The rebate income received should also reconcile to the expected amount.						

IAF A09 SEA

School Enrolment/Admissions Policy

Limited Assurance

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF SEA 001	Education Services should review the list of improvements at Annex 3 and considers incorporation of these into the digitalisation process where appropriate.	This will be incorporated into the new online admissions process which is being rolled out as part of the Council's digital improvement process.	3		31-Jan-2025		Adrienne Aitken
IAF SEA 002	To improve the user experience for parents / guardians, Education Services should produce a single document that lays out all the information in one place.	This will be incorporated into the new online admissions process which is being rolled out as part of the Council's digital improvement process.	2		31-Jan-2025		Adrienne Aitken
IAF SEA 003	Operational procedures should be written for all enrolment processes to facilitate Officers in completing all stages and types of enrolment consistently and efficiently. Good practice includes schools sharing guidance drafted locally around enrolment.	This will be rolled out to schools prior to admissions for 2025-26.	2		31-Dec-2024		Michael Boyle
IAF SEA 004	Education Services should review the Catchment Area Map and remove the disclaimer if appropriate.	The catchment map will be updated prior to school enrolment in January.	3		31-Jan-2025		Michael Boyle

Code	Finding/Recommendation	Agreed Action	Grading	Status	Due Date	Latest Note	Lead
IAF SEA 005	Information on the mid-session enrolment process should be made available to parents / guardians, and we understand that making this information available is planned as part of the digital transformation process.	This will be incorporated into the new online admissions process which is being rolled out as part of the Council's digital improvement process.	3		31-Jan-2025		Adrienne Aitken
IAF SEA 006	Prioritisation criteria for both primary and secondary schools must be written and published on the Council website.	This has been updated and the information can be accessed via the Council website.	1		31-Aug-2024	Action closed prior to issue of Final Report; adding to Pentana for record keeping purposes.	Michael Boyle
IAF SEA 007	A deadline for initial Early Entry request form submission to Early Learning and Childcare settings should be set for parents prior to the deadline for full completion of all paperwork.	This will be incorporated into the new online admissions process which is being rolled out as part of the Council's digital improvement process.	3		31-Jan-2025		Adrienne Aitken
IAF SEA 008	Education Services should liaise with St Mungo's Primary School to ensure that the School Handbook is made available on the website.	This has been updated and the handbook can be accessed via the Council website.	2		31-Aug-2024	Action closed prior to issue of Final Report; adding to Pentana for record keeping purposes.	Michael Boyle

Report to: Audit & Scrutiny Committee

Date of Meeting: 6 February 2025

Subject: Clackmannanshire and Stirling Integration Joint Board Annual Performance Report 2023-2024

Report by: Wendy Forrest, Head of Strategic Planning and Health Improvement

1. Purpose

- 1.1. This report offers assurance that the Integration Joint Board continues to fulfil its ongoing responsibility to ensure effective monitoring and reporting on the delivery of services, and relevant targets and measures included in the delegated functions, and as set out in the current Strategic Commissioning Plan.
- 1.2. The Integration Joint Board has a statutory responsibility to ensure effective performance monitoring and reporting of all services delegated in the Health and Social Care Partnership. The Health and Social Care Partnership is the delivery vehicle for the community health and social work/care services delegated by NHS Forth Valley, Clackmannanshire Council and Stirling Council.
- 1.3. Under the Public Bodies (Joint Working) (Scotland) Act 2014 Section 42 the Integration Authority must produce an Annual Performance Report (APR) for the reporting period, in this case 1 April 2023 to 31 March 2024. The report must be published by 31 July.
- 1.4. As set out in The Public Bodies (Joint Working) (Content of Performance Reports) (Scotland) Regulations 2014 No. 326 the Annual Performance Report must cover a range of areas, these include:
 - An assessment of performance in relation to national health and wellbeing outcomes, integration delivery principles, strategic planning.
 - Financial planning and performance
 - Best value in planning and carrying out integration functions
 - Performance in respect to Localities
 - Inspection of services
 - Review of the Strategic Plan
 - Any other information related to assessing performance during the reporting year in planning and carrying out integration functions as the integration authority thinks fit.

- 1.5. The Annual Performance Report Executive summary (Appendix 1) and Annual Performance Report 2023/2024 (Appendix 2) reflects on our progress together as a Health and Social Care Partnership from 1 April 2023 to 31 March 2024.
- 1.6. Within the Annual Performance Report we have illustrated the linkages between the Strategic Commissioning Plan priorities, National Health and Wellbeing Outcomes and the National Health and Care Standards.
- 1.7. Within the guidance, we are required to publish the Core Indicator set published by Public Health Scotland. This data is standardised and allows us to compare our performance to national trends and with other Partnership areas. This data is published annually in July and we have included analysis within the Annual Performance Report.

2. Recommendations

- 2.1. Note the Annual Performance Report 2023-24 and note that this has been published on the Partnership website as required.

3. Considerations

3.1. Highlights, Progress and Achievements

- 3.1.1. Most MSG (Ministerial Steering Group) and National Core indicators follow the desired trend direction with MSG 3a A&E attendances (18+) showing a 9% decrease since 2021/22 and is now below the target baseline of 26,585 set in 2015/16.
- 3.1.2. We have identified the challenges, such as the continued recovery from the pandemic, continued budget pressures, staffing challenges due to national shortages and the impact of the cost of living crisis for supported people and their carers.
- 3.1.3. We also identified the opportunities and the transformation delivered despite the challenging environment in which we operate. Establishing the Commissioning Consortium and the significant engagement and planning work completed, including the Alcohol and Drug Partnership Commissioning Plan, Integrated Workforce Plan and the Locality Planning Networks.

3.2. Challenges

- 3.2.1. Although the number of A&E attendances has decreased MSG1a shows the number of emergency admissions, especially in the 18+ age group, has been increasing since 2021/22.
- 3.2.2. The latest National Core Outcome Indicators (NI1-9) are based on the 2023/24 Health and Care Experience Survey. This online and postal survey is sent to a random sample of people registered with a general practice in Scotland every two years.
- 3.2.3. The level of support required for people in the Clackmannanshire & Stirling communities is changing due to an increasing proportion of older adults and increasing numbers of people with more than one long term condition (also known as comorbidities).

- 3.2.4. The ongoing financial and workforce challenges continue to be reflected in our recruitment and retention of staff.
- 3.2.5. The two social work client recording systems are in urgent need of modernisation and both Clackmannanshire Council and Stirling Council are looking to replace these systems.
- 3.3. Local and National Data Availability
 - 3.3.1. The report uses a range of data to describe and illustrate performance within the HSCP, and when data is used the source will be noted. Local data is gathered within the HSCP and Forth Valley NHS.
 - 3.3.2. We are required to publish the National Core Suite of Integration Indicators. This is published by Public Health Scotland. These indicators are a standard national set of data and allow us to compare our performance with other HSCP s and to the national average. National data covers all residents within the HSCP area and all services that have been used. This means that if a resident attended a hospital out with Forth Valley the data will be included.
 - 3.3.3. Public Health Scotland publish their most up to date indicators annually in July. Where full information to March 2024 is not available guidance from PHS is to use the 2023 calendar year as a proxy for 2023/24. Where this has occurred it has been noted.
 - 3.3.4. The Core Indicators are reported throughout the main body of the report, within the context of our strategic policies and we have provided comparisons against other HSCP areas in our LGBF family group (comparators) and the national average.
 - 3.3.5. The Core Suite of Integration Indicators are based on Standardised Mortality Ratio (SMR01) returns from the Health Board. Where not all 100% of records have been submitted/published/validated, this affects the data and will be the main reason figures change retrospectively from year to year and month to month. Where completeness is an issue, it has been noted and mainly affects national data only.
 - 3.3.6. Some methodology has also changed within the Health Care and Experience Survey which makes comparison with previous year's data difficult. Again, this has been noted where appropriate.
 - 3.3.7. Public Health Scotland also publish a suite of MSG (Ministerial Steering Group) Indicators which HSCP areas can use to monitor local progress without the expectation of benchmarking or comparison within Scotland or other HSCP areas.
 - 3.3.8. The MSG Indicators are reported throughout the body of this report, within the context of our strategic direction.
 - 3.3.9. As an HSCP, we have a wealth of data collected by our systems within the NHS Forth Valley services, Clackmannanshire Council and Stirling Council. This data provides local information on the people supported by our services within Forth Valley, it is not always possible to compare this local data to other partnership or national figures.

3.3.10. The Annual Performance Report is a part of public performance reporting. It is aimed at providing the public with a simple and effective overview of the progress made towards the priorities and how we are performing. It is written in Plain English and efforts to increase accessibility will be made. For example, publication of a Reader friendly plain text version, use of videos.

4. Sustainability Implications

N/A

5. Resource Implications

5.1. Financial Details

5.1.1. 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 X

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

5.2. Staffing

5.2.1. Workforce is considered in the report.

6. Exempt Reports

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

7. 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	<input type="checkbox"/>
Our families; children and young people will have the best possible start in life	<input type="checkbox"/>
Women and girls will be confident and aspirational, and achieve their full potential	<input type="checkbox"/>
Our communities will be resilient and empowered so that they can thrive and flourish	X

(2) Council Policies (Please detail)

8. 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 X

9. 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 X

10. Appendices

- 10.1. Appendix 1 – Clackmannanshire and Stirling IJB - HSCP Annual Performance Report 2023-2024 - Executive Summary.
- 10.2. Appendix 2 – Clackmannanshire and Stirling IJB - HSCP Annual Performance Report 2023-2024

11. Background Papers

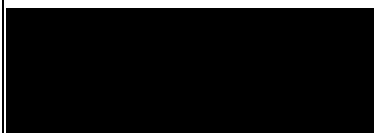
Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

Yes X (please list the documents below) No ☐

Author(s)

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Approved by

NAME	DESIGNATION	SIGNATURE
Joanna MacDonald	Interim Chief Officer	

Annual Performance Report 2023-2024

Executive Summary



Key Achievements in 2023/2024

- Developing and approving Locality Plans
- Developing and approving Alcohol and Drug Partnership Commissioning Plans
- Developing and agreeing a Workforce Plan including an improvement action plan
- Approved, along with Falkirk IJB, the development of a Forth Valley Strategic Commissioning Plan for Palliative and End of Life Care
- Agreeing significant and ambitious transformation and savings plans to support a ‘Needs Led, Resource Bound’ approach and demonstrate clear alignment to strategic priorities.



£272.6m total IJB Strategic Plan Budget 2023/24 £2.616m overspend met from Reserves

Performance Summary

Performance (MSG and NCI) 25 indicators	12	Improving performance	6	Static	7	Declining performance
Strategic Theme 1 - Prevention, early intervention, and harm	7	1	2			
Strategic Theme 2 - Independent living through choice and control	1	1	2			
Strategic Theme 3 - Achieving care closer to home	3	4	3			
Strategic Theme 4 - Supporting empowered people and communities	1	0	0			

Benchmarking (NCI only) 18 indicators						
Scotland	9	Better than average	3	Within 5%	6	Worse than average
	6	Better than average	8	Within 5%	4	Worse than average

Strategic Theme	Performance	
		The MSG information covers a range of activities under the umbrella of 'unscheduled care'. These activities support people to remain in their own homes, return to their own homes as quickly as possible when hospital treatment is required, prevent related re-admission to hospital and include end of life care. Unscheduled care is a core element of the health and social care system and as such, our services need to be responsive to need whilst being transformative in that contact with patients is shifted from reactive to proactive planned engagement, and from hospital settings to the community where appropriate.
ST1	↓	MSG1a - Number of emergency admissions (aged 18+) has increased for the last 3 years to 14,582 and is above the target of 10,584 set in 2015/16.
ST1	↓	MSG2a - Although the Number of unscheduled hospital bed days (aged 18+); acute specialties has decreased by 5.2% from 106,732 in 2022/23 to 101,143 in 2023/24. This is still above the target of 88,804 set in 2015/16.
ST1	↓	MSG2c - Although the available data for is for 2023 as a proxy for 2023/24 current information shows that the number of unscheduled hospital bed days (aged 18+); mental health specialties has reduced to 17,001 which is below the 2015/16 baseline of 20,378.
ST1	↓	MSG3a - A&E attendances (aged 18+) for Patients from all areas has reduced from 28,398 in 2022/23 to 26,053 in 2023/24 which is now below the 2015/16 base line of 26,585.
ST1	↓	MSG4a - Delayed discharge bed days (aged 18+) - All Reasons has increased from 14786 in 2022/23 to 15,624 in 2023/24 and is above the 2015/16 baseline of 10,069.
ST3	↓	MSG5a - Percentage of last 6 months of life spent in community (all ages) decreased to 89.2% in 2023/24 and has remained slightly under the target of 90% for the last 3 years.
ST3	↓	MSG6 -The latest information for is from 2022/23 and shows Proportion of 65+ population living in Community or institutional settings - Home (Supported and unsupported) is 96.8%. Although this is a reduction from 97.3% in 2021/22 it is still above the 2015/16 baseline target of 96.6%.

Strategic Theme	Performance	Outcome Indicators - Information published by PHS is sourced from the latest Scottish Health and Care Experience Survey 2023/24. This online and postal survey is sent to a random sample of people registered with a general practice in Scotland every 2 years.	Scotland average	Comparator HSCP average
ST2	↑	NI 1 - Percentage of adults able to look after their health very well or quite well has shown a small decrease from 91.7% to 90.8% .	90.7%	91.8%
ST2	↑	NI 2 - Percentage of adults supported at home who agreed that they are supported to live as independently as possible has decreased from 72.5% to 67.2% .	72.4%	71.9%
ST2	↑	NI 3 - Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided has decreased from 64.3% to 57.9% .	59.6%	63.7%
ST3	↑	NI 4 - Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated has decreased from 61.7% to 56% .	61.4%	59.8%
ST3	↑	NI 5 - Total percentage of adults receiving any care or support who rated it as excellent or good has decreased from 67.8% to 64.8% .	70%	70.5%
ST3	↑	NI 6 - Percentage of people with positive experience of the care provided by their GP practice has increased from 67.3% to 72.3% .	71.3%	68.5%
ST3	↑	NI 7 - Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life has decreased from 79.2% to 66.1% .	69.8%	69.5%
ST4	↑	NI 8 - Total combined % carers who feel supported to continue in their caring role has increased from 26.6% to 32.8% .	31.2%	31.9%
ST3	↑	NI 9 - Percentage of adults supported at home who agreed they felt safe has reduced from 75.3% to 66.8% .	72.7%	71.4%

Core Suite of Integration Indicators Performance Summary

Desired Trend ↑ increase ↓ decrease

Strategic Theme	Performance	Data Indicators - Information published by PHS. Data for indicators 12, 13, 14, 15, 16 and 18 are reported for the calendar year 2023 as a proxy for 2023/24 as data for the full financial year is incomplete at this time. Data for indicator 11 to calendar year 2023 is not currently available. Data is derived from various organisational/system datasets.	Scotland average	Comparator HSCP average
ST1	↓	NI 11 - The latest information for Premature mortality rate per 100,000 persons by Calendar Year is from 2022. This shows a decrease 440 in 2021 to 407 in 2022.	442	394
ST1	↓	NI 12 - Emergency admission rate (per 100,000 population) has increased from 13,036 in 2022/23 to 13,127 for calendar year 2023.	11,707	12,327
ST1	↓	NI 13 - Rate of emergency bed day per 100,000 population for adults (18+) decreased from 115,181 in 2022/23 to 110,213 for calendar year 2023.	112,883	114,651
ST1	↓	NI 14 - Emergency readmissions to hospital for adults (18+) within 28 days of discharge (rate per 1,000 discharges) has decreased from 126 in 2022/233 to 122 for calendar year 2023.	104	113
ST3	↑	NI 15 - Proportion of last 6 months of life spent at home or in a community setting reduced slightly from 89.3% in 2022/23 to 89.2% for calendar year 2023.	89.1%	89.4%.
ST1	↓	NI 16 - Falls rate per 1,000 population aged 65+ has decreased from 23.8 in 2022/23 to 23.6 for calendar year 2023.	22.7	23
ST3	↑	NI17 - Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections has increased from 80.8% in 2022/23 to 84.6% .	77%	78.7%.
ST2	↑	NI18 - Percentage of adults with intensive care needs receiving care at home has increased from 69.3% in 2022/23 to 70.4% for calendar year 2023.	64.5%	64.8%.
ST3	↓	NI19 - Number of days people aged 75+ spend in hospital when they are ready to be discharged, per 1,000 population has increased from 804 in 2022/23 to 814 .	902	870



Clackmannanshire and Stirling Integration Joint Board Annual Performance Report 2023-2024

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Message from the Chair

2023-2024 saw the cost-of-living crisis and increasing demand for services create the 'perfect storm' for health and social care across the country.

Our vision remains the same – to enable people to live full and positive lives in supported communities. We see progress on our four key strategies: prevention and early intervention; independent living; care closer to home and empowering people.

But we still face the challenge of meeting the increasing needs of an ageing population against the backdrop of limited resources. In Clackmannanshire and Stirling, one in five of us is over the age of 65 - by 2038 that will be one in four.

We need to ensure money is spent where it will most positively impact on people's health and wellbeing. That involves transforming our model of care.

For instance, £100 invested in prevention and early intervention near someone's home could save £1000s in a costly hospital stay down the line. Last year we invested in a falls prevention leader with the goal of reducing the number of emergency admissions to hospital.

And we need to make sure everyone has a say in how health and care is seamlessly delivered in their communities.

This year we strengthened our three Locality Planning Networks - Clackmannanshire, Urban Stirling and Rural Stirling. A great opportunity for you to make your voice heard, so I would welcome you to come along to one of their roadshows.

Finally would like to acknowledge the hard work and dedication of our staff, GP practices, third sector and independent providers in making a positive difference to thousands of lives. And a special shout out to our unsung heroes - the 21,000 unpaid carers who look after their loved ones in Clackmannanshire and Stirling.

Thank you

Message from the Interim Chief Officer

I want to express my sincere thanks to HSCP staff alongside colleagues in our Third and Independent sectors who have continued worked tirelessly to ensure the safe and effective provision of community health and social care and support across our communities.

This report reflects progress made in delivering against the priorities within our 2023-2033 Strategic Commissioning Plan which was approved by the Integration Joint Board in March 2023 follow an extension period of engagement with our communities and partners.

This report reflects some of the significant work and efforts of all people who worked alongside the communities of Clackmannanshire and Stirling throughout the last year. We have seen improvements in progressing key pieces of transformational work which will continue into 2024-25.

This eighth Annual Performance Report evidences that there is much to be proud of, however, it also shows that the HSCP continues to seek to meet the challenge of the growing population and increasing levels of complex needs in our population, against a backdrop of significant financial challenges now and going into the future.

Addressing these pressures will require significant further transformation in how we deliver services across the partnership area in the coming years and we will continue to provide engage with citizens to co-produce solutions to these challenges.

I hope you enjoy reading about our progress, in partnership with our communities.



Allan Rennie

Vice Chair
Integration Joint
Board



David Williams

Interim Chief
Officer

Introduction and background

The Public Bodies (Joint Working) (Scotland) Act 2014 requires the Integration Joint Board to publish an Annual Performance Report. This is the eighth Annual Performance Report for Clackmannanshire and Stirling Integration Joint Board (IJB) where we reflect on the 2023/24 and review the progress made in delivering the priorities set out in our [Strategic Commissioning Plan 2023 - 2033](#) which was approved by the IJB in March 2023. The Clackmannanshire and Stirling Health and Social Care Partnership (HSCP) is the delivery vehicle of the Integration Joint Board, services are delivered in line with the Strategic Commissioning Plan 2023 - 2033. See [Appendix 1](#) for a list of the functions delegated to the IJB.

The Strategic Commissioning Plan is a ten year plan based on the principles of human rights, equality and ecology. Five strategic themes reflect our aims setting out the vision and future of health and social care services in Clackmannanshire and Stirling.

- Prevention, early intervention & harm reduction
- Independent living through choice and control
- Care Closer to Home
- Supporting empowered people & communities
- Loneliness & isolation

In our [Strategic Commissioning Plan](#), we set out our key strategic themes and priorities based on what our citizen's, staff and partners have told us; where they wish for us to focus our activity and resources based on local demographics, population and need. The participation and engagement work carried out with communities, partners and stakeholders and how this feedback alongside current data informed our priorities within the strategic themes. We have also linked our priorities to the national and local environment and how our Enabling activities support our delivery. On page 5 we have detailed links across our strategic themes to the [National Health and Wellbeing Outcomes](#) set by the Scottish Government.

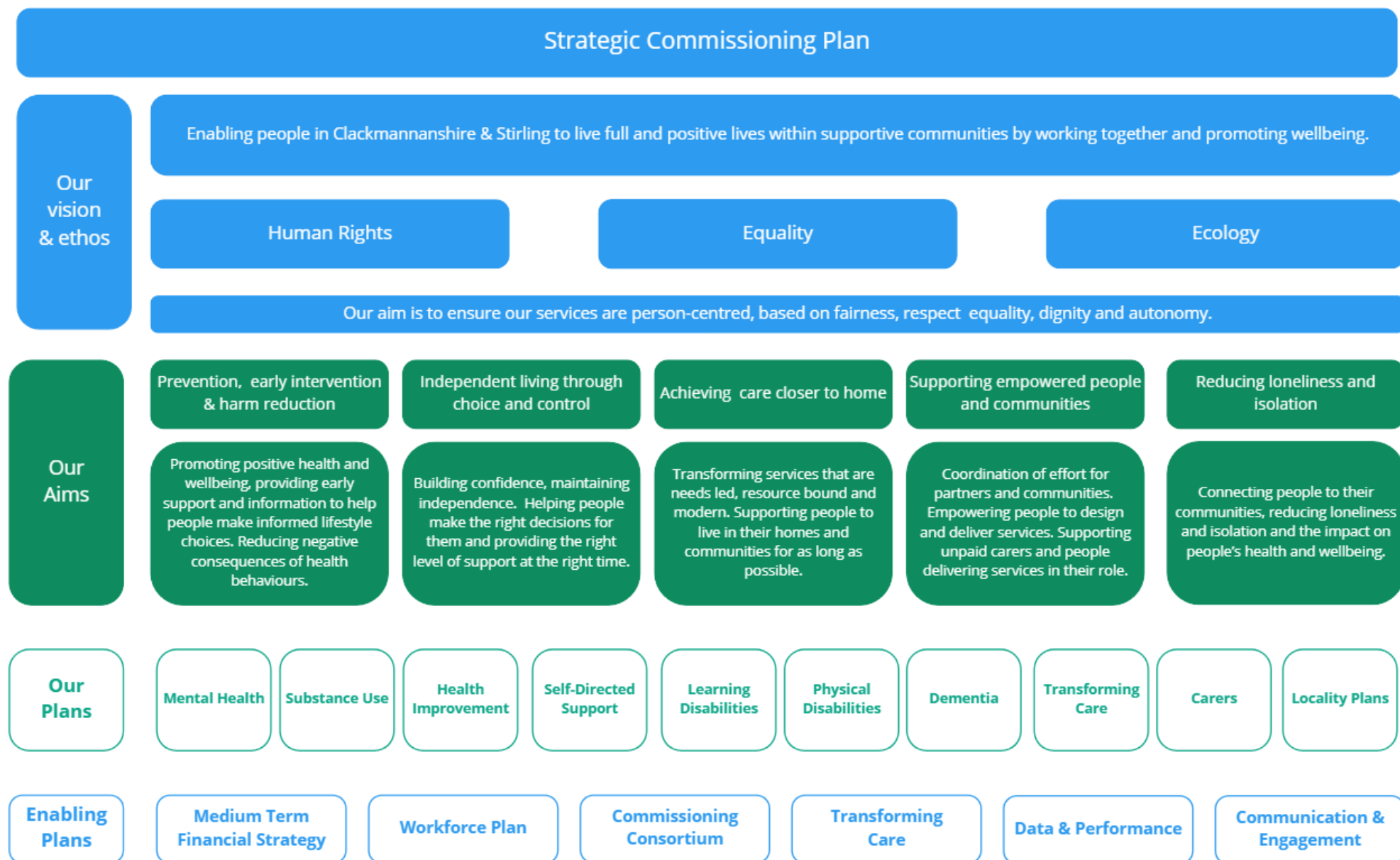
This report is a review of service delivery across Clackmannanshire and Stirling Health and Social Care Partnership including outcomes for citizens, key achievements, effective partnership working and challenges as well as reporting on the significant programme which has been delivered to modernise and transform services in recovery from the impact of COVID-19 and the challenging financial position we currently face.

Engagement

The Public Bodies (Joint Working) (Scotland) Act 2014 requires full consultation and engagement with stakeholders in the development of all plans and policies that impact people. Stakeholders include the public, people with lived and living experience, people who access services, unpaid carers, staff, providers, third sector and independent sector. Clackmannanshire and Stirling Health and Social Care Partnership are committed to the co-design and coproduction of community health and social care in the area. Engagement with people helps us all understand need, demand and work out how to deliver this in partnership with a wide range of people and organisations.

Have your say and get involved in shaping community health and social care. You can find out more here: [Get involved](#)

Our Strategic Commissioning Plan 2023-2033 - plan on a page



National Health & Wellbeing Outcomes

All themes and priorities of the Strategic Commissioning Plan are linked to the National Health and Wellbeing Outcomes. Each theme will demonstrate improvement for people and communities, how we are embedding a human rights based approach, consideration for equalities and evidencing improvement across the services we deliver.

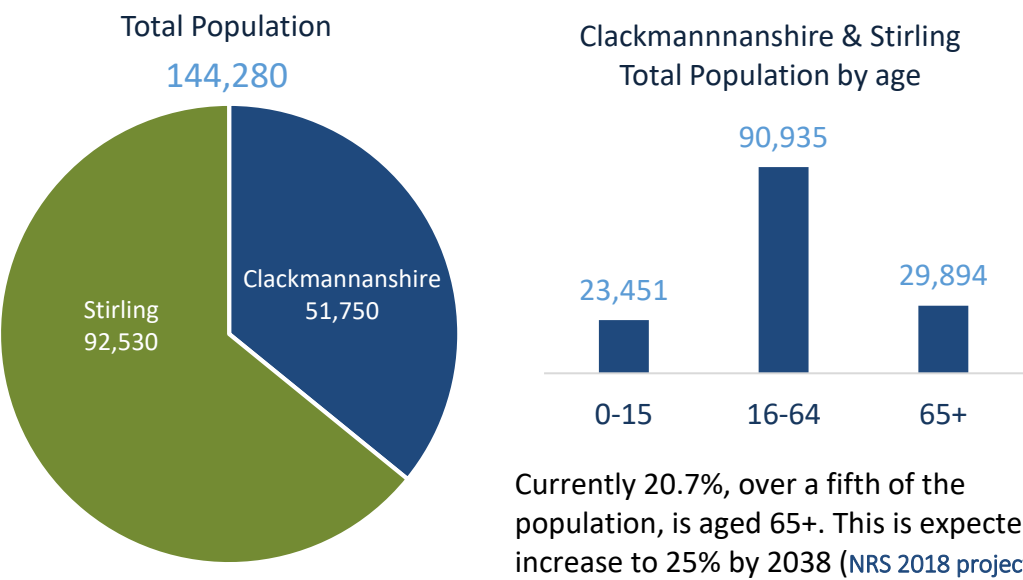
Health and Wellbeing Outcomes

1. People are able to look after and improve their own health and wellbeing and live in good health for longer.
2. People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.
3. People who use health and social care services have positive experiences of those services, and have their dignity respected.
4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
5. Health and social care services contribute to reducing health inequalities.
6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact on their caring role on their own health and wellbeing.
7. People who use health and social care services are safe from harm.
8. People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.
9. Resources are used effectively and efficiently in the provision of health and social care services.

Prevention, early intervention & harm reduction	Independent living through choice and control	Care Closer to Home	Supporting people & empowered communities	Loneliness & isolation
●	●	●	●	●
●	●	●	●	●
●	●	●	●	
●	●	●	●	●
●	●	●	●	●
	●	●		
●	●	●		
Enabling Activities				

Overview of Clackmannanshire and Stirling

Our Population (NRS 2022 mid-year)



Life Expectancy (NRS 2020-22)

Females	2021	2022	Direction
Clackmannanshire	80.6	79.9	↓
Stirling	81.9	81.6	↓
Scotland	81.0	80.7	↓
Males	2021	2022	Direction
Clackmannanshire	76.2	75.7	↓
Stirling	77.6	77.7	↑
Scotland	76.8	76.5	↓

Female life expectancy is generally higher than male life expectancy.

When compared to Scotland, Stirling has higher life expectancy for both females and males while Clackmannanshire has lower life expectancy.

In 2022, there was a slight decrease in life expectancy, with the exception of Stirling males.

Health and Social Care Needs

- 68% of people living in Clackmannanshire and 72% of people living in Stirling consider their health to be good or very good. This compares to 70% in Scotland (Scottish Household Survey).
- In Clackmannanshire 39% of people are living with a limiting long term illness or condition. In Stirling, 38% of people are living with a limiting long term illness or condition. This compares to 37% in Scotland. (Scottish Household Survey).
- In March 2024, 638 adults with learning disabilities (288 in Clackmannanshire and 335 in Stirling) were known to HSCP (Adult Social Services).
- There are approximately 21,250 unpaid carers in Clackmannanshire and Stirling area. 12,958 people identify themselves as unpaid carers and it is estimated that there are 8,000 unknown unpaid carers.
- In Clackmannanshire 22.0% and in Stirling 17.8% of the population were prescribed medication for anxiety, depression and psychosis. This compares to 20.1% in Scotland. (ScotPHO)
- 18% of adults in Clackmannanshire and 17% in Stirling are current smokers, compared to 15% in Scotland. (Scottish Health Survey)
- In Clackmannanshire 13,426 people (26.1% of the population) live in the 20% most deprived areas of Scotland. In Stirling, 11,110 people (11.8% of the population) live in the 20% most deprived areas of Scotland (SIMD 2020).

How we measure our performance

The Integration Joint Board has a responsibility to ensure effective performance monitoring and reporting. The IJB needs to be able to monitor performance and measure impact for our communities against our Strategic Commissioning Plan priorities and be able to share with communities and stakeholders.

Our [Integrated Performance Framework](#) relies on an integrated approach to managing, using, and understanding our data. This is because driving performance is most efficiently achieved based on a sound understanding of the systems and processes involved. Analysing our data alongside listening to our supported people and other stakeholders provides the best way to do that and provides advantage in planning change, deploying preventative approaches, evidencing our functions under legislation and driving process and cost efficiency.

Due to the nature of the delegated services ([Appendix 1](#)) within the Health and Social Care Partnership, the data we require to report and analyse is held across systems in NHS Forth Valley, Clackmannanshire Council and Stirling Council, national datasets and a collection of smaller datasets across a range of wider partners. The complexity of multiple organisations is further complicated by the fact that each organisation works with multiple systems. This leads to challenges in pulling information together and making the reporting processes as efficient as possible. Local data is reported throughout the relevant Strategic Themes and priorities in this report.

[Appendix 2](#) shows our performance for the Ministerial Strategic Group (MSG) indicators which support the delivery of the National Priorities Partnerships. The MSG information covers a range of activities under the umbrella of 'unscheduled care'. These activities support people to remain in their own homes, return to their own homes as quickly as possible when hospital treatment is required, prevent related re-admission to hospital and include end of life care.

In [Appendix 3](#) we have provided an assessment of our performance against the National Core Indicators (NCI) and includes comparisons with the Scottish average and with our comparator HSCP's. The 'Outcome' indicators above are reported every 2 years from the Scottish Health and Care Experience Survey commissioned by the Scottish Government with the latest information being published in 2023/24. The 'Data' Indicators measure mainly health activity, community and deaths information.

Performance Summary

Performance (MSG and NCI) 25 indicators	12	Improving performance	6	Static	7	Declining performance
Strategic Theme 1 - Prevention, early intervention, and harm	7	1	2			
Strategic Theme 2 - Independent living through choice and control	1	1	2			
Strategic Theme 3 - Achieving care closer to home	3	4	3			
Strategic Theme 4 - Supporting empowered people and communities	1	0	0			

Benchmarking (NCI only) 18 indicators						
Scotland	9	Better than average	3	Within 5%	6	Worse than average
	6	Better than average	8	Within 5%	4	Worse than average

Strategic Theme 1 - Prevention, early intervention & harm reduction

Prevention, early intervention, and harm reduction is focused on working with partners and communities to improve overall health & wellbeing and preventing ill health. By promoting positive health and wellbeing, physical activity and reducing exposure to adverse behaviours we can prevent pressures on people’s health and in turn health and social care services. Early intervention and harm reduction is about getting the right levels of support and advice at the right time, maintaining independence, and improving access to services at times of crisis.

There has been a small increase in the rate of emergency admissions per 100,000 population for adults (18+)(NI12) from 13,036 in 2022/23 to 13,127. This is above the Scottish average and the average for our comparator HSCP’s.

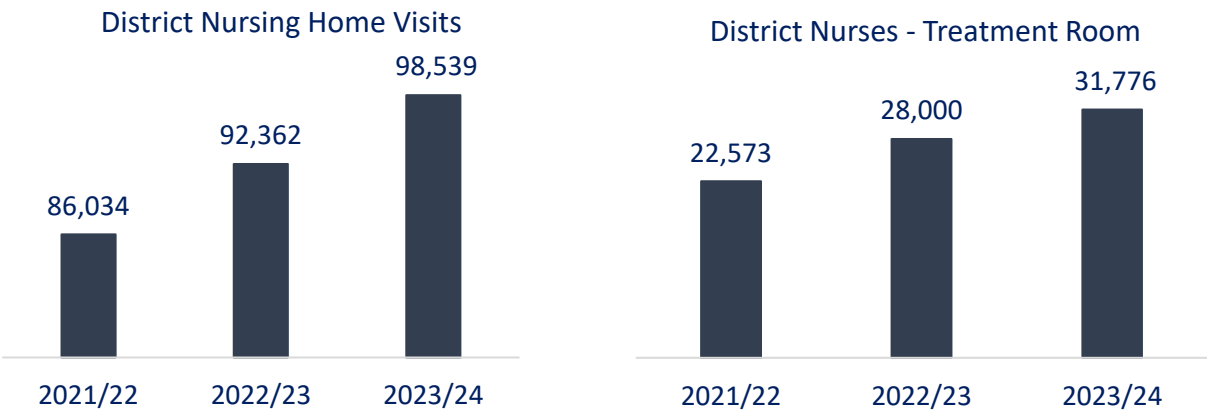
District Nursing

Many adults and older people can be supported at home, even when unwell, because it is well documented that staying unnecessarily in hospital can be detrimental to a person’s ability to be re-abled or rehabilitated which may lead to a loss of function. The community nursing team is available 24 hours a day, 365 days a year, and provides planned and unplanned care and support. From 2022/23 there has been a 6% increase in the number of home visits and a 13.5% increase in the number of treatment room visits.

The rate of emergency bed days per 100,000 population for adults (18+)(NI13) has reduced, by 4%, from 115,181 in 2022/23 to 110,293 in 2023. This is below the Scottish average of 112,883 and is considerably lower than the average of our comparator HSCP’s

Delayed discharge bed days (aged 18+) - All Reasons (MSG4a) has increased from 14786 in 2022/23 to 15,624 in 2023/24 and is above the 2015/16 baseline of 10,069.

A delayed discharge is when someone is assessed as ready to go home after being admitted to hospital, however, they are unable to leave because where they are going is not ready. For example, sometimes a person needs social care, or adaptations to their home or they are moving into a care home. How long someone stays in hospital can have a big impact on them, from how they move, their confidence and how they are recovering from or living with a condition. We aim to reduced delayed discharges. Delays in hospital can not only lead to poor outcomes for the person who is delayed, but this can cause hospital beds to be unavailable for someone who needs acute treatment.



The falls rate per 1,000 population (aged 65+)(N116) has reduced from 23.8 in 2023/24 to 23.6 in 2023/24. This is higher than the Scottish average of 22.7 and the HSCP comparator average of 23.

Preventing Falls

In Scotland, falls are the most common cause of emergency hospital admission for unintentional injuries in adults and can have a major impact on people’s health and well-being. From an organisational perspective we know the significant pressures that falls puts on hospital beds, requests for packages of care and community rehabilitation services. In light of these pressures a key objective of Allied Health Professional (AHP) Falls Prevention Lead, who commenced their role in February 2023, was to both improve the accessibility of our services and increase awareness about falls and the many components involved that increase a person’s risk of falling. The [Community Falls webpage](#) has been redeveloped and Local Falls Awareness Events have been held to help support self-management strategies within the community and encourage people to act earlier to seek the right support at the right time and a Falls Local Community Support leaflet has been developed to provide information on what local support is available to the community in relation to falls prevention. Through collaboration with the Scottish Ambulance Service (SAS), we aim to develop a pathway to encourage the use of community support services to reduce the conveyance of uninjured and well fallers to hospital. We will also explore using MECS (Telecare) to attend uninjured fallers and help return them to their feet to improve capacity within the SAS.



Stop Smoking Services

Stop Smoking Advisors provide free treatment and local support in Clackmannanshire and Stirling to stop smoking, usually over a 12 week programme to help you reduce your nicotine dependency.



In 2023/24 161 people achieved a 12 week quit success. This is a reduction from the 233 reported 12 week quits in 2022/23.

Quote from client accessing the Stop Smoking Service on Care Opinion April 2024
“I was beginning to smoke heavy and I could tell it was harming me when taking my dog a walk. I also have to climb stairs every day and I knew I wasn't fit and put it down to smoking. I picked up a smoking cessation card from a health centre and decided to give it a try. I struggled at first and reduced my smoking to about 5 per day which was brilliant for me but with the encouragement and support from Laura, I managed to stop altogether. Laura was excellent and she kept giving me goals to achieve. I cannot thank her enough”.

Priority 1 Mental Health and Wellbeing

Mental health and wellbeing is as important as physical health and wellbeing. There has been significant change as to how we deliver mental health services, there has been a redesign of existing services and developing additional resources to meet increasing demand, and in response to the impact of the COVID-19 pandemic.

Primary care is the first point of contact with the NHS. This includes contact with community based services such as general practitioners (GPs), community nurses, and Allied Health Professionals (AHPs).

The mental health nurse team are now embedded in the majority of GP practices offering weekly appointments across the area. Patients who require the medical opinion of a specialist clinician may be referred to an outpatient clinic for treatment or investigation. Outpatients are not admitted to a hospital and do not use a hospital bed.

Community Mental Health Teams (CMHTs) support people with severe and enduring mental health in the community. The Mental Health Acute Assessment and Treatment Service (MHAATS) receive urgent referrals from the Emergency Department at Forth Valley Royal Hospital and General Practitioners across Forth Valley.

The total number of unplanned bed days (mental health) 18+ financial year (MSG 2c) has continued its downward trend from its baseline of 24,851 in 2015/16 to 17,001 (2023 calendar year). The December 2023 snapshot rate of unplanned bed days (mental health) 18+ per 1,000 was 17.3.

7.8% of mental health emergency readmissions within 28 days (financial year 2023). This is higher than the Scottish average of 6.7%. (NHS FV)



In 2023/24 there were 355 admissions to the Mental Health Unit at Forth Valley Royal Hospital. This is a small increase from 334 in 2022/23 (NHS FV).



In 2023/24 there were 232 referrals to Adult Social Care services for Mental Health Clients. This is a 21% increase from 183 in 22/23. (Adult Social Services)



In March 2024 the percentage of people who commenced treatment within 18 weeks of referral to Psychological Therapies in Forth Valley was 73.6%. This is below the Target of 90% (PHS) and below the Scottish average of 80.7%.

What is the Mental Health Act?

The Mental Health (Care and Treatment) (Scotland) Act 2003 applies to people who have a "mental disorder" - this is defined under the Act and includes any mental illness, personality disorder or learning disability. This includes Emergency Detention Certificates and Compulsory Treatment orders.

Clackmannanshire & Stirling	2018/19	2022/23	2023/24
Number of Emergency Detention Certificates (Mental Health) Section 36	67	62	66
Number of Short Term Detention Certificates (Mental Health) Section 44	124	139	134
Number of Compulsory Treatment Orders (existing)	41	31	45
Number of Compulsory Treatment Orders (new applications)	46	107	90

(Adult Social Services)

What is a Guardianship?

This is a court appointment which authorises a person to act and make decisions on behalf of an adult with incapacity.

Anyone with an interest can make an application for a guardianship order. When we refer to an adult, this is someone who is aged over 16 who is not able to look after their own affairs.

Clackmannanshire & Stirling	2018/19	2022/23	2023/24
Total number of Existing Guardianships (private and local authority)	375	473	561

(Adult Social Services)



The NHS and Local Authorities have a statutory responsibility to provide access to independent advocacy for specific groups of people. These include people with a learning disability, mental health disorder (including young people under 16) an acquired brain injury, physical disability or life-limiting illness, frail and elderly, young people in transition to Adult Social Care services, offenders within the Forth Valley prison estate who are subject to the Mental Health Act.

Independent advocacy aims to help people by supporting them to express their own needs and make their own informed decisions. Forth Valley Advocacy (FVA) is the current provider of independent advocacy across Forth Valley (including the Clackmannanshire and Stirling & Falkirk Health and Social Care Partnership, and NHS Forth Valley). In 2023-2024, FVA provided advocacy support to approximately 760 individuals, with the majority eligible under the Mental Health Act.



Mental Health Money and Benefits Advice Project facilitated by Citizens Advice Bureau ran throughout 2023-24 for people experiencing poor mental health. This is a collaborative project with Mental Health services, Citizens Advice Bureau and The Robertson Trust. The project has gathered positive feedback and people feel more positive about the future.

Key actions for 2024-25

- A Joint Inspection of Adult Services in the Clackmannanshire and Stirling Health and Social Care Partnership is currently in progress and is due for completion in November 2024.
- A consultation and engagement programme to inform the development of the Mental Health and Wellbeing Strategic Commissioning Plan.

Priority 2 Drug and alcohol care and support

The Clackmannanshire and Stirling Alcohol and Drug Partnership (ADP) is responsible for the planning of local support services in partnership with Clackmannanshire and Stirling Councils, NHS Forth Valley, Police, Fire, and Third Sector colleagues.

Commissioning

The ADP Commissioning Consortium has considered lived and living experience and performance data to develop recommendations for the modernisation of our system of treatment and care. In November 2023 the IJB agreed proposals for future third sector contracted delivery of specialist substance use treatment aligned to MAT Standards*. We have also agreed the recontracting of family support aligned to the Whole Family Approach Framework and whole system strategic drivers including The Promise and Children's Services Plans.

Lived Experience and Human Rights

We have established our ADP Lived Experience Advisory Panel (LEAP) to facilitate lived and living experience input to ADP Strategic Planning. The group has already contributed critical feedback to ADP planning. We have also worked with REACH Advocacy to deliver Human Rights training and workshops to people connected to our system of care and at HSCP strategic planning level. Our involvement of lived and living experience continues through our work to implement the MAT Standards*.

MAT Standards and Harm Reduction

MAT Standards* implementation has been key to ADP work, supported by Public Health Scotland. Progress continues to be made to implementing these new standards for drug and alcohol treatment systems, through collaborative working across the whole system. Work continues to gather and share performance data to reflect progress, and collaborative discussion continues to ensure progress can be sustainably maintained. Our Primary Care Facilitation Team has been meeting to develop sustainable approaches within Primary Care and low intensity settings. ADP has also supported the development of a Clackmannanshire Council Naloxone policy and wider learning from drug and alcohol harms in partnership with Public Health.

*MAT Standards are Evidence based standards to enable the consistent delivery of safe, accessible, high-quality drug treatment across Scotland. These are relevant to people and families accessing or in need of services, and health and social care staff responsible for delivery of recovery oriented systems of care. For more detailed information about MAT Standards please see the Scottish Government web page [Medication Assisted Treatment \(MAT\) standards: access, choice, support - gov.scot \(www.gov.scot\)](https://www.gov.scot/publications/mat-standards/pages/1-1.aspx)

The Scottish Government set a Standard that 90% of people referred for help with problematic drug or alcohol use will wait no longer than three weeks for specialist treatment that supports their recovery.

As of 31st March 2024 82.5% NHS Forth Valley referrals waited no longer than three weeks whilst the Scottish average is 91.9%. Public Health Scotland

Waiting times data is currently available from two sources. DAISy, local data which is gathered and reported to Public Health Scotland who use this data to form their online dashboard. The Public Health Scotland published data shows different levels of compliance than our own local data. Generally, data for Clackmannanshire and Stirling shows higher rates of compliance than the Forth Valley wide figures that are published nationally.

There has been no national publication of Alcohol Brief Intervention delivery data since 2020, and local recording is still being examined for validity. This is not being reporting on locally or nationally but it remains a national target.

Forth Valley Recovery Community

Recovery cafés and Recovery Drop-ins (mini cafés) provide support seven days per week.

Locations in Clackmannanshire and Stirling

- Recovery café in The Gate at Alloa.
- Recovery drop-in, in Alva at The Baptist Church.
- Recovery café in Stirling at The Mayfield Centre.
- Women's mini -cafe in Stirling at Kildean Business and Enterprise Hub.
- Recovery drop-in, Stirling at Kildean Business and Enterprise Hub.

Peer Support sessions run at the following locations:

- The FV Royal Hospital in Larbert
- The SMS clinics

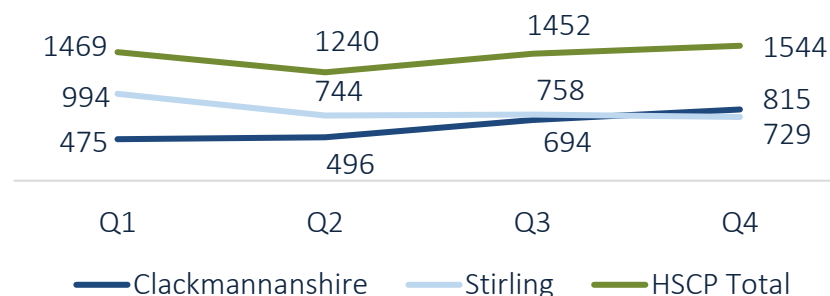
Recovery Ramble walks and Recovery in the Wild events continued to be popular activities which contributed to improving the physical and mental wellbeing of community members. Employment, training and education and self development along with various other activities and events were also held.

Find out more information at [Forth Valley Recovery Community website](https://www.forthvalleyrecoverycommunity.org.uk/).

Key actions for 2024-25

- Continue work with national and local partners to develop proposals for tier two recovery support aligned to relevant strategic drivers and lived experience requirements.
- Commission Harm Reduction Outreach approach drawing on local knowledge and experience.
- Continue support for Lived Experience Advisory Panel (LEAP)
- Refine planning and consider sustainability arrangements for lived and living experience reflection on service delivery
- Align ADP support for prevention messaging to Health Improvement planning and delivery.
- Facilitate whole system coordination for substance use harm reduction activity

Recovery Community Activity (individual attendances)
2023-24



The Recovery Community Activity data is gathered from commissioning and contract review processes and reflects the number of individual attendances in each area. The average weekly number of attendances has increased from 104 in 2022/23 to 112 in 2023/24.

Strategic Theme 2 - Independent living through choice and control

This Strategic Theme focuses on how the HSCP supports people and carers to actively participate in making informed decisions about how they live their lives and meet agreed outcomes. Services are focussed around helping people identify what is important to them to live full and positive lives and make decisions that are right for them.

Percentage of adults with intensive care needs receiving care at home (NI18) has increased from 69.3% in 2022/23 to 70.4% for calendar year 2023 which is above the Scottish average of 64.5% and our comparators average of 64.8%.

Percentage of adults supported at home who agreed that they are supported to live as independently as possible (NI2) has decreased from 72.5% to 67.2%. This is below the Scottish average of 72.4% and below our comparators average of 71.9%

Priority 3 Self-Directed Support information and advice promoted across all communities

Self-Directed Support that supports people's rights to provide choice, dignity and being able to take part in the life of their communities. As part of our response to the Self Directed Support Act, we are developing, in partnership with staff and supported people, a new Self Directed Support Policy which is outcomes focused and will be rolled to all staff working across Clackmannanshire and Stirling.

As at 31st March	2019/20	2020/21	2021/22	2022/23	2023/24
Option 1	56	59	67	89	94
Option 2	56	60	69	92	93
Option 3	4273	4389	4152	3888	4579
Option 4	133	95	109	130	169
All SDS options	4518	4603	4397	4199	4935
Change year on year		2%	-4%	-5%	18%

(Adult Social Services)

The total number of people eligible for support has increased by 18% from 4199 in 2022/23 to 4935 in 2023/24. The majority of people (92.8%) continue to choose support arranged by their local council (Option 3).

With the development of the new SDS approach, we will develop indicators around the new process. Key areas we are keen to develop will allow analysis of the asset based approach, recording to what extent people feel their outcomes have been met. It is also a priority to gather service delivery information on the number of people receiving the right advice and support at the right time, with robust recording of the number of people being signposted successfully, number of people with budget and support plans, reviews and understanding the experiences of people to improve and develop our process. We also aim to understand what is important for people and understand any barriers to accessing chosen SDS options to continue to modernise our local service delivery.

When a person has been assessed as eligible for support there is a duty to offer four choices in relation to how support will be facilitated. There should be no default option under Self-directed Support.

All of the four options are equally valid. What is important is that each supported person is informed of the four Self-directed Support options and are able to select the option that is right for them. The four options as follows:

Option 1 – Direct Payments This is the option that gives you the most control, flexibility and responsibility when it comes to your social care support.

Option 2 – Individual Budgets This is the option where you choose how you want to be supported and then the support is arranged on your behalf. You direct the support, but you do not have to manage the money.

Option 3 – Arranged Support This is the option where you ask your local council to choose and arrange the support that it thinks is right for you. You are not responsible for arranging the support, and you have less direct choice and control over how the support is arranged.

Option 4 (mixture of options 1, 2 and 3) This is where you choose the parts of your support you want to have direct control over, and what you want to leave to your council to sort out for you.

Priority 4 Support those affected by dementia at all stages of their journey

We aim to support people living with dementia to live well within their own communities following their diagnosis as well as reducing the amount of time people with dementia spend unnecessarily in a hospital environment. Good quality post diagnostic support is a priority of the HSCP in order to achieve good outcomes for people diagnosed with dementia, their family, carers and wider support networks.

In 2023/24 there were 192 new referrals to Health and Social Care Partnership adult social work for people with a Dementia diagnosis. Some individuals go on to receive one or more services from adult social work services. There a number of third sector organisations commissioned to support people with dementia and their carers in relation to post-diagnostic support with 456 people being supported at the end of March 2024.

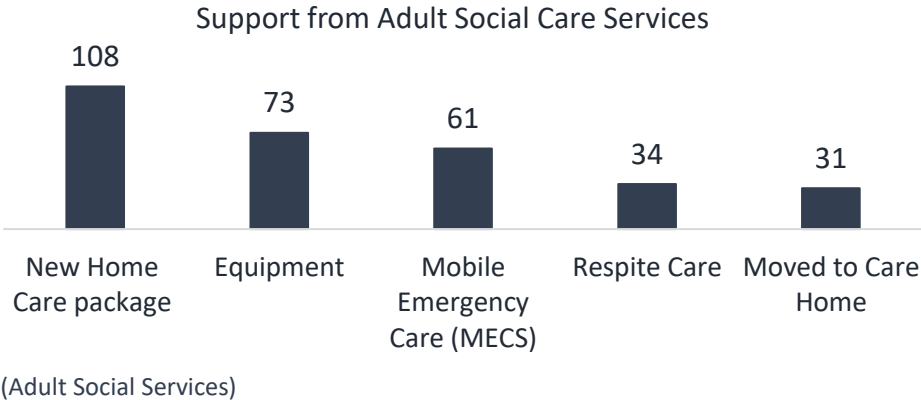
Data from all services delivering post-diagnostic support is a current area for improvement. Qualitative data would also allow for more of a focus on the outcomes of people accessing these support, which would help highlight any development work which could be beneficial in this area.

Commissioning

The Commissioning Consortium model is grounded in the fundamental principles of ensuring a comprehensive partnership approach across all sectors providing health and social care services; a commitment to provide enhanced delivery of service to individuals and communities and a need to create diversity within the marketplace based on population needs. The Dementia Commissioning Consortium was convened in February 2024, with the aim of coming together to review commissioned services for dementia, and if the right supports were in place.

Engagement

Engagement to date has taken place through the Commissioning Consortium. Membership includes representation from the third sector, service providers, staff within NHS community mental health, and researchers. While members of the public can be invited, work needs to progress to ensure representation from those with lived and living experience in future. Engagement with lived and living experience will be developed for 2024-2025.



Strategic Theme 3 - Achieving care closer to home

Achieving care closer to home shifts the delivery of care and support from institutional, hospital-led services towards services that support people in their community and promote recovery and greater independence where possible. Investing in and working in partnership with people, their carers and communities to deliver services. Improving access to care, the way services and agencies work together, working efficiently, improving the supported person's journey, ensuring people are not delayed in hospital unnecessarily, co-design of services, primary care transformation and care closer to home. It is also about providing people with good information and supporting our workforce.

In 2023/24 there was small increase in the number of days people aged 75+ spend in hospital when they are ready to be discharged, per 1,000 population (NI19) to 814 from 804 in 2022/23. This is under the Scottish average of 902 and lower than our comparators average of 870.

Percentage of people with positive experience of the care provided by their GP practice (NI6) has increased from 67.3% to 72.3% in 2023/24 which is above the Scottish average of 71.3% and our comparators average of 68.5%.

The total percentage of adults receiving any care or support who rated it as excellent or good (NI5) has decreased from 67.8% to 64.8%. This is below the Scottish average of 70% and below our comparators average of 70.5%

Reablement

Reablement is an approach within health and social care that helps individuals to learn or re-learn skills necessary to be able to engage in activities that are important to them. It is goal focussed and involves intensive therapeutic work. There is a focus on a person's strengths and abilities and what they can do safely, rather than focus on what they cannot do anymore. Reablement can support people recovering from an illness or accident and may prevent acute hospital admission, delay an admission to long-term care, supports timely discharge from hospital and maximises independent living and can reduce the need for ongoing care.

Reablement	2022/23	2023/24
Number of people receiving reablement support (at 31st March)	222	198
Number of people left reablement in year	363	591
% of people who required reduced or no care after reablement	61%	57%

Planned Care in Place in People's own Homes

At 12th March 2023/24 2,069 people received care and support in their own homes . At the same time 35122 hours of care and support were commissioned from providers.

An average of 66.9 placements start each month and 64.8 end so there has been a slow but steady increase in placements over the last 3 years.

Waiting list for Care and Support

Unfortunately, system pressures can cause delays or waiting lists. We work hard to avoid this, however there are challenges such as high demand and staff shortages, as seen nationally. This is an important area for the Partnership as we know that behind each of these numbers there is a person and family struggling.

In March 2024, 46 people without care already in place were waiting for care and support . This time last year 77 people were waiting.

Palliative and end of life care

Palliative and end of life care helps improve the quality of life for someone who has a life-limiting illness, by offering services, advice, information, referrals and support. While this can be a challenging time, there are important conversations involved.

Clackmannanshire and Stirling Integration Joint Board, Falkirk Integration Joint Board and NHS Forth Valley have agreed a joint approach to develop and produce a Strategic Commissioning Plan to commission community palliative and end of life care across Forth Valley. This is a whole system partnership approach to identify need in particular areas of health and care provision, and agreeing how to provide services to meet that need.

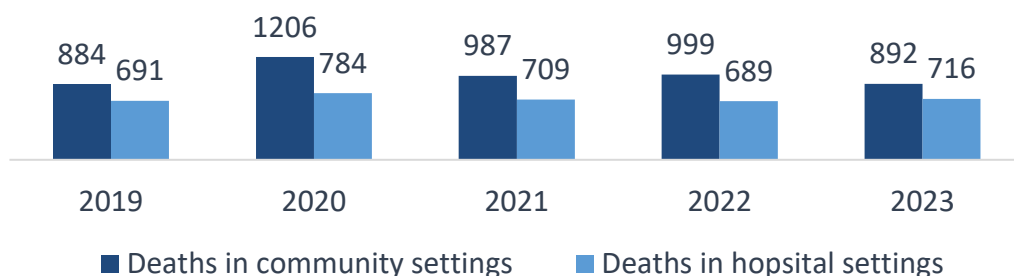
A programme of in-person engagement meetings hosted by the Interim Chief Officer and online surveys have been held and will inform the strategic commissioning plan which will be presented to the IJB in 2024-25. One of the key areas of focus is ensuring equality of access to a good death for everyone, including those with issues of substance use.

Stakeholders involved with the consultation included, people with lived and living experiences, palliative and End of Life care providers and staff, NHS staff working within palliative and end of life care, Locality Planning Group members, Community Councils, Care Homes, Third Sector partners, GP surgeries, Libraries, Service user reps, Health Improvement colleagues. The engagement in Stirling and Clackmannanshire complements the engagement in Falkirk to capture experiences covering the whole of Forth Valley.



Engagement meeting hosted by the Interim Chief Officer

Deaths by setting Clackmannanshire & Stirling



Deaths across a range of settings has remained consistent with the majority of people dying in a community setting for the past five years. This is consistent with the national trend. From 2019 to 2023, the percentage of people dying in hospital has ranged from 39% in 2020, to 44.5% in 2023. (NHS FV)

Average number of days spent in hospital in last six months of life			
	Clackmannanshire	Stirling	Scotland
2019/20	22	21	21
2020/21	19	15	18
2021/22	19	19	19
2022/23	20	19	20
Average	20	18.5	19.5

The amount of time spent in the community in the last six months of life has increased slightly in both Clackmannanshire and Stirling residents, reflecting the national trend.

However, people are spending on average 20 days in Clackmannanshire and 18.5 days in Stirling in hospital in the last six months of life, compared to 19.5 in Scotland. (NHS FV)

Priority 5 Good public information across all care and support working

Digital Information



How we access information is quicker and easier, for most people, than ever before. A quick search on the internet and we can order food, supplies, book events and trips, learn something new, and diagnose ourselves.

We know that digital information and support helps a lot of people navigate their conditions, disabilities and illness and can also be a place of support though social media groups for example. But how do people find relevant information for Clackmannanshire and Stirling? This year, we have been planning how we can improve the information out there for people in Clackmannanshire and Stirling, with our third sector interfaces and partners. Over the next year, what we have learned will be developed into better digital support and communication with people.

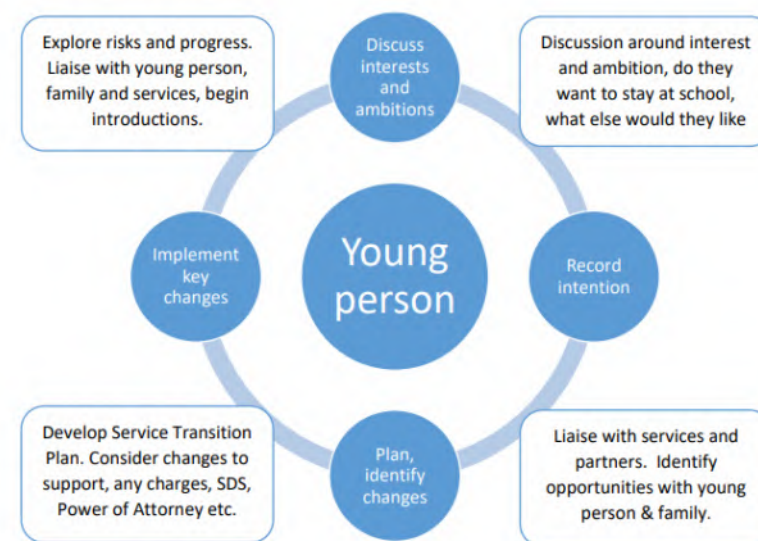
Locality Planning Network - Clackmannanshire

Transitions for young people with disability into adulthood Policy

The Transitions for young people with disability into adulthood policy was agreed in January 2024. Young people with additional support needs hope for the same things as other young people; to be independent, to have a voice and a social life. It is important that the transition from children's services to adulthood is as seamless as possible.

A young person with additional support needs (ASN) may receive support for their needs throughout their time at school. When a young person is due to leave school and children's Social Work Services, it is essential that the transition is well planned and directed around the wishes of the young person. Engagement with young people, their families and staff found that this is an immensely stressful time. As well as planning and multidisciplinary working, access to good information at their fingertips was key to helping young people and families navigate the transition and life change. A need for a website with details of the process, but also around the changing relationship parents have with their child as they become adults is needed, with guidance on guardianship and changes to benefits to options for education, work and socialising as examples of the information asked for. We are working to develop webpages specifically for young people, their families and carers to support this life stage.

Transition Review and Planning



Priority 6 Workforce capacity and recruitment

Workforce data is important to the planning and delivery of services. The Integrated Performance Framework sets out the requirement to develop data in order to plan and monitor service delivery. This is a key focus on the Strategic Workforce Plan Implementation Group over 2024 - 25. To this end, our employing organisations are building on our collation and analysis of workforce data to better understand the future needs of our workforce. Human Resource leads are working to harmonise and share data across Health and Social Care Partnership. For example, we now receive monthly reports from each of the employing bodies with an opportunity to look at how we report in an integrated way. This work is underway and it is hoped that we will be in position to begin reporting harmonised data in the near future.

This year we have:

In the last year we have achieved all the actions set out in Year 2 of Integrated Workforce Plan 2022-25. Workforce planning and development is now a standing agenda item at all leadership and management operational meetings across Health and Social Care Partnership. We have worked to better understand gaps in our recruitment and the challenges of recruitment and retention in health and social care. We have worked closely with HR leads in all three employers to understand trends and analysis linked to recruitment and retention of our health and social care workforce.

All partners have been working collaboratively to review and re-design job roles with staff involved; looking at skills, knowledge and competence to deliver roles confidently and safely, while building on the Fair Work Principles. For example, the senior role within Assessment and Locality teams has been approved and evaluated, this has provided career development for staff.



Our employing organisations are also building on our collation and analysis of workforce data to better understand the future needs of our workforce. Human Resource leads are working to harmonise and share data across Health and Social Care Partnership. For example, we now receive monthly reports from each of the employing bodies with an opportunity to look at how we report in an integrated way.

Recruitment

We have recognised the recruitment challenges in mental health clinical and nursing posts and have been actively seeking to recruit and offer peer to peer conversations to encourage applications.

Training

Key workforce planning leads have been undertaking learning around the Health and Care (Staffing) (Scotland) Act 2019. Managers have attended integrated sessions with Care Inspectorate in relation to Health and Care (Staffing) (Scotland) Act 2019 and have been supported to review staffing requirements as part of vacancy management. We have also worked closely with our third and independent sector providers and Care Inspectorate to support providers readiness for implementation.

As well as learning and development opportunities being shared across Health and Social Care Partnership, e-modules are also now routinely shared across the lead agency learning platforms. Work has also taken place to develop learning platform access that third sector services can make use of as well. All Public Protection learning and training is now trauma informed and trauma responsive in its content and delivery.

Engagement

The HSCP Learning and Development Group, supported by Workforce Leads and employing organisations have been overseeing the delivery of the Integrated Workforce Plan; meeting bi-monthly and reporting back to the Extended Senior Leadership Team of Health and Social Care Partnership.

In relation to addressing the continued challenge of recruiting care staff in our rural areas, we have delivered a campaign of local community career fairs which are helping us engage our communities even further as well as working directly with local community activists.

Work with staff around the implementation and operationalisation of policy and programmes such as Self-Directed Support Policy, Right Care Right Time and Transitions to Adult Health and Social Care Services Policy.

Key actions for 2024 - 2025

Planning for the coming year involves looking at career pathways, talent development and succession planning, with design already under way in relation to new Senior Practitioner roles within our Assessment and Partnership teams which will provide clearer routes of progression and development into more senior roles.

We are establishing baseline data in relation to internal mobility rates to monitor the impact of talent development and succession planning although it is too early to evaluate.

- Recruitment Challenges across professions and geographical areas
- Budget limitations given current financial situation – impacts upon resources available
- Balancing meeting the different needs of individuals/teams/areas to provide person-centred support whilst also trying to attain equity and cost and time effective interventions
- Workload and time-constraints of the staff responsible for delivering upon these objectives.

NI17 - Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections has increased from 80.8% in 2022/23 to 84.6% in 2023/24 which is above the Scottish average of 77% and our comparators average of 78.7%.

NI4 - Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated has decreased from 61.7% to 56%. This is below the Scottish average of 61.4% and below our comparators average of 59.8%

Strategic Theme 4 - Supporting empowered people and communities

Working with communities to support and empower people to continue to live healthy, meaningful, and satisfying lives as active members of their community. Being innovative and creative in how care and support is provided. Support for unpaid carers; helping people live in their local communities, access to local support, dealing with isolation and loneliness. Planning community supports with third sector, independent sector and housing providers. Neighbourhood care, unpaid carers, third sector supports. It is also about providing people with good information and supporting our workforce.

Priority 7 Support for Carers

32.8% of carers feel supported to continue their caring role (N18). This is above the average for Scotland of 31.2% and above the average of 31.9% in our LGBF family. This is an increase from 25.6% in the 2021/22 survey.

Carers' support continues to be a priority for Clackmannanshire and Stirling HSCP, the Carers' Lead and Short Breaks Co-ordinator are progressing work to widen the scope of support and compliment the support already provided by both Carers Centres.

Following a period of consultation and engagement including in person and an online survey we developed a Carer Support Framework (in line with Carers Act requirement for Eligibility Criteria for carers).

Partnership working has strengthened with the establishment of the Carers Planning Group with lived and living experience and partners supporting good health and wellbeing outcomes for carers by working together. By listening to carers across the area, digital approaches to compliment the support provided by the Carers Centres were explored and resulted in the introduction of [Mobilise](#) digital supports for Carers. This provides access to virtual meetings, telephone support and a wide range of advice and guidance to support them in their caring role and improve their health and wellbeing.

We have two Carers centres [Stirling Carers Centre](#) and [Central Carers](#) (who cover Clackmannanshire and Falkirk). They are funded by the Partnership to support carers in their caring roles and also carry out Adult Carer Assessments. The Carers Centre's also offer information and advice for carers as well as training workers across the Partnership. They also represent the interests of carers in a number of forums.

Whilst the aspiration is to provide every carer with an Adult Carer Support Plan (ACSP), not every carer wishes to complete a plan.

530 new Adult Carers were registered with both Carer's Centres and offered an ACSP with 496 completing a plan. This is a reduction from 540 in 2022/23. As at 31st March 2024 there were 2686 Adult Carers registered with 2365 one to one appointments carried out throughout the year.

In collaboration with the HSCP, Carers Centres and CAB a [Welfare Rights Project for Carers](#) facilitated by Citizens Advice Bureau provides support for carers to provide immediate holistic person centered advice, information and representation to Unpaid carers & support to colleagues working with unpaid carers and where necessary, refer and support clients to access appropriate advice agencies.



496 Adult Carer Support Plans for carers were completed in 2023/24



Key actions for 2024-25

- Providing good information and support to carers around Self-Directed Support with Forth Valley SDS.
- Celebration of Carers event to be held showcasing services supporting carers within the HSCP area.
- Launch and publication of Carers Support Pack, providing current information on community groups and organisations supporting carers and supported people throughout Clackmannanshire and Stirling. In response to requests for a local support pack and developed in collaboration.
- The Short Breaks Bureau will be a hub for information and support to carers for access to short breaks and respite.



Priority 8 Early intervention linking people with third sector and community supports

Community Connectors & Social Prescribing

The main aim of the [Community Link Worker Project](#) is to support activities that provide a person-centred and human rights approach utilising social prescribing, an important self-management tool, enabling people to continue to live in their community, independently, safely and well. It widens choice and control through signposting to third sector organisations and statutory agencies. The CLWs promote the understanding of and access to self-directed support. It has been recognised that CLWs are more than social prescribers, providing one-to-one support to enable people to gain confidence to access local activities. The CLW programme was developed through partnership collaboration. CTSI and SVE, the Third Sector Interfaces (TSIs) in each of their respective local authority areas, are the employing organisations and the lead partners in the project, providing the necessary resources, training, and supervision to ensure effective service delivery and professional development for the CLWs.

New Referrals	Reason for referral to CLW	Onward referrals
248	Social prescribing 94 Financial problems 60 Social isolation 50 Housing 38 Physical disability 27 Carer support 26 Stress 18	Financial support 74 Mental health support 50 Housing 30 Community groups 29 Self-help 19
Stirling 142 Clacks 106		
Total Encounters	Duration of encounter/ appointment	Onward referrals to other services
1238	0 – 30 minutes 455 30 – 60 minutes 233 60 – 90 minutes 105 90 – 120 minutes 57 120 + minutes 46	CAB Stirling Council on Disability Wellness exercises HSTAR Mental Health Nurse Scottish Autism Reachout with Arts in Mind Stirling Council Inspiring Communities
Stirling 727 Clacks 511		

Priority 9 Develop locally based multiagency working across communities

Localities

The Public Bodies (Joint Working) (Scotland) Act 2014 requires the IJB to identify Localities for the planning and delivery of services at a local level. Working in Localities supports collaborative working across primary and secondary health care, social care and with third and independent sector provision. Communities are empowered to co-design service provision within their local areas within the Locality Planning Networks and their Locality Action Plans. There are three localities with the Health and Social Care Partnership area Clackmannanshire, Rural Stirling and Urban Stirling.

Locality Planning Networks (LPNs)

The three LPNs have set priorities and actions establishing community priorities for each Locality area, these have been aligned with the Strategic Commissioning Plan. The Locality Planning Networks work collaboratively to co-design and co-deliver services, oversee delivery of the priorities and activities within these communities to meet the outcomes of individuals.



Locality Planning Network Priorities

Clackmannanshire	Rural Stirling	Urban Stirling
Issues of alcohol and drug use across Clackmannanshire.	Better understanding of services and increased knowledge linked to access to services across rural Stirling.	Clear shared communication on the clarity of roles across community health and care services.
Supporting and promoting Mental Health and Wellbeing.	Access to care closer to home.	Supporting Mental Health and Wellbeing.
Addressing Health Inequalities.	Scope support available to develop caring and connected communities and supporting recruitment opportunities in health and social care.	Identifying Social Enterprise opportunities based around our communities.
Clear shared communication on roles across community health and care services to be shared across communities.	Supporting people with dementia within our communities supporting capacity and need.	Supporting people with dementia within our communities supporting capacity and need.

Over 2023-24 we have moved to in-person event held in communities and have focussed on themes specific to the area. The events are useful forums for learning more about developments within the HSCP, linking with community organisations and groups and for collaborative problem solving. The Locality Planning Networks are an opportunity to engage with communities and is open to members of the public, people working in our localities, health and social care professionals and people managing services within the area. Each LPN has an independent Chair responsible for engaging with communities and discussion and providing leadership for local planning of informal service provision.

2024 Programme of Locality Planning Networks

Clackmannanshire	Rural Stirling	Urban Stirling
Health Improvement Alloa	Health Improvement Gartmore	Health Improvement Raploch
Caring in Clackmannanshire Alloa	Caring in rural Stirling Balfron	Caring in urban Stirling Bridge of Allan
Accessing Service - Bowmar Centre Alloa	Accessing Services Crianlarich	Accessing Services Cambusbarron
Mental Health Tillicoultry	Caring, Connected Communities Doune	Mental Health Braehead
Alcohol & Drugs Sauchie	Dementia Callander	Dementia Bannockburn

Localities continue to be an integral part of the engagement around developing and delivering the Strategic Commissioning Plan, contributing to the response to system pressures and desired outcomes of communities. They feed directly into the Strategic Planning Group and have clear influence. The priorities identified and agreed by the communities highlight the level of engagement and commitment to the Locality Planning Networks and the communities they represent.

In 2024-25, the Locality Planning Networks are working closely with operational Locality Working Groups, involving GP locality coordinators, community health and social care locality managers, health improvement locality leads and third sector interfaces to shape service delivery within the localities. There has also been a commitment in 2024 - 2025 to allocate a budget for each locality to support local organisations and groups to support building capacity and resilience within our communities.

Priority 10 Ethical Commissioning

Clackmannanshire and Stirling Health and Social Care Partnership has developed a collaborative approach to understand, plan and commission local services and care & support. The Commissioning Consortium is the basis for co-production form of service design with meetings involving supported people and their representatives, current third & independent sector providers, future providers and internal services. The aim is to create, develop, maintain and grow high quality service delivery. In the past year, there has been a focus on carers' support (Strategic theme 4), alcohol & drug partnership funding priorities (Strategic theme 1), dementia support (Strategic theme 2) and palliative & end of life care support (Strategic theme 3) with a new programme focused on mental health and well-being underway.

This approach relies on a partnership with the third and independent sector, people with lived experience, carers and their representatives as well as Health and Social Care Partnership delivered services. There is a focus on ethical commissioning, of choice & control and the principles of Human Rights-Based, to ensure we are future proofing the commissioning model to comply with current and future policy direction. The approach creates the conditions for open discussions around the right care at the right time whilst ensuring the budgets are managed effectively i.e. services are needs led but resource bound - creating a discussion with partners and supported people focused on best use of available financial spend, rather than cost pressures within the system.

The health and social care marketplace in Clackmannanshire and Stirling represents a mixed economy approach to service delivery, bringing together differing elements of service delivery and agreed shared outcomes for people. Within this landscape, the Health and Social Care Partnership and Third Sector Interfaces provide leadership and support both in service planning and mapping; and in ensuring service quality compliance within an agreed standard of quality assurance of services.

The Commissioning Consortiums have agreed shared principles of partnership working:

- To have an interest in, support, and promote the Consortium approach and its development across the whole system.
- Provide high quality, innovative services in collaboration with others and towards the delivery of the National Health and Social Care Outcomes.
- Have clear health and social care objectives whether delivering universal or specialist services.
- Be involved in delivering health and social care services, or aspiring to be involved in delivering services within Clackmannanshire and Stirling; with existing providers being asked to demonstrate their track record of providing high quality and robust care and support in the area.

For the Health and Social Care Partnership and Third Sector Interface there is a commitment to:

- Encourage all sector representatives to participate in the Consortium.
- Offer access to commissioning opportunities across all sectors and networking opportunities and shared learning with stakeholders across all sectors.
- Collective approaches to service planning, inspection preparation, performance management and demonstrating outcomes for people and communities.
- Support to facilitate the development of skills and capacity of organisations to operate in a complex commissioning and tendering environment.

Therefore the principles of the consortia approach ensure, in equal measure, a commitment to involvement and participation for those in receipt of care and support as well as a commitment to Best Value and resource efficiency across the whole system.

Impact of the Commissioning Consortium approach

A key success factor for the Commissioning Consortium has been the ability to communicate the principles across the sector by targeting the right partners

and stakeholders; explaining the ethical commissioning model approach; what it will mean for providers and people with lived experience; and finally how each can play a part in planning and commissioning the right care and support.

We have recognised that the approach is resource and time intensive to deliver, with officers offering safe spaces for discussions with all external stakeholders and internal providers, with the models of care which have been developed are more robust, person centred and economically viable. As well as more focused on outcomes for people and their carers.

The process of the commissioning consortium meetings has ensured all partners and stakeholders to be at same place when making commissioning recommendations to the Integration Joint Board, the IJB is committed to the approach as it provides detailed and robust feedback from supported people, providers, Health and Social Care Partnership staff and communities about the type and level of service required. There have been more positive and mature relationships created with internal and external commissioned services as well as a clarity of the role of the Third Sector Interfaces as key delivery partners of Consortium.

Feedback from providers has been mostly positive around openness of commissioning conversations and the opportunities to be flexible in their offering; feeling more able to participate meaningfully in planning and commissioning conversations.

Feedback from supported people and their carers has been really positive, individuals feeling that can influence the model of care, create flexibility in system, ensure they have choice & control as well as an ongoing commitment to the delivery of Human Rights-Based Approach across all services.

There has already been interest from Scottish Government colleagues as this approach aligns to current policy directives linked to human rights legislation as well as from IJB Chief Officers Network nationally.

The Commissioning Consortium across Clackmannanshire and Stirling is demonstrating the strength in relationships between Health and Social Care Partnership, third sector and independent sector providers to ensure care and support can continue to be delivered with those receiving care and their carers as key influencers and partners in the planning and commissioning of services.

Financial, Best Value Governance and Risk

Annual Financial Statement

The Integration Joint Board will continue to use the funding available to the partnership to improve services for people and pursue our Strategic Commissioning Plan priorities. Over time our alignment of use of resources (both financial and non-financial) to Strategic Commissioning Plan priorities and key performance indicators will continue to improve and evolve.

Financial Performance

The funding available to support delivery of the Strategic Commissioning Plan comes from Clackmannanshire and Stirling Councils and NHS Forth Valley and funding from Scottish Government.

This forms the Integrated Budget and the Set Aside budget for LargeHospital Services. The IJB then directs partners to deliver and/or commission services on its behalf.

For the financial year ended 31 March 2024 the IJB had an overspend on the Integrated Budget of £2.616m. This was met from the IJBs reserves reducing the financial flexibility to meet unexpected costs in future years.



£272.6m total
IJB Strategic Plan
Budget 2023/24



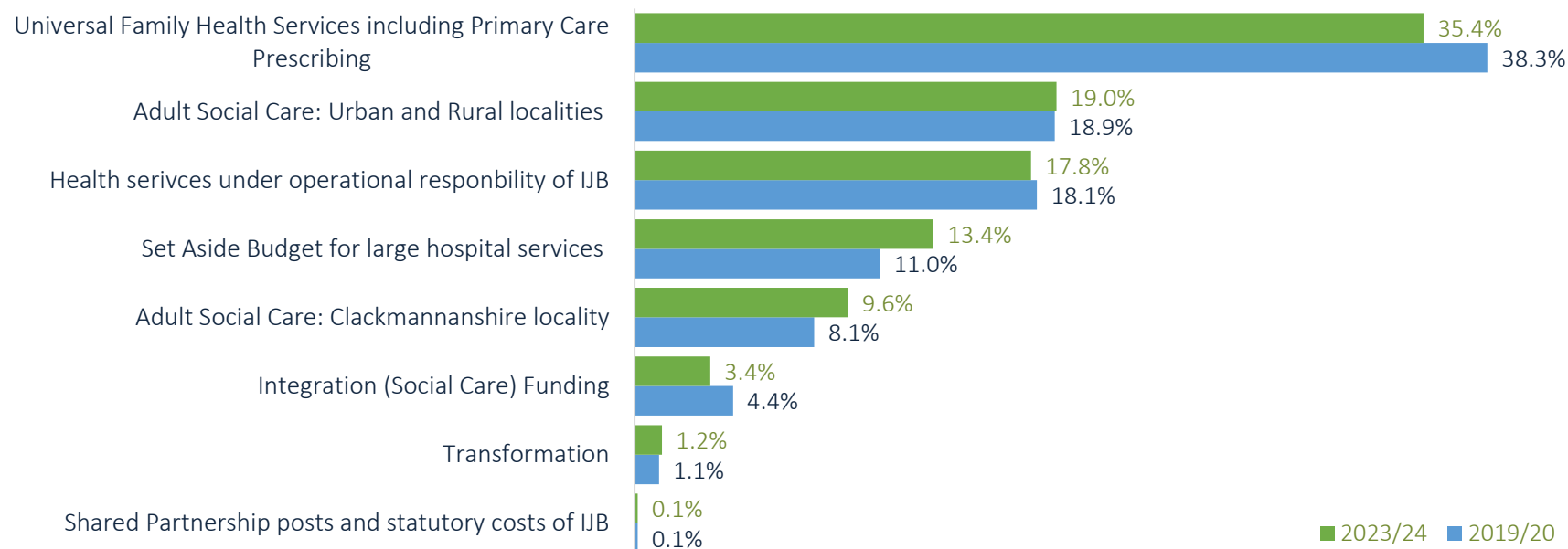
£2.616m
overspend met
from Reserves

The expenditure of the IJB for 2023/24 and the previous 5 years is summarised in the table and graph below. As the IJBs spend profile changes over a number of years we will continue to illustrate the effect of this graphically to provide evidence of alignment with strategic priorities and outcomes – this will be an evolutionary process over time. These figures are subject to statutory audit, and it may be useful to read the content of the IJBs Annual Accounts alongside this report. The IJBs Annual Accounts are published here: [Clackmannanshire and Stirling HSCP – Finance \(clacksandstirlinghscp.org\)](https://clacksandstirlinghscp.org)

Clackmannanshire & Stirling Health and Social Care Partnership budget by Service Area

	2019/20	2020/21	2021/22	2022/23	2023/24
Service area	£000	£000	£000	£000	£000
Set Aside Budget for large hospital services	22,007	23,588	24,736	31,513	36,595
Adult Social Care: Clackmannanshire locality	16,129	17,266	21,583	25,092	26,131
Adult Social Care: Urban and Rural localities	37,736	36,804	42,447	48,652	51,678
Health services under operational responsibility of IJB	36,129	37,774	39,774	43,685	48,544
Universal Family Health Services including Primary Care Prescribing	76,594	82,090	83,691	90,720	96,632
Integration (Social Care) Funding	8,838	23,072	13,168	10,148	9,287
Shared Partnership posts and statutory costs of IJB	284	300	317	375	391
Transformation	2,202	2,454	2,521	2,728	3,359
Total expenditure	199,919	223,349	228,237	252,914	272,618

Clackmannanshire & Stirling Health and Social Care Partnership budget by service area as % of total spend



Best Value, Governance & Risk

Clackmannanshire Council, Stirling Council and NHS Forth Valley (the partnership authorities) delegate budgets to the Integration Joint Board (IJB). The IJB decides how to use the budget to achieve the priorities of the Strategic Commissioning Plan and to progress towards the National Health and Wellbeing Outcomes set by the Scottish Government. Put in a more simple way, the Board identify our priorities and plan how we will deliver our services, improve outcomes for people and support people to live independent lives with the care and support they need.

The governance framework are the rules, policies and procedures that ensure the IJB is accountable, transparent and carried out with integrity. The IJB had legal responsibilities and obligations to its stakeholders, staff and residents of Clackmannanshire and Stirling.

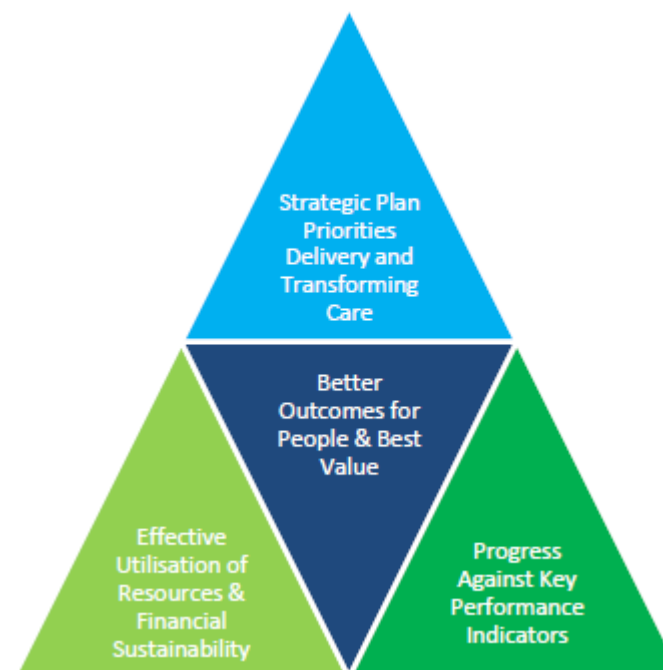
The Partnership monitors performance to measure progress in delivering the priorities of the Strategic Plan with financial performance a key element of demonstrating Best Value.

We monitor Best Value through:

- The Performance Management Framework and performance reports
- Development and approval of the Annual Revenue Budget
- Development of and reporting on the Transforming Care Programme
- Regular Financial reports
- Regular reporting on Strategic Improvement Plan
- Topic specific progress reporting e.g. Primary Care Improvement Plan
- Reporting on Strategic Plan Priorities to the IJB and topic specific reports.
- Best Value Statement

The IJB accounts contain an Annual Governance Statement which reports progress on the review and improvement of governance arrangements identifies any weaknesses apparent during the year and sets out a governance action plan for the coming year to continually improve governance arrangements.

The IJB is supported by two committees – Audit and Risk Committee and Finance and Performance Committee which report to the IJB through committee chairs who are voting members of the IJB. The terms of reference of the committees are reviewed periodically.



Appendix 1 - Functions delegated to Clackmannanshire and Stirling IJB

Clackmannanshire and Stirling Health and Social Care Partnership is responsible for planning and commissioning integrated services and overseeing their delivery. These services cover adult social care, adult primary and community health care services and elements of adult hospital care. We have strong relationships with acute health services and wider Community Planning Partnerships, the third sector and independent sector to jointly deliver flexible locality based services. Planning and designing outcome focused care and support in collaboration with communities and people with lived and living experience.

Last year significant progress in our integration was made with the delegation of Primary Care, Mental Health and Health Improvement Services into the Health and Social Care Partnership. Here are the services that fall under the management of the Health and Social Care Partnership.

NHS services delegated to HSCP

- Primary Care (as of April 2023)
- Mental Health (as of April 2023)
- Health Improvement (as of April 2023)
- District Nursing
- Substance use services
- Allied Health Professional services in outpatient clinics/out of hospital
- Public dental services/Primary medical services including out of hours, general dental, Ophthalmic & Pharmaceutical services
- Geriatric medicine and palliative care outwith hospital settings
- Community Mental Health & Learning Disability services
- Continence and kidney dialysis outwith hospital

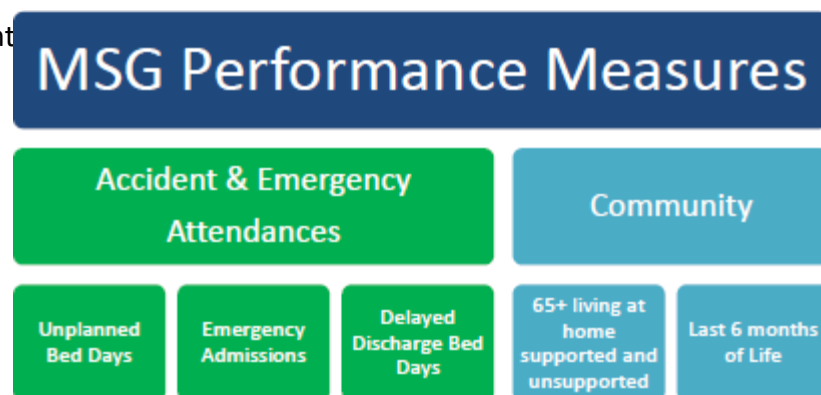
Clackmannanshire and Stirling Council services delegated to HSCP

- Social work services for adults aged 16+
- Services and support for adults with physical disabilities
- Services and support for adults with learning disabilities
- Mental health services
- Drug and alcohol services
- Adult Protection
- Carers support services
- Community Care Assessment Teams
- Support services
- Care home services
- Adult Placement services
- Aspects of housing support and assistance including aids and adaptations
- Day services
- Respite provision
- Occupational therapy, equipment and telecare

Appendix 2 – Ministerial Strategic Group (MSG) Indicators

To support the delivery of the National Priorities Partnerships we completed a self-assessment and improvement action plan as well as agreeing local targets for key areas. Nationally this is monitored by the Ministerial Strategic Group for Health and Community Care (MSG).

The MSG information covers a range of activities under the umbrella of ‘unscheduled care’. These activities support people to remain in their own homes, return to their own homes as quickly as possible when hospital treatment is required, prevent related re-admission to hospital and include end of life care. Unscheduled care is a core element of the health and social care system and as such, our services need to be responsive to need whilst being transformative in that contact with patients is shifted from reactive to proactive planned engagement, and from hospital settings to the community where appropriate.



Ref	Indicator	Strategic Theme	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	Desired trend or target
MSG1a	Number of emergency admissions (all ages)	For Info only	13,688	16,704	14,247	16,385	16,447	16,674	↓
	% change from previous year			22.0%	-14.7%	15.0%	0.4%	1.4%	
	Number of emergency admissions (aged 18+)	ST1	11,700	14,573	12,638	13,941	14,205	14,582	↓ 5% decrease from 2015/16 to 10,584
	% change from previous year		-0.5%	24.6%	-13.3%	10.3%	1.9%	2.7%	
MSG2a	Number of unscheduled hospital bed days (all ages); acute specialties	For Info only	96,213	103,004	85,703	98,922	109,497	104,253	↓
	% change from previous year		-	7.1%	-16.8%	15.4%	10.7%	-4.8%	
	Number of unscheduled hospital bed days (aged 18+); acute specialties	ST1	93,050	100,090	83,743	96,412	106,732	101,143	↓ 5% decrease from 2015/16 to 88,804
	% change from previous year		3.3%	7.6%	-16.3%	15.1%	10.7%	-5.2%	
MSG2c	Number of unscheduled hospital bed days (all ages); mental health specialties	For Info only	27,582	24,177	23,648	22,286	22,198	17,463*	↓
	% change from previous year		-	-12.3%	-2.2%	-5.8%	-0.4%	-21.3%	
	Number of unscheduled hospital bed days (aged 18+); mental health specialties	ST1	26,750	23,637	23,059	22,055	21,950	17,001*	↓ 18% decrease from 2015/16 to 20,378
	% change from previous year		3.7%	-11.6%	-2.4%	-4.4%	-0.5%	-23.4%	

Ref	Indicator	Strategic Theme	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	Desired trend or target
MSG3a	A&E attendances (all ages) - patients from all areas	For Info only	38,557	40,552	28,388	36,805	36,430	32,769	↓
	% change from previous year		-	5.2%	-30.0%	29.6%	-1.0%	-10.0%	
	A&E attendances (aged 18+) - Patients from all areas	ST1	30,284	32,040	23,092	28,512	28,398	26,053	↓ Maintain 2015/16 baseline of 26,585
	% change from previous year		7.1%	5.8%	-27.9%	23.5%	-0.4%	-8.3%	
MSG4a	Delayed discharge bed days (aged 18+) - All Reasons	ST1	11,016	12,630	9,355	13,518	14,786	15,624	↓ Maintain 2015/16 baseline of 10,069
	% change from previous year		36.8%	14.7%	-25.9%	44.5%	9.4%	5.7%	
MSG4b	Delayed discharge bed days (aged 18+) - Code 9	For Info only	2,942	2,540	3,482	2,608	5,446	6,963	↓
	% change from previous year			-13.7%	37.1%	-25.1%	108.8%	27.9%	
MSG5a	Percentage of last 6 months of life spent in community (all ages)	ST3	87.8%	88.2%	91.0%	89.6%	89.3%	89.2%	↑ 4.1% increase from 2015/16 baseline to 90%
	% change from previous year		0.9%	0.4%	2.8%	-1.4%	-0.3%	-0.1%	
MSG6	Balance of care: Proportion of 65+ population living in Community or institutional settings - Home (supported)	For Info only	5.2%	4.9%	4.9%	4.4%	4.7%	Not available	↑
	Scotland		4.7%	4.5%	4.5%	4.2%	4.3%		
	Balance of care: Proportion of 65+ population living in Community or institutional settings - Home (unsupported)	For Info only	91.7%	92.0%	92.5%	92.9%	92.1%	Not available	↑
	Scotland		91.3%	91.6%	91.9%	92.3%	92.0%		
	Balance of care: Proportion of 65+ population living in Community or institutional settings - Home (Supported and unsupported)	ST3	96.9%	96.9%	97.4%	97.3%	96.8%	Not available	↑ 0.1% increase from 2015/16 baseline to 96.6

MSG1, 2a, 3a, 3b, 4a, 4b, 4c 4d Updated to Mar 24 on 28-6-24 from v1.67 (SMR01a)

*MSG2c 2023 Calendar year used as a proxy for 23/24

MSG5a Death records, NRS; SMR01 & SMR04, Public Health Scotland from v1.67

MSG6 SMR01, SMR04, Care Home Census, Source Social Care data - Public Health Scotland; Social Care Census, SG; Population estimates, NRS From v1.67

Completeness issues: SMR01 records submitted by NHS Forth valley are 99% for 2023/24. Data SMR4 is 75% which means that some figures are likely to change. Where there are completeness issues this has been noted and the figure is highlighted in red italics.

MSG report advises this data should not be published for peer partnership/Scotland comparison.

Appendix 3 - National Core Indicators

The national core indicators are a requirement of the Annual Performance Report. Sourced from the latest release of the [Core Suite of Integration Indicators](#) published on 2nd July 2024.

Desired Trend ↑ increase ↓ decrease											
Performance			Improving performance		Static		Declining performance				
Benchmarking			Better than average		Within 5%		Worse than average				
	Ref	Indicator	Strategic Theme	2015/16	2017/18	2019/20	2021/22	2023/24	Desired trend	Scottish average	Comparator Average
Outcome Indicators	NI1	Percentage of adults able to look after their health very well or quite well.	ST2	94.60%	93.60%	93.60%	91.70%	90.80%	↑	90.70%	91.80%
	NI2	Percentage of adults supported at home who agreed that they are supported to live as independently as possible.	ST2	81.70%	81.90%	76.10%	72.50%	67.20%	↑	72.40%	71.90%
	NI3	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided.	ST2	76.40%	73.50%	74.40%	64.30%	57.90%	↑	59.60%	63.70%
	NI4	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated.	ST3	72.90%	76.50%	68.80%	61.70%	56%	↑	61.40%	59.80%
	NI5	Total % of adults receiving any care or support who rated it as excellent or good.	ST3	77.60%	77.60%	75.20%	67.80%	64.80%	↑	70%	70.50%
	NI6	Percentage of people with positive experience of the care provided by their GP practice.	ST3	86.70%	86.60%	78.80%	67.30%	72.30%	↑	68.50%	71.30%
	NI7	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life.	ST3	77.10%	79.40%	79.10%	79.20%	66.10%	↑	69.80%	69.50%
	NI8	Total combined % carers who feel supported to continue in their caring role.	ST4	32.40%	38.30%	29.70%	25.60%	32.80%	↑	31.20%	31.90%
	NI9	Percentage of adults supported at home who agreed they felt safe.	ST3	81.60%	86.00%	83.50%	75.30%	66.80%	↑	72.70%	71.40%

The 'Outcome' indicators above are reported every 2 years from the Scottish Health and Care Experience Survey commissioned by the Scottish Government (latest 2023/24). Please also note that 2021/22 results for some indicators are only comparable to 2019/20 and not to results in earlier years. This data is also available on the Public Health Scotland Website, you can access this here: publichealthscotland.scot

	Ref	Indicator	Strategic Theme	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	Desired trend	Scottish average	Comparator Average
Data Indicators	NI11	Premature mortality rate per 100,000 persons by Calendar Year	ST1	379	371	429	459	440	407	Not available	↓	442	394
	NI12	Emergency admission rate (per 100,000 population)	ST1	10,323	10,451	13,206	11,772	12,827	13,036	13,127	↓	11,707	12,327
	NI13	Rate of emergency bed day per 100,000 population for adults (18+).	ST1	113,000	113,435	109,221	96,473	106,781	115,181	110,293	↓	112,883	114,651
	NI14	Emergency readmissions to hospital for adults (18+) within 28 days of discharge (rate per 1,000 discharges)	ST1	104	105	130	153	130	126	122	↓	104	113
	NI15	Proportion of last 6 months of life spent at home or in a community setting	ST3	87.0%	87.8%	88.2%	91.0%	89.6%	89.3%	89.2%	↑	89.1%	89.4%
	NI16	Falls rate per 1,000 population aged 65+	ST1	19.7	20.8	23.5	20.2	23.6	23.8	23.6	↓	22.7	23.0
	NI17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections	ST3	96.2%	93.4%	91.0%	91.1%	87.0%	80.8%	84.6%	↑	77.0%	78.7%
	NI18	Percentage of adults with intensive care needs receiving care at home	ST2	66.7%	66.7%	69.8%	69.2%	71.2%	69.3%	70.4%	↑	64.8%	64.5%
	NI19	Number of days people aged 75+ spend in hospital when they are ready to be discharged, per 1,000 population	ST3	503	579	665	448	743	804	814	↓	902	870
	NI20	% of health and care resource spent on hospital stays where the patient was admitted in an emergency.	NA	22.7%	23.7%	23.0%							

Data for indicators 12, 13, 14, 15, 16 and 18 are reported for the calendar year 2023 as a proxy for 2023/24 as data for the full financial year is incomplete at this time. Data for indicator 11 to calendar year 2023 is not currently available. Data is derived from various organisational/system datasets.

Appendix 4 - Inspection of Services

Registered services owned by the Partnership are inspected annually by the Care Inspectorate. There were four registered service inspections during 2023/24. Additional information and full details on inspections can be found at the [Care Inspectorate](#) website. Since 1 April 2018, the new [Health and Social Care Standards](#) have been used across Scotland. In response to these new standards, the Care Inspectorate introduced a new framework for inspections of care homes for older people. Where we have areas for improvement we are required to publish our action plans.

Inspection Summary

Registered Service	Date Inspection Completed	How well do we support people's wellbeing?	How good is our leadership?	How good is our staff team?	How good is our setting?	How well is our care and support planned?	Recommendations	Requirements	Areas for improvement
Menstrie House	25/05/2023	Good	Very good	Very good	Good	Good	0	0	0
Bellfield Centre Care Home Service	05/10/2023	Very good	Good	Very good	Very good	Good	0	0	1
Stirling Council Reablement and Tec Services Housing Support Service	02/11/2023	N/A	N/A	N/A	N/A	N/A	0	0	0
Clackmannanshire Reablement and Technology Enabled Care Service Housing Support Service	11/01/2024	Very good	Good	N/A	N/A	N/A	0	0	0
Care Inspectorate									

Report to Audit and Scrutiny Committee

Date of Meeting: Thursday 6th February 2025

Subject: External Audit Recommendations: Progress Report

Report by: Strategy and Performance Adviser

1.0 Purpose

- 1.1. The purpose of this report is to provide a six-monthly update on progress of new and ongoing improvement actions against recommendations made by external auditors from their review of Council's Financial Statements up to and including 2022/23 and from a Best Value themed audit 2022/23.

2.0 Recommendations

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

3.0 Considerations

- 3.1. The Council is externally audited by Deloitte LLP, appointed by the Controller of Audit. Deloitte LLP conducted an audit of the 2022/23 Financial Statements in accordance with the Code of Audit Practice approved by the Accounts Commission.
- 3.2. A report to Council on 29th August 2024 set out the findings arising from that work. It included five recommendations around financial sustainability and enhancing governance of the Audit and Scrutiny Committee. Of these recommendations two recommendations are complete and have been implemented fully, and three recommendations are ongoing and have been partially implemented.
- 3.3. External audit also followed-up on eight outstanding actions for recommendations made in previous audits of the Council's Financial Statements. Of these, five outstanding actions are now complete and implemented fully and three actions are ongoing and partially implemented.
- 3.4. Deloitte LLP also conducted a Best Value themed audit 2022/23 on leadership of the development of new local strategic priorities.
- 3.5. Of the two recommendations raised, one improvement actions is complete and has been implemented fully and the other is an ongoing action that is partially complete.

- 3.6. All external audit recommendations take the form of strategic continuous improvement actions. They form part of the Council's Best Value Improvement Action Plan and they are monitored as part of our Annual Governance arrangements in place.
- 3.7. Table A below provides a breakdown of the total number of improvement actions complete and ongoing for all new and ongoing recommendations from external auditors from their review of the Council's Financial Statements up to and including 2022/23 and from a Best Value themed audit 2022/23. Overall progress during 2024/25 shows that 54% of external audit improvement actions are complete and fully implemented with 46% ongoing and partially implemented.

	NUMBER OF RECOMMENDATIONS FROM EXTERNAL AUDIT OF FINANCIAL STATEMENTS PRIOR TO 2022/23	NUMBER OF RECOMMENDATIONS FROM EXTERNAL AUDIT OF FINANCIAL STATEMENTS 2022/23	NUMBER OF RECOMMENDATIONS FROM BEST VALUE THEMED AUDIT 2022/23	TOTAL
COMPLETE	5	2	1	8 (54%)
ONGOING	3	3	1	7 (46%)
TOTAL	8	5	2	15 (100%)

Table A. Progress Summary of Recommendations Related to External Audit of 2022/23 Financial Statements and a Best Value Themed External Audit 2022/23.

- 3.8. The ongoing actions include some significant and complex pieces of work that depend upon internal resource with the necessary expertise, skills or capacity, which continues to be under high demand. This means that the work can take lengthier periods of time to progress or deliver, as might have been anticipated, particularly where the actions also require considered stakeholder consultation, adherence to formal approval processes or are dependent upon completion and approval of other high priority activities.
- 3.9. Similarly, some of the ongoing actions are dependent upon new resource, skills or capacity being recruited, for which progress in key areas such as Finance and Revenues and Legal and Governance is now progressing.
- 3.10. Appendix A provides further detail and commentary against all individual recommendations at the 2024/25 half-year mark.
- 3.11. The Annual Governance assurance process is ongoing, with key improvement actions identified through internal audit, external audit and through the Annual Governance Statement process being progressed and led by Senior Managers and Leaders. At the time of writing the draft 2023/24 Financial Statement of Accounts has been submitted to Deloitte LLP. A further progress report, including any new actions identified from the audit of the 23/24 financial statement and the Best Value thematic review around Workforce Planning, will come to a future Audit and Scrutiny Committee meeting.

4.0 Sustainability Implications

4.1. There are no sustainability implications.

5.0 Resource Implications

5.1. Financial Details

5.2. There are no financial implications with this proposal. No ☒

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

5.4. Staffing

5.5. Staff involved will represent a cross section of all Council portfolios. Yes ☒

6.0 Exempt Reports

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

7.0 Declarations

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

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

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

(2) **Council Policies**

Complies with relevant Council Policies	<input checked="" type="checkbox"/>
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8.0 Equalities Impact

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

9.0 Legality

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

10.0 Appendices

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

Appendix A Progress Against Recommendations Related to External Audit of Financial Statements up to and including 2022/23 and a Best Value Themed External Audit 2022/23.

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 ☐

- Clackmannanshire Council, 29th August 2024: Annual report to those charged with Governance and the Controller of Audit for Financial Year Ended 2022/23 prepared by Chief Finance Officer.
(<https://www.clacks.gov.uk/document/meeting/1/1247/7959.pdf>)

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Fi Grinly	Strategy & Performance Advisor	2391

Approved by

NAME	DESIGNATION	SIGNATURE
Chris Alliston	Strategic Director, Partnerships & Performance	

Progress Against Recommendations Related to External Audit of Financial Statements up to and including 2022/23 and a Best Value Themed External Audit 2022/23.

The following recommendations arose from external audits of the Council's Financial Statements prior to 2022/23:

Recommendation: 1. Finance team capacity	
The council should ensure that the finance team is adequately resourced to prepare a comprehensive set of unaudited accounts and provide the necessary working papers in a timely manner to support the audit process.	
Management Response:	Finance management continue to review team capacity and undertake recruitment of permanent staff. Due to a tight labour market, recruiting to vacancies continues to be challenging and a redesign of the Service is underway including the opportunity to offer apprenticeships and/or trainee positions to support future succession planning.
Responsible Person:	Chief Finance Officer
Target Date:	Ongoing
2024/25 Half-Yearly Update	Ongoing and partially complete - The Chief Accountant and permanent capital accountant are now in post. The first phase of the Finance restructure has been approved by Senior Leadership Group and is progressing though Trade Unions consultation. The implementation of the Revenues structure is complete and remaining posts have been recruited to.

Recommendation: 2. Bank reconciliations	
The council must comply with its own financial regulations and prepare bank reconciliations at least once a month.	
Management Response:	Bank reconciliations were completed in a timely manner through the year, however, work to resolve reconciling items led to delays in finalising the reconciliations and passing the information over to External Audit. Regular reviews have been scheduled to ensure progress through the year.
Responsible Person:	Chief Finance Officer
Target Date:	31 st March 2023

2024/25 Half-Yearly Update	Complete and fully implemented - Bank reconciliations are undertaken monthly. Reconciliations are reviewed regularly by the Corporate Accountant and progress is reviewed in weekly Treasury Team meetings.
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Recommendation:	3. Finance staff will continue to liaise with internal officers and external valuers to ensure financial statements accurately reflect the non- current asset position.
Management Response:	Finance staff will continue to liaise with internal officers and external valuers to ensure financial statements accurately reflect the non- current asset position.
Responsible Person:	Chief Finance Officer
Target Date:	30 September 2023
2024/25 Half-Yearly Update	Complete and fully implemented - Finance worked with officers in Place to identify assets for revaluation which were then carried out by external valuers.

Recommendation:	4. Management commentary and annual governance statement The council should review the project plan for the preparation of the unaudited annual governance statement to ensure it is prepared to the appropriate standard and fully supported by audit evidence.
Management Response:	A number of enhancements were made to the Management Commentary and Annual Governance Statement during the audit period. Officers will review both these areas for the 2022/23 accounts.
Responsible Person:	Chief Finance Officer and Monitoring Officer
Target Date:	30 September 2023
2024/25 Half-Yearly Update	Complete and fully implemented - the officer will continue to monitor this into 2023/24.

Recommendation:	5. Financial systems of internal control and key supporting documents The council must review the control environment and reinstate critical key controls such as timely reconciliations. This should be supported by revised financial management and governance documents that clearly define expectations and responsibilities.
Management Response:	As reported to Council on 6th October 2022, a working group consisting of Officers and Elected Members has been set up to consider and review both the Scheme of Delegation & Standing Orders. These will be presented to Council for approval following completion.
Responsible Person:	Chief Finance Officer and Monitoring Officer
Target Date:	2023/24
2024/25 Half-Yearly Update	<p>Ongoing and partially implemented - The Financial Regulations were reviewed and approved by Council in June 2023. Reconciliations were completed on a timely basis during 2023/24.</p> <p>Action is subject to completion of the Integration Scheme for the Clackmannanshire and Stirling Integrated Joint Board, with final sessions to take place with Senior Leadership Group then Elected Member briefings will follow. It is anticipated that this work will be completed the end of Q4 of 24/25. Subject to approval of the Integration Scheme then further work can continue on the review of the Council's Scheme of Delegation.</p> <p>Some initial work has commenced on the review of Standing Orders.</p>

Recommendation:	6. Prevention and detection of fraud and error. The council should review and update its antifraud arrangements and policies and ensure these are clearly communicated to staff.
Management Response:	An annual fraud and corruption training plan will be developed for all staff and the profile of the whistleblowing policy raised through a programme of internal communication.
Responsible Person:	Senior Manager, Legal & Governance
Target Date:	September 2023
	Revised target date: 31 March 2024

2024/25 Half-Yearly Update	Ongoing and partially implemented - the revised Whistleblowing policy/procedure was approved by Council in October 2023 and cascaded to staff. Ongoing communications include an article on CONNECT staff internet in August 2024 and a forthcoming article in CONNECTED staff newsletter for Spring 2025. We are also looking to put in place training in combating fraud and corruption for Directors, Senior Managers and other key officers during 2025/26.
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Recommendation:	7. Audit and scrutiny committee Officers should keep the revised Audit and Scrutiny committee arrangements under review to ensure there is sufficient time for members to review papers and provide effective scrutiny and challenge.
Management Response:	Officers will monitor this during the year.
Responsible Person:	Extended Senior Leadership Group
Target Date:	Ongoing
2024/25 Half-Yearly Update	Complete and fully implemented - the Audit and Scrutiny Committee undertook a review of its plan between August and October, with the final plan being agreed on 26 October. This will be kept under ongoing review.

Recommendation:	8. Long-term planning (from 2020/21 Action Plan) Long-term planning arrangements, including a range of scenarios, should continue to be developed to support the council in recovering from the Covid-19 pandemic and in transforming services. 2021/22 update: Progressing – the council has a clear focus on continuing to develop its longer-term planning.
Management Response:	The council is reviewing its long-term plan through its Be the Future (BtF) programme including plans for transforming services and adapting to the changed environment. Regular updates continue to be provided to Council on the BtF programme.
Responsible Person:	Chief Executive & Director of Transformation
Target Date:	Ongoing
2024/25 Half-Yearly Update	Complete and fully implemented - Covid recovery is now built into business as usual. Chief Executive continues to provide regular updates to Council on the progress of the BtF

	programme and the general transformation of service to adapt to the current and future anticipated environment.
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The following recommendations arose from an external audit of the Council's Financial Statements 2022/23:

Recommendation:	1. Financial sustainability – budget setting The Council should set out within its budget papers any other specific risks that impact on the achievement of a balanced financial position and what mitigating action the Council has planned to manage these risks.
Management Response:	Accepted. Budget papers will continue to include comment around the ability to meet a balanced budget. Budget strategy report includes in year risks such as Pay Award and mitigating actions being taken - essential spend, recruitment to critical posts. Regular out turn reporting is presented to Audit and Scrutiny which includes comment in relation to under/over spends. Any significant forecasted overspend must have a management action plan developed to mitigate the overspend which is then brought back to committee. Other specific financial risks and impacts will be included as they arise.
Responsible Person:	Chief Finance Officer / Senior Manager, Finance & Revenues
Target Date:	Ongoing reporting
2024/25 Half-Yearly Update	Ongoing and partially implemented - this is being considered for inclusion in the 2025/26 Budget Report and future budget strategy reports.

Recommendation:	2. Financial sustainability – reserves The finance monitoring reports should be expanded to give members an update on progress with the use of the earmarked reserves to ensure that they are being actively monitored and being applied for the purposes intended.
Management Response:	Accepted. We will look to include a specific section that provides a detailed breakdown of earmarked reserves opening balance, used in year to date and the closing balance. This will ensure that members are fully informed about the status of these reserves and can scrutinise the use of the reserves during the year.
Responsible Person:	Chief Finance Officer / Senior Manager, Finance & Revenues
Target Date:	October 2024 (June outturn report 2024/25 and Ongoing reporting)

2024/25 Half-Yearly Update	Complete and fully implemented - this information was included within the Quarter 1 and 2 outturn reports for 2024/25 and will continue to be included in future outturn reports.
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Recommendation:	3. Financial sustainability A Medium-Term Financial Strategy be developed, with clear actions on how financial sustainability is to be achieved. This should follow Audit Scotland's report in June 2014 Scotland's public finances – A followup audit: Progress in meeting the challenges (audit-scotland.gov.uk) as a reference.
Management Response:	The Budget strategy is set annually outlining the budget approach for the year to close the gap. This is in line with the current 1-year settlement of Local Government funding which makes up the majority of the Councils income. The gap for the next 3 years is also included in the strategy with assumptions on variable elements. Savings and pressures are prepared over a multi-year period to reduce the gap in future years as well as the forthcoming year. We will consider incorporating the recommendations of Audit Scotland's report into future budget strategy reports.
Responsible Person:	Chief Finance Officer / Senior Manager, Finance & Revenues
Target Date:	March 2025
2024/25 Half-Yearly Update	Ongoing and partially implemented - a medium-term Financial Strategy is being developed.

Recommendation:	4. Financial sustainability - transformation More work is required to build the detail behind each project and fully align this to the development of a medium-term financial strategy by (AGS 023 018): a) Adding greater detail about individual projects; b) Setting clear timelines for each project; c) Assess the resources and support required to deliver these projects (taking into account the resources that are already identified); and d) Developing a benefits realisation tracker to assess whether the Council has achieved its aims.
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Management Response:	<p>Accepted. Project details are now captured on a standard template which includes timelines, project budgets, key risks/issues and interdependencies and transformation.</p> <p>Resource requirements are also reviewed by the project lead sponsor. These updates link back to the 10 agreed corporate priorities and are reported to the Strategic Oversight Group and the Be the Future Board at each meeting.</p> <p>A benefits realisation tracker is also being developed which will be applied to each project.</p> <p>New Business cases will also be reviewed to ensure they capture relevant information going forward.</p>
Responsible Person:	Senior Manager, Capital and Transformation
Target Date:	December 2024
2024/25 Half-Yearly Update	<p>Ongoing and partially implemented –</p> <p>a, b and c: Project details are now captured on a standard template which includes timelines, project budgets, key risks/issues and interdependencies and transformation. This is working well and gives officers and Elected Members a clear picture of the status of each project. These updates link back to the agreed corporate priorities and are reported to the Strategic Oversight Group and Be the Future Board.</p> <p>d) Benefits Realisation Plan and framework for reporting were approved at 16th May 24 Council meeting. Key metrics for each project were agreed and baseline recorded.</p>

Recommendation: **5. Governance – Audit and Scrutiny Committee (ASC)**

The ASC could be enhanced by:

a) allocating provisional times for each item on the agenda to help manage the meetings within the set timeline.

b) formalising the arrangement for substitute members with specific expertise within the Committee's Terms of Reference.

c) receiving regular updates from management on progress with the implementation of internal and external audit recommendations.

Management Response:	<p>a) Accepted. This will be discussed with the chair, with implementation.</p> <p>b) Accepted. This will be discussed with the chair.</p> <p>c) Accepted but it is already intended within the current forward plan. An internal audit update went to committee in August 2023, with an undertaking to provide 6 monthly updates thereafter. The external audit reports were intended to be contained in the six monthly AGS progress report. I accept this need to be clearer.</p>
Responsible Person:	Strategic Director, Partnerships and Performance
Target Date:	<p>a) 31 March 2024</p> <p>b) 31 August 2024</p> <p>c) 31 March 2024</p>
2024/25 Half-Yearly Update	<p>a) Complete and fully implemented - following the annual review process all Committee members now attend the pre agenda meeting along with officers, this provides the opportunity to have high level overview of papers, and outline areas which members will focus on at Committee to allow officers to have sufficient information to respond fully. Assigning timings to agenda items for the A&S could stifle questions and debate. The Chair is effective in managing the agenda and the meeting.</p> <p>b) Complete and fully implemented - the former Strategic Director undertook work at the request of Committee regarding co-opting of members onto Committee. At the paper tabled in Dec 2023 it was noted. "When the Committee considered its Annual Report on 26 October 2023, it remitted a number of actions to the Strategic Director, Partnership and Performance that were to be further progressed and reported back in December 2023. These were: 3.1.1. Seek Council approval of the Committee's Annual Report at the next available meeting. 3.1.2. Consider arrangements for co-opting independent members on to the Audit & Scrutiny Committee; 3.1.3. Draft a training and development programme for the Committee based on a skills audit undertaken in October 2023; and 3.3. Initial research has been undertaken on the action outlined at 3.1.2. CIPFA recommend at least two co-opted independent members. Having looked at a sample of Scottish councils the membership of most is similar in size and arrangements to Clackmannanshire's Audit & Scrutiny Committee. That includes for example, having a chair from the main opposition independent of the prevailing administration group. There appears to be no significant</p>

	<p>shift elsewhere to co-opting independent expertise from out with the pool of elected members...” Committee noted and agreed the paper. Where members of Committee are unable to attend substitutes do attend where possible given the size of the Council. This is evident from the recording attendees held by Committee Services.</p> <p>c) Complete and fully implemented - regular reporting now takes place in relation to outstanding internal audit actions. External Audit recommendations are now also reported to Committee with the first half yearly report provided to Committee in Feb 2025.</p>
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The following recommendations arose from external audits of the Council’s Financial Statements prior to 2022/23:

Recommendation:	<p>1. Agreement of priorities</p> <p>The Council’s priorities for 2023/24 were not agreed until October 2023, more than halfway through the year.</p> <p>Risk – Insufficient time to implement any changes into Business Plans for the year.</p> <p>The Council should ensure that the priorities are agreed in advance of the start of the year to ensure any changes can be built into Business Plans.</p>
Management Response:	This has been updated in the revised timeline, with the 24/25 performance indicators being agreed as part of the February 2024 budget.
Responsible Person:	Strategic Director, Partnership & Performance
Target Date:	Completed in February 2024
2024/25 Half-Yearly Update	Complete and fully implemented.

Recommendation:	<p>2. Elected members</p> <p>Skills analysis and self-evaluation process has not been completed (with the exception of the ASC members) and personal development plans are not in place.</p> <p>Risk – elected members do not have the skills and knowledge to perform their role effectively</p> <p>A skills analysis and self-evaluation process should be carried out to assess the skills for each elected member. Personal development plans should then be developed and tailored to individual members' needs.</p>
Management Response:	A programme of training was developed for members as part of their induction programme, however individual training needs analysis will now be offered to elected members to identify any relevant training needs.
Responsible Person:	Senior Manager Legal and Governance / Monitoring Officer.
Target Date:	31 December 2024
2024/25 Half-Yearly Update	<p>Ongoing and partially implemented - training for elected members is a continual professional requirement through their term as a local councillor. A programme of training was undertaken after the 2022 local government elections and further round of training is being reviewed by Senior Manager of Legal & Governance and Senior Manager of HR and will be rolled out in due course.</p> <p>The Council has recently engaged with the Improvement Service to undertake a Political Skills Assessment (PSA) for Elected Members. The aim of this work is to understand the skills, and development requirements of Members, with the view to being able to offer more tailored learning interventions for those who engage with the process. The PSA process was launched in December 2024, with a view to establishing who wishes to undertake the process by the end of January 2025. After this point meetings will be scheduled with Elected Members who want to engage, with training and skills development requirements identified and collated as part of the 2025/26 training needs analysis process (due to conclude in April 2025).</p>

Report to Audit & Scrutiny Committee

Date of Meeting: 06 February 2025

Subject: Partnership & Performance: 2024/2025 Half Year Business Plan Update

Report by: Strategic Director, Partnership & Performance

1.0 Purpose

- 1.1. The report updates the Committee on the half year progress of the 2024/2025 Partnership and Performance Business Plan.
- 1.2. The report outlines progress as of 30 September 2024. A comprehensive overview is available in Appendix 1; however, key highlights and considerations are presented below.

2.0 Recommendations

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

3.0 Considerations

- 3.1. 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 2024/25 agreed by Council on 29th August 2024. (link can be found at <https://www.clacks.gov.uk/document/meeting/1/1247/7948.pdf>)
- 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. 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.

3.4. HR and Workforce Development

- 3.5. The service continues to progress work both with ensuring the business as usual of the HR, payroll, and workforce development functions, as well as seeking out ways to develop the way the Service supports staff across a range of areas.
- 3.6. Development work has included progressing with the Interim Workforce Strategy action plan, which over the period was the roll out of the new Team Leaders Forum. This leadership development opportunity acts as the next step forward from the Senior Leadership Forum and is designed to engage operational leads across the organisation through a set of networking and engagement events, thereby opening up opportunities for cross service collaboration and innovation.
- 3.7. The team also engaged with Flexibility Works (Scottish experts in flexible working) in order to understand and better support flexible working within the Council (which was a major theme from our 2023 Staff Survey). This included undertaking a themed survey, and face to face conversations with staff, and the preparation of a report which outlined the Council's current approach, and how this might develop in the future. This work continues, with members of the Strategic Leadership Group (SLG) approving a further deep dive into challenges around flexible working, and how managers can make best use of the policies available to them.
- 3.8. The Health & Safety team remains committed to ensuring a safe working environment. Significant progress has been made in recording risk assessments with a view of building a comprehensive database to track risks and mitigation strategies.
- 3.9. The Workforce Development team has enhanced communication channels across the Council, introducing regular Chief Executive video messages and tailored multimedia content to support various service areas.
- 3.10. Additionally, the Workforce Development team continues to deliver a range of learning and development opportunities for staff. Team members continue to deliver a range of soft skills and policy focussed courses both hybrid (online) and face to face as part of the annual corporate training calendar, and on request (i.e. bespoke course requirements) from across Council service areas (such as supporting Education colleagues with recruitment and selection training). The Workforce Development team also engages across all Council areas in developing bespoke elearning content, including with educational psychology (in a longstanding nationally recognised collaboration) and to support other areas on request. The H&S team has also continued to develop their Council wide training offering, with a range of H&S topic based courses, First Aid courses, and IOSH training Being offered to both address service based gaps as they are identified, and to generate revenue on an external basis for the Council.

- 3.11. In operational HR, the appointment of an Absence Compliance Officer is expected to enhance the management of long-term absences and support managers in facilitating timely returns to work. Moving forward this post will be crucial in taking a more proactive, and therefore more productive stance to the high absence levels in the Council.
- 3.12. Lastly, the HR business partner team continue to provide a range of supports to all areas of the Council, including supporting managers with maximising attendance, capability processes, and a range of other HR services. In addition, the team delivers a range of training courses across all Council service areas so as to upskill managers in key Council HR policies and procedures.

Finance and Revenues

- 3.13. The annual budget process for 2024/25 commenced in May and work continued throughout the summer months to develop savings proposals. These proposals will be further developed and included within the proposals to support the Council in its decision making to agree a balanced budget. There was also continued oversight of the delivery of the ambitious 20-year Capital Programme, supporting Be the Future, contributing significantly to an investment-led recovery in Clackmannanshire. The audit of the 2022/23 accounts continued throughout the first half of the year with the Finance and Revenues Team providing supporting information to the external auditors to enable the final accounts to be approved by Council in the third quarter of the year.
- 3.14. Alongside the work to finalise the 2022/23 audited annual accounts, the Finance and Revenues team progressed work to complete the 2023/24 draft annual accounts to be submitted for audit in the second half of the year.
- 3.15. Annual billing for both Council Tax and Non-Domestic rates was completed in advance of the start of the 2024/25 financial year. Online forms for requesting exemptions and reliefs and notifying changes in circumstance were also developed and made available to rate payers to make it easier to apply. The customer portal for Council Tax was further enhanced to not only allow Council taxpayers to view their council tax bills online but also to notify changes and apply for discounts and exemptions. Following targeted campaigns, the number of users accessing the portal has doubled with an average of 113 changes per month being notified by this means reducing the time staff spend processing these changes as these are processed automatically.
- 3.16. 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

- 3.17. The service continued to improve operational service delivery across a range of areas whilst ensuring a focus on transformational activities. This included an ongoing focus on civil contingencies response and preparedness with developments in planning, exercising and debrief activity as well as supporting response and recovery during incidents. Unfortunately, during the reporting period, this included supporting response and recovery following the Kellieplace major incident. Work with community resilience groups has continued with arrangements well-embedded in a number of communities and preparatory work also continues ahead of the Protect Duty anticipated in 2025.
- 3.18. The communications and customer services team continue to support customers through the contact centre and at Kilncraigs reception. Over the reporting period over 37,000 calls were handled by customer service advisors; an average of 5344 calls per month. 86% of all calls made to the contact centre were answered. The provision of internal and external communications services continues to ensure that staff and customers are kept informed on services and Be the Future developments utilising the Councils range of channels and approaches. This has included, working with Organisational Development, use of video/vlogs to share key information.
- 3.19. Good progress has been made on Digital Transformation over the reporting period. Key achievements have included the implementation of a new telephony system , major security programme of work for the reaccreditation of Public Sector Network compliance including a windows upgrade and continued implementation of the technical design authority and Programme and Risk Management Office for IT and Digital. The majority of employees have also now been migrated to M365 Outlook/exchange with small pocket groups still to be migrated. This work has been supported by Digital Champions across all service areas.
- 3.20. The service continues to support the development of Council and partnership strategies, including consultation and engagement activity. During the reporting period 12 public consultations were carried out using our Citizen Space consultation software, including the community safety and anti-social behaviour strategy, the Local Development Plan 2 Evidence Report and the Councils Climate Change Strategy. The service also continues to provide support across the Council on business planning, risk planning and reporting and on continuous improvement activity. Over the reporting period P&P facilitated a corporate self-assessment process with the Improvement Service, in line with our Best Value duties. The Councils Annual Governance Assurance process was also led by the service during the reporting period.
- 3.21. The service continues to support the Clackmannanshire Community Planning Partnership, with significant focus in 2024 around the finalisation of the new Wellbeing Local Outcomes Improvement Plan 2024/34, following a lengthy period of consultation and engagement.

Legal & Governance

- 3.22. 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 and Transformation. The service continues to work towards a redesign to improve overall capacity and resilience.
- 3.23. Legal Service has successfully recruited key personnel to address increasing demand and complexity in legal matters.
- 3.24. The Licencing. Team continues to support Licencing Board responsibilities, with increased demand. After discussions with the Licensing Board the Team are investigating training requirements for elected members on the Board. There will also be a visit to observe Fife Council's Licensing Board, as part of this training and good practice to see another Licensing Board in action.
- 3.25. The Information Governance service is continuing to improve the service requirements in relation to data protection, records management and freedom of information. Review of RIPSAs policy and processes is ongoing and training to be rolled out to relevant officers.
- 3.26. The public archive service was fully restored in 2022, with continuing high demand. The Registrar continues to provide an important public service to citizens in the registration of births, marriages and deaths and goes over and above what is required.
- 3.27. The Scotland's People service is fully reopened and the team continued to provide a high quality Scottish Certificates service. As result of customer demand a further desk is being created within the Registrar's office at the Speirs Centre.
- 3.28. Internal Audit service continues to deliver the agreed audit plan in partnership with Falkirk Council.
- 3.29. Continual development for Elected Members is essential to ensuring their effectiveness in the variety of roles and responsibilities that are undertaken at the Council. The Senior Mager Legal and Governance and Senior Manager HR and Workforce Development are working with the Improvement Service to offer development opportunities for Members, which over the period has centered around the Political Skills Assessment tool. Whilst this is voluntary for members, the outputs of this work will assist with identifying skills requirements for members both now and in the future, and will give individual members who engage invaluable knowledge of the indicators of effective practice in their important role.

- 3.30. 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

- 3.31. 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.

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	<input checked="" type="checkbox"/>
Our families; children and young people will have the best possible start in life	<input checked="" type="checkbox"/>
Women and girls will be confident and aspirational, and achieve their full potential	<input checked="" type="checkbox"/>
Our communities will be resilient and empowered so that they can thrive and flourish	<input checked="" type="checkbox"/>

(2) **Council Policies**

Complies with relevant Council Policies	<input checked="" type="checkbox"/>
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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 – 2024/25 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/1/1247/7948.pdf>

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Chris Alliston	Strategic Director	2184

Approved by

NAME	DESIGNATION	SIGNATURE
Chris Alliston	Strategic Director	

Partnership & Performance

Business Plan 2024-25

(Half Year Update)

Key Organisational Performance Results

Code	KPI	2022-23	2023-24	2024-25	2024-25	Lead
		Value	Value	Target	Note	
ALL FRD L&D	Instances of Fraud detected	0	1	0	None reported	Senior Manager Legal & Governance
ALL ICO L&D	Number of organisational data breaches reportable to the Information Commissioner	3	2	0	There has only been 1 reported organisational breach to date	Senior Manager Legal & Governance
RAP CTA 002	Cost of collecting Council Tax (per dwelling)	£5.27	£5.52	£5.89	Calculated at the end of the year	Senior Manager Finance & Revenues
RAP CTA 01a	Council tax collected within year (excluding reliefs & rebates)	96.9%	95.8%	96.5%	Calculated at the end of the year	Senior Manager Finance & Revenues
ALL AB1 GOV	Average FTE days lost through sickness absence per employee (Teachers plus all other local government employees)	14.02	14.90	12.00	For the period (Apr – sept 2024) overall total days lost per employee (Council wide) sits at 7.26 days	Senior Manager HR & Workforce Development
RAG CRD 003	Invoice Payment Within 30 Days	88.6%	92.2%	93%	Calculated at the end of the year	Team Leader; Senior Manager Finance & Revenues
GOV EQO 02b	The percentage of the highest paid 5% of earners among council employees that are women	58.2%	70%	60%	Calculated at the end of the year	Senior Manager Partnership & Transformation
GOV EQO 03a	The gap between the average hourly rate of pay for male and female Council employees	1.0%	0.1%	-1%	Calculated at the end of the year	Senior Manager Partnership & Transformation

Partnership & Performance: Financial Results

Code	KPI	2022-23	2023-24	2024-25	2024-25	Lead
		Value	Value	Target	Note	
P&P SAV FRV	Percentage of Partnership & Performance budget savings achieved	100%	43%	100%	99.5% as at September	Strategic Director - Partnership & Performance
P&P VAR FRV	Outturn variance based on budget - Partnership & Performance	(£294k)	£409k	0	Q2 outturn showed (£173k) overspend	Strategic Director - Partnership & Performance

Partnership & Performance: Customer Results




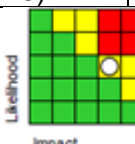













Code	KPI	2022-2023	2023-24	2024-25	2024-25	Lead
		Value	Value	Target	Note	
P&P C03 CUS	% formal complaints dealt with that were upheld/partially upheld - Partnership & Performance	54%	27%	0	17% The service responded to 6 stage 1 complaints in the reporting period, with 1 complaint upheld, 3 not upheld and 2 where the matter was resolved.	Strategic Director - Partnership & Performance
P&P C10 CUS	% formal complaints closed within timescale - Partnership & Performance	33%	63.6%	100%	83% The service responded to 6 stage 1 complaints, with 5 responded to within the 5 day timescale. No stage 2 complaints were handled by Partnership and Performance during the reporting period.	Strategic Director - Partnership & Performance
P&P CNQ BUS	% Councillor Enquiries responded to within timescale - Partnership & Performance	62%	77.3%	100%	50% 4 out the 8 enquiries responded to on time	Strategic Director - Partnership & Performance
P&P FOI GOV	% Freedom of Information requests responded to within timescale - Partnership & Performance	88%	73.5%	100%	74.4% as at 31/12/24	Senior Manager Legal & Governance



Code	KPI	2022-2023	2023-24	2024-25	2024-25	Lead
		Value	Value	Target	Note	
P&P MPQ BUS	% MP/MSP enquiries responded to within timescale - Partnership & Performance	50%	25%	100%	86% 6 out of the 7 enquiries responded to on time.	Strategic Director - Partnership & Performance
NEW	% calls answered by Contact Centre	79%	83%	100%	On average over the reporting period 86% of calls made to the contact centre were answered. This is an improvement on the previous reporting periods in 22/23 and 23/24.	Senior Manager Partnership & Transformation
NEW	Average waiting times for calls to be answered (in minutes)	1.59	1.19	00:58	The average waiting times for calls to be answered during the reporting period is 00:58 seconds; a decrease since the previous reporting periods in 22/23 and 23/24.	Senior Manager Partnership & Transformation





Partnership & Performance: People Results






Code	KPI	2022-2023	2023-24	2024-25	2024-25	Lead
		Value	Value	Target	Note	
P&P MDT HWD	Percentage of employees who have completed mandatory training by the due date	50%	52%	100%	100% All P&P staff members have now completed mandatory training, which is a significant breakthrough for the Directorate.	Strategic Director - Partnership & Performance
P&P S05 HWD	Staff Survey - Partnership & Performance staff - I am given the opportunity to make decisions relating to my role	No Survey Undertaken	67%	100%	2024 staff survey results have not been analysed at the time of report writing	Strategic Director - Partnership & Performance
P&P S12 HWD	Staff Survey - Partnership & Performance staff - I feel valued for the work I do	No Survey Undertaken	60%	100%	2024 staff survey results have not been analysed at the time of report writing	Strategic Director - Partnership & Performance
P&P S15 HWD	Staff Survey - Partnership & Performance staff - I feel a sense of achievement for the work I do	No Survey Undertaken	68%	100%	2024 staff survey results have not been analysed at the time of report writing	Strategic Director - Partnership & Performance
P&P S17 HWD	Staff Survey - Partnership & Performance staff - I feel that I am treated with dignity and respect within my team	No Survey Undertaken	72%	100%	2024 staff survey results have not been analysed at the time of report writing	Strategic Director - Partnership & Performance
P&P S21 HWD	Staff Survey - Partnership & Performance staff - I am clear about how I contribute to the organisation's goals	No Survey Undertaken	58%	100%	2024 staff survey results have not been analysed at the time of report writing	Strategic Director - Partnership & Performance
P&P AB1 GOV	Average FTE Days Sickness Absence (Partnership & Performance)	8.85	9.99	5.00	3.78 FTE Days	Strategic Director - Partnership & Performance





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			

Code	ACTION	By When	Expected Outcome	Latest Note	Lead
	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-2025		Work continues to be taken forward in preparation for the new Protect Duty (Martyn's Law). Plans are now in place relating to a National Power Outage as well as Fuel and Care for People Plans which have been developed at a regional level. Training continues to be delivered, alongside exercising of key plans. Multi-agency Safety Advisory Groups continue to support public events, and Community Resilience Groups continue to work well. Where required following incidents, formal debriefs continue to be held to ensure that lessons can be learned on response and recovery activities.	Strategic Director - Partnership & Performance
	Ensure robust plans and processes are in place for managing CONTEST risks and ensuring compliance with statutory duties, including preparations for the new Protect Duty	31-Mar 2025		Plans are in place to ensure compliance with the national CONTEST Strategy with oversight of this work provided through the Risk and Integrity Forum. 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.	Senior Manager Partnership & Transformation


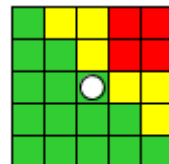
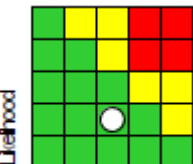
Code	ACTION	By When	Expected Outcome	Latest Note	Lead
P&P 20003	Continue to support consultation and engagement activities (budget and corporate strategies).	31-Mar-2025		Significant engagements undertaken and completed on LOIP and 2025/26 budget. Consultation has also taken place on a number of significant corporate strategies using the Councils Citizen Space platform which can be accessed here: Clackmannanshire Council - Citizen Space	Senior Manager Partnership & Transformation
	Ensure robust approaches are in place to comply with statutory duties on Mainstreaming Equalities.	31-Mar-2025		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. A refresh of the Mainstreaming Equalities and Diversity Outcomes will be completed in 2025 in line with statutory requirements.	Senior Manager Partnership & Transformation
	Continue to embed the Health & Safety Management System ensuring services are utilising full functionality in terms of risk assessments, incident reporting etc.	31-Mar-2025		Significant investment has been made by the H&S to increase reporting of incidents, and recording of risk assessments across the Organisation. Embedding the Evotix system has been successful, with further system developments due.	Senior Manager HR & Workforce Development
P&P 20013	Conclude the P&P Redesign, including implementation of immediate workforce plan priorities	31-Mar-2025		Revenues restructure has been completed and implemented through first half of the year. Finance structure to progress during second half of the year. Legal & Governance redesign is still in progress and moved forward during 2025	Senior Manager Finance & Revenues Senior Manager Legal & Governance


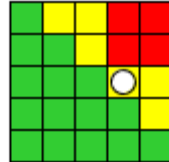
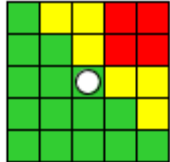
Code	ACTION	By When	Expected Outcome	Latest Note	Lead
	Approval of 2023/2024 Annual Accounts	January 2025		On track for draft annual accounts to be approved in January 2025.	Senior Manager Finance & Revenues
	Ensure completion of identified outstanding Internal Audit Actions as reported to Audit and Scrutiny Committee in June 2024.	31-Dec-2024		Regular reporting is now in place with update reports on both internal audit and external audit presented to Audit and Scrutiny Committee. Progress on Internal Audit Actions is a standard agenda item on SLG and ESLG agenda	Strategic Director - Partnership & Performance
	Enable an approved balanced budget 2025/26	31-Mar-2025		Work progressing through the Budget Working Group to identify savings and pressures as set up in the Budget Strategy report to Council in May 2024.	Senior Manager Finance & Revenues
P&P 20031	Consolidate corporate support Information management approaches and address any high-risk gaps	31-Mar-2025		This action will be progressed in 2025 in conjunction with Senior Manager of P & P.	Senior Manager Legal & Governance
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-2025		Work on this action will be progressed in 2025 however good progress has already been achieved. This includes a new self assessment approach agreed and progressed with support from the Improvement Service in 2024; deployment of the new Risk management Strategy approved by Council in 2024 and improvements made to the Annual Governance Statement process in 2024. Plans are well underway to consolidate and streamline planning, reporting and self assessment in line with Best Value.	Senior Manager Partnership and Transformation


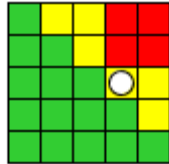
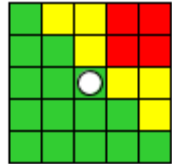
Code	ACTION	By When	Expected Outcome	Latest Note	Lead
	Achieve Armed Forces Silver Accreditation	31-Mar-2025		An application to achieve silver level Armed Forces accreditation will be submitted in 2025.	Senior Manager Partnership & Transformation
	Complete the refresh of the Local Outcomes Improvement Plan and associated Community Planning operating arrangements; Support the Community Planning Partnership to undertake development and continuous improvement activities in line with Best Value and other statutory duties.	31 Mar 2025		The refresh of the Wellbeing Local Outcomes Improvement Plan 2024-34 has been completed and approved by Alliance partners and Council. Work is underway with partners on a self-assessment process with the Improvement Service, and discussions and plans are ongoing on additional development work with partners. Progress on this work is anticipated in early 2025.	Senior Manager Partnership & Transformation
New	Deliver a focused SLF session regarding good corporate governance	31-Dec-2024		Delivered and presented to both the SLF and TLF.	Strategic Director – Partnership and Performance
New	Roll out training in Financial Governance and financial systems processes including promoting awareness of the management information produced by the finance system to assists decision making.	31-March-2025		Training to be delivered in the second half of the year.	Senior Manager Finance & Revenues


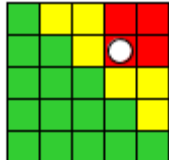
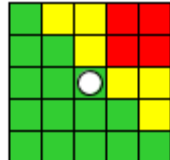
Code	ACTION	By When	Expected Outcome	Latest Note	Lead
New	Workforce Planning Sessions to be undertaken with all Directorates to inform the Strategic Workforce Plan 2025-2028 and creation of Directorate Workforce Plans.	31-Dec-2024		Sessions for directorates have not yet been undertaken, but are expected to complete in time for the development of the Strategic Workforce Plan 2025-28. As such, although this action will move into exception, we do expect it to complete by the conclusion of the Interim Workforce Strategy 2022-25.	Senior Manager – HR and Workforce Development
New	Training in combating fraud and corruption for relevant officers	31-March-2025		The Council will be working with its insurers Gallagher Bassett to develop a training course for managers	Senior Manager Legal & Governance
New	Enable delivery of the digital and data transformation activities including roll out of M365, PSN compliance, IoT, in line with the Be the future transformational change programme	1- March - 2025		Good progress is being made around digital and data transformation including the deployment of M365 (outlook/exchange) and security activities including submission of our Public Services Network application in late 2024.	Strategic Director – Partnership and Performance




Business Plan Appendix - Service Risk Register



ID & Title	P&P SRR 001	Catastrophic Business interruption	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.						<div></div> <div>Impact</div>		<div></div> <div>Impact</div>	
Related Actions	P&P 20 001 P&P 20 028 P&P 20 029	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 around Integrated Emergency Management and Business Continuity Management. ICT Infrastructure Plans PSN & Cyber Security compliance	Internal Controls	Business Continuity Plans						
Latest Note	Concurrent risks from supply chain and labour issues, the cost of living crisis, adverse weather, geopolitical events, cyber threats 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, response and recovery arrangements as well as testing and debrief activity continues. There is also significant effort being placed on upgrading systems and infrastructure to mitigate or minimise cyber threats.									

ID & Title	P&P SRR 003	Ineffective community engagement	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.						<div><div><div>Uplift</div><div>Impact</div></div></div> <div><div><div>Uplift</div><div>Impact</div></div></div>			
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						
	Complete Refresh our Wellbeing Local Outcomes Improvement Plan 2024/34 and associated operating arrangements.			Mainstreaming Equality & Diversity						
	P&P 20 003	Continue to support consultation and engagement activities (budget and corporate strategies).		Customer Charter						
	Ensure robust approaches are in place to comply with statutory duties on Mainstreaming Equalities.			Community Asset Transfer Guidance						
				Unacceptable Behaviour Policy						
Latest Note	P&P resources for this area of work are modest and delivery or implementation requires a multi-service, and partnership led approach. Implementation of agreed approaches, plans and policies with guidance and support is key to mitigating risks.									

ID & Title	P&P SRR 004	Poor Staff engagement	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 embed our values and achieve our vision. May also result in workforce gaps as a result of difficulties with recruitment and retention leading to difficulties in meeting statutory or regulatory requirements both now and possibly more acutely in the future.						<div><div>Likelihood</div><div></div><div>Impact</div></div>		<div><div>Likelihood</div><div></div><div>Impact</div></div>	
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	Work is planned as part of Be the Future programme through a refreshed workforce plan. Labour shortages continue to cause difficulties across the board, impacting on operations, staff and strategic priorities. Forecast suggest that labour shortages and supply chain issues may continue for the foreseeable future, with the potential to impact on the existing, ageing workforce. This will require an ongoing response of flexibility, adaptability and ingenuity.									

ID & Title	P&P SRR 006	Labour Shortages	Status		Managed By	Strategic Director - Partnership & Performance	Current Rating	16	Target Rating	9
Potential Effect	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.						<div> Likelihood Impact</div> <div> Likelihood Impact</div>			
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 PSN and 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								
	NEW	Finalise the Fraud Strategy and Fraud risk management arrangements and implementing a programme of training for Directors and managers.								
	NEW	Whistleblowing Policy								
Latest Note	Staff turnover and a stretched and ageing workforce has resulted in increased risks of failures of governance. Capacity remains variable across the directorate, and therefore this risk will require ongoing significant focus. We have developed a workforce plan to identify and address a number of key areas of concern.									

ID & Title	P&P SRR 007	Financial Resilience		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 emerging environmental factors including the cost of living crisis, high inflation, financial constraint and climate change. .										
Related Actions	P&P 20 023	Lead on the approach to deliver an approved balanced budget 2025/20206	Internal Controls	Budget Strategy & Monitoring							
	P&P 21 015	Contract Standing Orders Review		Corporate Transformation Programme							
	Achieve savings for 2024/2025			Procurement Strategy							
Latest Note	Ongoing geopolitical events in Eastern Europe and the Middle East, previous high inflation, reduction in Government funding, increased Government priorities and cost of living crisis continue to impact 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	Failure to deliver Digital Transformation	Status		Managed By	Strategic Director - Partnership & Performance	Current Rating	16	Target Rating	9
Potential Effect	The aftermath of the pandemic and 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.						<div></div>			
Related Actions	P&P 20 029	Implement PSN and Scottish Cyber Security Resilience Framework and identify associated improvement plan.	Internal Controls							
	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 continues to make significant investment in digital infrastructure, including in M365 digital and decommissioning or aged systems. This work will need to continue at pace over the next 3 to 5 years to meet citizen demand and to sufficiently realise benefits. Given the general increased risk profile across the board, including the impacts and consequences of geopolitical developments, this will remain an important area of ongoing focus.									

Report to: Audit & Scrutiny Committee

Date of Meeting: 6 February 2025

Subject: Interim Report - People Community Wellbeing Plan 2024-25

Report by: Strategic Director, People

1.0 Purpose

The purpose of this report is to update Audit and Scrutiny Committee on progress with the People Community Wellbeing Plan for 2024-25, which was approved by Clackmannanshire Council on 29 August 2024. This approach is designed to streamline reporting by presenting a single, unified report that reflects the integrated nature of these services and the collaborative work of the respective partnerships.

It was agreed and recommended by Council to write to Scottish Government to propose that this approach is adopted. Since then the relevant Directors at Scottish Government have given their approval and agree that this approach could contribute to Public Sector Reform by identifying cross directorate solutions, pooling of resources and improved allocation of funding, alongside better data and evidence gathering.

2.0 Recommendations

- 2.1. It is recommended that Council:
- 2.2. Approves the report noted at Appendix 1.

3.0 Background

- 3.1. To reflect a One Plan, One Report approach, this year the various different People Plans have been streamlined into one **Community Wellbeing Plan**. This was approved by Clackmannanshire Council on 29 August 2024. Further integration of Council Plans into this approach are under consideration, e.g. Employability, Homelessness.
- 3.2. The combined Plan is focused on the following outcomes:
- 3.3. **Outcome 1** – Our children and young people (including women and girls) have improved life outcomes by growing up loved, safe and respected
- 3.4. **Outcome 2** – Our empowered communities are well designed, inclusive, sustainable, resilient and safe
- 3.5. **Outcome 3** – People of all ages are able to successfully contribute to our communities as they are education, skilled and confident individuals

- 3.6. **Outcome 4** – Poverty in our communities is reduced by improving outcomes for all
- 3.7. **Outcome 5** – Our people are healthy and active with improved health and wellbeing
- 3.8. **Outcome 6** – Our Equality and Human Rights are respected and fulfilled by tackling inequalities across our communities.
- 3.9. The One Plan incorporates various Plans and includes the People Business Plan 2024-25. More detailed operational plans sit behind the One Page Plans.
- 4.0 Summary of Impact - The One Plan report at Appendix 1 reflects progress in many areas. Key highlights are noted below:**
 - 4.1. The emphasis on prevention, early intervention and collaborative working across sectors has created a strong foundation for improving life outcomes. The work underway in gender equality education, inclusion and disability services, family support and care-experienced children's services illustrates a comprehensive approach to supporting young people's safety, well-being and future success.
 - 4.2. Overall progress demonstrates a holistic, inclusive approach to empowering communities. Continued focus on implementation timelines, expanding partnerships and integrating lived experiences are critical to maintaining momentum and ensuring strategic goals are fully achieved.
 - 4.3. Significant progress has been made in educational attainment, workforce development and the creation of learning opportunities outside the classroom. Initiatives such as trauma-informed training, leadership development and targeted support for vulnerable children and young people show a clear commitment to building skills for learning, life and work.
 - 4.4. The combined efforts to enhance childcare provision, provide income maximisation support and reduce living costs demonstrate meaningful progress towards the strategic outcome of reducing poverty and improving wellbeing.
 - 4.5. There is significant progress in supporting improved physical and mental health and wellbeing in Clackmannanshire, with a wide range of services, programmes and initiatives in place to deliver positive outcomes. These interventions and the Family Wellbeing Partnership approach are having a significant impact on young people and families in Clackmannanshire, particularly those facing inequalities.
 - 4.6. There is notable progress in promoting human rights and tackling inequalities, particularly through the emphasis on youth voice. The approach taken has been multifaceted, involving children and young people in decision-making, embedding the principles of the UNCRC and providing support for vulnerable groups, including care-experienced children and those with additional support needs.
 - 5.0 Whilst there has been significant progress, as evidenced in the report at Appendix 1 and summarised above, there are challenges which reflect recurring themes across the Directorate, which align with the four strategic priorities (Health and Wellbeing, Empowering Families and Communities, People Workforce and Sustainable, Inclusive Growth) and which have informed the next steps below:

- 5.1. **Sustainability and Scalability**
 - Ensure long-term funding and leadership to embed, maintain and scale existing programmes and initiatives.
 - Continue to build partnerships and identify new funding streams to secure the future of critical projects
- 5.2. **Comprehensive Evaluation and Impact Measurement**
 - Implement systematic and structured evaluation mechanisms to assess the effectiveness and long-term impact of programmes.
 - Use evaluation data to refine strategies, demonstrate outcomes, and secure ongoing support and funding.
- 5.3. **Professional Development and Addressing Emerging Needs**
 - Enhance professional learning in areas such as neurodevelopmental support to meet emerging needs.
 - Continue to develop and adapt professional learning for staff to address specific skill gaps and improve service delivery.
- 5.4. **Leadership and Collaboration**
 - Maximise leadership capacity and resource through continued collaborative focus on strategic priorities.
 - Continue to foster collaboration with stakeholders to enhance programme delivery and sustainability.
- 5.5. **Consistency and Integration**
 - Embedding and maintaining successful practices, such as trauma-informed approaches, into all areas of service delivery.
 - Promote consistency in applying UNCRC legislation.
- 5.6. **Proactive Planning for Emergent Issues**
 - Continued environmental scanning and analysis of threats and risks in order to anticipate future challenges and adapt strategies to address emerging needs.

6.0 Sustainability Implications

- 6.1. Sustainability is integrated into all People Directorate planning

7.0 Resource Implications

- 7.1. None

8.0 Exempt Reports

- 8.1. Is this report exempt? **No**

9.0 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 ☒) all

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)

Complies with relevant Council policies.

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

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 Appendix 1 Community Wellbeing Plan Report 2024-2025 (People Directorate-including Pentana extract)

12.2 Appendix 2 - Case Studies - Planet Youth

12.3 Appendix 3 - Case Studies - What Matters To You / Family Wellbeing Partnership

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)

No

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Catrion Scott	Senior Manager	2469

Approved by

NAME	DESIGNATION	SIGNATURE
Lorraine Sanda	Strategic Director (People)	



Community Wellbeing Plan (People Directorate) 2024/25

Interim Report (June 2024 - December 2024)

One Plan, One Report



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Introduction

This **Community Wellbeing Interim Report 2024/25** notes the combined efforts and considerable progress of the **People Directorate** towards meeting the six strategic outcomes below, and how this work is supporting the four strategic priorities. Key actions were set out in the **People Community Wellbeing Plan 2024/25** and agreed at Council in August 2024.

People Directorate: Strategic Priorities and Strategic Outcomes 2024/25



The unified approach to planning and reporting (one plan, one report) was agreed at Council in August 2024 and has led to a reduction in the number of outcomes from 113 to 6.

This interim progress report demonstrates that the approach taken and the **determined focus on agreed strategic outcomes across these plans** is yielding accelerated progress towards the outcomes set.

It is anticipated that the analysis of year end quantitative and qualitative data will further support this assertion. Further progress against the key performance indicators will be reflected in the final annual report for 2024/25, when most national data will be published. The final annual combined report for 2024/25 will be submitted to Audit and Scrutiny in Autumn 2025.

The **Community Wellbeing Plan (One Plan) 2024/25** combines the following plans/frameworks:

Children Service's Plan 2024-2027	Community Learning and Development Plan 2024-2027	Community Justice Plan 2023-2028
Family Wellbeing Partnership Plan 2024-2026	Libraries Plan 2024-2027	Local Child Poverty Action Plan 2024-2030
National Improvement Framework 2024-2027	The Promise Plan 2023-2026	Sport and Active Living Framework 2024-2028
Violence Against Women and Girls Plan 2023-2026	Wellbeing Local Outcomes Improvement Plan 2024-2034	

The **Community Wellbeing Interim Report 2024/25** is a high-level summary of combined progress across all plans against each of the six strategic outcomes and four strategic priorities. An update on the Key Performance Indicators and the *Pentana* extract is also included.

Interim Highlights 24/25

National and international interest in the pioneering work of the Family Wellbeing Partnership and the People Directorate has been noted. This is demonstrated by scrutiny bodies and external organisations. See for example:

- COSLA Excellence Award Solace Best Team Award, Clackmannanshire Council, Early Help Team [Nine Council Teams Named Winners in COSLA Excellence Awards | COSLA](#) - September 2024
- Care Inspectorate Report: Family Connections Team (Adult Placement Continuing Care) Adult Placement Service Inspection Report, [InspectionReport-321164.pdf](#) - October 2024
- Alva ELC Inspection

- Revised management structures in primary and secondary establishments are in place for August 2025.
- Online school enrolment of pupils moving into P1 for the 2025/26 session has commenced.
- Centre for Public Impact: [Clackmannanshire-Strategic-Transformation-Story-Public-version-Nov-2024-1.pdf](#) - November 2024
- Improvement in pupil attainment

Clackmannanshire primary schools have seen record levels of children meeting expected standards in literacy and numeracy; 77.3% of primary school pupils achieved expected levels in numeracy and 74% in literacy: (published data for session 23/24). Secondary school performance has also improved. The latest SQA results report an increase in the number of pupils achieving National 5 and Higher qualifications. Additionally, for numeracy, S3 pupils achieved 94.0%, which is above the national average of 90.3%. For literacy, our S3 pupils reached a new high of 91.1%, above the national average of 88.3%. Furthermore, the poverty related attainment gap between pupils from different socio-economic backgrounds continues to narrow, reflecting the impact of work related to the Scottish Attainment Challenge, which aims to ensure every child has the same opportunity to succeed. In addition, Clackmannanshire has outperformed the national average in terms of overall attendance levels.

- Justice Services multi-disciplinary hub

Continued development with co-location of a range of support services.

- Pearson National Teaching Awards: Impact through Partnership, Alloa Community Around the School - Clackmannanshire Family Wellbeing Partnership, Silver Winners, 2024 <https://www.teachingawards.com/award-winner/alloa-community-around-the-school-clackmannashire-family-wellbeing-partnership/> - December 2024
- The Promise

A key focus has been the creation of bespoke programmes for Care Experienced Young People. The Virtual Headteacher has worked alongside partners to offer Group work opportunities including Outdoor Learning, Qualifications Groups, Leadership Groups and Looking Outwards (widening horizons) Groups to supported re-engagement. This has resulted in 10% improvement in attendance of an identified cohort of young people in S4. Clackmannanshire was a very early adopter of the 'Keeping The Promise Award'(KTPA). All establishments are now reviewing language and quality assurance procedures and have embarked on achieving the KTPA, by committing to this self-evaluation and accreditation programme and undertaking training sessions, in collaboration with Education Scotland. This achievement was celebrated during Care Experienced Week October 2024, with a visit from the First Minister, who met a group of care experienced children and young people and carers in Clackmannanshire to hear from them directly, and

acknowledged our commitment that has seen more than 2000 young people and 600 staff receive KTPA training so they better understand the Promise.

- 16 Days of Activism against gender based violence- strong community focus and engagement. Evaluation report is underway.

- **Wellbeing Hub and Lochies School**

Development remains on track for handover in Spring/Summer 2027. The project is nearing the end of the Hub Stage 2 process (RIBA Stage 4). The Hub Stage 2 Report should be submitted in Quarter 1 of 2025. The Wellbeing Hub and new Lochies School development remains on track for handover in Spring/Summer 2027. The design phase has moved into the final stage with final design refinements and decisions expected to be completed by March 2025 to allow design freeze for final costing. The project is still forecasted to remain within the affordability cap. The construction programme is being revised and finalised following completion of the marketing testing phase by the appointed contractor. The Full Business Case is targeted to be brought forward to Council alongside the final cost plan in May/June 2025.

- **ACEL Data**

Latest ACEL data indicates that Clackmannanshire is reporting the second largest improvement in Literacy across our Primary School Establishments since 2016/17, compared to all other Scottish local authorities. This improvement can be largely attributed to the increase in Writing where the difference in achievement rates over the same time period is four times more than the Scottish average. Latest ACEL data indicates Clackmannanshire is reporting the third largest improvement in Numeracy in our Primary School Establishments since 2016/17, compared to all other Scottish local authorities. Clackmannanshire is reporting the greatest improvement in narrowing the poverty related attainment gap in Numeracy over the same time period, compared to all other Scottish local authorities.

Summary of Progress towards Achieving Outcomes

Strategic Outcome: Children and young people have improved life outcomes by growing up loved, safe and respected

Significant progress has been made towards the strategic outcome of improving life outcomes for children and young people by ensuring they grow up loved, safe, and respected with multiple initiatives and interventions aimed at safeguarding, empowerment, and enhancing wellbeing. Progress updates across several strategic actions identify the following key developments:

Ensuring Women and Girls Feel Safe

- **Education and Awareness:** Efforts to address gender-based violence (GBV) and promote gender equality have been integrated into education from an early age. Schools have been involved in raising awareness through activities such as workshops, mentorship programmes, and campaigns such as 16 Days of Activism against GBV. The launch of the White Ribbon Status campaign and collaboration with community partners e.g. Women's Aid and Police Scotland signal a strong community commitment to tackling gender-based violence as a community.
- **Youth Engagement:** The Youth Forum and youth-led workshops have actively involved young people in discussions about GBV, ensuring their perspectives shape future actions. The collaboration with SportScotland's Fit for Girls programme also targets increasing girls' participation in sport, helping build confidence and resilience. Planet Youth work is ensuring an early intervention and preventative approach to support GBV and improve outcomes for all. 21 young people were actively involved in the 16 Days of Activism launch event, with another 80 young people participating in school events. 130 young people have also participated in awareness raising activities around mental health and substance misuse.
- **Partnerships and Support Services:** The presence of a full-time Violence against Women and Girls (VAWG) Coordinator and increased collaborative efforts across various partnerships (education, housing, health, and justice) as well as collaboration on 16 Days of Activism, which demonstrates a comprehensive approach to tackling gender-based violence.
- **Early Intervention:** Our Safeguarding Through Rapid Intervention (**STRIVE**) team are a multi-agency team dedicated to early intervention and prevention. From October to December 2024, STRIVE worked supported 23 adults. In the last six months, the STRIVE team has reformed their processes to deliver more non-court mandated support to families. This support is offered to families and couples who have been highlighted to services before there is criminal involvement. Recently, the significant impact of these reforms has been evident as women build more trust in the support and can ask for this support before crisis point. Through this process, support has been offered through the Caledonian Programme to individuals concerned about their own behaviour or their partners, and convictions in court have also been made through this early intervention model. This means **more women are accessing support in the right place at the right time, before crisis point.**

Review Provision for Children with Disabilities

- **Improved Inclusive Services and Activities:** Children with Disability Social Work provision has been reviewed internally, in line with the findings of the Care Inspectorate thematic review. The review has included new approaches to budget allocation and a Forth Valley template for assessment of need. The Child Wellbeing Partnership's continued collaboration with PAMIS (Promoting a More Inclusive Society) and Play Alloa has resulted in the expansion of childcare and childcare activities for children with a range of additional support needs. The Child Wellbeing Partnership's funding for after school and social activities, in partnership with Play Alloa and PAMIS, is creating a more inclusive environment for children with disabilities. Additionally, the participatory budgeting exercise at Alva Primary School and other schools is enabling families to have a direct role in identifying and organising wellbeing activities. Additionally, to provide a targeted, demand led activities programme for children with a disability, consultation was undertaken with parents, carers, and children with lived experience. This has led to the reintroduction and expansion of water confidence sessions, bi-ski lessons, dance, and additional extra-curricular activities. The draft Transition Policy agreed at Council in January 2023 to support young people moving from Education and Children's Services to Adult Services has improved transition process and outcomes.
- Furthermore, the planning and development of accessible facilities, such as the Wellbeing Hub and the new Lochies School will ensure children with disabilities can access high-quality facilities in the future.

Ensure Place-Based Whole Family Support

- **Family Support Hubs:** The Family Support Collaborative has been delivering family support hubs across Clackmannanshire since October 2024. Currently the hubs are being delivered in Alloa, Tullibody and Clackmannan. The intention is to extend this provision gradually over the remainder of the year. The establishment of these hubs across key locations in Clackmannanshire is a major step toward providing place-based, accessible support for families. These hubs offer a range of services designed to help families with practical and emotional needs.
- **Parent and Toddler Groups:** The Child Wellbeing Partnership expansion of parent and toddler groups, with the involvement of Educational Psychology, Speech and Language Therapy, HomeStart and Action for Children, is ensuring an enhanced and holistic approach to family support. These groups not only support child development but also offer families tools and resources to improve their parenting and wellbeing. Close links with the NHS Family Nurse Partnership and FWP Young Parenting Project continue.
- **Young Parenting Project:** The project is currently supporting 19 young women. Support is being given covering many practical and financial aspects for example; housing applications including Homeless applications, repairs, registering births, bank account applications, National Insurance Identity applications, Council Tax Reduction applications, Utilities, financial statements,

photographic identity applications, college applications and a variety of benefit and funding applications. These have included: Universal Credit (various elements), Best Start Grants/Foods, Scottish Child Payment, Scottish Welfare Fund and Child Benefit. The total financial gain for young families from September 2023 to September 2024 is c£38,900.

- **Child Wellbeing Partnership** are currently supporting 115 pre-5 children, 51 babies in baby and toddler groups and 239 children with primary school-aged childcare.

Ensure a Portfolio of Accommodation and Supports for Care Experienced Children

- **Improved Care Provisions:** Progress toward providing increased local care options is evident, with plans in place to expand foster care services and accommodation for care leavers. The establishment of a new children's house and accommodation with support for care leavers is a significant step forward in supporting young people as they transition out of care.
- **Education Support:** There is a clear focus on improving educational outcomes for care-experienced children. Enhanced attendance tracking, bespoke curricula, and additional support measures such as input from the Virtual Headteacher and flexible learning options are contributing to improved engagement and outcomes. The increased engagement and attendance in schools, as well as rising levels of literacy and numeracy, indicate positive trends for care-experienced children in Clackmannanshire.

Summary

In summary, significant progress has been made across multiple areas toward achieving the **strategic outcome that children and young people grow up loved, safe, and respected**. The emphasis on prevention, early intervention, and collaborative working across sectors has created a strong foundation for improving life outcomes. The work being done in gender equality education, inclusion and disability services, family support, and care-experienced children's services illustrates a comprehensive approach to supporting young people's safety, well-being, and future success. One of the People Directorate principles has been to bring about the changes demanded by the Independent Care Review that we keep 'The Promise' that children and young people who are care experienced are supported to improve their life experiences and life chances and that they grow up, loved, safe and respected. We have made significant progress with the actions outlined in our Clackmannanshire Promise Plan, which has had resultant positive impact on tracking and monitoring of attendance, attainment and health and wellbeing of children and young people.

Strategic Outcome: Empowered communities are well designed, inclusive, sustainable, resilient and safe

Significant progress has been made towards achieving the strategic outcome: Empowered communities that are well-designed, inclusive, sustainable, resilient, and safe. Key progress is noted below:

Delivering the Transformation Funding Vehicle for Family Wellbeing Partnership (FWP)

- Considerable scoping has been completed and an interim project manager has been recruited. Financial, legal and assurance frameworks are

being explored. The target to establish the Transformation Vehicle is scheduled for April 2025.

Improving Data Usage for Driving Improvement

- Data systems for tracking attainment, attendance, and developmental milestones are being actively used.
- Collaborative efforts such as the National Improving Writing programme and Strategic Needs Assessments highlighting significant partnership working.
- An increase in the range of vocational programmes offered for young people, indicate improvement towards positive, sustained destinations; particularly for care experienced young people.
- Data sharing and analysis are increasingly embedded in decision-making, though some initiatives (e.g., Children's Strategic Needs Assessment) remain in early stages.

Increasing Collaboration with Partners and Communities

- Active partnerships with various organisations, parents, and carers reflect strong collaborative progress.
- Programmes such as What Matters To You (WM2U), Sauchie Community Collaborative, **Family Voices** participation, and FWP Community around the School emphasise community engagement and build on the earlier work of the FWP and Lens Intrapreneurship Programmes.
- Projects (e.g., parenting groups for children with additional support needs) and leadership academies demonstrate innovative, inclusive approaches.

Development of Anti-Social Behaviour Strategy

- The **revised Antisocial Behaviour Strategy** (ASB) 2024-2027 for Clackmannanshire is underpinned by the principles of the Family Wellbeing Partnership and the Scottish Approach to Service Design and was developed jointly between Clackmannanshire Council and Police Scotland over the course of 2023-2024.
- A comprehensive audit informed the ASB Strategy, with strong community and partner involvement.
- The ASB Strategy was approved by Clackmannanshire Council on 3rd October 2024. At Clackmannanshire Alliance on 13 December 2024, Governance structures were discussed and joint community safety efforts are underway.

Developing a Voice Strategy for Empowering Families and Communities

- What Matters To You are supporting the development of a Voice Strategy.
- Multiple voice groups including those with **lived experiences** in the development of policies, frameworks and project planning demonstrate a strong commitment to family and community empowerment.
- Non-judgmental care planning and the language of care highlight systemic change.

Improving Community Justice Outcomes

- Significant increase in bail supervision cases and early intervention work signals robust efforts to enhance community justice outcomes.
- Co-location and multi-disciplinary hubs showcase effective resource utilisation.

Summary

The progress demonstrates a holistic, inclusive approach to empowering communities. Continued focus on partnership, community based systems change and amplifying the voice of those with lived experience, will ensure continued momentum.

Strategic Outcome: People of all ages successfully contribute to our communities by developing skills for learning, life, and work

Progress towards Strategic Outcome "People of all ages successfully contribute to our communities by developing skills for learning, life, and work" has been substantial in many areas but there remain challenges that need continued focus.

Learning Estate Strategy

- In partnership with Place Directorate the Learning Estate Strategy is progressing, with a revised strategy planned for presentation in 2025. There continues to be active, ongoing effort towards improving the infrastructure and supporting learning environments. Although not yet finalised or implemented, the strategy is moving forward: Replacement for Lochies School; Progress is being made with regular updates on the progress towards the new Lochies School. Craighbank Primary Development; Negotiations with developers for contributions towards the educational needs arising from housing in the Craighbank Primary catchment area are nearing completion. Once agreed, educational resources will be better aligned with population growth in the area, which is crucial for supporting communities and learners.

Workforce Development

- Extensive **staff development** programmes in areas such as trauma-informed care, specialised skills training (e.g., sports coaching), and family support services demonstrate commitment to workforce development. A suite of workforce development opportunities and modules aim to ensure that staff are equipped with the necessary skills to support diverse learners and prioritise wellbeing.
- **Professional Learning and Upskilling:** Notable progress has been made in professional learning for staff, including trauma-informed training and leadership development through programmes, such as Columba 1400's Values-Based Leadership (VBL). These initiatives are designed to enhance the capacity of staff to support children and young people's learning, wellbeing, and

social development.

- **Collaboration and Networking:** Active partnerships with colleges, third-sector organisations, and local community services, as well as initiatives such as the Routes to Volunteering programme, are contributing to the development of work-related skills and community engagement. These collaborations offer pathways into work for a wide range of individuals, further contributing to skills development across the community.

Improve Attainment

- **Curriculum for Excellence and Educational Outcomes:** Improvements in literacy and numeracy, particularly in writing at First Level, show that educational outcomes are on track, with national averages being exceeded. The narrowing of the attainment gap in numeracy at senior phase further highlights positive strides in academic achievement.
- **Attendance Rates:** Higher than average attendance rates for children and young people point to strong engagement in learning; indicating positive learning environments in schools, fostering better outcomes for learners.
- **Active Schools Programme:** The continuation of an extensive extracurricular sports and physical activity programme demonstrates the importance of developing life skills beyond the classroom.
- **Support for Young People (16-19):** Programmes aimed at supporting school leavers, particularly those with additional support needs (ASN), indicate a commitment to closing the attainment gap. These programmes help young people transition successfully into work or further education and include eight cohorts of Leadership Academies and a total of 70 young people graduating with Employability Awards, First Aid and Mental Health Training. Additionally, cohorts of young people have banked 50 National 3 and 4 units and 20 National 4 full course Awards through the Qualifications Group and CALA (Clackmannanshire Active Learning Academy).

Next Steps

- **Sustainability and Scalability:** Some of the new programmes are dependent on external funding. A portion of the Shared Prosperity Fund is supporting the delivery of the SVQ Centre at Bowmar Community Centre until March 2025. This will require ongoing funding, leadership, and active partnership involvement to sustain and scale and plans are in place to work with the Employability Team moving forward. While initial efforts are positive, careful monitoring and long-term support are necessary to ensure these initiatives continue to thrive.
- **Evaluation and Impact Measurement:** While there has been extensive training and staff development, the overall impact of these initiatives on service delivery, staff performance, and outcomes for children and families need to be more systematically measured. Further emphasis on structured evaluation will help ensure these programmes have lasting effects.
- **Trauma-Informed Practice:** Although progress is being made in implementing trauma-informed, relationship-based practices, full

integration across services has not yet been achieved. Ensuring consistent application of this model across all levels of service will be vital for its long-term success.

- **Expansion of Professional Learning for Emerging Issues:** While there has been significant staff development, gaps remain in addressing emerging issues such as supporting learners with neurodevelopmental profiles and the use of substance use frameworks. Ongoing professional development, such as the planned twilight sessions, will help address these gaps.
- **Permanence Planning:** The need for improvement in permanence planning for children in care has been identified. Enhancing the analysis of this area and ensuring that practice improvements translate into better outcomes for children will be a key next step.

Summary

Significant progress has been made towards this outcome, particularly in areas such as educational attainment, workforce development, and the creation of learning opportunities beyond the classroom. Trauma-informed staff and community development training, leadership development, and targeted support for vulnerable children and young people demonstrates a clear commitment to building skills for learning, life, and work. However, challenges remain, particularly in ensuring the sustainability of new programmes, evaluating their long-term impact, and addressing emerging training needs. Additionally, more comprehensive strategies for tracking permanence planning and embedding trauma-informed practices across services will be essential for achieving sustained, positive outcomes. Overall, this interim update demonstrates that the People Directorate is on a positive trajectory. Continued efforts are necessary to ensure that progress is both embedded and sustained.

Strategic Outcome: Poverty in our communities is reduced by improving outcomes for all

Considerable progress has been made towards achieving the strategic outcome of reducing poverty in communities by improving outcomes for all, with a focus on alleviating poverty through enhanced childcare systems and income maximisation initiatives. Progress is noted below:

Childcare Offer and Support for Families:

- The Child Wellbeing Partnership School Age Childcare has been expanded to all ages. **School-age childcare is now available across multiple communities** in Clackmannanshire, including Alloa South and East, Tillicoultry, and Sauchie. This expansion has been supported by partnerships with local third-sector organisations, private providers, and sports and leisure team.
- The availability of **pre-five childcare** has been enhanced, with 74 children currently supported in early learning and childcare (ELC) settings, and additional support for families needing extended hours for work, training, or self-care. The total reach for pre-five childcare across local authority and private settings is significant.
- New **baby and toddler groups**, such as 'Wee Play Alloa' and 'Play Roots', are providing tailored support to families, particularly

those with additional support needs. These groups support family wellbeing and enhance access to social and developmental resources.

- These initiatives collectively help to **reduce the cost of living** for families by offering accessible childcare, enabling parents to participate in work or training, thereby potentially increasing household income.

Income Maximisation and Cost of Living Support:

- The **Family Wellbeing Partnership** has trialled One Stop Support Shop sessions, providing energy vouchers and benefits advice to community members. These sessions were successful in Alloa Academy, helping 30 people with energy vouchers and benefit entitlement support, and are set to expand in 2025.
- The **Housing Service** has redesigned its approach to include money advice services, which directly support residents with income maximisation and debt management, ensuring better financial stability for households.
- The ongoing **rent review process** and affordability exercises are addressing the potential burden of housing costs on low-income households, which is a crucial step in ensuring that the rent-to-income ratio does not exceed a sustainable level.
- The **Child Wellbeing Partnership** also assists parents by offering referrals to Department of Work and Pensions (DWP) for childcare benefits, ensuring they receive financial support to ease childcare costs.
- Events such as the **Take What You Need** initiatives have provided food, winter clothes, and energy advice, directly addressing the immediate needs of families living in poverty.
- Additionally, efforts to expand the availability and range of **free period products** further contribute to cost-saving measures for families, ensuring dignity and choice for those who need them.

Summary

The combined efforts to enhance childcare provisions, provide income maximisation support, and reduce living costs demonstrate meaningful progress towards the strategic outcome of reducing poverty and improving wellbeing. The focus on **access to work, training, and study** through improved childcare and **income support services** suggests that households are receiving the necessary support to help alleviate financial pressures. Continued expansion and enhancement of these initiatives, including trials in community hubs and further strengthening our partnerships, are likely to continue improving outcomes for families in need.

Strategic Outcome: People are healthy and active with improved health and wellbeing

Considerable progress has been made towards achieving the strategic outcome of people being healthier and more active with improved health and wellbeing, with several key initiatives contributing to the improved mental and physical health and wellbeing of children, young people, and adults. The **Wellbeing Hub**, which remains on track, will contribute significantly to community health and wellbeing.

Ensuring effective Mental Wellbeing Services

Mental Health and Wellbeing

- **Comprehensive Mental Health and Wellbeing Services:** There has been a marked increase in the range and availability of mental health and wellbeing services. Programmes like Mind Moose, Kooth, Qwell, and Text Clacks are providing digital mental health support across various age groups. The expansion of the Qwell service to include all adults in Clackmannanshire demonstrates a broadening of the mental health and wellbeing supports available.
- **Crisis Management:** The Text Clacks service has proven effective in managing immediate mental health crises, especially among those at risk of suicide, with no users of the service requiring emergency services due to effective risk assessments and de-escalation approaches.
- **Therapeutic Support for Children and Families:** The Counselling in Schools Service and the Creative Therapeutic Interventions for Children Service have offered developmentally appropriate therapeutic experiences. Positive feedback from students, parents, and teachers (with improvements reported in 83% of cases) indicates the effectiveness of these services in enhancing mental wellbeing.
- **Parent and Family Support:** In-person support services, such as Barnardo's In Mind and the co-produced parent support service through the Educational Psychology Service, show progress in offering valuable resources for families to manage mental health challenges.
- **Workshops and Courses:** The success of the THRIVE to Keep Well Programme and the pre-THRIVE pilot course, with 83% of participants reporting improvements in mental wellbeing and 89% noting an increase in parenting capacity, further demonstrates progress toward better mental health outcomes. A further refined Pre-THRIVE, THRIVE and Post-THRIVE offer and enhanced connectivity to other supports and services will support the continued positive journeys of participants.

Physical Health and Wellbeing

- **Sport and Active Living:** The refreshed Sport and Active Living Framework, the ongoing commitment to delivering a new Wellbeing Hub and Lochies School, and the extensive school and community activities offered by the Sport and Leisure team demonstrate how highly sport and physical activity is prioritised in Clackmannanshire.
- **Community Involvement:** The collaboration with local sports clubs and community groups to deliver physical activity sessions and competitions further supports the strategic outcome of increasing physical activity across Clackmannanshire. The School Sport Committees guide what activities are offered through pupil led approaches.

Community and Family Wellbeing

- **Collaborative Community Approach:** The Family Wellbeing Partnership continues to provide a range of initiatives aimed at supporting families with their wellbeing. The extension of the Community around the School approach to all three secondary

schools, alongside the Planet Youth work and campaigns like “Did you know...?” is a key part of this broader strategy to help build resilience and promote healthier lifestyles among children and families.

- **Sexual Health:** The increased delivery of courses, education programmes and awareness raising around sexual health are supporting the overall health and wellbeing of young people and families.
- **Healthy Eating:** The continued delivery of healthy eating initiatives with a focus on family meals are contributing to the overall health and wellbeing for young people and families.
- **Future Developments:** The ongoing progress of the **Wellbeing Hub** and new **Lochies School** development will further enhance the community health and wellbeing infrastructure once completed and open to the public in 2027.

Summary

Considerable progress has been made in supporting improved physical and mental health and wellbeing in Clackmannanshire, with a wide range of services, programmes, and initiatives now in place and delivering positive outcomes. The strategic outcome of improving health and wellbeing, particularly mental health, has been progressed through a combination of digital services, therapeutic interventions, and community involvement. The positive feedback from children, families, and participants in our various programmes, illustrates the positive impact these interventions and the Family Wellbeing Partnership approach is having on our young people and families in Clackmannanshire, particularly those facing inequalities.

Strategic Outcome: Human rights are respected and fulfilled by tackling inequalities across our communities

Significant progress has been made towards ensuring human rights are respected and inequalities are tackled across communities. The approach taken has been multifaceted, involving children and young people in decision-making, embedding the principles of the UNCRC and targeting specific inequalities. Key areas of progress include:

Youth Participation and Empowerment

- The framework for involving children and young people in decision-making aligns with the United Nations Convention on the Rights of the Child (UNCRC), empowering them to participate in shaping local priorities. Youth Voice is deeply embedded in our practices, with children consulted on policy, budgeting decisions and new projects. An established framework regularly provides opportunities for children and young people to be involved and influence decision making within the Authority. Our framework mirrors the principles of the UNCRC and empowers youth voice using the Youth Charter.

- The ongoing work with the Children's Parliament, where young people co-create agendas and share their priorities, ensures that their views directly influence our actions. Our commitment to youth voice is evidenced in the appointment of two Members of the Scottish Youth Parliament, who have been involved in proposing and debating motions which affect their peers. MSYPs were consulted on the development of the new Wellbeing Local Outcomes Improvement Plan. One of the MSYPs also has a monthly column in the local newspaper, to express the views and rights of local young people.

UNCRC Implementation

- The continued focus on UNCRC principles across all Directorates indicates a strong commitment to respecting children's rights.
- We are carrying out a readiness audit on all services to gauge readiness for UNCRC implementation, using a tool developed by the Improvement Service.
- The anticipated action plan, based on these audits, will help further prioritise areas for improvement, to ensure that all decision making affecting children and young people is considered through a UNCRC lens.

Child-Friendly Complaints and Participation

- Progress on implementing Child Friendly Complaints demonstrates a focus on ensuring that children's voices are central in complaints processes. Training and resource development, including resources and materials for parents and carers, will further enhance this initiative. Materials will be provided by the Scottish Public Services Ombudsman early in 2025, which will further enhance the support for establishments. An issue around assessing the child's capacity to represent their views is being investigated to produce clearer guidance for schools and ELCs.

Planet Youth and Awareness Raising

- Planet Youth activities align to UNCRC and since June 2024, Planet Youth Officers have been working in our primary and secondary schools, in the community and with Third Sector partners and have facilitated family sessions at the Family Centre. Resources are also shared with our Clacks Planet Youth Coalition members: Third Sector, NHS and other partners. An active social media campaign has raised awareness and increased the profile of this work.

Poverty Reduction and Housing

- The Housing Service is actively addressing poverty through policy reviews, integrating UNCRC principles and involving young people in decisions. The formation of a Youth Housing Panel and the focus on ensuring young voices are heard in tenancy participation policies represent progress in tackling inequality in housing and poverty.

Support for Care-Experienced Young People (CEYP)

- Clackmannanshire has made notable strides in improving outcomes for care-experienced young people, with the increase in positive destinations (employment, training, or higher/ further education) reflecting successful initiatives, including tailored support from the Virtual Headteacher and community partners.

Community and Educational Engagement

- The work of the Child Wellbeing Partnership, alongside projects such as WM2U and youth-led initiatives, shows strong efforts to empower young people and communities to design services and policies that directly affect them. This co-design approach ensures that services are more responsive to the needs of the community.

Support for Young People with Additional Support Needs (ASN)

- We have taken steps to improve the support and transitions for children and young people with additional support needs. Revised referral processes and consultation with educational establishments has made access to specialist placements more streamlined and transparent. The Educational Psychology Service has also shifted to a more relational, in-person support model, which has been positively received by schools.
- The Transition Policy has been successfully implemented across the authority. Each school has received information regarding how to refer to the Operational Transition Group for consideration of additional levels of support for young people leaving school. All 2025 leavers have been identified and many 2026 leavers have already been referred.
- Partnerships with organisations such as Forth Valley Disability Sport and the Open University OpenLearn portal are providing additional opportunities for personal growth and skills development.
- Expanded and enhanced offer of sport activities for children with additional support needs or disabilities.

Inclusion and Support for Vulnerable Populations:

- The development of volunteer programmes, such as supported volunteering at the Community Café for young adults with ASN, contributes to the inclusion of vulnerable groups and provides opportunities for skill-building and community engagement.

Summary

In summary, notable progress has been made in promoting human rights and tackling inequalities, particularly through emphasis on children and young people's involvement in decision-making. While some areas are still under development, the ongoing work demonstrates a comprehensive approach to

addressing social inequalities and embedding human rights principles, particularly for vulnerable groups, such as our care-experienced children and those with additional support needs.

The People Directorate continues to show commitment to meeting the needs of all learners, in line with the findings of the Additional Support for Learning Review and the third progress report, published in November 2024. Increasing emergent need has resulted in a re-directing of appropriate resource to ensure that we fulfil this ambition, working in partnership with Educational Psychology and partner organisations.

Summary of Progress towards Strategic Priorities

Strategic Priority: Health and Wellbeing

Significant progress has been achieved in improving health and wellbeing in Clackmannanshire, with considerable improvements in mental health services, family support services, and sport and active living. The key areas of focus and their associated impacts are summarised as follows:

Mental Health and Wellbeing

- Service Expansion: Services like Mind Moose, Kooth, and Qwell have all been extended ensuring support services are on offer to a wide range of age groups.
- Crisis Management: The success of the Text Clacks service in de-escalating crises highlights the effective management of mental health emergencies.
- Therapeutic Support: School counselling and creative interventions have led to measurable improvements, with 83% of cases reporting enhanced mental wellbeing in the users of the service.

Community and Family Wellbeing

- Parent and Family Support: Initiatives such as the THRIVE to Keep Well programme and pre-THRIVE pilot programme have offered significant improvements in mental health supports and interventions for parents and families.
- Collaborative Efforts: The Community around the School approach and work such as Planet Youth are fostering increased community resilience and promoting healthier lifestyles, ensuring our schools become key support hubs for our communities.
- Healthy Living: Focus on family-oriented healthy eating programmes and expanded school and community sport and physical activity programmes emphasise the level of priority the Council has placed on improving community health and wellbeing.
- Positive feedback from children, young people, families, and communities has indicated that these interventions are having a tangible impact and are valued by our communities.

Infrastructure Development

- The ongoing development of the Wellbeing Hub and the new Lochies School also highlights the Council's commitment to improving health and wellbeing outcomes.

Overall Impact on Strategic Priority: Health and Wellbeing

The combination of strong community involvement and collaborative efforts to expand and enhance place-based family supports is having a significant impact on health and wellbeing in Clackmannanshire. The range of services, programmes and initiatives are benefiting children, young people, and families from a broad spectrum of backgrounds and demographics, particularly those facing inequalities. Additionally, effective therapeutic services and mental wellbeing supports are positively impacted mental wellbeing health outcomes.

Strategic Priority: Workforce Development

Progress toward the Strategic Priority - Workforce Development is strong, with evidence of meaningful advancements across several key areas. The key areas of focus and their associated impacts are summarised as follows:

Extensive Staff and Community Development

- Programmes in trauma-informed care, readiness for learning, readiness for caring and Keeping the Promise demonstrate a commitment to upskilling the workforce to meet the needs of our community, including for our care experienced community and those with additional support needs.
- Leadership development through initiatives such as Columba 1400's Values-Based Leadership (VBL) investment in staff capacity building.
- Continuous professional learning, including twilight sessions for emerging issues, ensures ongoing staff skill development.

Educational Outcomes

- Improvements in literacy and numeracy outcomes, exceeding national averages, indicate that educational professional learning efforts are yielding positive results.

Collaborative Partnerships

- Collaboration with colleges, third-sector partners, Allied Health professionals, private sector and community services is fostering shared expertise and resource optimisation.
- Reporting by regulatory and scrutiny bodies is indicating increasingly positive outcomes.
- The Routes to Volunteering programme highlights a pathway approach to skill-building and community engagement.

Support for Young People

- Targeted programmes for school leavers, especially care experienced young people and those with additional support needs (ASN), demonstrate a clear focus on bridging educational and workforce opportunities.

Overall Impact on Strategic Priority: Workforce Development

Workforce Development has remained a key focus and seen substantial progress, aligning well with strategic priorities. These initiatives should strengthen staff capability and alongside the collaborative networks, continue to support positive outcomes for children, young people, and communities.

Strategic Priority: Empowering Families and Communities

- The strategic priority of empowering families and communities is progressing well, with significant strides in creating well-designed, inclusive, and resilient communities and evidence of leading public sector reform. The key areas of focus and their associated impacts are summarised as follows:

Prevention and Early Intervention

- Strong emphasis on prevention and early intervention supports, such as school-age childcare expansion and tailored family support services.
- Enhanced access to social, educational, and developmental resources through Community around the School approaches and new enhanced baby and toddler groups.

Collaborative Approaches

- Partnerships with third-sector organisations, local services, and community groups to address diverse needs.
- Youth involvement in decision-making aligning with human rights principles, ensuring that services reflect community priorities and that the voice of lived experience informs service design.

Educational and Workforce Development

- Improvements in educational outcomes, such as literacy, numeracy, and attendance rates, and narrowing of the attainment gap.
- Progress in workforce upskilling, including trauma-informed training and leadership development.

Infrastructure and Sustainability

- Active planning and development of educational infrastructure, such as the Learning Estate Strategy and Lochies School replacement.

Support for Vulnerable Children, Young People and Adults

- Tailored initiatives for care-experienced children and young people, as well as those with additional support needs.
- Progress in permanence planning and transitions.

- Mentoring, volunteering, and employability support.

Health and Wellbeing

- Comprehensive mental health and wellbeing services for children, families, and communities.
- Community-based physical activity and healthy living initiatives.
- Community-based social, emotional and wellbeing opportunities.

Overall Impact on Strategic Priority: Empowering Families and Communities

The People Directorate has made progress and remain committed to empowering families and communities. Overall, the trajectory is positive, reflecting a well-rounded and inclusive approach to improving life outcomes for children, young people, and their families.

Strategic Priority: Sustainable, Inclusive Growth

The People Directorate is making meaningful progress towards the Strategic Priority of Sustainable, Inclusive Growth. The key areas of focus and their associated impacts are summarised as follows:

Economic and Social Development

- Educational Infrastructure: Investment in Lochies School and the Wellbeing Hub reflect proactive planning for long-term sustainable growth.
- Skill Development: Efforts to improve skills for learning, life, and work, including targeted programmes for young people and professional learning for staff, contribute to workforce readiness and community engagement.

Poverty Reduction and Economic Resilience

- Childcare and Family Support: Expanded childcare access directly supports workforce participation and reduces financial strain on families, contributing to economic resilience and community wealth building.
- Income Maximisation Initiatives: The combination of financial support (e.g., energy vouchers, money advice services) and direct poverty alleviation measures (free period products and cost-of-living support) demonstrates the People Directorate's robust commitment to addressing economic inequalities.

Health and Wellbeing

- Physical and Mental Health: Programmes such as the Family Wellbeing Partnership, Counselling in Schools, and digital mental health platforms enhance individual and community resilience, contributing to sustainable growth by fostering a healthier population within Clackmannanshire.
- Active Living: Investments in sport, physical activity, and community-driven initiatives further promote well-being, inclusion, and active participation.

Human Rights and Inclusion

- Youth Involvement and Rights: Embedding UNCRC principles and ensuring youth participation in decision-making (e.g., Scottish Youth Parliament, Planet Youth) supports inclusivity and equitable growth.
- Focus on Vulnerable Groups: Targeted initiatives for care-experienced children, young people with additional support needs, and poverty reduction efforts ensure that sustainable growth benefits all our families.

Overall Impact on Strategic Priority: Sustainable, Inclusive Growth

The People Directorate is contributing positively towards achieving Sustainable, Inclusive Growth; working on supporting empowered, inclusive, and sustainable communities while addressing economic, educational, and social challenges. Continued efforts to sustain and evaluate initiatives, coupled with addressing emerging needs, will ensure that the momentum is maintained. The People Directorate, working on the People Community Wellbeing Plan and the respective integrated community planning partnership plans will continue to work on the strategic actions. A strategic needs assessment and threat/risk analysis will inform planning for 2025/26. The planned FWP Transformation Vehicle will be an important step forward in the long-term sustainability of the systems required to ensure that positive outcomes for people can be achieved in an agile and sustainable manner.

Challenges

The following challenges /collective next steps reflect recurring themes across the four strategic priorities, as summarised below:

Sustainability and Scalability

- Ensure long-term funding and leadership to embed, maintain and scale existing programmes and initiatives.
- Continue to build partnerships and identify new funding streams to secure the future of critical projects.

Comprehensive Evaluation and Impact Measurement

- Implement systematic and structured evaluation mechanisms to assess the effectiveness and long-term impact of programmes.
- Use evaluation data to refine strategies, demonstrate outcomes, and secure ongoing support and funding.

Professional Development and Addressing Emerging Needs

- Enhance professional learning in areas such as neurodevelopmental support to meet emerging needs.
- Integrate trauma-informed practices fully and consistently across all services and teams.
- Continue to develop and adapt professional learning for staff to address specific skill gaps and improve service delivery.

Leadership and Collaboration

- Maximise leadership capacity and resource through continued collaborative focus on strategic priorities.
- Continue to foster collaboration with stakeholders to enhance programme delivery and sustainability.

Consistency and Integration

- Embedding and maintaining successful practices, such as trauma-informed approaches, into all areas of service delivery.
- Promote consistency in applying UNCRC legislation.

Proactive Planning for Emerging Issues

- Continued environmental scanning and analysis of threats and risks in order to anticipate future challenges and adapt strategies to address emerging needs.

Empowering Families and Communities

- Continue to focus on family and community involvement to enhance wellbeing and build resilience.
- Expand initiatives that empower communities, ensuring voice of lived experience and participation in decision-making.

The **People Community Wellbeing Plan** and the respective integrated **Community Planning Partnerships Plans** will continue to focus on our agreed Strategic Priorities and Strategic Actions. By addressing the collective next steps and maintaining the current momentum, the People Directorate **is on track to achieve** our Strategic Outcomes, as evidenced in this report.

The People Directorate Strategic Needs Assessment and subsequent threat/risk analysis will inform the 2024/25 annual report and subsequent planning for 2025/26.

Common Business Plan Key Performance Indicators 2024/25

Description of KPI	2021-22	2022-23	2023-24	2024-25	Target (as set out in 24/25 Plan)
Average FTE working days lost through sickness absence PPL AB1 GOV	11.9	12.3	14.02		13% reduction
% of Freedom of Information requests dealt with within timescale PPL FOI GOV	90%	92%	86%		100%
% of Councillor Enquiries dealt with within timescale PPL CNQ BUS	91%	93%	96%		100%
% of MP/MSP enquiries dealt with within timescale PPL MPQ BUS	76%	86%	83%		100%
% formal complaints closed within timescale (stages 1 and 2) PPL C02 CUS	55%	62%	85%		100%
% formal complaints dealt with that were upheld/partially upheld PPL C04 CUS	23%	49%	36.5%		<25%
% of employees who have completed mandatory training by the due date	N/A	10.3%*	58%		>75%
Staff Survey - I feel valued for the work I do PPL S12 HWD	63%	N/A	56%		>75%
Staff Survey - I feel that I am treated with dignity and respect within my team PPL S17 HWD	75%	N/A	74%		100%
Staff Survey - I am clear about how I contribute to the organisation's goals PPL S21 HWD	74%	N/A	69%		>90%
Survey response rate PPL S26 HWD	23%	N/A	31%		>50%

People Community Wellbeing Plan - Key Performance Indicators 2024/25

Overarching KPI's (Individual Plans will also have their own KPIs)	2021/22	2022/23	2023/24	2024/25	Target
Child Poverty Rate (0-15 years Clackmannanshire) – relative poverty after housing costs	25.5%	27.3%	March 2025 (next update)	*	24%
Percentage of school leavers entering initial Positive Destination*	96.5%	94.9%	Feb 2025 (next update)	*	97%+
Percentage of children with one or more developmental concerns at 27-30 month reviews	17.9% [Jan – Mar 22]	15.3% [Jan – Mar 23]	16.1% [Jan – Mar 24]	*	14.7% [national]
Attendance Rate – all * (taken from stretch aims)	90.3%	90.7%	90.1%	*	92%
Attendance Rate – Care Experienced (taken from stretch aims)	89.5%	86.5%	88.1%	*	92%
Percentage of P1, P4 and P7 pupils combined achieving expected CfE Level in Literacy* (taken from stretch aims)	63.3%	69.6%	74%	*	75%
Percentage of P1, P4 and P7 pupils combined achieving expected CfE Level in Numeracy* (taken from stretch aims)	71.7%	72.4%	77.3%	*	78%
Attainment gap at Senior Phase - SCQF Level 5 (percentage points) *	-10.4	-20.7	-14	*	-10
Percentage of School Leavers achieving at SCQF Levels in Literacy and Numeracy (Levels 4, 5 & 6) *	54.5%	53.7%	Feb 2025	*	60.1% [national]
Percentage of Care Experienced School Leavers achieving at SCQF Levels in Literacy & Numeracy (Levels 4, 5 & 6) *	26.3%	30.2%	Feb 2025	*	38.7% [VC]
Domestic Abuse Incidents (rate per 10,000 population)- Clackmannanshire	146	127	March 2025	*	114

No of children referred to Children's Reporter (offences only) – rates per 1000 children	5.8	10.5	13.4	*	11.2 [national]
Percentage of care experienced children with 3 or more placements during the year	6%	5%	April 2025	*	0%
Number of unplanned external placements changes for children	9	1	6	*	0
Number of children in residential placements	17	12	24	*	12
Percentage of Children and Young People who describe their mental health as good or very good	No data	41%	Not yet available	*	50%
Percentage of Children and Young People (under 18's) participating in extracurricular school sport and physical activity	36%	42%	45%	*	47%
Proportion of adolescents who have consumed alcohol in last 30 days (Icelandic Model/Planet Youth)	36%	No data	28%	*	14%
Teenage Pregnancy Rate (under 20 years) Rate per 1000 women	30.5	33.6	July 2025	*	27.1
% of Girls in Clackmannanshire participating in recreational activity ** new measure	No data	No data	73%	*	76%














* Data to be added once published.

People Directorate Progress Report: Community Wellbeing Plan 2024/25

Key to Symbols

Current Status:	 Completed	 In Progress, On Track	 Check Progress/Unassigned	 Overdue	 Cancelled
Expected Outcome:	 Already Complete	 Will Complete Within Target	 Will Complete Outwith Target	 Will Fail to Complete	 Cancelled

Plan Summary

	PPL CWP 245 People Directorate Business Plan 2024/25				Overall Progress		<div><div>64%</div></div>	
	Lead	Strategic Director - People		Portfolio Owners	Chief Education Officer; Chief Social Work Officer			
Outcomes				Expected Outcome	Due By	Completed	Progress	
	CWP 245 100	1. Children and Young People have improved life outcomes by growing up loved, safe and respected				31-Mar-2025	<div><div></div></div>	<div><div>63%</div></div>
	CWP 245 200	2. Empowered communities are well designed, inclusive, sustainable, resilient and safe				31-Mar-2025	<div><div></div></div>	<div><div>69%</div></div>
	CWP 245 300	3. People of all ages successfully contribute to our communities by developing skills for learning				31-Mar-2025	<div><div></div></div>	<div><div>57%</div></div>
	CWP 245 400	4. Poverty in our communities is reduced by improving outcomes for all				31-Mar-2025	<div><div></div></div>	<div><div>72%</div></div>
	CWP 245 500	5. People are healthy and active with improved health and wellbeing				31-Mar-2025	<div><div></div></div>	<div><div>64%</div></div>
	CWP 245 600	6. Human Rights are respected and fulfilled by tackling inequalities across our communities				31-Mar-2025	<div><div></div></div>	<div><div>61%</div></div>

Outcome Summary

▶ 1. Children and Young People have improved life outcomes by growing up loved, safe and respected							Overall	<div><div>63%</div></div>
High-level Action Areas			Lead Service Area	Expected Outcome	Due By	Completed	Progress	
▶	CWP 245 101	Ensure Women & Girls Feel Safe	Inclusion & Partnerships	✓	31-Mar-2025		<div><div>66%</div></div>	
▶	CWP 245 102	Review Provision for Children with Disabilities	Early Intervention	✓	31-Mar-2025		<div><div>62%</div></div>	
▶	CWP 245 103	Ensure Whole Family Support is Available	Early Intervention	✓	31-Mar-2025		<div><div>55%</div></div>	
▶	CWP 245 104	Deliver on the Promise	Permanence	✓	31-Mar-2025		<div><div>70%</div></div>	
▶ 2. Empowered communities are well designed, inclusive, sustainable, resilient and safe							Overall	<div><div>69%</div></div>
High-level Action Areas			Lead Service Area	Expected Outcome	Due By	Completed	Progress	
▶	CWP 245 201	Transformation Vehicle: Family Wellbeing Partnership	Inclusion & Partnerships	✓	31-Mar-2025		<div><div>60%</div></div>	
▶	CWP 245 202	Improve Use of Data	People Directorate	✓	31-Mar-2025		<div><div>58%</div></div>	
▶	CWP 245 203	Increase Collaboration	Community Learning & Development	✓	31-Mar-2025		<div><div>70%</div></div>	
✓	CWP 245 204	Develop Anti Social Behaviour Strategy	Secondary Education & Communities	✓	31-Mar-2025	08-Jan-2025	<div><div>100%</div></div>	
▶	CWP 245 205	Develop Voice Strategy	People Directorate	✓	31-Mar-2025		<div><div>54%</div></div>	
▶	CWP 245 206	Improve Community Justice Outcomes	Justice Services	✓	31-Mar-2025		<div><div>75%</div></div>	
▶ 3. People of all ages successfully contribute to our communities by developing skills for learning							Overall	<div><div>57%</div></div>
High-level Action Areas			Lead Service Area	Expected Outcome	Due By	Completed	Progress	
▶	CWP 245 301	Review & Implement Learning Estate Strategy	Education; Property Services	✓	31-Mar-2025		<div><div>50%</div></div>	
▶	CWP 245 302	Strengthen Workforce Development	People Directorate	✓	31-Mar-2025		<div><div>60%</div></div>	
▶	CWP 245 303	Ensure Self-evaluation & QA Informs Planning	People Directorate	✓	31-Mar-2025		<div><div>60%</div></div>	
▶	CWP 245 304	Improve Attainment & Close Gap	Education	✓	31-Mar-2025		<div><div>60%</div></div>	

<div>  4. Poverty in our communities is reduced by improving outcomes for all </div>						Overall	<div> <div></div> 72% </div>
High-level Action Areas		Lead Service Area	Expected Outcome	Due By	Completed	Progress	
	CWP 245 401	Deliver System of Childcare & Alleviate Poverty	Early Learning, Primary Education & Libraries	✓	31-Mar-2025		<div> <div></div> 75% </div>
	CWP 245 402	Prioritise Cost of Living & Income Maximisation	People Directorate	✓	31-Mar-2025		<div> <div></div> 70% </div>
<div>  5. People are healthy and active with improved health and wellbeing </div>						Overall	<div> <div></div> 64% </div>
High-level Action Areas		Lead Service Area	Expected Outcome	Due By	Completed	Progress	
	CWP 245 501	Ensure Mental Wellbeing Services are in Place	Educational Psychology	✓	31-Mar-2025		<div> <div></div> 65% </div>
	CWP 245 502	Ensure Wellbeing Hub/Lochies Remains on Track	Sport & Leisure	✓	31-Mar-2025		<div> <div></div> 66% </div>
	CWP 245 503	Increase Healthier Behaviours & Choices	Inclusion & Partnerships	✓	31-Mar-2025		<div> <div></div> 63% </div>
<div>  6. Human Rights are respected and fulfilled by tackling inequalities across our communities </div>						Overall	<div> <div></div> 61% </div>
High-level Action Areas		Lead Service Area	Expected Outcome	Due By	Completed	Progress	
	CWP 245 601	Embed UNCRC Across People Directorate	Secondary Education & Communities	✓	31-Mar-2025		<div> <div></div> 65% </div>
	CWP 245 602	Reduce Inequality Through Co-design	Inclusion & Partnerships	✓	31-Mar-2025		<div> <div></div> 70% </div>
	CWP 245 603	Review ASL Provision	Additional Support Needs	✓	31-Mar-2025		<div> <div></div> 50% </div>

Summary of High-level Action Areas

1. Children and Young People have improved life outcomes by growing up loved, safe and respected



Ensure Women & Girls Feel Safe

Ensure women and girls feel equally safe at home, in work and in the community

Latest Update Lead Officer Senior Manager Inclusion & Partnerships Due By 31-Mar-2025 Progress

66%

 Expected Outcome CWP 245 101

Clackmannanshire's Violence Against Women and Girls (VAWG) Partnership is focused on education, prevention, and collaboration to address gender-based violence (GBV). Key initiatives include inclusive RSHP education in schools, the Equally Safe at School strategy, and a youth-led workshop on GBV. A White Ribbon Status Campaign was launched, aiming to engage the community, particularly men and boys, in preventing GBV. The STRIVE team provides early intervention and non-court mandated support to families at risk. The 16 Days of Activism campaign featured workshops, community events, and survivor-led poetry to raise awareness. The partnership collaborates across sectors, with a focus on integrating support for women and children in housing, education, and justice systems. The upcoming Equally Safe Delivery Plan aims to create a trauma-informed approach to tackling GBV. In Spring 2025, Mentors in Violence Prevention will be relaunched across secondary schools.



Review Provision for Children with Disabilities

Review provision for children with disabilities, in partnership

Latest Update Lead Officer Service Manager (Early Intervention) Due By 31-Mar-2025 Progress

62%

 Expected Outcome CWP 245 102

A review of Children with Disability social work provision has been carried out, incorporating new budget allocation approaches and a Forth Valley needs assessment template. Collaboration with PAMIS has ensured that facilities, including play areas and changing places, are more accessible. A targeted activities programme for children with disabilities was developed following consultation with parents, carers, and children, leading to the expansion of water confidence sessions, bi-ski lessons, dance, and extracurricular activities. The Child Wellbeing Partnership, in partnership with Play Alloa and PAMIS, funds after-school and social activities across Clackmannanshire. Additional funding has been allocated to Lochies School for family wellbeing activities, and Alva Primary's Ochil Classes are conducting a participatory budgeting exercise to support wellbeing and childcare experiences. School leaders and nursing staff have also engaged in training to better support children's physical and mental health, with referrals tracked to monitor service engagement.



Ensure Whole Family Support is Available


Ensure place based whole family support is available at the point of need

Latest Update Lead Officer Service Manager (Early Intervention) Due By 31-Mar-2025 Progress


55%

 Expected Outcome CWP 245 103

The Family Support Collaborative has been running family support hubs across Clackmannanshire since October 2024, with locations in Alloa, Tullibody, and Clackmannan, expanding gradually throughout the year. The Child Wellbeing Partnership is funding enhanced parent and toddler groups in partnership with Action for Children, Home Start, and supported by NHS Speech and Language Therapy (SaLT) and Educational Psychology Service (EPS). Sessions are now available in multiple locations, including Coalsnaughton from January 2025. So far, 16 families have been supported, with positive feedback such as "You've helped me find joy in parenting". The EPS and SaLT have trained play leaders to foster positive parent-child interactions. Practical support includes the provision of slow cookers, recipe packs, and connections with other Family Wellbeing Partnership services. Additionally, the CLD Family Learning sessions focus on healthy relationships and family learning, while Social Work teams track developmental milestones in local children. The Social Work Early Help Team continue to develop groups supports provided in Alloa Family Centre and Ben Cleuch Centre.



Deliver on the Promise

Ensure a portfolio of accommodation and supports to deliver on the Promise


Latest Update	Lead Officer	Senior Manager (Permanence); Senior Manager (Secondary Education & Communities)	Due By	31-Mar-2025	Progress	<div><div>70%</div></div>	Expected Outcome		CWP 245 104
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Progress is being made to enhance local care services, with improvements in fostering, adoption and adult care services leading to increased interest in fostering. This trend is expected to result in a rise in foster carers by 2025. Plans for a new children's house and accommodation for care leavers have reached the planning stage. A continued focus on supporting young people leaving care ensures that this area remains a priority. Recent inspections highlighted improvements in foster care planning and education support for care-experienced children. Tracking attendance and academic progress, as part of the Keeping The Promise Award, has led to improved attendance and outcomes, particularly in literacy and numeracy. Additionally, work is ongoing to upskill staff in trauma-informed care models. A multi-disciplinary therapeutic team is being established to provide tailored support for care-experienced children and young people, with services operational once the new residential provision is complete.


2. Empowered communities are well designed, inclusive, sustainable, resilient and safe


Transformation Vehicle: Family Wellbeing Partnership


Deliver on a new Transformation Funding Vehicle for the Family Wellbeing Partnership

Latest Update	Lead Officer	Senior Manager Inclusion & Partnerships	Due By	31-Mar-2025	Progress	<div><div>60%</div></div>	Expected Outcome		CWP 245 201
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Scoping work completed, interim project manager recruited to establish Transformation Vehicle by 01 April 2025. Post is funded by The Hunter Foundation, who are also seeking independent funding to add to the vehicle. Regulatory bodies (Audit Scotland, CIPFA UK) are being consulted.


Improve Use of Data

Improve the use of data to drive improvement, in collaboration with partners

Latest Update	Lead Officer	Strategic Director - People	Due By	31-Mar-2025	Progress	<div><div>58%</div></div>	Expected Outcome		CWP 245 202
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Data tracking is central to Performance Improvement meetings in Clackmannanshire, enabling Quality Improvement Officers to support and challenge headteachers on attainment and attendance. Schools are engaging with the National Improving Writing Programme, where practitioners are trained to use data tools to enhance literacy. A new system tracks developmental milestones for 3-year-olds, with most children meeting social and emotional development targets. Monthly attendance updates help identify trends, with improved attendance in primary, secondary, and specialist schools.

Data from National Standardised Assessments informs planning for key stages, and literacy and numeracy progress is being analysed. Quality assurance visits provide schools with data overviews, aiding improvements in children's experiences. Collaboration with partners supports a Children's Strategic Needs Assessment to address child poverty.

Care-experienced pupils' positive destinations have risen, with initiatives like Virtual Headteacher support and volunteering opportunities. A data dashboard is under development, expanding service performance reporting. Child Care Senior Management are currently working on developing a data dashboard that incorporates all key performance information across the Service. This will expand on current monthly reporting around referrals, open cases, closures etc.



Increase Collaboration

Increase collaboration with partners and communities

Latest Update	Lead Officer	Community Learning & Development Co-ordinator; Senior Manager (Secondary Education & Communities)	Due By	31-Mar-2025	Progress	<div><div>70%</div></div>	Expected Outcome		CWP 245 203
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Clackmannanshire Council's 2022/23 Best Value Thematic Management Report highlights successful community planning collaborations, particularly with the Family Wellbeing Partnership (FWP). Notable projects include the "What Matters to You" (WM2U) initiative, which supports five community groups, and FWP's outreach activities like the Parent/Carer support sessions and Challenge Poverty Week. The Council also fostered partnerships for whole family support, including a new ASD parenting group. A key success is the implementation of the Keeping the Promise Award, which is integrated into school improvement plans, enhancing engagement and professional learning. Additionally, partnerships with NHS Forth Valley and external organisations have led to initiatives such as the Breastfeeding Friendly Scotland Award. Community involvement continues through programmes, such as Active Schools Leadership Academy and national reading initiatives, demonstrating a strong focus on community well-being and collaboration across sectors.



Develop Anti Social Behaviour Strategy

Develop an Anti Social Behaviour Strategy informed by a comprehensive audit

Latest Update	Lead Officer	Senior Manager (Secondary Education & Communities)	Due By	31-Mar-2025	Progress	<div><div>100%</div></div>	Expected Outcome		CWP 245 204
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A comprehensive audit of antisocial behaviour in Clackmannanshire was carried out between October 2023 and March 2024, as part of a scoping exercise, to inform the development of an Antisocial Behaviour Strategy. This helped to contribute to our understanding of the antisocial behaviour problems in Clackmannanshire, as experienced by our communities and local service providers. The subsequent Antisocial Behaviour Strategy (ABS) 2024-2027, was produced in partnership with stakeholders including residents, young people, community councils and partner organisations and approved by Clackmannanshire Council on 3 October 2024 and the Clackmannanshire Alliance on 13 December 2024. This work aligns with our Local Outcomes Improvement Plan (LOIP) priorities and the People Directorate One Plan and will involve combining areas relating to Community Safety under one Working Group which will report to the Alliance, incorporating Violence against Women and Girls, STRIVE, Alcohol and Drug Partnership and Criminal Justice.




Develop Voice Strategy

Develop an overarching Voice Strategy for Empowering Families and Communities

Latest Update	Lead Officer	Strategic Director - People	Due By	31-Mar-2025	Progress	<div><div>54%</div></div>	Expected Outcome		CWP 245 205
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In Clackmannanshire, various voice groups like Family Voices and Family Connections are shaping a voice strategy with support from Animate/What Matters to You. Community engagement is central, with children and young people involved in forums such as the Clacks Youth Forum and the Scottish Youth Parliament. Families contribute to funding decisions through the Family Support Collaborative. A remuneration policy is being developed to fairly compensate those with lived experience in co-production work. The Family Connections Team, which supports foster carers, was highly rated in a November 2024 inspection, noting the involvement of children in care planning. Clackmannanshire is also developing an Implementation Plan for the national Equally Safe Delivery Plan, to be completed by March 2025, informed by lived experience and a partnership-wide consultation.

Improve Community Justice Outcomes Improve Community Justice outcomes

Latest Update Lead Officer Senior Manager (Justice Services) Due By 31-Mar-2025 Progress 75% Expected Outcome  CWP 245 206

The Community Justice Partnership (CJP) has achieved several significant milestones. It published the Community Justice Outcome Improvement Plan (CJOIP) 2023-2028 in December 2024, receiving positive feedback from Clackmannanshire Council and The Alliance. The partnership demonstrated effective engagement through Short Life Working Groups (SLWG) and strengthened collaborative approaches, including co-location of services and joint funding initiatives, such as the Addiction Recovery Worker. It also raised awareness of diversion options through strong collaboration with key agencies. Notable developments included an 800% increase in bail supervision cases, prompting the recruitment of a new Bail Officer. Additionally, the CJP expanded its multi-disciplinary hub and advanced prevention and early intervention efforts, including the Caledonian System and a public attitudes to crime survey to be released in early 2025. Ongoing collaborations with community organisations, including CLD, are further enhancing support for individuals within the justice system.


3. People of all ages successfully contribute to our communities by developing skills for learning

Review & Implement Learning Estate Strategy In partnership with Place Directorate, review and implement a new Learning Estate Strategy

Latest Update Lead Officer Chief Education Officer Due By 31-Mar-2025 Progress 50% Expected Outcome  CWP 245 301

Regular updates are given to the Council regarding the progress of Lochies School replacement. new Learning Estate strategy will be presented to the Council in summer 2025. In 2023/24, achievements in Curriculum for Excellence levels improved, particularly in Literacy, which exceeded national averages at both Early and First Level. First Level Writing achievement was notably high, likely due to a new writing approach. At Second Level, improvements were seen across all subjects, with both Literacy (69%) and Numeracy (74%) meeting their stretch targets. Senior-level results showed the largest increase, with a narrowing of the numeracy attainment gap in 2023/24. Recent attendance data for 2022/23 revealed that pupils in Clackmannanshire had higher attendance rates than the national average. The Active Schools team offers a broad range of extra-curricular sports and physical activities across all 22 schools, with participation levels tracked and reported each term.

Strengthen Workforce Development Strengthen Workforce Development and address any issues

Latest Update Lead Officer Strategic Director - People Due By 31-Mar-2025 Progress 60% Expected Outcome  CWP 245 302

Work is progressing to upskill staff in the People Directorate on the Readiness for Caring (R4C) and Readiness for Learning (R4L) models, with training in trauma-informed approaches. A multi-disciplinary therapeutic team is being established to support care-experienced children and young people. The Family Wellbeing Partnership continues to invest in leadership and training programmes, such as Columba 1400's Values-Based Leadership initiatives. A range of new employability and volunteering programmes are also being developed, including a partnership with Forth Valley College to provide construction skills training for S2-S4 pupils. In education, staff have accessed extensive training on trauma-informed practices, with over half of managers completing trauma training. A new framework for substance use education has been developed, and numerous initiatives have been implemented to enhance literacy and numeracy across schools. Recent inspection reports highlight progress in improving staff training and life story work within the Family Connections Team.



Ensure Self-evaluation & QA Informs Planning

Ensure high quality self-evaluation and robust Quality Assurance informs service improvement planning

Latest Update Lead Officer Strategic Director - People Due By 31-Mar-2025 Progress 60% Expected Outcome CWP 245 303

Leadership of the registered children's services linked to the Family Connections Team was evaluated as very good, with robust risk management and a strong quality assurance framework. A recent HMIE inspection in October 2024 highlighted progress in self-evaluation and quality assurance initiatives, including regular monitoring of attainment data and Quality Improvement Officers' visits to schools. The inspection also emphasised positive relationships between children, young people, and caregiver families, with clear support structures in place. Caregiver families had access to a range of training and were engaged in service improvement through consultation. The service demonstrated a positive impact on educational and health outcomes for children, with tailored care planning and access to external advocacy. However, areas for improvement were identified in permanence planning and the use of digital platforms for gathering feedback. Overall, the service's strengths significantly outweighed the areas for improvement, with continuous efforts towards better outcomes for children.



Improve Attainment & Close Gap

Improve attainment, with a particular focus on closing the attainment gap

Latest Update Lead Officer Chief Education Officer Due By 31-Mar-2025 Progress 60% Expected Outcome CWP 245 304

This year, three programmes for young people aged 16-19 have been commissioned through No One Left Behind (NOLB), focusing on school leavers. One programme, led by Enable, supports young people with ASN to gain qualifications and work experience, with 19 out of 30 spaces filled. The Library Service has partnered with Lornhill Academy cluster schools to implement the Scottish Book Trust's Reading Schools programme. Young people in St Serf's and Banchory primary schools are participating in Outdoor Learning programmes, and working towards Dynamic Youth Awards. Education staff have accessed 2,300 hours of CLPL to implement a trauma-informed approach to closing the poverty-related attainment gap. Curriculum for Excellence levels showed improved results in literacy and numeracy in 2023/24, with notable progress in writing. Recent attendance data revealed higher attendance rates than the national average. Plans for an early years conference in February 2025 aim to support childhood development and the developmental milestone project.

4. Poverty in our communities is reduced by improving outcomes for all



Deliver System of Childcare & Alleviate Poverty



Test and deliver a system of All Age Childcare for identified communities of need; alleviating poverty by reducing the cost of living and increasing household income

Latest Update Lead Officer Improving Outcomes Team Leader Due By 31-Mar-2025 Progress 75% Expected Outcome CWP 245 401





The Child Wellbeing Partnership in Clackmannanshire has expanded its services to offer all-age childcare, focusing on families at risk of poverty. This initiative aims to improve family wellbeing and enable access to work, training, or study. School-age childcare is now available in multiple areas, supported by partnerships with third-sector and private providers. Sport and Leisure activities have been enhanced across six schools, offering breakfast clubs and sports sessions with snacks.

For children under five, the partnership supports 74 children in local and private Early Learning and Childcare (ELC) settings, providing additional hours to aid families with work or personal needs. Community baby and toddler groups have also expanded, including specialised groups like 'Wee Play Alloa' for children with additional needs.

Enhanced support includes 'Play Roots,' which combines childcare with professional services, and referrals to Safe Families. Since September 2024, 141 children have benefited from this comprehensive pre 5 childcare and family support initiative. Furthermore, the current roll for school aged childcare includes 239 children.

	Prioritise Cost of Living & Income Maximisation	Cost of living and income maximisation opportunities are prioritised				
Latest Update	Lead Officer	Strategic Director - People	Due By	31-Mar-2025	Progress	Expected Outcome
					<div><div>70%</div></div>	 CWP 245 402
<p>The Family Wellbeing Partnership (FWP) has trialled One Stop Support Shop sessions in schools and communities, supporting up to 30 people per session with energy vouchers and benefit advice. In February 2025, these sessions will expand to community hubs across Clackmannanshire.</p> <p>The Housing Service has introduced money advice support and is redesigning its rent structure to ensure affordability, with a consultant-led review and proposals expected in early 2025. An affordability exercise ensures rent does not exceed 30% of household income.</p> <p>The Child Wellbeing Partnership now offers income maximisation support to parents, with direct referrals to the DWP for childcare benefits as part of updated registration processes.</p> <p>A CLD "Take What You Need" event saw 82 attendees access free soup, winter clothes, and energy advice referrals.</p> <p>Additionally, free period products, including menstrual cups and period pants, are now widely available, ensuring dignity and personal choice for those in need.</p>						

5. People are healthy and active with improved health and wellbeing

	Ensure Mental Wellbeing Services are in Place	Ensure effective mental wellbeing services are in place for children, young people and communities				
Latest Update	Lead Officer	Principal Educational Psychologist	Due By	31-Mar-2025	Progress	Expected Outcome
					<div><div>65%</div></div>	 CWP 245 501
<p>In Clackmannanshire, a variety of mental wellbeing services have been developed for children, young people, and families. The annual Mental Health and Wellbeing Survey highlights the need for ongoing mental health support, with 59% of respondents reporting high or very high scores on the Total Difficulties Scale of Strengths and Difficulties. the continuum of mental health supports available for children, young people and their families has been extended this year. Services like Kooth, Qwell, and Text Clacks offer digital mental health support for all ages. The Counselling in Schools Service and Creative Therapeutic Interventions for Children have shown positive outcomes, with 83% of pupils reporting improved mental health. Additionally, the Barnardo's In Mind project and THRIVE programmes support families and adults, with 80-89% of THRIVE participants reporting increased wellbeing, confidence, and improved parenting. The THRIVE to Keep Well Programme, involving 22 participants across three cohorts, showed significant improvements in mental health and life outcomes. These services continue to adapt to meet the diverse needs of the community.</p>						
	Ensure Wellbeing Hub/Lochies Remains on Track	Ensure the delivery of the Wellbeing Hub and new Lochies School remains on track				
Latest Update	Lead Officer	Senior Manager (Sport & Leisure)	Due By	31-Mar-2025	Progress	Expected Outcome
					<div><div>66%</div></div>	 CWP 245 502
<p>The Wellbeing Hub and new Lochies school project is on track for handover in Spring/Summer 2027. The Hub Stage 2 process (RIBA Stage 4) is nearing completion, with the report due in Q1 2025. The formal Public and Community Consultation for the Planning Application has concluded, and the neighbourhood consultation will end on 5th September 2024. Ongoing community and partner consultations are informing final design decisions. The Planning Application is nearly complete, with a Planning Committee report scheduled for 23rd January 2025, following a 3-month delay. The next update to the Council is in January 2025, with a request for approval to begin site enabling works in March 2025. The design phase is finalising by March 2025, and the project remains within budget. The construction programme is being revised following marketing testing by the contractor.</p>						



Increase Healthier Behaviours & Choices

Increase opportunities for children, young people and families to engage in positive and healthier behaviours and choices, with a particular communities focus on those facing inequality

Latest Update Lead Officer Senior Manager Inclusion & Partnerships Due By 31-Mar-2025 Progress 63% Expected Outcome CWP 245 503

The Family Wellbeing Partnership offers a variety of initiatives to support children, young people, and families in making positive and healthier choices. The Community Around the School approach, initially launched at Alloa Academy, is now active at Lornhill and Alva Academies. Planet Youth Officers promote resilience-building activities and run family wellbeing sessions with the Early Help Team. Other initiatives include a Sexual Health course with NHS Forth Valley and an Anti-Bullying programme for ASN students at Alloa Academy. The Active Schools team offers an extensive extracurricular sports programme across 22 schools, with youth-led committees planning activities. The Clackmannanshire Sport & Active Living Framework is being implemented to achieve strategic goals, while local sports clubs collaborate with the Sport and Leisure team to provide further opportunities. The THRIVE to Keep Well Programme, focusing on wellbeing and positive change, includes NHS assessments and follow-up support.

6. Human Rights are respected and fulfilled by tackling inequalities across our communities



Embed UNCRC Across People Directorate

Embed UNCRC (Scotland) Act across all services within the People Directorate

Latest Update Lead Officer Senior Manager (Secondary Education & Communities) Due By 31-Mar-2025 Progress 65% Expected Outcome CWP 245 601

Clackmannanshire Council places great importance on the views of children and young people, embedding their voices within decision-making processes. The Council's framework, aligned with the UNCRC and supported by The Children's Parliament, allows young people to influence priorities and co-create agendas through regular consultations with Council representatives. This approach is integrated across various services, including policy development, budgeting, and project scoping, with the aim of promoting children's rights and wellbeing. Initiatives like Planet Youth and the Youth Housing Panel ensure young people's involvement in community and housing decisions, while a review of Housing policies focuses on poverty reduction and supporting vulnerable families. The Council is also developing a Scrutiny Panel for tenants and enhancing child-friendly complaints processes. Training on the UNCRC is ongoing for staff, and the importance of clear communication with children is reinforced through child-friendly documents and feedback surveys. The Scottish Youth Parliament (MSYP) and the Child Wellbeing Partnership actively seek and incorporate young people's views in services. Additionally, Children's Social Work involves children in decisions affecting them and ensures policies consider their rights, with a focus on clarity and participation.



Reduce Inequality Through Co-design

Reduce inequality through delivery of opportunities co-designed by the community

Latest Update Lead Officer Senior Manager Inclusion & Partnerships Due By 31-Mar-2025 Progress 70% Expected Outcome CWP 245 602

The "What Matters to You" (WM2U) initiative is currently funding five community projects in Clackmannanshire, supported by the local council and WM2U's Make It Happen Fund. These projects focus on community-led initiatives, with funds directed to groups and individuals through a co-design process. The Child Wellbeing Partnership has partnered with the Clackmannan Development Trust to deliver tailored childcare and activities, while a new Community Engagement Officer ensures services reflect local views. Clackmannanshire's Care Experienced (CE) destinations have seen an increase in young people achieving positive outcomes. Additional support includes volunteer opportunities, pregnancy support, and specialised services for young people at risk of care. Furthermore, a remuneration policy for those with lived experience in co-production is being developed, and the Community Justice Partnership is working to establish a Lived Experience Panel, launching in January 2025.



Review ASL Provision

Review Additional Support for Learning Provision to ensure that the needs of all learners are met

Latest Update Lead Officer Additional Support Needs Team Leader; Senior Due By 31-Mar-2025 Progress 50% Expected Outcome CWP 245 603

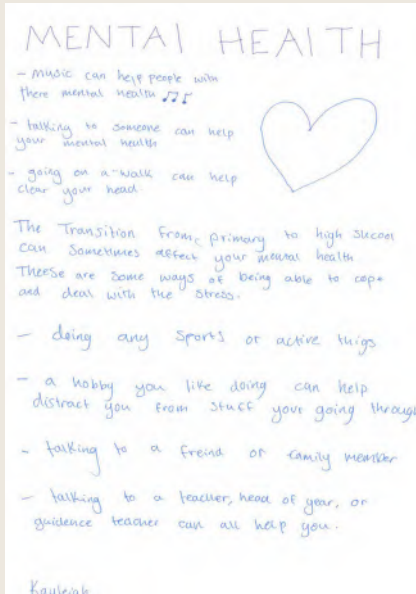
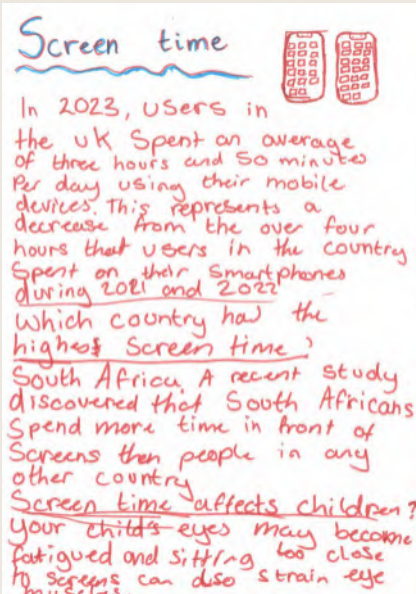
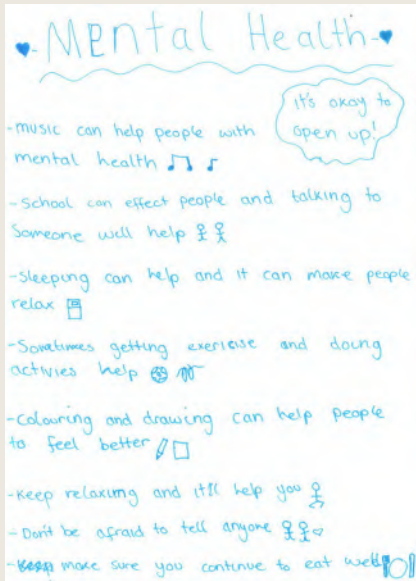
The process for requesting ASN specialist placements through the Internal Resource Group (IRG) has been reviewed following consultations with establishments. New referral paperwork and guidance have been shared with schools, alongside meeting dates for 2024-25. Revised documentation was also provided to Heads of Establishment in September 2024, including updated GIRFEC guidance. The transition policy has been successfully implemented, with schools receiving information on referring to the Operational Transition Group for additional support for school leavers. Feedback suggests the process is now more streamlined and transparent, with improved understanding among senior managers. Community Learning and Development (CLD) has supported volunteers at the Community Cafe, while the Educational Psychology Service (EPS) has shifted to a more relational, in-person support model for schools, receiving positive feedback. The EPS continues to support out-of-authority pupils, with successes including mainstream returns and transitions to college.



CASE STUDY: ALLOA ACADEMY



PARTNER Clackmannanshire





CASE STUDY: ALLOA ACADEMY



PARTNER Clackmannanshire

We implemented a multidisciplinary approach with S3 students within their English classes, focusing on health and wellbeing. Coalition partners collaborated with students in a small group setting to explore relevant data. All of the pupils in S3 were then introduced the Planet Youth (PY) approach. From this, a group of 15 pupils wanted to explore the approach further by focusing on topics in alignment with the dataset, to produce resources for primary-aged pupils.

GROWTH & IMPACT



YOUTH KNOWLEDGE

The growth and impact on youth knowledge from this session encompassed a deepened understanding of health-related topics such as caffeine, smoking, and cannabis use, including their effects on the body. Through engagement with the Planet Youth initiative, S3 pupils expanded their awareness of preventive measures concerning sleep, screen use and mental health. This knowledge empowered them to create educational posters aimed at primary school students, fostering peer-to-peer education and positively influencing younger age groups. Such initiatives not only enhance their own understanding but also equip them with valuable skills in communication, collaboration, and advocacy in health education.



ENGAGEMENT

The engagement fostered a collaborative effort among the NHS Health Improvement Service, the school, Planet Youth Officer, and S3 students. Through this initiative, students gained valuable knowledge and skills in help-seeking behaviors and reducing stigma surrounding mental health. By actively participating in discussions and workshops, they not only enhanced their own understanding but also became advocates for positive mental health practices among their peers. This youth-led approach not only promotes open dialogue and support for mental health issues but also encourages primary-aged young people to feel more comfortable seeking help and discussing mental well-being in their own lives.



ALIGNMENT WITH SCHOOL

The alignment with the school deepened the incorporation of the Health and Wellbeing PSE (Personal and Social Education) curriculum into the English curriculum, following the Curriculum for Excellence in Scotland. This integration emphasised the pivotal role of health and wellbeing, alongside prevention and health promotion, within the educational framework. By intertwining these subjects, students not only developed essential literacy skills through English but also gained a deeper understanding of personal health, societal wellbeing, and proactive health behaviors. This holistic approach supports students in making informed decisions, promoting resilience, and fostering a supportive environment where health education is integral to their overall learning experience.

THE VISION: YOUTH LED RESOURCES

Our vision was to inform pupils about Planet Youth and to create resources with pupils which are informative and can be used with younger pupils. The discussions which were central to the development of these resources were in alignment with the Curriculum for Excellence for PSE relevant to their age and stage of learning.

By involving these young people in the production of educational materials, we aim to share their expertise, experiences, and understanding with younger pupils in primary school, fostering a community of learning and growth.

THE SESSIONS: ENGAGEMENT AND EDUCATION

Using the PY data, Health Improvement Advisors from the NHS delivered a session focusing on the incidences of caffeine, smoking, and cannabis use within the population. They discussed the impact of these substances on the body and provided guidance on seeking help for young people concerned about themselves or their friends/family.

Following these sessions, Olivia (Planet Youth Officer) introduced the Planet Youth initiative to the entire current S3 roll and facilitated a session to produce resources and materials for primary school children. As a result, 15 pupils participated in a workshop to create posters on Planet Youth topics of their choice for use in primary schools. These topics included preventive measures and conversations around sleep, screen use and mental health. The completed posters are attached to the back of this case study.

THE OUTCOME: RESOURCES AND YOUTH LED INITIATIVE AS PART OF COALITION PLAN.

The project resulted in the creation of informative posters by S3 pupils, addressing key Planet Youth topics such as sleep, screen use and mental health. These resources, designed for primary school children, are part of a broader youth-led initiative within the coalition's health and wellbeing plan. The engagement of 15 students in this effort highlights the potential for youth-driven contributions to Public Health Education. Future work may include these young people in the co-design of transition materials and the development of positive peer workshop resources, further integrating their insights and experiences into ongoing upstream prevention efforts.

FUTURE IMPLEMENTATION AND EVALUATION

Future implementation involves S3 pupils in the development of additional health and wellbeing resources, including co-designing transition materials for primary pupils and creating positive peer workshop resources. The project will expand its scope to cover a broader range of health topics and strengthen partnerships with health organisations and community groups. Evaluation methods will include collecting qualitative feedback from primary pupils, teachers, and health professionals, conducting surveys and focus groups with S3 pupils and assessing the impact on primary pupils' knowledge and behaviours. Continuous improvement will be achieved by using feedback and impact data to refine resources and strategies, ensuring alignment with broader health and wellbeing initiatives.



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CASE STUDY: ALLOA FAMILY CENTRE



Alloa Family Centre summer sessions were run for the first time in 2024. These were co-facilitated in a collaboration between Social Work Family Support Workers, Planet Youth Officers and Community Learning and Development Workers and Development Workers.

GROWTH & IMPACT



FAMILY ENGAGEMENT

The sessions ran over 6 weeks of the holidays and over the last 5 weeks attracted 160 individuals, of which 92 are children aged 0-15.

Families are both local to the Family Centre and come from some of the villages in Clackmannanshire.

Sessions have been attended by parents, carers and grandparents. This has allowed families to spend weekly quality time together to foster community engagement and positive relationships, at no cost to the families.



FEEDBACK FROM FAMILIES

"Having these sessions have meant so much to me, I have space to talk to others in the community and [name] has had an opportunity to play with other little ones" – Mum of toddler, 2.

"We love how fun and relaxed the family centre is <3" – Young person.

"Lovely little group to bring my little one during the holidays. She is enjoying coming and doing lots of different things every week and socialising with other kids :)" Mum of toddler

"Me and the kids love coming here, met new friends and love all the staff x" – parent of two primary aged children.

"Fabulous Club! :) Outdoor area and activities (tick), Lots of indoor activities (tick), Messy Play (tick). Great for social interaction with other children and adults. Keep it going! We'll be here!" – grandmother of young person.

"My kids come running into the centre each Monday eager to get involved, they have told me they feel like they are cared about and valued here" – parent of two children aged 8 and 10.

"It has been great to have some free family activities. I hope they continue during other holidays. It has really helped our summer" – Mum, toddler, and primary aged children.

FOUNDATIONS OF THE SUMMER SESSIONS: ROUTES INTO PREVENTION

The Alloa Family Centre previously was a vibrant community hub. The recent perspective has been that the centre is only used by families engaging with social services. Work has been ongoing to challenge this perception and reduce the stigma which is associated with the building.

Through discussions it was identified that there was a limited pool of free provisions over the summer which families could engage with together. As such, Lynne, team leader from the Early Help Team and Olivia, Planet Youth Officer devised a free programme of activities based in the family centre. This provided an opportunity for families to attend, learn more about Planet Youth and spend quality time together – which we know is a protective factor.

YOUTH WORK'S PIVOTAL ROLE IN THE SUCCESS OF THE SESSIONS

Youth work is crucial in the success of upstream early prevention, especially for our summer sessions delivered in partnership with the Community Learning and Development team. This success hinged on several factors. Our CLD team has strong, trusting relationships with young people and their families which facilitated positive relationships with Planet Youth officers and started the conversations around prevention. CLD work enhances our young people's abilities in decision-making, problem solving and emotional regulation which is vital for preventing substance use.

The introduction of these sessions and the integration of our CLD workers helped to facilitate strong relationships and a working environment where families, children and young people expressed that they felt valued, safe and heard (see feedback from families).

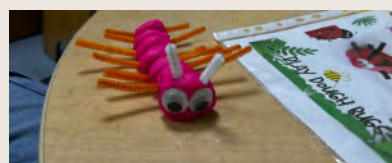
HOW DOES THIS LINK TO THE PLANET YOUTH MODEL?

The summer sessions delivered at the Alloa Family Centre align closely with the Planet Youth approach by emphasising community and family engagement, ensuring accessible support and maintaining consistency and continuity during a time when children and young people have less structure and more free time – which can increase the risks of engaging with risky behaviours. By removing financial barriers, these free sessions ensure that all families, regardless of economic status, can participate, fostering an inclusive environment that supports widespread community change.

This work focuses on building resilience and social connections, which are crucial components of the Planet Youth approach, which aims to strengthen the protective factors and reduce risk factors associated with substance use and other negative behaviours.

Through engagement with these sessions, children, young people and their families are less likely to seek out risky behaviours as a form of entertainment or stress relief, creating positive environments that support healthy development and align with the objectives of the Planet Youth model.

CASE STUDY: ALLOA FAMILY CENTRE





CASE STUDY: HEALING ARTS FESTIVAL FAMILY ARTS AND WELLBEING SESSION

PLANET
Youth®

PARTNER Clackmannanshire

The Healing Arts Festival 2024 is a celebration of the healing power of art and its impact on wellbeing. As part of this festival, Planet Youth in Clackmannanshire ran an additional summer session with families which focused on wellbeing and arts, which naturally encompasses the community engagement and early upstream prevention efforts as outlined within the planet youth approach.

GROWTH & IMPACT



FEEDBACK FROM FAMILIES

Feedback from participants at the Healing Arts Festival and throughout the summer sessions was overwhelmingly positive. Families appreciated the opportunity to engage in free, high-quality activities that promoted wellbeing and social interaction. Many parents and carers noted the positive impact on their children's behaviour and emotional health, attributing it to the supportive environment and the opportunity to engage in creative play.

One parent remarked, "It has been wonderful to have a space where my children can explore their creativity and connect with others. The arts festival was a highlight of our summer, and I hope events like this continue."



THE BENEFITS OF ART FOR WELLBEING

Arts have long been recognised as a powerful tool for promoting mental health and emotional wellbeing. The Healing Arts Festival arts and wellbeing session provided a space where families could express themselves freely, engage in creative activities, and connect with others in a supportive environment. These activities are not only enjoyable but also therapeutic, helping participants to process emotions, reduce stress, and build resilience.

For the children involved, the arts offered an outlet for self-expression and a means of developing social connections. The collaborative nature of the activities, such as a participatory fingerprinting tree, encouraged teamwork, communication, and a sense of accomplishment. These experiences contribute to the development of important life skills, such as emotional regulation and problem-solving, which are critical for preventing substance use and other risky behaviours.

COMMUNITY ENGAGEMENT AND THE PLANET YOUTH MODEL

The Healing Arts Festival exemplified the core principles of the Planet Youth model, which seeks to strengthen community bonds and create environments that support healthy youth development. By bringing families together in a creative and positive setting, the festival fostered a sense of belonging and collective identity. This is crucial for building a community where young people feel valued and supported, reducing the likelihood of engagement in risky behaviours.

The collaborative approach to organising the summer sessions, including the Healing Arts Festival, highlights the importance of multi-agency partnerships in achieving these goals. The involvement of various stakeholders, including social work, youth development, and community learning professionals, ensured that the event was inclusive and responsive to the needs of the community.

CONCLUSION: LOOKING AHEAD

The Healing Arts Festival at the Alloa Family Centre was a fitting conclusion to a successful summer programme that not only provided much-needed activities during a critical time but also laid the groundwork for ongoing community engagement and wellbeing initiatives. As we look ahead, the success of this event underscores the importance of integrating arts and creative expression into our community programmes, in alignment with the Planet Youth model, to support the healthy development of our young people and the wider community. The positive outcomes from the summer sessions, particularly the Healing Arts Festival, have set a strong precedent for future initiatives. We are committed to continuing this work, fostering an environment where creativity, community, and wellbeing are at the heart of everything we do.



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FWP & What Matters to You (WM2U) October 2024

Activity to Date

The collaboration between the Family Wellbeing Partnership (FWP) and What Matters to You (WM2U) was established in Clackmannanshire in Autumn 2023. Delivered in partnership with The Hunter Foundation and BBC Children in Need, this approach builds on the power of local people to identify practical solutions to improve the use of public resources in local communities. Through introductory sessions at Hawkhill Community Centre and The Bowmar Community Centre, a cafe conversation event (Autumn 2023) and follow up meetings, local people and practitioners were encouraged to act upon what matters to them and their communities. This work highlights another example of person-centred, relational ways of working with community voice at the core.

Now that awareness has been raised and the approach is established throughout Clackmannanshire, community members and groups are contacting FWP staff directly to request information. The process for specific projects is straightforward and ongoing support is provided. Initially, interested groups (either existing or newly established) meet with a WM2U representative and a FWP representative and are supported to complete a proposal form. On approval (by WM2U and FWP) small amounts of funding are provided through the WM2U Make it Happen fund, matched by Clackmannanshire Family Wellbeing Partnership (FWP). Thereafter, there are monthly support meetings. Although there are no restrictions on the type or nature of projects that are funded, those without clear community voice do not make it to the funding stage.

To date, four projects have come to fruition in Clackmannanshire.

1. Ben Cleuch Polytunnel Gardening

Working with the Education Refugee Team, the New Scots group has refurbished a poly tunnel and is growing produce for the community. This supportive environment has enabled some to share existing skills while others learn new skills.

<https://wm2u.co.uk/news/believe-tomorrow>

2. Crochet Comforts

Working with Community Learning and Development (CLD) at the Bowmar Community Centre, this WM2U project provides a safe space for people to learn a new skill and to seek support. Recently small groups of young people from a nearby secondary school (Alloa Academy) have also requested to learn this skill and have been coming to The Bowmar Centre with teachers to do so.

<https://wm2u.co.uk/news/crochet-comforts>

3. Tullibody Family Foodies

Working with Abercromby PS staff, a group of parents and carers have re-instated and further developed family cooking groups. The group is also enhancing relationships between children, families and staff.

<https://wm2u.co.uk/news/families-together-tullibody-parents>

4. Sauchie Community Collaborative

The Sauchie Resource Centre Manager and centre members are working with FWP staff to create opportunities for the local community to share their views and to encourage wider involvement in community issues and initiatives. In July 2024, a community day at the centre brought in over 100 local people who shared their opinions and needs.

2024-26 Plans

The four groups above will continue to have monthly support meetings with WM2U and FWP. Three other projects are currently in discussion. One project is with the Alloa Family Centre – to raise awareness of the many purposes of the Family Centre - with an initial discussion scheduled for November 2024. Discussions are also being planned with Alloa Men's Club to discuss mentoring for young people and with Park Early Learning Centre to discuss early upstream prevention work. In addition to the WM2U and FWP representatives, a learning partner (Animate) has recently joined the process to capture ongoing learning.

With funding from What Matters to You (WM2U), there are plans to offer a Columba 1400 Values Based Leadership (VBL) residential experience to a range of Clackmannanshire WM2U group members. This will further establish the investment and commitment of the

Council to empower local people and to support the development of initiatives that matter to the wider community.

Outcomes and Impact

There are multiple positive outcomes from the partnership work with What Matters to You (WM2U) which contribute to Council wide transformation activity and Be the Future. A shared and embedded understanding of the Family Wellbeing Partnership (FWP) has grown and community voice has been amplified and exercised through the WM2U projects. Concrete examples are provided by the four projects introduced above. All of the projects contribute towards the Family Wellbeing Partnership goals as follows.

1. Developing the conditions to enhance wellbeing and capabilities

Each of the projects enables more opportunities to be realised for local people, bringing people together for learning and enjoyment and creating informal support networks. Already people are reporting feeling more confident, enjoying developing new skills and meeting new people. The Ben Cleuch Polytunnell group and the Tullibody Family Foodies also promote enhanced physical wellbeing through growing produce for families and sharing new healthy recipes.

2. Creating a community where everyone has the opportunity to flourish

Group participants are gaining new skills and developing new relationships, supported by practitioners. Group leaders are gaining confidence and enjoying new experiences. For example, the group leader of Crochet Comforts (a parent of school aged children) is now teaching small groups of young people from a secondary school and has been funded for commissioned work – for example, to provide small, crocheted gifts for a recent group of Finnish visitors to Clackmannanshire.

An additional benefit of this approach is establishing examples for others to follow. Already other community members are coming forward to discuss the possibility of running different groups (such as a community art class). Furthermore, this way of working sparks new ideas – for example, the Tullibody Family Foodies parents have started to investigate the possibility of running a youth club at Tullibody Civic Centre.

3. Delivering a radical shift towards preventative and relational model of public services

Small amounts of funding are making a real difference in people's lives and changing the nature of the relationship between the Council and the community. Aligned with the

Scottish Approach to Service Design, this approach is empowering individuals and communities by involving them in the design and delivery of the services they want.

4. Ensuring voice and agency of Clackmannanshire people and communities is at the heart of decision making

Community voice underpins all the WM2U work in Clackmannanshire, empowering communities to lead and participate in place-based initiatives that matter to them. This process is expanding the community of change makers throughout Clackmannanshire, adding to those already established through The Lens process in 2022 and 2023.

The impact of WM2U work in Clackmannanshire has been documented from the start and stories and statements feature on the What Matters to You (WM2U) website:
<https://wm2u.co.uk/what-matters-you>.

Report to Audit & Scrutiny Committee**Date of Meeting: 6 February 2025****Subject: Place: 2023/24 Year End Business Plan Update****Report by: Strategic Director, Place****1.0 Purpose**

- 1.1. The report updates the Committee on the year-end status of the 2023/24 Place Business Plan.

2.0 Recommendations

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

3.0 Considerations

- 3.1. Place Services 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>)
- 3.2. The Department continues to play a key part in the coordination and management of response, transformation and business as usual activity. This work ranges Housing Services, Corporate and Educational Asset Management, Soft Facilities Management; Environmental Services and Development Services, including City Region Deal activity.
- 3.3. 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.

4.0 Key Achievements

- 4.1 Clackmannanshire has grown its reputation as a leader in Active Travel. Through 2023-24, we developed Phase 1 of our Active Travel programme linked to the City Region Deal investment. This saw the Menstrie to Alva route completed and under budget. The Department is now focusing on the extension into Phase 2 from Alva to Fishcross.
- 4.2 The Department set itself a priority to reduce void levels of our Housing Stock, to ensure that the Council is maximising the potential income for reinvestment back to

improving our housing stock for our tenants. In this reporting period we reduced by approximately half the void levels in line with our improvement plan.

5.0 Challenges

- 5.1. It is important to highlight to the Committee that whilst the Department has worked to progress the priorities set out in our Business Plan, there have been a number of factors that have prevented us from activity some of those priorities, some of which has been outwith Officers control.
- 5.2. There have been significant capacity strains within key service functions, Property Services for one. This has delayed works on developing the Learning Estate Strategy and the Asset Management Strategy. These are now planned for 2025-26.
- 5.3. There have been other developments delayed such as the Westhaugh Travellers Site Development, however this was outwith the Department's control, as the primary contractor through HUBCO East went into administration. Officers have worked closely with HUBCO East and Scottish Government and work is underway to recommence the project in this current fiscal year.

6.0 Areas for Further Development

- 6.1. It is recognised that there are a number of areas that require further development, notwithstanding the points referenced within the previous Section. The Department as part of their 2024-25 Business Plan has carried forward a series of actions, with a new Strategic Director appointed, there is a refocus on service standards including the Department performance on Elected Member enquiries, Complaint handling and FOI/EIR handling.

7.0 Conclusion

- 7.1. The Place Department continues to demonstrate impact in terms of delivering business critical and essential front line Council 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 as well as a supporting function for other Council Services and Departments.
- 7.2. Not all the intended actions within the 23/24 plan have been delivered to date; however these actions have been reassessed and are being taken forward into the 24/25 business plan, agreed by Council in October 2024. Staff continue to be stretched and tested over a prolonged period, and capacity and skills gaps have impacted on some plans. Despite ongoing challenges and risks, whether these are inflation, labour supply or financial constraints, the Portfolio demonstrates achievement and response in the context of enabling delivery of Council priorities. This is testament to the flexibility, expertise, experience and resilience of its many dedicated staff.

8.0 Sustainability Implications

- 8.1. There are no direct sustainability implications arising from this report.

9.0 Resource Implications

9.1. Financial Details

9.1.1 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 ☒

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

Yes ☒

9.2. Staffing

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

10.0 Exempt Reports

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

11.0 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**

Complies with relevant Council Policies ☒

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 ☐ No ☒ Not applicable

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 ☒

14.0 Appendices

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

Appendix A – 2023/24 Performance Report

15.0 Background Papers

- 15.1 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 ☐

Place Business Plan 2023/24 (link can be found at J:\PLACE Directorate\Reports to Council and Committee\2. Audit & Scrutiny Committee\2025\1. 6 February 2025\2. Place Year End Business Plan Report 2023-24 - Strategic Director\Papers - Final)

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Kevin Wells	Strategic Director	2533

Approved by

NAME	DESIGNATION	SIGNATURE
Kevin Wells	Strategic Director	

Place Directorate Business Plan 2023/24 - Year End Progress Report

1.1 Performance Indicators - Housing Service

Code	Performance Indicator	2021/22	2022/23	2023/24			Management Comments	Lead
		Value	Value	Value	Target	Scotland		
HMO ALL 035	Rent Loss due to Void (empty) Properties	0.66%	1.02%	1.34%	1.00%	1.79%	In recognition of the deterioration of VOID performance following the Senior Manager being of Secondment a Voids Improvement Plan and financial investment was submitted to Council in June 2023. Due to (A) the lag in the performance matrix and (B) the delay in getting the voids Action Plan underway, it was only during 2024/25 that we have seen the results of this agreed Council action.	Tenancy Services Coordinator - Housing Options; Team Leader Tenancy Services
HMO HPI 005	Council Dwellings Meeting the Scottish Housing Quality Standard (SHQS)	59.87%	39.33%	93.54%	100.00%	77.80%	Work continued corporately with the Energy Efficiency Team, providing updated EPC's for those that had went out of the ten year anniversary date. As noted to Council this was the major reason for the change in the SHQS compliance.	Senior Manager - Housing
HMO HPI 157	Council Dwellings Meeting the Energy Efficiency Standard for Social Housing (ESSH)	62.28%					Recording of this indicator has been temporarily paused nationally due to regulatory changes.	Senior Manager - Housing
HMO PRO 006	Average Time to Complete Non-emergency Repairs (working days)	4.90	5.41	5.12	7.08	10.03	Excellent performance continued. However, it is acknowledged that this is expensive to respond and react rather than be proactive.	Senior Housing Officer
HMO TEM 011	Rent Arrears (as % of rent due in the year)	10.66%	11.51%	11.15%	11.51%	9.50%	This performance indicator is largely influenced by Former Tenant Arrears (FTA). The housing Service redesign was approved following organisation redesign principles and includes the return of FTA management to the service from Revenues.	Team Leader Tenancy Services

1.2 Performance Indicators - Property Service

Code	Performance Indicator	2021/22	2022/23	2023/24			Management Comments	Lead
		Value	Value	Value	Target	Scotland		
ASM FAC 02a	Operational Buildings Suitable for Current Use	91.4%	91.4%	91.4%	85.0%	85.5%	The Council manages a portfolio of 81 public buildings, including the school estate. Suitability is assessed annually against the 'core facts criteria', with 91.4% graded good or satisfactory.	Project Co-ordinator
ASM FAC 03a	Council Buildings in Satisfactory Condition (by floor area)	97.5%	97.5%	97.5%	95.0%	89.8%	Building condition is assessed annually with 97.5% considered to remain as satisfactory.	Project Co-ordinator

1.3 Performance Indicators - Development Service

(22/23 data shown where 23/24 not yet published)

Code	Performance Indicator	2021/22	2022/23	2023/24			Management Comments	Lead
		Value	Value	Value	Target	Scotland		
EDE LGB B1b	Business Gateway Startups (per 10,000 population)	15.7	17.2	16.6	14.3	13.6	2023/24 comment: Clackmannanshire continues to be a positive location for business startup and survival. Business Gateway supports both startup and expanding businesses. 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.	Senior Manager - Development
EDE LGB B3a	Properties with Superfast Broadband	98.2%	98.7%	98.7%	95.5%	95.5% (22/23 benchmark)	2023/24 comment: Clackmannanshire effectively has complete geographical access to Superfast broadband. This allows for initiatives to reduce all forms of exclusion and poverty, while also facilitating improved productivity at home and in the workplace.	Senior Manager - Development
EDE SLD 19a	Town Vacancy Rate (vacant retail units as % of total - Alloa town centre only)	18.6%	22.7%	10.8%	22.7%	12.0% (22/23 benchmark)	2023/24 comment: Town centre vacancies have declined in the most recent year, due to a full review of the defined area of Alloa town centre. Properties previously included, but outside the defined boundary of the town centre have not been included in the 2023/24 data. This provides a much more accurate figure for the rate of vacant units in Alloa town centre.	Senior Manager - Development
SAP DEM EW%	Unemployment Rate - All Working Age (16-64 years)	4.9%	3.7%	5.4%	3.2%	3.1%	2023/24 comment: The 2023-24 unemployment rate for 16-24 year-olds in Clackmannanshire is lower than the working age population aged 16-64. The 16-24 year-old cohort has seen an increase in the unemployment rate to 2023/24, as has the overall working age cohort. Both remain above both the target figure and the Scottish average. The Clackmannanshire Works programme has succeeded in reducing the impact of unemployment in Clackmannanshire. The programme has supported 773 clients of working age to move closer to the labour market in 2023/24. In the same period, 199 clients progressed into sustained employment. 2023/24 comment: The 2023-24 unemployment rate for 16-24 year-olds in Clackmannanshire is lower than the working age population aged 16-64. The 16-24 year-old cohort has seen an increase in the unemployment rate to 2023/24, as has the overall working age cohort. Both remain above both the target figure and the Scottish average. The Clackmannanshire Works programme has succeeded in reducing the impact of unemployment in Clackmannanshire. The programme has supported 773 clients of working age to move closer to the labour market in 2023/24. In the same period, 199 clients progressed into sustained employment.	Team Leader Economic Development; Senior Manager - Development
SAP DEM EY%	Unemployment Rate - Young People (16-24 years)	6.3%	4.8%	5.1%	3.5%	3.4%		Team Leader Economic Development; Senior Manager - Development

Code	Performance Indicator	2021/22	2022/23	2023/24			Management Comments	Lead
		Value	Value	Value	Target	Scotland		

Code	Performance Indicator	2021/22	2022/23	2023/24			Management Comments	Lead
		Value	Value	Value	Target	Scotland		
DEV DMA 11a	Immediately Available Employment Land (as % of land allocated for employment in Local Development Plan)	68.5%	68.0%	26.1%	27.2%	22.8%	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).	Planning & Building Standards Team Leader; Senior Manager - Development
DVM PBS P1c	Average Time to Process Commercial Planning Applications (weeks)	6.5	7.2	9.3	11.7	12.0	Average processing time 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.	Planning & Building Standards Team Leader
DVM E&S 005	Carbon Dioxide Emissions - All (per head of population)	9.5 tonnes	9.2 tonnes	9.1 tonnes	6.6 tonnes	4.8 tonnes	<p>The source data illustrates how industry emissions are by far the largest contributor, accounting for 37.1% of emission in Clackmannanshire, followed by commercial gas and electricity and then Transport. Emission figures indicate that total public sector emissions are a small proportion of the area-wide total at 2.01%.</p> <p>While regional emission in Clackmannanshire have shown a downwards trajectory since 2005, a revision of the benchmark from 2018 onwards to include Agriculture Livestock, Agriculture Soils and Landfill emissions data led to an increase between 2017 and 2018.</p> <p>Clackmannanshire's per capita emissions, at 9.8 tCO₂e, are higher than the Scottish average of 7.1 tCO₂e. Additionally, out of the 32 Scottish local authorities, Clackmannanshire has the 11th highest per capita emissions.</p> <p>The disproportionate significance of industry emission to Clackmannanshire is part of the reason for the above average per capita emissions with 3.6 tCO₂e for industry emissions in Clackmannanshire compared to an average of 1.12 tCO₂e across Scotland as a whole.</p>	Senior Manager - Development; Home Energy Strategy Officer
DVM E&S 006	Carbon Dioxide Emissions - Within Local Authority Scope (per head of population)	6.3 tonnes	6.5 tonnes	6.1 tonnes	5.9 tonnes	4.3 tonnes	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	Senior Manager - Development; Home Energy Strategy Officer

Code	Performance Indicator	2021/22	2022/23	2023/24			Management Comments	Lead
		Value	Value	Value	Target	Scotland		
							and, for all emissions, we were among only 3 authorities whose results continued improving in 21/22.	
DVM E&S 007	Carbon Dioxide Emissions - From Transport (per head of population)	16.6 tonnes	18.3 tonnes	18.7 tonnes	26.8 tonnes	26.8 tonnes	The Council welcomes the addition of new benchmarked emissions indicators, though there may be issues with this newly-released data. We are attempting to clarify the exact formula in use, but this relates only to whether results are 'per head of population' as stated, or whether they have been calculated 'per 1,000 population', which would affect all authorities' results equally. The data does 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.	Senior Manager - Development; Home Energy Strategy Officer
DVM E&S 008	Carbon Dioxide Emissions - From Electricity (per head of population)	41.1 tonnes	36.7 tonnes	34.8 tonnes	46.1 tonnes	43.5 tonnes	The Council welcomes the addition of new benchmarked emissions indicators, though there may be issues with this newly-released data. We are attempting to clarify the exact formula in use, but this relates only to whether results are 'per head of population' as stated, or whether they have been calculated 'per 1,000 population', which would affect all authorities' results equally. The data does 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.	Senior Manager - Development; Home Energy Strategy Officer
DVM E&S 009	Carbon Dioxide Emissions - From Natural Gas (per head of population)	48.2 tonnes	41.5 tonnes	41.2 tonnes	57.2 tonnes	57.2 tonnes	The Council welcomes the addition of new benchmarked emissions indicators, though there may be issues with this newly-released data. We are attempting to clarify the exact formula in use, but this relates only to whether results are 'per head of population' as stated, or whether they have been calculated 'per 1,000 population', which would affect all authorities' results equally. The data does 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.	Senior Manager - Development; Home Energy Strategy Officer
EDE EMP 005	Unemployed People Assisted into Work via Council Employability Programmes	9.0%	39.3%	21.0%	17.4%	12.9%	Unemployment rates are higher amongst young people than the overall working age population. 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, with rates substantially above the Scottish average.	Senior Manager - Development
EDE LGB B2a	Residents Earning Less	N/A	N/A	N/A	14.4%	9.4%	It is disappointing that the Office for National Statistics is now only	Senior Manager -

Code	Performance Indicator	2021/22	2022/23	2023/24			Management Comments	Lead
		Value	Value	Value	Target	Scotland		
	than the Real Living Wage						providing this vital data for the 19 largest authorities, though national bodies hope to address this. The Clackmannanshire Anchor Partnership endorsed the Good Employment Charter on 21-Apr-23, subsequently approved by the Alliance on 23-Jun-23. A working group of the Anchor Partnership will be created to oversee delivery. It is anticipated that this will improve Real Living Wage (RLW) levels across the County.	Development
DVM PBS P1b	Cost per local planning application	£3,575	£3,362	£4,055	£4,341	£5,538	Lower than average and variable depending on number of applications received by small planning team. Staff undertake additional functions beyond assessment of planning applications (eg. capital project management, bid preparation, Place making , City Region Deal, Local Development Plan assistance and environmental improvement work).	Planning & Building Standards Team Leader
DEV LFR 026	Cost of Economic Development & Tourism per 1,000 population	£37,707	£74,350	£83,961	£71,944	£109,349	Further investigation into the detailed inclusions and exclusions in this calculation will be conducted in order to set future targets, as investment in essential employability and business support services is critical for inclusive growth.	Senior Manager - Development
RGY EHE 014	Cost of Environmental Health per 1,000 population	£13,648	£11,001	£11,710	£15,032	£15,239	After the service cost being skewed by grant funding from the Scottish Government to deal with the pandemic, the funding model favouring smaller Councils, the costs are nearer to pre pandemic levels. The service is now concentrating on re-establishing work streams and service provision that was suspended during the pandemic. This "recovery" phase will take several years, particularly for food regulation, and follows an approved plan.	Senior Manager - Development
RGY TST 004	Cost of Trading Standards per 1,000 population	£1,891	£1,281	£1,758	£4,721	£7,063	Savings have been made in recent years due to unfilled vacancies but this has put significant strain on service delivery. Stirling Council is actively seeking to address the shortfall in staffing in order to ensure that service provision is maintained at the required level. This is proving challenging, however.	Senior Manager - Development

1.4 Performance Indicators - Environment Service

(22/23 data shown where 23/24 not yet published)

Code	Performance Indicator	2021/22	2022/23	2023/24			Management Comments	Lead
		Value	Value	Value	Target	Scotland		
ENV STR 02e	Street Cleanliness Score (% 'acceptable')	90.4%	96.5%	90.8%	90.6%	92.1%	Whilst Street Cleanliness was above target it still remained below Scotland target @ 92.1%. StCare redesign will improve efficiencies and will see benefits in 2025-2026	Senior Manager – Environment Land Services Team Leader
ENV WMA 04c	Household Waste Composted or Recycled	50.0%	51.0%	52.0%	51.0%	43.5%	Bold changes in our recycling and collection service made by the Council and successfully implemented by the Waste Service has shown an increase in household waste being recycled. Moving from residual waste being collected every 3 weeks to 4 weeks and the introduction a new paper and card bin combined with normal service resuming after Covid-19 has led to an improvement in our recycling rates above National targets.	Senior Manager – Environment Waste Team Leader
RAT RCI 001	A Class Roads to be Considered for Treatment (3 year average)	26.9%	27.1%	27.9%	25.0%	28.9%	The quality of our road network is a major factor for road safety in relation to the possible impact of incidents on families and communities, but also the potential financial implications of insurance claims and reputational damage against the Council, as well as ensuring we exploit our key central location to attract people and trade to and through the area. Though we remain above the Scottish average for unclassified roads we are below average on all A, B & C class roads, a continued reduction in roads maintenance budgets both capital and revenue has caused this drop in treatments for these roads. Roads and winter maintenance continues to be a high priority and must be managed within the context of reducing budgets across many environmental services.	Senior Manager – Environment Team Leader (Roads & Street Lighting)
RAT RCI 002	B Class Roads to be Considered for Treatment (3 year average)	19.0%	24.7%	23.7%	20.0%	32.5%		Senior Manager – Environment Team Leader (Roads & Street Lighting)
RAT RCI 003	C Class Roads to be Considered for Treatment (3 year average)	27.0%	26.3%	25.0%	30.0%	33.4%		Senior Manager – Environment Team Leader (Roads & Street Lighting)
RAT RCI 004	Unclassified Roads to be Considered for Treatment (4 year average)	40.8%	40.6%	37.9%	42.0%	36.2%		Senior Manager – Environment Team Leader (Roads & Street Lighting)

Code	Performance Indicator	2021/22	2022/23	2023/24			Management Comments	Lead
		Value	Value	Value	Target	Scotland		
SAP PHO T01	Active Travel to School	65.9%	66.1%	65.3%	50.8%	50.2%	Exemplary levels can be seen, with top quartile rankings in 14 of the last 15 years, and the 2nd highest levels of any authority for the last 2 years. Significant investment has been made in our 'Connected Clackmannanshire' Network with improved active travel and safer routes to school initiative to promote accessible and sustainable active travel routes, alongside work to make our roads more walking- and cycling-friendly.	Senior Manager – Environment Transportation Team Leader

Code	Performance Indicator	2021/22	2022/23	2023/24			Management Comments	Lead
		Value	Value	Value	Target	Scotland		
ENV SHS POS	Satisfaction with Parks & Open Spaces (3 year average)	87.4%	88.0%	85.0%	87.3%	87.3%	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.	Senior Manager – Environment Land Services Contracts Manager
ENV SHS STR	Satisfaction with Street Cleaning (3 year average)	63.3%	65.0%	66.3%	58.7%	58.3%		Senior Manager – Environment Land Services Contracts Manager
ENV SHS WMA	Satisfaction with Refuse Collection (3 year average)	64.3%	65.0%	73.3%	76.0%	78.0%		Senior Manager – Environment Team Leader (Roads & Street Lighting); Performance & Quality Officer
ENV LAN 01a	Cost of parks & open spaces per 1,000 population	£14,272	£18,374	£17,990	£18,374	£23,311	Cost of parks and open spaces continues to be on target, whilst there has been capital investment from the Scottish Government for new infrastructure, savings have been made on operational revenue budgets.	Senior Manager – Environment Land Services Contracts Manager
ENV STR 04a	Cost of street cleaning per 1,000 population	£12,283	£16,046	£15,014	£14,860	£16,068	Increased due to backlog of work due to Covid-19, illicit dumping and house land clearances also impacted street cleaning teams.	Senior Manager – Environment Land Services Contracts Manager
ENV WMA 02c	Cost of refuse collection per premise	£45	£51	£58	£51	£76	Cost remains below national average which highlights how efficient the waste service delivery model currently is. Continued low costs of operating will be achieved via ongoing work towards Councils Net Zero targets, new target operating model and structural changes.	Senior Manager – Environment Team Leader (Roads & Street Lighting)
ENV WMA 02d	Cost of refuse disposal per premise	£110	£112	£108	£112	£95	Costs held steady through increase in new build properties and significant drop in residual waste tonnage collected / deposited at Forthbank Recycling Centre of 690 tonnes, resulting in reduction in landfill tax of around £69,000. Net Zero targets, landfill ban and planned changes to collections next year should result in reduced tonnages to landfill.	Senior Manager – Environment Team Leader (Roads & Street Lighting)
RAT RDS 024	Cost of maintenance per kilometre of road	£12,968	£9,573	£14,449	£10,955	£12,844	Increase in wholesale costs for materials and availability has reduced the number of schemes that could be delivered. This has had a significant impact on our road condition indicator performance and will only continue with the increased inflation. There are still concerns regarding the accuracy and consistency of authorities' reporting for this measure. The current level of investment will not keep the road network in a 'steady state'.	Senior Manager – Environment Team Leader (Roads & Street Lighting)

1.5 Performance Indicators - Place Directorate

(benchmarks not available for local indicators)

Code	Performance Indicator	2021/22	2022/23	2023/24	Management Comments	Lead
		Value	Value	Value		
PLC CNQ BUS	% Councillor enquiries responded to within timescale - Place	86.7%	84.2%	90.7%	There were 399 Member enquiries attributed to Place, which accounts for 84% of total Member enquiries.	Strategic Director - Place
PLC FOI GOV	% Freedom of Information requests responded to within timescale - Place	92.9%	94.2%	92.5%	There were 544 FOIs attributed to Place, which accounts for 40.75% of Council FOIs	Strategic Director - Place
PLC MPQ BUS	% MP/MSP enquiries responded to within timescale - Place		85.7%	73.8%	There were 122 MSP/MP enquiries attributable to Place, which accounts for 78.71% of Council MSP/MP enquiries	Strategic Director - Place
PLC C01 CUS	Number of formal complaints received - Place	280	150	152	Complaints attributed to Place account for 54.49% of total Council complaints. Top 4 themes are service provision (121); policy and procedure (130); employees (9); communication (9)	Strategic Director - Place
PLC C02 CUS	% formal complaints closed within timescale - Place	41.8%	72.2%	55.3%	Performance within this reporting period has dipped from 2022/23. This has become a priority for the new Strategic Director, appointed in August 2024.	Strategic Director - Place
PLC C04 CUS	% formal complaints dealt with that were upheld/partially upheld - Place	33.3%	46.6%	45.4%	The level of upheld/partially upheld complaints has broadly remained stable, and the service strives to use the learning gained to make service improvements and/or avoid similar issues from arising.	Strategic Director - Place

2.1 Actions - Sustainable Inclusive Growth

Code	Action	Desired Outcome	Due	Progress	Lead
PLC 213 101	Climate Change Strategy and Climate Emergency Action Plan	To ensure that all strategic decisions , budgets and approaches to planning decisions are in line with a shift to net zero greenhouse gas emissions by 2045	31-Aug-2024	Finalreport including Action Plan scheduled to go to Council in November 2024.	Senior Manager - Development
PLC 213 103	Deliver Community Wealth Building Action Plan Outcomes	For Clackmannanshire to become a community wealth building place through: progressive procurement of goods and services; making financial power work for local places; socially productive use of land and assets; fair employment and just labour markets and plural ownership of the economy.	31-Mar-2025	Draft Progress Report complete and ready to enter committee cycle.	Senior Manager - Development
PLC 213 105	Review of the Local Development Plan and the preparation of a Proposed Plan, in line with NPF4 and the Regional Spatial Strategy for the Forth Valley area.	To set out how Clackmannanshire will develop and change over the next 10-15 years, meeting planning legislation and setting out the Council's strategic objectives in spatial terms.	31-Mar-2028	The Service has been awaiting Scot Govt. Guidance on the production of Evidence Reports before embarking on formal review of the current LDP. Early stages of evidence gathering have commenced and will be stepped up in 24/25.	Senior Manager - Development
PLC 213 109	Produce Alloa Town Centre Masterplan	To develop a coordinated masterplan to guide investment and provide a prospectus of potential opportunities to stimulate public and private sector investment in the regeneration of Alloa.	31-Mar-2025	Building on the Living Alloa project and dovetailing with Innovation Hub CRD project, early survey work is underway on a new Masterplan (Place Plan) for Alloa TC. Budget approval will be sought for resources to prepare a plan in 24/25.	Senior Manager - Development
PLC 213 111	Deliver CRD programme in line with delivery plan/financial profile	To meet the outcomes that are specified in the Deal Benefits Realisation strategy	31-Mar-2024	Spend on Clacks projects is largely in line with profile. Council endorsed the combination of SIEC, ILIH, CHT and Digital to enable the development of Alloa Innovation Campus. This initiative which is designed to bring investment to Clackmannanshire, in particular, Alloa is largely dependant on the University of Stirling who lead on much of this initiative.	Strategic Director - Place
PLC 234 101	Develop and secure governance on phase 1 of the property asset management plan	To ensure the long term financial and environmental sustainability of the Councils non-housing assets	31-Mar-2025	Arrange for the disposal of identified assets. Some Identified Phase 1 Assets have been sold. Procurement of Agency Surveyor required to complete remaining.	Senior Manager - Property
PLC 234 102	Develop and secure governance on phase 2 of the property asset management plan	To ensure the long term financial and environmental sustainability of the Councils non-housing assets	31-Mar-2025	Arrange for Disposal of identified assets. Procurement of Agency Surveyor required to complete.	Senior Manager - Property
PLC 234 103	Co Produce a Regional Economic Strategy	Produce with Stirling and Falkirk Councils, a Regional Economic Strategy to identify areas where the Forth Valley can collectively work to deliver economic benefit	31-Mar-2025	A final draft is now expected in March 2025.	Senior Manager - Development
PLC 234 104	Refresh Clackmannanshire	To ensure that economic development activities	31-Mar-	Early work gathering evidence and economic data for	Senior Manager -

Code	Action	Desired Outcome	Due	Progress	Lead
	Economic Strategy	meet current and emerging priorities, risks and opportunities	2025	the strategy has started.	Development
PLC 234 105	Clackmannanshire Investment Strategy	Full funding officer post as first stage of implementation of Investment Strategy	31-Aug-2024	The works associated with this action was delayed and anticipated that it will not now occur until 24/25-25/26	Senior Manager - Development
PLC 234 106	Review Local Economic Partnership (LEP) governance arrangements	To ensure compliance with Council and partnership governance arrangements	31-Aug-2024	Action is complete.	Senior Manager - Development

2.2 Actions - Empowering Families & Communities

Code	Action	Desired Outcome	Due	Progress	Lead
PLC 213 201	Undertake condition survey & option appraisal of Learning Estates Primary School property assets.	To inform the next iteration of the Learning Estate strategy.	31-Dec-2024	Work on-going. Procurement issues have delayed completion of this task.	Senior Manager - Property
PLC 213 202	Develop the next iteration of the Learning Estate Strategy	To secure the long term operational, financial and environmental sustainability of the learning estate in order to support quality educational outcomes for our young people.	30-Apr-2025	Delayed as a consequence of procurement delay on condition surveys and options appraisals	Senior Manager - Property
PLC 213 203	Deliver Learning Estate capital projects	To secure the long term operational, financial and environmental sustainability of the learning estate in order to support quality educational outcomes for our young people	30-Apr-2025	Future Learning Estate Capital Projects will be identified based on outcome of Options Appraisals and Strategy.	Senior Manager - Property
PLC 213 205	Develop plans to implement Scottish Government policy for free school meals for P6 and	To ensure that the Council meets its statutory responsibilities, delivers a service that is co-designed with Education, and to secure additional funding for capital improvements.	30-Apr-2026	Roll out of free school meals delayed by Scottish Government	Senior Manager - Property
PLC 213 207	Deliver Westhaugh Gypsy/Traveller site improvement project	To provide modern, low carbon, purpose built facilities that meet the needs of the community	30-Apr-2025	Delay - Formal site start delayed due to TIER1 contractor going into administration. HUBCo looking to appoint new Tier 1 contractor to start on site early 2025.	Senior Manager - Property; Senior Manager - Housing
PLC 213 208	Tenant Participation Improvement Plan	To establish staff resource and a refreshed TP strategy to improve tenant engagement and to meet the Council's responsibilities under the Scottish Housing Regulator's Charter.	31-Aug-2024	Complete – Strategy to be presented to Council August 2024.	Senior Manager - Housing

2.3 Actions - Health & Wellbeing


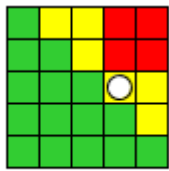
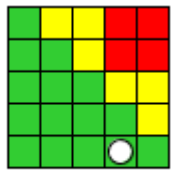
Code	Action	Desired Outcome	Due	Progress	Lead
PLC 213 301	Support the development of the Wellbeing hub	To facilitate the quality design and effective delivery of new leisure and wellbeing facilities and services.	31-Mar-2025	Property and Community Benefit support will continue to be provided for the development of the Wellbeing Hub as required.	Senior Manager - Development; Senior Manager - Environment; Senior Manager - Property
PLC 213 302	Deliver Housing Capital plan	To secure the long term operational, financial and environmental sustainability of the Council's housing stock and service provision, meeting the needs of current and future tenants	31-Mar-2025	Capital Plan reviewed and delivered on an annual basis, forming the updated SHIP.	Senior Manager - Property
PLC 213 305	Deliver Menstrie-Alva active travel route	To encourage people to make healthier, low carbon transportation choices.	31-Mar-2024	Project successfully complete and under budget @ £1,759,000.00 & selected for Ministerial Visit This is Phase 1 of the 3 Phase project, attention now turns to design for Phase 2 Alva to Fishcross.	Senior Manager - Environment
PLC 213 307	Comprehensive review of the council use of homeless temporary accommodation (HRA stock, RSL and Private)	To help minimise and mitigate failures from the unsuitable accommodation order.	31-Mar-2024	Initial review complete and additional stock from RSLs obtained.	Senior Manager - Housing
PLC 234 301	Deliver voids improvement plan	To reduce the number of void properties to increase the availability of homes for people and to reduce the financial impact of rent loss due to voids.	31-Aug-2024	Complete – Housing & Property teams continue close working to seek improvements in line with June 2023 Council Report. Void levels have halved in the year in line with our near business as usual work rate	Senior Manager - Property; Senior Manager - Housing
PLC 234 302	Deliver fire safety and electrical check performance improvement	To ensure that all council homes have compliant fire safety systems and current electrical testing certification.	30-Jun-2024	Complete.	Senior Manager - Property


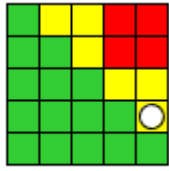
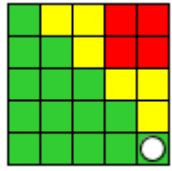
2.4 Actions - Compliance & Operational Resilience


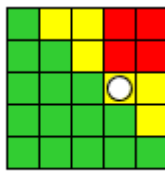
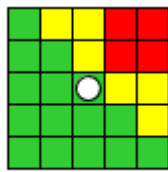
Code	Action	Desired Outcome	Due	Progress	Lead
PLC 213 401	Implement service redesign and associated workforce development plan	To secure the long term operational and financial sustainability of the services within Place; and to support the effective delivery of the Council's Be The Future transformation programme.	31-Mar-2024	Waste Services and Housing redesign is now complete. Proposals for Property Service are in progression.	Strategic Director - Place
PLC 213 402	Implement Housing/Property IT system	To have a fit for purpose IT system, ensuring legislative compliance, delivery of tenant priorities including appointment systems and support flexible and mobile deployed working.	31-Aug-2025	Procurement route established, clarification of final costs and contracts awaiting approval. Suppliers will be on site early 2025 to implement new systems.	Senior Manager - Property; Senior Manager - Housing
PLC 213 404	Review service delivery model for Trading Standards service	To secure the long term operational and financial sustainability of the service.	31-Aug-2024	Review has been undertaken with Stirling Council to establish clear performance reporting and schedule of	Senior Manager - Development

Code	Action	Desired Outcome	Due	Progress	Lead
				meetings to ensure clear and effective communication. A reviewed SLA is also being drawn up and Stirling Council has recruited new trading standards staff which will improve service delivery.	
PLC 213 405	Deliver property Compliance and Operational Resilience capital projects	To secure the long term operational and financial sustainability of Council services; and to support the effective delivery of the Council's Be The Future transformation programme.	31-Mar-2025	Annual Plan. Projects reviewed and delivered each year as required.	Senior Manager - Property
PLC 213 406	Deliver roads and transportation Compliance and Operational Resilience capital projects	To secure the long terms operational and financial sustainability of the roads network and to enhance active travel opportunities.	31-Mar-2024	All Projects complete in year and to budget, despite a challenging year with climate change and reduced budgets the Roads Service has delivered its planned carriageway & footway resurfacing schemes With a clear focus on Net Zero the service was able to carry out another road recycling scheme and plans are in place for further road recycling this fiscal year.	Senior Manager – Environment Team Leader (Roads & StreetLighting)
PLC 234 401	Review health and safety and compliance performance and culture and embed improvement in line with the Corporate Health and Safety Improvement Plan.	To ensure that people are safe from harm, property and equipment is not damaged and to meet legislative requirements.	31-Mar-2024	The Strategic Director reviewed a number of the approaches undertaken within the department with a range of actions progressing onto the 2024/25 reporting period. Works undertaken included campaigns on the reporting of incidents and near misses, instigation of a review of Risk Assessments and working closely with corporate Health & Safety Colleagues.	Strategic Director - Place
PLC 234 402	Complete Kilncraigs roof works	To ensure operational resilience of Kilncraigs building and to enable the re-opening of reception services.	31-Mar-2024	Roof Works Complete with 20 year guarantee in place.	Senior Manager - Property
PLC 234 403	Complete RAAC assessment in council homes and public buildings and secure governance on required actions for decanted blocks.	To fully understand risk exposure and future investment requirements. To enable informed engagement with tenants and owners of affected buildings	31-Aug-2024	RAAC assessment complete for domestic stock and public buildings. Place Director has established RAAC working group, technical options appraisal being built up to help inform a future officer's recommendation to members.	Senior Manager - Property; Senior Manager - Housing


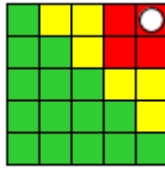
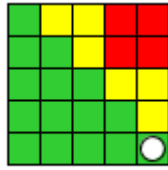
3.1 Risks - Corporate Register (Owned by Place Directorate)


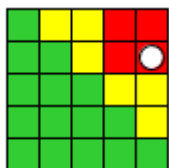
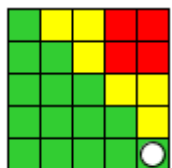
ID & Title	Conflicting Needs Around Management of RAAC				Approach	Treat	Status		Lead	Strategic Director - Place	Current Rating	12	Target Rating	4	
COU CRR 054															
Description	Potential deterioration of buildings with RAAC (Reinforced Autoclaved Aerated Concrete) into unsafe structures, requiring options appraisal that addresses both strategic implications (financial, assets and duty of care for residents), and the needs of individuals directly affected by uncertainty and other personal impacts, including financial											<div><div>Likelihood</div><div>Impact</div></div>		<div><div>Likelihood</div><div>Impact</div></div>	
Potential Effect	Domestic properties become uninhabitable, increasing voids & pressure demand on housing/homelessness services, with affordable housing already in high demand & short supply. Unbudgeted financial cost to housing services, community impacts and reputational damage through activism & negative media publicity.														
Related Actions	PLC DRR 003	Focused resource to manage the RAAC survey programme, communications and resident support actions				Internal Controls	RAAC Survey Programme								
	PLC DRR 004	Housing service leads part of Scottish Government RAAC Cross Sector Working Group					Scottish Government RAAC Cross-sector Working Group								
							Housing Needs & Demand Assessment								
Latest Note	Ongoing survey works across the domestic property estate at present undertaken by qualified structural engineers. An options appraisal to be developed to assess the forward actions required to be taken. Continued engagement with relevant sector organisations to communicate developments in RAAC. This risk has been escalated to the corporate level from the Place Directorate register for additional scrutiny around governance assurance due to recent media interest, though scores have been reviewed and remain consistent.														


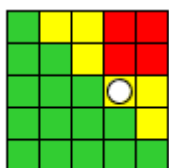
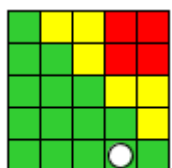
ID & Title	Continued Contribution to Climate Change				Approach	Treat	Status		Lead	Strategic Director - Place	Current Rating	10	Target Rating	5	
COU CRR 049															
Description	The Council fails to play its part in addressing the climate emergency, such as by not adapting to climate change, reducing waste and travel, making available resources, using/promoting sustainable practices, materials & technologies or failing to act as an ambassador for national & international good practice as it emerges.											<div><div>Likelihood</div><div>Impact</div></div>		<div><div>Likelihood</div><div>Impact</div></div>	
Potential Effect	Worsening environmental impacts including flooding (see Severe Weather risk), increased fuel poverty (with health/social impacts), missed efficiency savings/economic opportunities and poorer air quality. Reputational impacts of not supporting national/international policy, and legal implications of not meeting targets or demonstrating progress.														
Related Actions	PLC 213 101	Climate Change Strategy and Climate Emergency Action Plan				Internal Controls	Local Biodiversity Action Plan								
	PLC 213 104	Develop routemap to compliance with EESSH2 for all Council Housing stock.					Regional Energy Masterplan								
	PLC 213 111	Deliver CRD programme in line with delivery plan/financial profile					Sustainable Food Growing Strategy								
Latest Note	We submit Climate Change Duties reports annually, and are developing/implementing several related strategies & projects around our own practice and dissemination to local residents & businesses. These relate to assets, housing stock, energy & fuel poverty advice, community food growing, waste reduction, low-carbon technology and sustainable transport. A comprehensive Net Zero/Climate Change Strategy and Climate Emergency Action Plan is also being prepared for Council in Q3, 2024/25 and a Council Climate Emergency Group and community Climate Change Forums have been established to support this process. Scotland's International Environment Centre proposal, as part of the City Region Deal, will place Clackmannanshire at the forefront of Scotland's Climate Change mitigation efforts.														


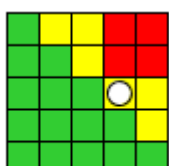
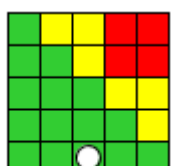
ID & Title	Failure to Prepare for Severe Weather Events	Approach	Tolerate	Status		Lead	Strategic Director - Place	Current Rating	12	Target Rating	9
COU CRR 031											
Description	Inability to respond to severe weather events due to lack of appropriate planning & equipment (e.g. 4x4 vehicles). Most likely flooding from rain/coastal surge, winter weather or heatwave (increasing frequency & severity due to climate change).							<div><div>Likelihood</div><div>Impact</div></div>	<div><div>Likelihood</div><div>Impact</div></div>		
Potential Effect	Widespread community dislocation (including possible risk to life), damage to property, businesses, roads & utility infrastructure (inc. telecoms & power), or inability of staff to get to workplace. Impact on delivery, reputation & finances, and increased workload in numerous services to support communities, including clearing roads and core paths (e.g. from fallen trees & other debris).										
Related Actions			Internal Controls	Business Continuity Plans							
				Winter & Flood Management Plan							
				Forth Valley Local Resilience Partnership							
Latest Note	Controls in place for monitoring and action as required. New severe weather framework developed. Community Resilience teams in place in areas of high risk. Ongoing liaison and discussion with Met Office and SEPA, looking at the long term impacts of climate change										


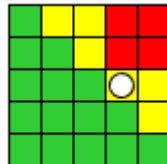
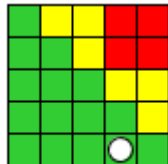
3.2 Risks - Place Directorate Register


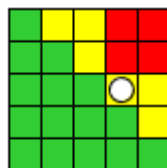
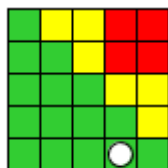
ID & Title	Insufficient Financial Resilience		Approach	Treat	Status		Lead	Strategic Director - Place	Current Rating	25	Target Rating	5
PLC DRR 009												
Description	The Directorate does not have sufficient resource to meet essential service demands, customer needs, or external agendas.								<div><div>Likelihood</div><div>Impact</div></div>	<div><div>Likelihood</div><div>Impact</div></div>		
Potential Effect	Reputational and legal implications and severe, extended loss of service provision.											
Related Actions	PLC 213 401	Implement service redesign and associated workforce development plan	Internal Controls	Routine and robust internal management oversight.								
	PLC DRR 001	Effective financial management.										
	PLC DRR 002	Focus resources on key priorities as set out in this business plan.										
Latest Note	Place services have out-turned within budget for the last three years, whilst delivering significant savings. The majority of savings have been management efficiencies or one-off in year savings. Identification of recurring savings is becoming ever more difficult without having impacts on service delivery.											

ID & Title	Health & Safety Breach		Approach	Treat	Status		Lead	Chief Executive	Current Rating	20	Target Rating	5	
PLC DRR 008													
Description	Incident or statutory breach results in injury or death of staff member or customer due to lack of awareness or non-compliance with policies and procedures. Incidents may also arise from third parties actions, outwith Council control.								Likelihood		Impact		Impact
Potential Effect	The effects on individuals and their families, financial penalties (including Health & Safety Executive intervention fees), criminal proceedings, adverse publicity, increased insurance or damage to Council assets.												
Related Actions	PLC 234 401	Review health and safety and compliance performance and culture and embed improvement in line with the Corporate Health and Safety Improvement Plan.		Internal Controls	Health & Safety Management System								
Latest Note	The Council has been embedding a new H&S management system to assist monitor and maintain records of safety management. The department has been focusing on the roll out of this system, including the reporting of incidents in particular by our formal manual workforce, who tend not to be enrolled on the Council Network. A series of Risk Assessment Review and updates are underway and H&S continues to be a central discussion point by Management.												

ID & Title	Insufficient Built Asset Information		Approach	Treat	Status		Lead	Strategic Director - Place	Current Rating	12	Target Rating	4	
PLC DRR 013													
Description	Lack of sufficient stock condition survey information and robust asset management strategy resulting in inability to project future works programmes requirements. Risk of stock falling into disrepair and financial resources being deployed in the wrong areas.								Likelihood		Impact		Impact
Potential Effect	Wasted time, effort and money on works undertaken without thought or link to forward asset management strategy and housing need. Failure to improve on housing quality and energy efficiency performance indicators. Inability to adequately plan for future investment and provide a robust and assured HRA Financial Business Plan (30yr).												
Related Actions	PLC DRR 005	Housing Business Plan		Internal Controls	Property Asset Management Strategy								
	PLC 213 405	Deliver property Compliance and Operational Resilience capital projects			SHQS & Regulator Reporting								
	PLC 213 402	Implement Housing/Property IT system											
Latest Note	January 2025 – Funding for full scale asset management survey will be included in the HRA budget for approval for spend in 2025/26.												

ID & Title	Inadequate Workforce Planning		Approach	Treat	Status		Lead	Strategic Director - Place	Current Rating	12	Target Rating	3	
PLC DRR 010													
Description	Due to lack of workforce planning the Directorate fails to ensure sufficient capacity/resource to deliver key Council service or fails to adequately develop its workforce to ensure that skills, knowledge and structures are appropriate, sustainable financially viable and compatible with our corporate vision.								Likelihood		Impact		Impact
Potential Effect	Loss of key staff from posts identified as single points of failure, leading to inability to delivery key services and lack of adequate professional advice to Council Officers/Elected Members. Negative impact on staff health and wellbeing.												
Related Actions	PLC 213 401	Implement service redesign and associated workforce development plan		Internal Controls	Strategic Workforce Plan								
Latest Note	Council approved the Strategic Workforce Plan (2019-22) in June 2019. This identifies the key workforce development priorities for the Council, and establishes a detailed plan of work for the next three years (via the annexed workforce development delivery plan). As we move through the implementation of this plan, the likelihood of this risk occurring will reduce.												

ID & Title	Housing Quality & Environmental Underperformance		Approach	Treat	Status		Lead	Strategic Director - Place	Current Rating	12	Target Rating	4
PLC DRR 014									<div><div>Likelihood</div><div></div><div>Impact</div></div>	12	<div><div>Likelihood</div><div></div><div>Impact</div></div>	4
Description	Changes in reporting guidance and a backlog of assessments arising from the pandemic (when properties could not be accessed) resulted in a greater proportion of stock classified as non-compliant with the Scottish Housing Quality Standard (SHQS) and Energy Efficiency Standard for Social Housing (ESSH). Further future risk of not being able to meet our required commitments to decarbonisation and improving the energy efficiency within the domestic housing stock due to a lack of sufficient stock condition survey information and a detailed forward asset management strategy.											
Potential Effect	Regulatory and reputational impacts, potential non compliance with decarbonisation and net zero targets											
Related Actions	PLC 213 101	Climate Change Strategy and Climate Emergency Action Plan			Internal Controls	SHQS & Regulator Reporting						
	PLC DRR 005	Housing Business Plan										
	PLC DRR 006	Focused resource from internal and external sources to meet target deadline of 31st March 2024										
Latest Note	The authority has been an extremely strong performer for over a decade in SHQS, including 100% compliance with the previous energy efficiency element for 5 years running (to 18/19). Replacement of the latter with ESSH saw benchmark rankings move into the 2nd and 3rd quartiles, and now to the bottom quartile for 2 years (to 21/22). Our decline in SHQS performance was mirrored by most other authorities, though to a slightly lesser degree (Scottish average 90.3% down to 69.7%, Clacks 98.8% to 59.9%).											

ID & Title	Lack of Affordable & Suitable Housing Supply (Mainstream & Temporary/Homeless)		Approach	Treat	Status		Lead	Strategic Director - Place	Current Rating	12	Target Rating	4
PLC DRR 015									<div><div>Likelihood</div><div></div><div>Impact</div></div>	12	<div><div>Likelihood</div><div></div><div>Impact</div></div>	4
Description	There is an overall increase in demand for affordable social housing across all local authority areas. Increasing demand for mainstream housing, homeless accommodation, housing provision for care leavers and for refugees is significant, the increasing cost of living and pressure on home energy costs only add to the challenge. Current challenges in our turn around times associated with void and bought back from market properties becoming available and decelerating new build programmes mean demand is outstripping supply and we are struggling at present to meet our housing need.											
Potential Effect	Diminished capacity to comply with statutory obligations within the Housing (Scotland) Act to provide suitable accommodation to those who require it. The service is currently in breach of the Unsuitable Accommodation Order due to utilisation of stock out with area for extended duration stays. Further potential impacts include – inability to support housing applicants into sustainable tenancies, implications for wellbeing (particularly mental health), lack of stability and inclusion, possible reputational damage and regulatory impacts, reduction in available properties to meet demand from waiting list applicants and those with an application for adapted properties. Reduced capacity to support the Councils aspirations as set out within “The Promise”.											
Related Actions	PLC DRR 007	Update Housing Needs & Demand Assessment			Internal Controls	Local Housing Strategy						
	PLC 234 301	Deliver voids improvement plan				Buy-back Strategy						
						Strategic Housing Investment Plan						
Latest Note	Similar issues are being experienced across Scotland, Clackmannanshire Council’s caseload has increased by 63% since May 2019, despite the existing mitigation of an increased proportion of lets going to homeless applicants (47% in 19/20 up to 60% for subsequent 3 years). This is expected to worsen further as a result of increased mortgage interest rates, potential for repossessions and pressure on private landlords which may increase rents and evictions. We anticipate there to likely be additional obligations on local authorities as part of the new Scottish Government Housing Bill.											

Report to: Audit and Scrutiny Committee

Date of Meeting: 6th February 2025

**Subject: Public Bodies' Climate Change Report Duty (PBCCRD):
Clackmannanshire Council Annual Report 2023/24
Internal Audit**

Report by: Strategic Director (Place)

1.0 Purpose

- 1.1. The purpose of this report is to inform members of the outcome of an internal audit process recently carried out on the Council's Public Body Climate Change Duties Annual Report 2023/24 and to set out actions that are being taken to address issues raised by the audit process.

2.0 Recommendations

- 2.1 It is recommended that the Council:
- (a) notes the contents of the internal audit report on Clackmannanshire Council's progress in delivering its climate change duties (Appendix 1 – Internal Audit report), as delivered to the Scottish Government, and
 - (b) Supports the recommendations to improve performance and reporting, including those from Internal Audit as set out in paragraph 4.6 below.

3.0 Background

- 3.1. Clackmannanshire Council has statutory duties under Section 44 of the Climate Change (Scotland) Act 2009 to contribute to reducing Scotland's greenhouse gas emissions; to contribute to helping Scotland adapt to a changing climate; and to act in the way that it considers most sustainable.
- 3.2. The Climate Change (Scotland) Act 2009 was amended by the Climate Change (Emissions Reduction Targets) (Scotland) Act 2019, increasing the ambition of Scotland's emissions reduction targets to net zero by 2045 and revising interim and annual emissions reduction targets.
- 3.3. The guidance associated with the legislation recommends that public bodies embed climate change action in all core corporate and business planning processes and report on their progress annually.

- 3.4. The Scottish Government expects Local Authorities to lead by example in combating climate change and making a valuable contribution towards achieving the country's emissions reduction targets.
- 3.5. The Climate Change (Duties of Public Bodies: Reporting Requirements) (Scotland) Order requires public bodies to report annually on their compliance with the duties. Clackmannanshire Council's most recent Public Sector Climate Change Reporting Duties (PBCCRD) report covered the year 2023/24 (see Appendix 2 - PBCCD submitted report) and was submitted to Sustainable Scotland Network (SSN), the government reporting body, by the deadline of 30 November 2024.

4.0 Considerations

- 4.1. The PBCCRD report was submitted to internal audit for review, the purpose being to assess the reporting arrangements and accuracy of the information contained within the 2023/24 report and also to consider whether the recommendations of their previous review of 2022/23 had been put in place.
- 4.2. On completion of the internal audit, they reported that there had been some delays in Internal Audit receiving the final report and supporting information from responsible officers, partly due to vacancies in some services and the associated resourcing issues which impacted on the ability of the services to provide data. However, the report was submitted to the SSN by the deadline of 30 November.
- 4.3. Internal Audit found that the recommendations from last year have been partially addressed. They considered that further steps were required to develop a timetable which would allow for the final report to be ready for internal audit validation one month before the submission deadline and that the Climate Emergency Working Group should hold a central record of what information is provided by each officer.
- 4.4. During the course of the auditors work they also identified that the Council Travel Plan required updating and that there was a need to ensure the reporting of waste emissions figures consistently on the return.
- 4.5. On the basis of their findings Internal Audit have provided 'Limited Assurance' on the Council's reporting arrangements and the accuracy of the information in the Public Body Climate Change Duties 2023/24 Annual Report.
- 4.6. The recommendations of Internal Audit for future year's reports have been recorded and steps put in place to ensure that they are followed up and delivered for the 24/25 PBCCRD report. The recommendations contained within the report have been accepted by the Development Service and are set out below.
 - 4.6.1 Develop a annual report compilation timetable with the final report being completed and ready for internal audit validation one month before the submission date (Complete – see appendix 3 – PBCCD timetable 24/25);
 - 4.6.2 A central record should be held by the Climate Emergency Working Group identifying what information was provided by which Officer for the

report. (Complete - The Energy and Sustainability Team will be the first point of contact for requests for further information);

4.6.3 The Council Travel Plan should be reviewed and updated as required. It should also be approved by Council within an appropriate timeframe (An appropriate timeframe will be agreed by Transport and Human resources services);

4.6.4 Waste emissions figures from Council operations must be consistently compiled and included in future returns. (When national figures are produced in September / October the details will be placed into the report);

4.6.5 In order to improve the extent of carbon savings data further investigation should be undertaken into a tool that can assist the services to capture the relevant carbon data to calculate the emissions savings. (There are ongoing investigations into a suitable tool. Costs and available resources will have an impact on the ability to introduce a service wide tool).

4.6.6 All of the Council's carbon reduction projects should involve a calculation of potential carbon savings as part of the project plan and actual carbon savings realised from project implementation should also be quantified. Both should be included in future PBCCD annual reports (Where figures are available the carbon saving details will be provided. Services will be encouraged to capture this data. This will be promoted at the Climate Emergency Board and Climate Emergency Working Group meetings).

4.7 As can be seen steps are being taken to fulfil the recommendations. Full details of the recommendations and agreed management actions can be found in Annex 2 of Appendix 2, Internal Audit – Public Body Climate Change Duties Final Report.

4.8 The PBCCRD report is a standard template split into five required areas:

- Profile of Reporting Body
- Governance, Management and Strategy
- Corporate Emissions, Targets and Project Data
- Adaptation
- Procurement

4.9 The process of completing the return requires significant effort and coordination in gathering information from a wide range of Council services. As in previous years this has been carried out by one officer from the Energy and Sustainability team contacting services direct. Due to other services being busy and having competing priorities, on occasions it has proven difficult to obtain timely responses from services. Long term absence of key members of staff has also played a part in delays in completing the report. This year, the Climate Emergency Working Group (CEWG) will pro-actively encourage prompt

responses to ensure that deadlines are met. The group of managers and officers who sit on this group have direct access to the required information. The PBCCRD will continue to be a standing item on the agenda for this meeting and a clear timetable has been drawn up to ensure that PBCCRD information is gathered at an appropriate time to allow the report to be finalised, checked and sent to internal audit at least one month prior to the deadline date that SGN sets. This will help to ensure that the deadlines are met for the report. Areas of risk have also been identified to ensure that 'single points of failure' are not experienced where, for example, a staff member is absent for an extended period and previously no other officer was able to provide information essential for completion of the report.

4.10 Significant progress has been made in the last year both in response to the recommendations of the previous review and to the Climate Emergency declared by the Council in August 2022. These include:

- the Council's greenhouse gas emissions are continuing to reduce (see appendix 4 – Greenhouse gas emissions);
- an internal Strategic Energy Management Group has been established to assist in the delivery of the Council's Local Heat and Energy Efficiency Strategy;
- a strategic environmental assessments of our Climate Change strategy has been completed and it is planned to present the strategy to Council for approval early in 2025;
- further consultation and a strategic environmental assessment of our draft Pollinator strategy has taken place and plans are in place to present this also to Council in early 2025;
- the Climate Emergency Action Plan (CEAP) continues to be developed and updated by members of the Climate Emergency Group;
- the Climate Emergency Board (CEB) continues to meet quarterly to create, implement and own annual greenhouse gas emission reduction targets for Clackmannanshire Council's own operations and the wider area;
- steps are being taken to embed the Climate Emergency Action Plan action / key performance indicators into Pentana, the Corporate Performance Management System.

5. Sustainability Implications

5.1 The recommendations in this and the Council's Climate Emergency Action Plan will enable the Council to better meet its sustainability and climate change duties. They are also likely to result in fewer adverse impacts on the environment, a reduction in greenhouse gas emissions, and better preparedness for the likely impacts of a changing climate.

6. Resource Implications

6.1 Staffing

There are increasing pressures on staff to deliver Climate Change initiatives and to comply with statutory returns. The updating and development of these plans and strategies have proved challenging during the past year due to resource limitations and other legislative and Government priorities requiring the development of new strategies, statistical data and formal returns.

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 ☒

(1) **Council Policies**

- Complies with relevant Council Policies ☒

8.0 Appendices

Appendix 1 – Internal Audit report

Appendix 2 - PBCCD submitted report

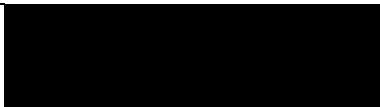
Appendix 3 : PBCCD timetable 24/25

Appendix 4: Greenhouse gas emissions

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Lawrence Hunter	Energy and Sustainability	Ext 2681

Approved by

NAME	DESIGNATION	SIGNATURE
Kevin Wells	Executive Director (Place)	

MEMO

To: Lawrence Hunter, Energy and Sustainability Strategy Officer

Copy To: Nikki Bridle, Chief Executive
Kevin Wells, Strategic Director, Place
Chris Alliston, Strategic Director, Partnership and Performance
Lorraine Sanda, Strategic Director, People
Isabel Wright, Internal Audit Manager

From: Sarah McPhee, Senior Internal Auditor

Date: 23 December 2024

Subject: **INTERNAL AUDIT – PUBLIC BODY CLIMATE CHANGE DUTIES DRAFT REPORT**

1. As part of our Internal Audit coverage for 2024/25, Internal Audit has recently completed validation work on the Council's Public Body Climate Change Duties (PBCCD) 2023/24 Annual Report.

Background

2. The Climate Change (Scotland) Act 2009 (the Act) introduced the requirement for public bodies to report on their climate change duties. The Council is due to submit its 2023/24 report / return to the Sustainable Scotland Network (SSN) by the deadline of 30 November 2024. This is in line with the timescales laid down in the Act.
3. The Climate Change (Emissions Reduction Targets) (Scotland) Act 2019 sets targets to reduce Scotland's emissions of all greenhouse gases to net-zero by 2045, with interim targets for reductions of at least 56% by 2020, 75% by 2030, and 90% by 2040.
4. On 11 August 2022, the Council agreed to set a target for the Council's own operations to reach net zero greenhouse gas emissions by 2040 at the latest and set interim targets leading up to 2040. They also set a target for the Clackmannanshire area to reach net zero greenhouse gas emissions by 2045 at the latest.

Internal Audit Findings

5. To ensure the consistency of returns across public bodies, the annual report format is a standard template split into five required areas:

- Profile of Reporting Body;
 - Governance, Management, and Strategy;
 - Corporate Emissions, Targets, and Project Data;
 - Adaptation; and
 - Procurement.
6. The return is made up of the completion of a checklist, which confirms that the information has been validated by the organisation's Internal Audit section. Our work, therefore, focused on reviewing the reporting arrangements and the accuracy of the information included in the report. Our previous review in 2023 of the 2022/23 Public Sector Change Duties Annual Report reported that there were considerable delays in receiving the information and final report resulting in the submission noting it was 'pending Internal Audit validation'. There was also some ambiguity around who compiled the data resulting in several amendments being made.
7. This previous review in 2023 made the following recommendations:
- a PBCCD annual report compilation timetable should be developed with the final report completed and ready for Internal Audit validation one month before the submission deadline;
 - a central record should be held by the Climate Emergency Working Group identifying what information was provided by which officer;
 - all the carbon reduction projects should involve a calculation of potential carbon savings as part of the project plan; the PBCCD annual report should include as an action / agenda item for the Climate Change Board / Emergency Working Group;
 - all report anomalies identified should be investigated and the PBCCD should be amended / reissued; and
 - waste figures should be included in future returns.
8. This year unfortunately there have again been delays in Internal Audit receiving the supporting information from responsible officers and also the final Public Bodies Climate Change report, however, the report was submitted to the SSN by the deadline of 30 November. Internal Audit have also found that the recommendations from last year have been partially addressed, with the following two recommendations remaining outstanding and requiring further action:
- a PBCCD annual report compilation timetable should be developed with the final report completed and ready for Internal Audit validation one month before the submission deadline; and
 - a central record should be held by the Climate Emergency Working Group identifying what information was provided by which officer.
9. In addition, during the course of our current work we identified various additional required actions relating to the Council's climate change governance, management, and strategy arrangements. These involved

updating the Council Travel Plan and having it approved by the Council in an appropriate timeframe; reporting waste emissions figures consistently on the return; developing a timetable to allow the final report to be completed one month prior to submission; a central record identifying what information was provided by which officer; and investigating the development of a tool to help capture carbon data to calculate project emissions savings.

10. Our findings are summarised in **Annex 1**.
11. A summary of our recommendations is set out at **Annex 2**. In conclusion, previous Internal Audit recommendations from the audit of the 2022/23 Public Sector Change Duties Annual Report have been partially implemented (see paragraph 8 above) and are included again for ease of reading in Annex 2
12. We can, therefore, provide **LIMITED ASSURANCE** (see **Annex 3** for a definition) specifically on the Council's reporting arrangements and the accuracy of the information in the Public Body Climate Change Duties 2023/24 Annual Report. It is anticipated that the Energy and Sustainability Strategy Officer will report on Climate Change Duties to the Council as soon as it can be tabled. This will include recommendations based upon the findings from this audit.

Sarah McPhee
Senior Internal Auditor
23 December 2024

CLIMATE CHANGE ACT PUBLIC BODY DUTIES ANNUAL REPORT

INTERNAL AUDIT FINDINGS

Section 1 – Profile of Reporting Body

1. We were content that Section 1 had been fully completed with information being provided from Human Resources and Accountancy. Information recorded includes the number of full time equivalent staff, floor area of the operational and non-operational estate, and the Council's budget for 2023/24. The figures originally provided had to be amended in order to reconcile to supporting data.

Section 2 – Governance, Management, and Strategy

2. The information provided in Section 2 is provided from a variety of sources across the Council and we were content that it had been accurately recorded. We did, however, note the incorrect name of a Directorate in section 2a which was amended for later versions.
3. We reviewed the minutes of Climate Emergency Board Meetings held in February 2024 which confirmed progress in relation to Climate Change Strategy and Climate Emergency Action Plan to help deliver on the new net zero targets and to align priorities.
4. It is noted that the Council Travel Plan promoted as a proposal to cover Business Travel was last updated in 2018/19, but still requires to be approved by the Council. We **recommend** that the Council Travel Plan should be reviewed and updated as required, ensuring it should also be approved by Council within an appropriate timeframe.
5. Section 2(f) of the report sets out the Council's top five priorities for Climate Change, governance, management, and strategy for the year ahead. We were content these were agreed by the Strategic Director of Place, updated for the 2023/24 Annual Report, and that these are in line with the priorities agreed by the Council in August 2022 as part of the Climate Change Strategy and Net Zero Targets Report. These priorities are:
 - Delivery of the Wellbeing Economy Local Outcome Improvement Plan which incorporates the strategic outcome of Shaping Places;
 - To obtain Council approval of the Climate Change Strategy, which incorporates additional governance measures in the form of a Climate Emergency Board and Climate Emergency Working Group;
 - Establish a Strategic Energy Management Group to provide governance for the Regional Energy Masterplan;
 - Embed the Climate Emergency Action Plan action / key performance indicators into Pentana, Corporate Performance Management System; and
 - Embed the Regional Energy Masterplan action / key performance indicators into Pentana, Corporate Management System.
6. In delivering these top priorities the Council will need to take cognisance of a number of Scottish Government priorities. These include:
 - The Climate Change (Emissions Reduction Targets) (Scotland) Act 2019. This sets targets to reduce Scotland's emissions of all greenhouse gases to net zero by 2045;
 - The Wellbeing Economy. The Council is working with the Scottish Government to support the development of a local economy that works for its residents, businesses, and natural environment.

Key to developing a Wellbeing Economy is to make the economy more humane and more sustainable;
and

- Scottish Government budget (2023/24) initiatives to tackle the climate emergency.

Section 3 – Emissions, Targets, and Projects

- The emissions data is based on greenhouse gas emissions which the Council can directly influence.
- The Council's Energy Officer sources the data from records of usage. The Carbon Footprint and Project Register Tool (CFPR) has not been used this year. The CFPR tool was developed by Zero Waste Scotland and the SSN, with partners, to support the public sector with implementing effective carbon management processes. It is unclear why the Council has decided not to use the CFPR tool to confirm their figures.
- We were content that the information provided in relation to Scope 1 (gas, LPG, fuel oil, diesel, and biomass), Scope 2 (grid electricity) and Scope 3 (water, water treatment, and grid electricity) emissions was consistent with that in the 2018/19, 2019/20, 2020/21, 2021/22, and 2022/23 reports. It was noted that the Scope 1 and 3 for 2022/23 in the current return was different from the final return received in the prior year, however, evidence has been received to demonstrate a late amendment to the submission in the prior year.
- The information at **Table 1** confirms that the Council's greenhouse gas emissions have reduced over the previous four years. There was a major increase in 2021/22, however, due to the incorporation of emissions from waste (7,074 tCO₂e) into the carbon footprint in Scope 3. This information was not available in previous years, however, was again not included for 2022/23 due to information being unavailable from the originating department. Waste emissions have been included in the 2023/24 figures (5,901 tCO₂e) into the carbon footprint in Scope 3. There was also a slight decrease in Scope 1 and 2 emissions due to a reduction in fuel usage, and the increase in Scope 3 is due to increased mileage claims.

Table 1
Greenhouse Gas Emissions

Year	Scope 1	Scope 2	Scope 3	Total	Units
2017/18	3,940	3,096	503	7,538	tCO ₂ e
2018/19	3,445	2,418	421	6,285	tCO ₂ e
2019/20	3,468	2,139	379	5,986	tCO ₂ e
2020/21	3,137	1,663	245	5,045	tCO ₂ e
2021/22	3,098	1,890	7,327	12,315	tCO ₂ e
2022/23	3,163	1,800	173	5,136	tCO ₂ e
2023/24	3,071	1,777	6,162	11,010	tCO ₂ e

- We reviewed the data for Sections 3(a), 3(b), and 3(c) of the report. We were content, after amendments, that they fully reconciled to supporting documentation.
- In section 3(b) waste is included as an emission type, although, there is no consistency in reporting the emissions figures each year. Waste emission figures were reported as part of the 2021/22 return and again in the 2023/24 return, as per **Table 1**. We **recommend** that waste emissions figures from Council operations must be consistently compiled and included in future returns.
- Section 3(e) details the estimated total annual carbon savings from all projects implemented by the body in the report year. The supporting evidence cannot be provided as it is noted there is insufficient data available on projects to quantify the carbon savings for Natural Gas and other Heating Fuel categories. This was clarified as a lack of resource available to gather the data required to calculate the savings and that a tool to help the services capture this information is being investigated going forward. We **recommend** in order

to improve the extent of carbon savings data further investigation should be undertaken to develop a tool that can assist the services to capture the relevant carbon data to calculate the emissions savings.

14. The Council's top ten carbon reduction projects for 2023/24 are recorded in Section 3(f). These include repairs to heating systems, boiler replacements to Council owned housing and public buildings, active travel routes, Community Bus Fund, HVO trial, and ongoing LED lighting upgrade on street lights. Internal Audit could not validate all the carbon reduction projects due to the lack of estimated savings recorded in the return, the one exception being the HVO (hydrotreated vegetable oil) trial figures which are estimated figures based only on savings on waste vehicles. We **recommend** that all of the Council's carbon reduction projects should involve a calculation of potential carbon savings as part of the project plan, and actual carbon savings realised from project implementation should also be quantified. These figures should be included in future PBCCD annual reports.

Section 4 – Adaptation

15. The objective and themes covered in Section 4 are part of the standard template fields. Although there has not been a thorough and systematic assessment of all current and future climate-related risks, the Energy and Sustainability Team have made steps towards this, including the collation of risks from the earlier Local Climate Impacts Profile and from the Incident Report, Resilience Plans, and Business Plans. As with last year, climate change is featured in the corporate risk log. We were content with the progress made, and comments in the return were provided by the Energy and Sustainability Strategy Officer using their knowledge of corporate developments.
16. Significant work has been undertaken across a variety of areas. This includes supporting pollinator friendly planting and implement a thoughtful grass cutting regime, as well as working in partnership with Forth Rivers Trust to consider where natural flood management measures could be introduced.

Section 5 – Procurement

17. The information contained within this section of the report was agreed with the Procurement Manager. These arrangements were acceptable.

**CLIMATE CHANGE ACT PUBLIC BODY DUTIES ANNUAL REPORT
RECOMMENDATIONS AND ACTION PLAN**

Classification of Recommendations		
Grade 1: Key risks and / or significant deficiencies which are critical to the achievement of strategic objectives. Consequently, management needs to address and seek resolution urgently.	Grade 2: Risks or potential weaknesses which impact on individual objectives, or impact the operation of a single process, and so require prompt but not immediate action by management.	Grade 3: Less significant issues and / or areas for improvement which we consider merit attention but do not require to be prioritised by management.

Rec No.	Recommendation	Agreed Management Action	Responsible Owner	Action Due
1.	<p>A Public Bodies Climate Change Duties (PBCCD) annual report compilation timetable should be developed, whereby the information required should be submitted by responsible Officers soon after the end of the reporting year.</p> <p>The final report should be completed and ready for Internal Audit validation one month before the submission deadline.</p> <p>Memo Paragraph: 8</p> <p>Grade 2</p>	<p><u>Recommendation Accepted</u></p> <p>A timetable has already been developed and can be further enhanced to include supporting documentation.</p> <p>Challenges are:</p> <ul style="list-style-type: none"> that some data, such as Waste, is not available until much later in the year; and the Sustainable Scotland Network have reported that they will be making substantial changes to the format, which makes it difficult for the services to pre-judge what the new requirements will be. 	Energy and Sustainability Team / Climate Emergency Board	28 February 2025

Rec No.	Recommendation	Agreed Management Action	Responsible Owner	Action Due
2.	<p>A central record should be held by the Climate Emergency Working Group identifying what information was provided by which Officer for the report.</p> <p>This should also include supporting documentation to evidence the information provided.</p> <p>Memo Paragraph: 8</p> <p>Grade 3</p>	<p><u>Recommendation Accepted</u></p> <p>A central record has already been established. Supporting documentation will be included within the folder.</p> <p>The Energy and Sustainability Team will be the first point of contact for requests for further information as staff roles and responsibilities can change in the various services over the reporting period.</p> <p>This will ensure that the Energy and Sustainability Team are provided with any updates that require to be placed in the reporting document.</p>	Energy and Sustainability Team / Climate Emergency Working Group	30 September 2025
3.	<p>The Council Travel Plan should be reviewed and updated as required. It should also be approved by Council within an appropriate timeframe.</p> <p>Annex 1 Paragraph: 2.4</p> <p>Grade 3</p>	<p><u>Recommendation Accepted</u></p> <p>An appropriate timeframe will be agreed by the service.</p>	Transport and Human Resources	31 October 2025
4.	<p>Waste emissions figures from Council operations must be consistently compiled and included in future returns.</p> <p>Annex 1 Paragraph: 3.12</p> <p>Grade 2</p>	<p><u>Recommendation Accepted</u></p> <p>When national figures are produced in September / October the details will be placed into the report.</p>	Waste / Energy and Sustainability Team	31 October 2025
5.	<p>In order to improve the extent of carbon savings data further investigation should be undertaken into a tool that can assist the services to capture the relevant carbon data to calculate the emissions savings.</p> <p>Annex 1 Paragraph: 3.13</p> <p>Grade 3</p>	<p><u>Recommendation Accepted</u></p> <p>There are ongoing investigations into a suitable tool.</p> <p>Costs and available resources will have an impact on the ability to introduce a service wide tool.</p>	Climate Emergency Working Group / Digital Transformation Team	Ongoing

Rec No.	Recommendation	Agreed Management Action	Responsible Owner	Action Due
6.	<p>All of the Council's carbon reduction projects should involve a calculation of potential carbon savings as part of the project plan.</p> <p>Actual carbon savings realised from project implementation should also be quantified.</p> <p>These figures should be included in future Public Bodies Climate Change Duties annual reports.</p> <p>Annex 1 Paragraph: 3.14</p> <p>Grade 2</p>	<p><u>Recommendation Accepted</u></p> <p>Where figures are available the carbon saving details will be provided.</p> <p>Services will be encouraged to capture this data. This will be promoted at the Climate Emergency Board and Climate Emergency Working Group meetings.</p> <p>If a corporate tool can be secured for recording this information this information may be able to be provided more readily.</p> <p>As previously mentioned, costs and resources will impact upon our ability to introduce an appropriate tool suitable for all services.</p>	Climate Emergency Working Group / Digital Transformation Team	Ongoing

DEFINITION OF ASSURANCE CATEGORIES

Level of Assurance	Definition
Substantial assurance	The systems for risk, control, and governance are largely satisfactory, but there is some scope for improvement as the present arrangements could undermine the achievement of business and/or control objectives and/or leave them vulnerable to some risk of error/abuse.
Limited assurance	The systems for risk, control, and governance have some satisfactory aspects, but contain a number of significant weaknesses that are likely to undermine the achievement of business and/or control objectives and leave them vulnerable to an unacceptable risk of error/abuse.
No assurance	The systems for risk, control, and governance are ineffectively designed and/or are operated ineffectively such that business and/or control objectives are not being achieved and the risk of serious error/abuse is unacceptable. Significant improvements are required.

Public Sector Report on Compliance with Climate Change Duties 2024 Template FY

PART 1 Profile of Reporting Body

1a Name of reporting body

Provide the name of the listed body (the "body") which prepared this report.

Clackmannanshire Council

1b Type of body

Select from the options below

Local Government

1c Highest number of full-time equivalent staff in the body during the report year

2067.53

1d Metrics used by the body

Specify the metrics that the body uses to assess its performance in relation to climate change and sustainability.

Metric	Units	Value	Comments
Population size served	population	51750.00	Mid-2022 population estimates published by NRS 26-Mar-24 (Download file from data link > Table 1 tab > cell E13) - https://www.nrscotland.gov.uk/mid-year-population-estimates/mid-2022
Floor area	m2	109342.00	Figures obtained from building survey reports
Please select from drop down box			
Please select from drop down box			
Please select from drop down box			
Please select from drop down box			
Please select from drop down box			
Please select from drop down box			
Other (please specify in comments)			
Other (please specify in comments)			
Other (please specify in comments)			
Other (please specify in comments)			
Other (please specify in comments)			
Other (please specify in comments)			
Other (please specify in comments)			

1e Overall budget of the body

Specify approximate £/annum for the report year.

Budget

Budget Comments

£152,184,000

1f Report type

Check the report year type is correct. The alternative template must be used for academic year reporting.

Reporting type

Report year comments

Financial

Financial (April to March) 2023/24

1g Context

Provide a summary of the body's nature and functions that are relevant to climate change reporting.

Clackmannanshire is the smallest local authority in Scotland by population and third smallest by mainland area covering 159 square kms. Clackmannanshire Council is responsible for providing a range of public services, including education, social care, roads and transport, economic development, housing and planning, environmental protection, waste management, and cultural and leisure services. More information about the organisation can be found on the Council website; www.clacks.gov.uk

Public Sector Report on Compliance with Climate Change Duties 2024 Template FY

PART 2 Governance, Management and Strategy

Governance and management

2a How is climate change governed in the body?

Provide a summary of the roles performed by the body's governance bodies and members in relation to climate change. If any of the body's activities in relation to climate change sit outside its own governance arrangements (in relation to, for example, land use, adaptation, transport, business travel, waste, information and communication technology, procurement or behaviour change), identify these activities and the governance arrangements. Provide a diagram / chart to outline the governance structure within the body.

In 2018/19 the organisation was separated into 3 service areas - Partnership and Performance, People and Place. Day-to-day responsibility for co-ordinating the Council's sustainability and climate change response,

2b How is climate change action managed and embedded in the body?

Provide a summary of how decision-making in relation to climate change action by the body is managed and how responsibility is allocated to the body's senior staff, departmental heads etc. If any such decision-making sits outside the body's own governance arrangements (in relation to, for example, land use, adaptation, transport, business travel, waste, information and communication technology, procurement or behaviour change), identify how this is managed and how responsibility is allocated outside the body. Provide a diagram to show how responsibility is allocated to the body's senior staff, departmental heads etc.

The Council's 'Be the Future' programme and Statement of Corporate Priorities are structured around the 3 themes: Sustainable Inclusive Growth; Empowering Families and Communities; and, Health & Well-being. The aims for 2030 include an aim to have "Clear strategies and innovations which place Clackmannanshire in a leading role in meeting climate challenge" while climate change work constitute a key facet of the theme of Sustainable Inclusive Growth.

The Statement of Corporate priorities (<https://www.clacks.gov.uk/document/meeting/1/1201/7697.pdf>) includes the following:

A revised Risk Strategy was approved in Oct-23 expanding categories to include Environment (previously Finance, Legal, Health & Safety, Reputation, Continuity)

- See Appendices A (Appetite Statement) & B (Guidance, including impact scoring & Governance Checklist) - <https://www.clacks.gov.uk/document/meeting/1/1201/7699.pdf>

- Internal Corporate Risk & Integrity Forum attended by Development Senior Manager, providing quarterly updates on Energy, Sustainability & Climate Change

- Corporate Risk Register includes 2 climate-related risks - Continued Contribution to Climate Change and Failure to Prepare for Severe Weather Events -

<https://www.clacks.gov.uk/document/meeting/295/1210/7785.pdf>

- Plans, reports, press releases & updates included in Public Performance Reporting web pages (see also Council & Transformation in right-hand menu) - <https://www.clacks.gov.uk/council/performance/>

Under the draft Climate Change Strategy, the Council has proactively established a Climate Emergency Action Plan that details specific strategies for both mitigating and adapting to climate change. Oversight of these initiatives is provided by the Climate Emergency Board, ensuring alignment with broader objectives and accountability. Meanwhile, the Climate Emergency Working Group is responsible for implementing these strategies on the ground, driving tangible progress towards enhancing resilience and reducing greenhouse gas emissions. This comprehensive approach reflects the body's commitment to addressing the challenges posed by climate change effectively.

The Council's General Services Revenue and Capital Budget 2023/24 was published in March 2023 and sets out the Councils' capital programme to invest £236 million in the area over the next 20 years. The ambitious plan will deliver a new wellbeing hub, improvements to our schools, significant economic regeneration and will play a key role in the journey towards net zero.

In setting the General Service Revenue Budget 2023/24, the Council faced huge challenges such as the effects of inflation, wage increases, escalating energy costs and economic headwinds and made difficult decisions in order to comply with the legal obligation to balance it's budget. The Council agreed a target operating model in August 2023 places the needs of residents, communities and businesses at the heart of Council decision-making and resilience and financial sustainability over the coming years.

The General Services Revenue and Capital Budget 2023/24 is available here [7557.pdf](#) ([clacks.gov.uk](https://www.clacks.gov.uk)) with Investment in Net Zero capital projects shown on page 68.

The General Capital Grant allocated to Clackmannanshire Council in 2023/24 was £4.351m, this is augmented by additional specific grant income streams totalling £3.296m, resulting in total grant income of £7.647m being available in 2023/24. The £3.296m includes specific capital grant funding for Clackmannan Regeneration (£0.568m), Play Parks, (£0.118m), City Region Deal Grant (£0.061m) and Active Travel Routes (1.400m).

2d Does the body have a climate change plan or strategy?

If yes, provide the name of any such document and details of where a copy of the document may be obtained or accessed.

Clackmannanshire Council approved the development of a Climate Change Strategy on August 2022 which incorporated the council's net zero targets (2040) and an area wide target of 2045.
<https://www.clacks.gov.uk/environment/climatechange/>

During 2023/24 a Strategic Environmental Assessment was carried out on the draft Climate Change Strategy. Final consultation on the draft strategy is scheduled for August/September 2024, with the finalised document scheduled to be presented to Council on 30 November 2024 for approval.

During 2023/24, the council further developed the Climate Emergency Action Plan which outlines the council's priorities for adaptation and mitigation.

On the 30th November council approved our Regional Energy Masterplan (REM) <https://www.clacks.gov.uk/document/meeting/1/1202/7738.pdf> and Local Heat and Energy Efficiency Strategy (LHEES) which is incorporated within the masterplan. During 2023/24 the council's Energy and Sustainability Team liaised with the Scottish Government's Heat Network Support Unit to develop a funding bid for financial support to create a full business case for the development of a local heat network. N.B. the funding bid was submitted but unfortunately the government funding was no longer available. During 2024/25, the Energy and Sustainability Team will work with The Heat Network Support Unit to progress our funding bid for when the Scottish Government announce new funding. The following provides a link to the REM:
<https://www.clacks.gov.uk/document/meeting/1/1202/7738.pdf>

2e Does the body have any plans or strategies covering the following areas that include climate change?

Provide the name of any such document and the timeframe covered.

Topic area	Name of document	Link	Time period covered	Comments
Adaptation	Climate Change Strategy	https://www.clacks.gov.uk/document/7146.pdf	2024-2045	<p>This Strategy sets out a framework for achieving net zero greenhouse gas emissions by 2040 at the latest for the Council's own operations and by 2045 at the latest for the Clackmannanshire area.</p> <p>It includes means of aligning all strategic decisions, budgets and approaches to planning decisions with a shift to net zero greenhouse gas emissions in addition identifying emission reduction opportunities to initiate the development of a thematically based Climate Emergency Action Plan. The strategy consists of the following 6 themes:</p> <ul style="list-style-type: none"> • Energy, Heat & Buildings • Low Carbon Transport • Waste, Recycling & the Circular Economy • Biodiversity, Carbon Storage & Agriculture • Adaptation, Planning & Organisational Capacity • Economic Development & Sustainable Procurement
Business travel	Local Transport Strategy	https://www.clacks.gov.uk/transport/localtransportstrategy/	January 2020: 5 year review period	<p>The Local Transport Strategy</p> <ul style="list-style-type: none"> • VISION: Facilitate the free and equitable movement of people and goods within Clackmannanshire by a choice of modes that are safe, accessible and well integrated. Through the development of the transport network in a sustainable manner to meet the needs of all, Clackmannanshire can become an attractive vibrant community encouraging economic prosperity whilst improving health and protecting the environment. • The LTS describes how Roads Services co-ordinates its approach to include its own and external guidance and policy; how it carried out its SEA on a raft of policy documents that inform the LTS and how it gathers funding from Government bodies by meeting their stringent environmental and sustainability criteria. • The Strategic Environmental Assessment of the Local Transport Strategy has been undertaken to identify, describe and evaluate any significant effects and alternatives. Any potential impacts as a result of the Local Transport Strategy have been identified, assessed and where possible mitigated. The transport team are scheduling update to this strategy for 24/25.

Staff Travel	Council Travel Plan	https://www.clacks.gov.uk/transport/counciltravelplan/	January 2020 - 3 year review period	<p>The Plan looks at the wider Council operations with the same outcome as the Kilncraigs Travel Plan. The Council have successfully introduced a pool car scheme, which has substantially reduced the number of grey fleet miles undertaken by staff.</p> <p>In 2022/23 there were 31 electric vehicles in the fleet. Budget cuts in the vehicle replacement programme will see a much reduced vehicle replacement plan over the next three financial years. Electric and alternative fuelled vehicles will still be identified and supplied where applicable, however the speed of adoption will be vastly reduced. There are more than 135 members of staff registered to use the pool vehicles. We have recently took on a active travel project manager. their role is to further encourage sustainable travel. The council hopes to expand on its electric fleet vehicles. EV charging infrastructure</p>
Energy efficiency	Local Housing Strategy (2012)	https://www.clacks.gov.uk/housing/localhousingstrategy/ Associated with the Statement of Corporate Priorities - https://www.clacks.gov.uk/document/meeting/1/1201/7697.pdf	Ongoing	<p>Government's objectives of tackling poverty and inequality, creating and supporting jobs, meeting energy efficiency and decarbonisation aims as well as delivery of fuel poverty and child poverty targets, and creating connected, cohesive communities.</p> <p>The LHS is due for revision in 2024/25, Housing to 2040 states that 'to lead by example, we will aim for all new homes delivered by Registered Social Landlords and local authorities to be zero emissions homes by 2026. This will mean accelerating the introduction of zero emissions heating systems ahead of the 2024 regulations coming into force and making greater use of offsite construction in the social rented sector to deliver high-quality and energy-efficient homes. This will feature in the new LHS as part of the section on energy efficiency.</p> <p>LHS Outcome Energy efficiency is improved and fuel poverty and carbon emissions are reduced across all tenures. · Continue to maximise funding from Government and utility company initiatives to help households improve the energy efficiency of their home · Continue to provide match funding where possible, to maximise income · Maximise funding from energy providers to increase renewable energy use across all housing, such as solar panels and air</p>
Fleet transport	Fleet Asset Management Plan	See annex 9	2013-2018 (update is currently being developed)	<p>maximises value for money, is environmentally and energy efficient and contributes directly to delivering year on year reductions in greenhouse gas emissions.</p> <p>For 23/24 the above statement is still valid and covers primarily what Fleet are striving to achieve. I would also include the on-going commitment to introducing more electric vehicles and charging infrastructure in line with Scottish Government net zero targets.</p> <p>The introduction and full use of vehicle telematics has seen an improvement in vehicle idling, although fairly small we continue to work with user departments on the education of all drivers.</p> <p>Work is continuing to identify areas of fleet that can easily be moved to electric / alternative fuelled vehicles. We have seen investment in hybrid technology in the fleet and all vehicles purchased that are not electric or hybrid variants are bought with the latest Euro Emissions standards for Diesel fuelled vehicles. Investment in alternative fuels for diesel driven vehicles is also being considered to further reduce vehicle borne CO2 levels across the fleet.</p> <p>Budget cuts in the vehicle replacement programme will see a much reduced vehicle replacement plan over the next three</p>

					<p>On 18 April 2019, the Council adopted the Digital Strategy 2019-25, a key part of the Be the Future transformation programme. Regular updates are provided to the Strategic Oversight Group and Council. Key priorities include:</p> <ul style="list-style-type: none"> - Transitioning from legacy systems to Microsoft 365 - Migrating to cloud-based services - Implementing digital and data-first approaches, including IoT and automation <p>IoT devices have been installed in schools to monitor air quality, aiming to support smarter buildings and optimise heating. The rollout of M365 continues, facilitating electronic collaboration and reducing the need for travel, transport, and heated meeting spaces.</p> <p>Our digital ambitions guide our IT strategy, aligning with the Future Ways of Working Programme to develop modern work practices as part of our building back better approach. The strategy aims to "use ICT to enable modern, smarter ways of working, enhancing the Council's ability to serve its citizens while reducing environmental impact." It also commits to "improving sustainability," reducing energy consumption, and reusing equipment where possible.</p>
ICT	Digital Strategy - Enhancing Digital Foundations 2019-2025	https://www.clacks.gov.uk/document/meeting/1/859/6304.pdf	2019-2025		
Renewable energy	Local Development Plan	https://www.clacks.gov.uk/property/ldpadopted/	2015/17 - the plan should be reviewed every 5 years, however, following the adoption of National Planning Framework 4 in February 2023, and Local Development Plan guidance in May 2023, the Council now have until May 2028 to produce a new Local Development Plan. Early stages of plan preparation are underway, in respect of public consultation and preapring Evidence Report.	<p>The Clackmannanshire Local Development Plan includes policies on renewable energy.</p> <p>Housing</p> <p>SC5 Layout and Design Principles</p> <p>SC7 Energy Efficiency and Low Carbon Development</p> <p>Services</p> <p>SC11 Transport Networks</p> <p>SC13 Decentralised Energy</p> <p>SC14 Renewable Energy</p> <p>SC15 Wind Energy Development</p> <p>SC16 Hydro-electricity Development</p> <p>SC17 Biomass</p> <p>SC18 Large Solar Arrays</p> <p>SC19 Deep Geothermal</p> <p>Business and Employment</p> <p>EP6 Green Business</p> <p>Supplementary Guidance:</p> <p>SG2 Onshore Wind Energy</p>	
Sustainable/renewable heat	Local Development Plan	https://www.clacks.gov.uk/property/ldpadopted/	2015-2035	<p>The Clackmannanshire Local Development Plan includes a policy on decentralised energy, which includes district heating. Clackmannanshire Council has taken part in the Heat Network Partnership for Scotland's Local Authority District Heating Strategy Programme, and has undertaken work with Zero waste Scotland towards developing an energy masterplan.</p>	

					<p>consistent and supportive Waste Service for the people of Clackmannanshire. The Policy helps support a more circular economy by developing a more efficient service with increased quality and quantity of recycling collected.</p> <p>The Service aims to:-</p> <ul style="list-style-type: none"> Improve our household waste and recycling services to maximise the capture of, and improve the quality of, resources from the waste stream, recognising the variations in household types and geography to endeavour that our services meet the needs of all residents. Encourage and work with residents to actively participate in recycling and utilise fully the services provided. Operate our services so that our staff are safe, competent and treated fairly with the skills required to deliver effective and efficient resource management on behalf of our communities. Deliver a high quality, reliable, consistent & responsive customer service that meets the needs and aspirations of the people of Clackmannanshire. <p>In the journey towards meeting our national recycling targets 2025 and contributing</p>
Waste management	Household Waste & Recycling Collection Policy October 2023	https://www.clacks.gov.uk/document/6540.pdf	2023-current		<p>Clackmannanshire produced in partnership with SEPA, Scottish water and other responsible authorities Explains what we are doing and how we propose to address the impacts of flooding locally.</p> <p>The Local FRMP provides a 6 year action plan of flood mitigation projects and initiatives; these include;</p> <ul style="list-style-type: none"> Natural Flood Risk Management, Infrastructure projects, Community resilience in partnership with local communities, schools etc. Awareness raising, Protection then Resilience we promote the use of sustainable drainage as part of our development control consultation responses where these elements can have multiple benefits for the environment and community enhancement and wellbeing. <p>To meet our duties / actions under the cycle 2 (2022-28) LFRMP for The Forth LPD continued to support the 5 community resilience groups (in Menstrie, Tillicoultry, Alva, Dollar and Muckhart); The council has committed to its funding share of a flood protection scheme in Tillicoultry, however due to a current hold on Government flood scheme funding, the intended scheme for Tillicoultry is unlikely to proceed until at least cycle 3 of the LFRMP (2028-34); we continue to engage the Community Payback Team to carry out cyclical inspections and clearance of key</p>
Water and sewerage	Local Flood Risk Management Strategy	https://www.stirling.gov.uk/planning-building-the-environment/flooding/flood-risk-management-plan/	2022-2028 (6 year review period)		
Land Use	Local Development Plan	https://www.clacks.gov.uk/property/ldpadopted/	2015/17 - the plan should be reviewed every 5 years, however, following the adoption of National Planning Framework 4 in February 2023, and Local Development Plan guidance in May 2023, the Council now have until May 2028 to produce a new Local Development Plan. Early stages of plan preparation are underway, in respect of public consultation and preapring Evidence Report.		<p>Strategic environmental assessment was used in the preparation of the Local Development Plan to ensure that the plan and its policies contribute to reducing greenhouse gas emissions and climate change adaptation. SEA will be used again in the preparation of the new LDP.</p>
Other (please specify in comments)	Roads & Transportation (RAT) Risk Register • RAT RAT 013 Impact of Adverse Weather (Winter & Flooding)	https://www.clacks.gov.uk/document/3832.pdf	Nov 2019 - annual review		<p>WATER RAT 013 Impact of Adverse Weather (Winter & Flooding).</p>
Adaptation	Corporate Risk Management Strategy	https://www.clacks.gov.uk/document/meeting/1/1201/7699.pdf	2023-28 (appendices reviewed annually)		<p>Environment is key category in Appetite Statement (pg 17), Guidance (pg 20) & Governance Checklist (pg 23)</p>

Energy efficiency	Regional Energy Masterplan (REM) & Local Heat and Energy Efficiency Strategy (LHEES)	https://www.clacks.gov.uk/document/meeting/1/1202/7738.pdf	2023-2045	This document outlines the steps required to reach a net-zero energy system across Stirling and Clackmannanshire, with specific objectives and outcomes set out, and key performance indicators (KPIs) to monitor progress identified. The document also incorporates the council's LHEES.
Adaptation	Local Development Plan	https://www.clacks.gov.uk/property/ldpadopted/	2015/17 - the plan should be reviewed every 5 years, however, following the adoption of National Planning Framework 4 in February 2023, and Local Development Plan guidance in May 2023, the Council now have until May 2028 to produce a new Local Development Plan. Early stages of plan preparation are underway, in respect of public consultation and preparing Evidence Report.	<p>Environmental Sustainability</p> <p>To deliver a sustainable pattern of development that supports community cohesion, reduces greenhouse gas emissions, supports waste minimisation and ensures that new development consistently contributes to environmental protection and enhancement by:</p> <ul style="list-style-type: none"> · ensuring that new development does not result in growth in Clackmannanshire's net greenhouse gas emissions; · minimising release of greenhouse gas emissions from natural sources including protection of carbon-rich soils, minimising waste and encouraging woodland expansion where appropriate; · delivering a step change towards improved energy and water conservation and efficiency, and increasing the production of renewable energy to meet Government targets; · adapting to the impacts of climate change by ensuring that new development is appropriately 'climate proofed' to remain resilient to predicted future climatic conditions, and to protect existing development from the adverse effects of climate change; · reducing overall flood risk and promoting sustainable flood management techniques; · managing and reducing pollution, to contribute to the improvement of our air and water quality; · safeguarding soil quality and quantity; · minimising our waste and maximising opportunities for
Energy efficiency	Local Development Plan	https://www.clacks.gov.uk/property/ldpadopted/	2015/17 - the plan should be reviewed every 5 years, however, following the adoption of National Planning Framework 4 in February 2023, and Local Development Plan guidance in May 2023, the Council now have until May 2028 to produce a new Local Development Plan. Early stages of plan preparation are underway, in respect of public consultation and preparing Evidence Report.	<p>Policies</p> <p>Housing</p> <p>SC7 Energy Efficiency and Low Carbon</p> <p>Services</p> <p>SC13 Decentralised Energy</p> <p>SC14 Renewable Energy</p> <p>SC15 Wind Energy Development</p> <p>SC16 Hydro-electricity Development</p> <p>SC17 Biomass</p> <p>SC18 Large Solar Arrays</p> <p>SC19 Deep Geothermal</p> <p>Supplementary Guidance:</p> <p>SG7 Energy Efficiency and Low Carbon Development</p>
Business travel	Council Travel Plan	https://www.clacks.gov.uk/document/2906.pdf Please note this was updated in 2018/19 but still requires to be approved by Council	January 2020 - 5 year review period	The Road Traffic Reduction Report sets out targets to reduce existing levels of traffic or the rate at which traffic is growing within Clackmannanshire.

Staff Travel	Kilncraigs Travel Plan	See annex 10	January 2020 - 3 year review period	<p>The Council Travel Plan and Kilncraigs Travel Plan: Clackmannanshire Council as a local authority has a responsibility to lead by example, in order to encourage local businesses and residents to adopt a sustainable approach to travel. The Council has developed a travel plan for all Council staff and visitors as part of the relocation to Kilncraigs.</p> <p>The Kilncraigs Travel Plan has a simple target which is to reduce the number of vehicles coming to Kilncraigs by encouraging modal shift to active travel.</p> <p>Staff travel surveys are continually undertaken to assess attitudes of staff to options for travel plans. The results are available to download from the documents and publications section below.</p> <p>A number of measures have been introduced to encourage staff and visitors to travel by more sustainable modes. Complete review required to commence 24/25 with a view to improving infrastructure and staff incentives. The council's newly appointed Active Travel Manager will lead on this.</p>
Staff Travel	Active Travel (Cycling) Action Plan	https://www.clacks.gov.uk/transport/friendlyroads/	Development in 2018/19 and currently being implemented	<p>The Council's strategy to get more people walking and cycling for work journeys and leisure with the twin aims of reduction in vehicle journeys and increase in health. This will have a beneficial impact on air quality and decrease car borne pollutants. The current Connected Clackmannanshire Strategy will be expanded to a full regional active travel strategy commencing 24/25. This will identify future active travel routes and prioritise these for future delivery.</p>
Water and sewerage	Surface Water Management Plan SWMP	See annex 8	2018/2021 update being worked on	<p>The SWMP for Clackmannanshire (February 2019) has been agreed with SEPA and Roads & Transportation Services and is aimed at reducing surface water flood risks in the top six prioritised Hot Spot Areas identified by the study. We are to procure detailed SWMPs for our top three identified areas at present (1 in Central Tillicoultry and 2 in Alva). Work ongoing.</p>
Business travel	Transport and Environment Report	https://www.clacks.gov.uk/document/2905.pdf Note this was updated in 2018/19 but still requires to be approved by the Council.	January 2020 - 5 year review period	<p>The Transport and Environment Report sets out the key aims to protect and enhance the environment with regard to transport. It details how the Council's activities can be adapted to minimise impact on the environment and to help reduce the impacts and effects of climate change. We must plan positively for the community's social and economic needs whilst facilitating access both to our built environment and to the countryside for recreation and tourism but always in a way that safeguards and enhances the environment. This report is the link between the LTS and SEA and is subject to review as part of the LTS process.</p>
Other (please specify in comments)	Climate Emergency Action Plan	See Annex 1	2024-2045	<p>This plan outlines the actions required to be carried out by responsible services in the council's efforts to achieve net zero by the 2040 & 2045 targets. Actions contained within the CEAP follow the 6 themes outlined in the Climate Change Strategy:</p> <ul style="list-style-type: none"> • Energy, Heat & Buildings • Low Carbon Transport • Waste, Recycling & the Circular Economy • Biodiversity, Carbon Storage & Agriculture • Adaptation, Planning & Organisational Capacity • Economic Development & Sustainable Procurement
Business travel	Roads Asset Management Plan	See annex 6	April 2019 - Annual Review	<p>This Plan describes the Council's largest asset and how it is managed in a sustainable manner. The plan was due to be updated and reworked in line with the latest SCOTS National Guidance in 2022, however lack of resources has resulted in this being postponed and due for completion in 24/25.</p>

2f What are the body's top 5 priorities for climate change governance, management and strategy for the year ahead? Provide a brief summary of the body's areas and activities of focus for the year ahead.

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2g Has the body used the Climate Change Assessment Tool (a) or equivalent tool to self-assess its capability / performance?

If yes, please provide details of the key findings and resultant action taken.

(a) This refers to the tool developed by Resource Efficient Scotland for self-assessing an organisation's capability / performance in relation to climate change.

No

Further information**2h Supporting information and best practice**

Provide any other relevant supporting information and any examples of best practice by the body in relation to governance, management and strategy.

Sustainability, including climate risk, has a more prominent place in the revised Business Planning Guidance (<https://www.clacks.gov.uk/document/meeting/266/1093/7114.pdf>). The Climate Emergency Working Group's responsible services carry out actions within the Climate Emergency Action plan and reports to the Climate Emergency Board. Clackmannanshire Council is currently in the process of establishing a Strategic Energy Working Group to carry out actions and monitor KPIs within the Regional Energy Masterplan.

Public Sector Report on Compliance with Climate Change Duties 2024 Template V9

PART 3Corporate Emissions, Targets and Project Data

Emissions

Exemptions from the start of the year which the body uses as a baseline (for its carbon footprint) to the end of the report year

Complete the following table using the greenhouse gas emissions total for the body calculated on the same basis as for its annual carbon footprint / management reporting or, where applicable, its sustainability reporting. Include greenhouse gas emissions from the body's estate and operations (a) (measured and reported in accordance with Scope 1 & 2 and, to the extent applicable, selected Scope 3 of the Greenhouse Gas Protocol (b). If data is not available for any year from the start of the baseline year to the end of the report year, provide an explanation in the comments column.

(a) No information is required on the effect of the body on emissions which are not from its estate and operations.

(b) This refers to "The greenhouse gas protocol. A corporate accounting and reporting standard (revised edition)", World Business Council for Sustainable Development, Geneva, Switzerland / World Resources Institute, Washington DC, USA (2004). ISBN: 1-55973-588-3.

SELECT APPROPRIATE BASELINE YEAR. TOTAL EMISSIONS IN THIS MOST RECENT FOOTPRINT YEAR IN THIS QUESTION SHOULD EQUAL TOTAL EMISSIONS IN Q10

Baseline year	Year	Year type	Scope 1	Scope 2	Scope 3	Total	Units	Comments
Baseline Year	2013/14	Financial	3,623.00	5,902.00	242.00	9,767.00	CO ₂ e	Scope 1 represents Emissions from Gas, LPG, Fuel Oil, Diesel Petrol and Biomass
Year 1 carbon footprint	2014/15	Financial	3,846.00	5,581.00	270.00	9,700.00	CO ₂ e	Scope 2 represents Emissions from Grid Electricity
Year 2 carbon footprint	2015/16	Financial	5,292.00	5,027.00	084.00	10,403.00	CO ₂ e	Scope 3 represents Emissions from Water, Waste Treatment, Waste Vehicle Storage Claims and Grid Electricity (Transmission and Distribution)
Year 3 carbon footprint	2016/17	Financial	9,994.00	4,424.00	023.00	14,441.00	CO ₂ e	Utility figures collated from invoices
Year 4 carbon footprint	2017/18	Financial	3,640.00	3,099.00	503.00	7,242.00	CO ₂ e	Discovered by Councils 10 and 11 software systems Link
Year 5 carbon footprint	2018/19	Financial	3,443.00	2,443.00	421.00	6,307.00	CO ₂ e	
Year 6 carbon footprint	2019/20	Financial	3,688.00	2,139.00	370.00	6,197.00	CO ₂ e	
Year 7 carbon footprint	2020/21	Financial	3,127.00	1,463.00	246.00	4,836.00	CO ₂ e	
Year 8 carbon footprint	2021/22	Financial	3,059.00	1,400.00	225.00	4,684.00	CO ₂ e	
Year 9 carbon footprint	2022/23	Financial	3,143.00	1,400.00	173.00	4,616.00	CO ₂ e	
Year 10 carbon footprint	2023/24	Financial	3,073.29	1,777.41	6,103.41	11,011.11	CO ₂ e	Utility figures have been included in this year's report whereas this data was included in previous years (except for 21/22)
Year 11 carbon footprint		Financial				-	CO ₂ e	
Year 12 carbon footprint		Financial				-	CO ₂ e	
Year 13 carbon footprint		Financial				-	CO ₂ e	
Year 14 carbon footprint		Financial				-	CO ₂ e	
Year 15 carbon footprint		Financial				-	CO ₂ e	
Year 16 carbon footprint		Financial				-	CO ₂ e	
Year 17 carbon footprint		Financial				-	CO ₂ e	
Year 18 carbon footprint		Financial				-	CO ₂ e	
Year 19 carbon footprint		Financial				-	CO ₂ e	
Year 20 carbon footprint		Financial				-	CO ₂ e	

Breakdown of emissions sources

Please refrain from deleting rows or columns anywhere in this template. This workbook is password protected to prevent this and should not be unlocked.

Complete the following table with the breakdown of emissions sources from the body's most recent carbon footprint (greenhouse gas inventory). This should correspond to the last entry in the table in Q4 above. Use the 'Comments' column to explain what is included within each category of emissions source entered in the first column. If there is no data consumption available for an emissions source enter the emissions in kgCO₂e in the 'Consumption' column of one of the 'Other' rows and assign the scope and an emission factor of 1.

(a) Emissions factors are published annually by the UK Department for Energy Security & Net Zero

Emision factor Year

2023

You use filter emissions sources by 'Type' in column C to enable quicker selection of emissions sources in column D. See the list in the Emissions Tab.

User defined emissions sources can be entered in rows 131 onwards. Please only use those if you cannot find a relevant emission source in the dropdown list or you have a baseline emission factor or non-standard derivation of emissions e.g. based on a survey/consumption data. If you require extra rows in the table please use the template to create additional tabs.

Emission Type	Emission source	Consumption data	Units	Emission factor	Units	Emissions (CO ₂ e)	Comments
Gas	Natural gas	Scope 1	11,589.117 kWh	0.185933 kg CO ₂ e/kWh	0.185933	2133.80747	Increased Gas usage in Public Buildings
Gas	LPG	Scope 1	89.054 kWh	0.211992 kg CO ₂ e/kWh	0.211992	18.87244	School
Gas	Petrol	Scope 1	146.830 kWh	0.888933 kg CO ₂ e/kWh	0.888933	130.066	Increased Fuel Oil usage at FortHaven plus
Biomass	Wood pellets	Scope 1	94 tonnes	11.581302 kg CO ₂ e/tonne	11.581302	4.85126	Fuel for machinery
Gas	Drain (average household level)	Scope 2	200.118 litres	2.51058 kg CO ₂ e/litre	2.51058	0.50248	Increased petrol usage at Redwell P & S
Electricity	Electricity UK	Scope 2	9,363.064 kWh	0.287077 kg CO ₂ e/kWh	0.287077	2687.45476	Increased Electricity usage in Public Buildings and Street lighting (SGL)
Electricity	Transmission and distribution - Electricity UK	Scope 2	9,363.064 kWh	0.027793 kg CO ₂ e/kWh	0.027793	0.259731	Increased Diesel usage in Public Buildings based on 95% of water consumption
Water	Water supply	Scope 3	84.063 cubic metres	0.100000 kg CO ₂ e/cubic metres	0.100000	8.40630	Increased Electricity usage in Public Buildings and Street lighting (SGL)
Water	Water treatment	Scope 3	80.715 cubic metres	0.100000 kg CO ₂ e/cubic metres	0.100000	8.07150	Buildings based on 95% of water consumption
Transport - car	Average car - unknown	Scope 3	501.180 km	0.188966 kg CO ₂ e/km	0.188966	95.51585	Increased Diesel usage in Public Buildings based on 95% of water consumption
Gas	Petrol (average household level)	Scope 1	4.474 litres	2.087497 kg CO ₂ e/litre	2.087497	9.34040	Transport (car / car)
Plastic	Household (National Domestic waste - landfill)	Scope 3	11.246 tonnes	897.04871 kg CO ₂ e/tonne	897.04871	1008.89024	Data received from SRA -
Waste	Mixed dry recyclables - Recycled	Scope 3	12.303 tonnes	71.380851 kg CO ₂ e/tonne	71.380851	878.107	https://data.gov.uk/dataset/household-waste
Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	0.00000	Plastic select from drop down box
Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	0.00000	Plastic select from drop down box
Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	0.00000	Plastic select from drop down box
Other	Other (please specify in comments)	Other (please specify in comments)	Other (please specify in comments)	Other (please specify in comments)	Other (please specify in comments)	0.00000	Other (please specify in comments)
Other	Other (please specify in comments)	Other (please specify in comments)	Other (please specify in comments)	Other (please specify in comments)	Other (please specify in comments)	0.00000	Other (please specify in comments)

Generation, consumption and export of renewable energy

Provide a summary of the body's annual renewable generation (if any), and whether it is used or reported by the body.

Technology	Total consumed by the body (kWh)	Renewable Electricity	Total consumed by the body (kWh)	Renewable Heat	Total consumed by the body (kWh)	Comments
Solar PV	104.115	104.115	25.871	-	-	
Wind	-	-	-	285.068	-	
Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box
Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box	Plastic select from drop down box

Targets

Operational targets

Use all of the body's targets of relevance to its climate change duties. Where applicable, targets for reducing indirect emissions of greenhouse gases, overall carbon targets and any separate land use, energy efficiency, waste, water, information and communication technology, transport, travel and heat targets should be included. Where applicable, you should also provide the body's target date for achieving zero direct emissions of greenhouse gases, or such other targets that demonstrate how the body is contributing to Scotland achieving its emissions reduction targets.

Scope of target	Type of target	Target	Units	Boundary/scope of target	Year used as baseline	Baseline figure	Units of baseline	Target completion year	Progress against target	Comments
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
2024 target for organisational emissions	Percentage	100% organisational emissions reduction	kg CO ₂ e reduction	All emissions	2020/21	12,226	kg CO ₂ e	2024/25	100%	Please select from drop down box
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3a Estimated decrease or increase in the body's emissions attributed to factors (not reported elsewhere in this form) in the report year
If the emissions increased or decreased due to any such factor in the report year, provide an estimate of the amount and direction:

Emissions source	Total estimated annual emissions (tCO ₂ e)	Increase or decrease in emissions	Comments
			Between the period of 01/04/23 - 01/03/24 the Council sold and acquired the following assets - Sold: 10 Operational Properties, Properties the Council would occupy and consume utilities in). Acquired: 10 Operational Properties, (Properties the Council would occupy and consume utilities in).
			Estates have sold 1 Non Operational Property (Properties leased out to non Council Tenants who pay their own utility costs). 153 West Stirling Street Area 1912 261 - Sold 20/09/24. For your information, in almost all leased out property the Council pass the responsibility for sourcing utility providers and paying the associated costs to the tenants.
			Non Operational Property - The Lodge Mar Place Area 1912 248 - Remeasured/Revised lease to pass utility costs to the tenants from 26/07/23 - Prior to this date the previous lease included all utility costs in the monthly rent.
			Estates have also sold land assets but they will not be of interest to you as they did not have any utilities on site.
Electric charges		Please select from drop down box	Residue leased in 2 residential properties for
Electric generation		Please select from drop down box	
Staff numbers		Please select from drop down box	
Other (please specify in comments)		Please select from drop down box	
Please select from drop down box		Please select from drop down box	
Please select from drop down box		Please select from drop down box	
Total			

3b Anticipated annual carbon savings from all projects implemented by the body in the year ahead
If no projects are expected to be implemented against an emissions source, enter "0".
If the organisation does not have any information for an emissions source, enter "unknown".
If the organisation does not include the emissions source in its carbon footprint, enter "N/A".

Emissions source	Total estimated annual carbon savings (tCO ₂ e)	Comments
Electricity		No projects planned
Refrigerant gas		No projects planned
Other heating fuels		No projects planned
Electricity		No projects planned
Water and sewerage		No projects planned
Travel		No projects planned
Plant Transport	272	Potential savings in CO2 with movement to W20 bus, possible further savings in CO2 dependent on up take of full electric vehicles (budget dependent). These figures are estimated only and will rise or fall depending on vehicle numbers taking part in the trial.
Other (please specify in comments)		
Please select from drop down box		
Total	272	

3c Estimated decrease or increase in emissions from other sources in the year ahead
If the body's corporate emissions are likely to increase or decrease for any other reason in the year ahead, provide an estimate of the amount and direction.

Emissions source	Total estimated annual emissions (tCO ₂ e)	Increase or decrease in emissions	Comments
			Between the period of 01/04/23 - 01/03/24 the Council sold and acquired the following assets - Sold: 10 Operational Properties, Properties the Council would occupy and consume utilities in). Acquired: 10 Operational Properties, (Properties the Council would occupy and consume utilities in).
			Estates have sold 1 Non Operational Property (Properties leased out to non Council Tenants who pay their own utility costs). 153 West Stirling Street Area 1912 261 - Sold 20/09/24. For your information, in almost all leased out property the Council pass the responsibility for sourcing utility providers and paying the associated costs to the tenants.
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			Estates have also sold land assets but they will not be of interest to you as they did not have any utilities on site.
Electric charges		Please select from drop down box	Residue leased in 2 residential properties for
Electric generation		Please select from drop down box	
Staff numbers		Please select from drop down box	
Other (please specify in comments)		Please select from drop down box	
Please select from drop down box		Please select from drop down box	
Please select from drop down box		Please select from drop down box	
Total			

3d Total carbon reduction project savings since the start of the year which the body used as a baseline for its carbon footprint
If the body has data available, estimate the total emissions savings made from projects since the start of that year ("the baseline year").

Year savings	Total estimated emissions savings (tCO ₂ e)	Comments
Total project savings since baseline year		

Further information

Supporting information and best practice
Provide any other relevant supporting information and any examples of best practice by the body in relation to corporate emissions, targets and projects.

The Road Maintenance Team has been carrying out low carbon trials including, use of electrically powered machinery and low carbon road repair treatment making an estimated 84% saving on carbon emissions.

Public Sector Report on Compliance with Climate Change Duties 2024 Template

PART 4 Adaptation - please do not include information in this part on measures that solely reduce emissions with no implications for climate adaptation. These are climate mitigation measures which should be reported in the Emissions tab.**Assessing and managing risk****4a Has the body assessed current and future climate-related risks?**

If yes, provide a reference or link to any such risk assessment(s).

We have yet to complete a thorough and systematic assessment of current and future climate-related risks, but we have made steps towards this including the collation of risks from the earlier LCLIP and from the Incident Report, Resilience Plans and business plans.

Internal Corporate Risk & Integrity Forum attended by Development Senior Manager, providing quarterly updates on Energy, Sustainability & Climate Change. Climate has featured on our Corporate Risk Register since 2011, initially with a single risk focussing on both mitigation and adaptation. These areas were then separated (2015), with 'Failure to Prepare for Severe Weather Events' (Business Continuity perspective) remaining on the corporate register, and wider mitigations monitored via the (then) Enterprise & Environment Committee, and our Annual Emergency Planning Statement of Preparedness. This has recently been re-assessed, and the wider climate risk has been re-escalated to the corporate log (in addition to Severe Weather), to ensure that both areas are subject to a higher level of scrutiny by both the internal Corporate Risk & Integrity Forum and the Council's Audit Committee. When the Council considers flood risk management and specifically when it produces studies to inform flood protection schemes, it strives to build in the very latest thinking on what should be accounted for in designed solutions (structural and non-structural) to help reduce the impact of Climate Change.

4b What arrangements does the body have in place to manage climate-related risks?

Provide details of any climate change adaptation strategies, action plans and risk management procedures, and any climate change adaptation policies which apply across the body.

The corporate risk log (<https://www.clacks.gov.uk/document/meeting/295/1210/7785.pdf>) is owned by the Strategic Leadership Group and the Director of Partnership & Performance is responsible for the corporate risk management approach. The Council follows a systematic risk process, reporting corporate and service risks to Council on a regular basis. Processes are assessed via internal and external governance and audit mechanisms, and peer-reviewed by other local authorities. Adaptation is also embedded in our proposed Local Development Plan and associated supplementary guidance.

Climate related risks are identified by the Climate Emergency Working Group's responsible services and reported to the Climate Emergency Board. Climate related risks are then managed with actions on the Climate Emergency Action Plan.

Climate has featured on our Corporate Risk Register since 2011, initially with a single risk focussing on both mitigation and adaptation. These areas were then separated (2015), with 'Failure to Prepare for Severe Weather Events' (Business Continuity perspective) remaining on the corporate register, and wider mitigations monitored via the (then) Enterprise & Environment Committee, and our Annual Emergency Planning Statement of Preparedness. This has recently been re-assessed, and the wider climate risk has been re-escalated to the corporate log (in addition to Severe Weather), to ensure that both areas are subject to a higher level of scrutiny by both the internal Corporate Risk & Integrity Forum and the Council's Audit & Scrutiny Committee.

We have also carried out risk assessments on a Tree Planting project on the slopes of the Dumyat (which is associated with the catchment at Menstrie) that was being carried out by a private developer. We had to ensure the cultivation techniques being used did not increase runoff risk, the outcome is to avoid long trenches and implement short ones.

Taking action**4c What action has the body taken to adapt to climate change?**

Include details of work to increase awareness of the need to adapt to climate change and build the capacity of staff and stakeholders to assess risk and implement action. The body may wish to make reference to the Scottish Climate Change Adaptation Programme ("the Programme").

The Council has proactively established a Climate Emergency Action Plan that details specific strategies for both mitigating and adapting to climate change. Oversight of these initiatives is provided by the Climate Emergency Board, ensuring alignment with broader objectives and accountability. Meanwhile, the Climate Emergency Working Group is responsible for implementing these strategies on the ground, driving tangible progress towards enhancing resilience and reducing greenhouse gas emissions. This comprehensive approach reflects the body's commitment to addressing the challenges posed by climate change effectively.

The Council has initiated a comprehensive approach to support pollinator-friendly planting and implement a thoughtful grass-cutting regimen across significant areas of its grounds. Throughout the spring and summer months, we've partnered with community groups to leverage NatureScot funding, facilitating the development of impactful pollinator projects. Additionally, during 2023/24, our Countryside Ranger service, in collaboration with TCV and EPIC, successfully planted approximately 11,000 trees.

The Council previously agreed to promote a flood protection scheme for Tillicultry which was a recommendation of a Flood Risk Assessment Options Appraisal in 2017. This appraisal was a required action of the Council as set out by the first Local Flood Risk Management Plan for The Forth Local Development Plan 2022 – 2028. The scheme was submitted for national prioritisation to the Scottish Government in 2021/22. It will be a requirement of any prioritised scheme programmed to receive 80% funding from the Scottish Government that it must include the implementation of identified Natural Flood Management techniques as part of the scheme's delivery and that the whole scheme will require to accommodate the ability to be adaptive to the impacts of climate change.

In the 2022/23 budget review it was identified that a funding towards capital flood projects by the Scottish Government has indicated a substantial over spend on committed approved projects to an extent that threatens planned projects such as the Tillicultry Flood Prevention Scheme. Although identified in the council cap programme, the 80% allocation that must come from the Scottish Government to fund such a project is at risk hence the project proposed by the council is at risk. There has been no change to this position since last years report.

The Council continues in a successful partnership with the Forth Rivers Trust to consider where natural flood management measure could be introduced in the council area. The first site assessed was at Muckhart where the partnership included the local flood group. As of the date of this report the project was completed successfully and is to be put forward for a national environment award as demonstrating positive collaboration with the community groups and public bodies. Other catchment areas are being considered where Natural Flood Management (NFM) measures could be introduced. The Councils collaboration with Forth Rivers Trust is being extended to include The Conservation Volunteers (TCV). As a consequence, active engagement has started with key land owners with a view to developing more significant NFM measures within the River Devon catchment. This project will require close collaboration and agreement with all the community flood groups within the Hillfoots area.

The Menstrie care home and Menstrie Primary school has had improved flood guard equipment made available and the development of each project has involved each respective community flood group. In the case of Menstrie care home, the Menstrie Community Resilience Group has developed there emergency response plans to include an action to erect the flood guards when the local flood warning system (River Trak) activates on the Menstrie burn.

4d Where applicable, what contribution has the body made to helping deliver the Programme?

Provide any other relevant supporting information.

We continue to work with internal and external partners. We have continued to run climate change adaptation projects with Inner Forth Futures Initiative partners. Additional projects associated with widening the scope of the volunteer work and the council considers there are additional community buy in and social wellbeing benefits accrued as a result. We continue to engage with these and other partners, like the Forth Rivers Trust, to promote local flood risk management and to raise community awareness of flood risks. We also have a continuing partnership with Scottish Flood Forum and TCV to develop more community resilience groups. The Council also has an ongoing partnership with the Scottish Fire and Rescue Service to promote better links with them re FRM and Community Resilience capacity building. One key aspect of this though is that it is not easy to sustain such groups. It takes concerted effort by the council to ensure the groups receive the support they need.

Clackmannanshire Council has significantly contributed to the successful delivery of the Energy Efficiency Scotland: Area Based Scheme (EES: ABS) funded by the Scottish Government. This initiative has empowered local residents by enhancing their financial resilience and fostering greater energy independence. The insulation improvements provided through this program not only ensure warmer homes during the winter months but have also been positively noted by residents for their effectiveness in keeping homes cooler during the summer. Feedback from the community highlights the tangible benefits of enhanced comfort and reduced energy costs, demonstrating the program's impactful role in supporting sustainable living conditions and adapting to the changing climate.

The Surface Water Management Plan for Clackmannanshire (February 2019) was agreed with SEPA and Transportation Team and is working to reduce surface water flood risks in the top six prioritised Hot Spot Areas identified by the study. Due to staff shortages we have yet to procure detailed SWMPs for our top three identified areas (1 in Central Tillicultry and 2 in Alva). Site works are hoped to proceed next financial year to introduce surface water planning solution for the identified hotspot are in Alva (in Lovess Loan).

Partnership working and capacity building in existing and more recently established community resilience groups continues to be managed by the council. One aspect the council is aware of is the long term lives of the groups in terms of are they able to sustain functioning groups over a lengthy period. The council continues to value the actions of each of the groups and therefore continues to engage with the groups regularly. This continued engagement is supported by the Scottish Flood Forum, SEPA and TCV. Community groups are further being encouraged to better understand how their catchments, watercourses and drainage systems operate during adverse weather conditions. This knowledge building includes where locally known flood prone areas might be during specific rainfall event types and how best to react to them whilst also being aware that such community groups are not required to directly manage responses to weather events. Such knowledge, and knowledge of how events will be exacerbated by climate change, means the groups are better able to prepare their communities, including vulnerable residents, to react to and recover more quickly from such events.

Area wide plan of the Forth area including Stirling, Falkirk Clackmannanshire produced in partnership with SEPA and Scottish water.

The Local FRMP provides a 6 year action plan of flood mitigation projects and initiatives; these include;

- Natural Flood Risk Management,
- Infrastructure projects,
- Community resilience in partnership with local communities, schools etc.
- Awareness raising,
- Protection then Resilience
- Working with Scottish Water to provide sustainable SUDs schemes at new developments and to make existing SUDs schemes more sustainable. (note: this should be all as the previously set out wording here as per page 19)

Review, monitoring and evaluation**4e What arrangements does the body have in place to review current and future climate risks?**

Provide details of arrangements to review current and future climate risks, for example, what timescales are in place to review the climate change risk assessments referred to in Question 4(a) and adaptation strategies, action plans, procedures and policies in Question 4(b).

The Council employs a comprehensive framework to assess and manage both existing and emerging climate risks. This framework involves a systematic risk management process that routinely reports corporate and service risks to the Council. The evaluation and oversight of these processes are conducted through a combination of internal and external governance structures, as well as audit mechanisms, ensuring a high level of accountability. The Corporate Risk and Integrity Forum is held quarterly. Additionally, peer reviews conducted by neighbouring local authorities further enhance the rigor of our assessments.

To ensure a proactive approach, climate risks are continually revisited as part of the Climate Emergency Action Plan (CEAP) initiatives, the Key Performance Indicators (KPIs) outlined in the Regional Energy Masterplan, and the five-year review of the Climate Change Strategy. Actions within the CEAP are reviewed continually by the Climate Emergency Working Group who meet quarterly. These arrangements enable the Council to stay ahead of climate-related challenges, adapting our strategies and responses to safeguard our community's resilience in the face of climate change.

Transportation staff have worked with Sustainability and with The Conservation Volunteers and the Local Flood / Resilience Groups along the Hillfoots to develop a network of Flood Risk Monitor volunteers to monitor key choke points in watercourses to enhance community flood resilience and we have developed this model further in order to encompass invasive species on the selected watercourses in addition to choke points.

4f What arrangements does the body have in place to monitor and evaluate the impact of the adaptation actions?

Please provide details of monitoring and evaluation criteria and adaptation indicators used to assess the effectiveness of actions detailed under Question 4(c) and Question 4(d).

The council monitors and evaluates the impact of adaptation actions within the Climate Emergency Action Plan (CEAP), the Climate Emergency Board (CEB) who meet quarterly and through systematic reporting mechanisms.

Future priorities for adaptation**4g What are the body's top 5 climate change adaptation priorities for the year ahead?**

Provide a summary of the areas and activities of focus for the year ahead.

1. Complete a Strategic Environmental Assessment of our Climate Change Strategy and submit to Council for approval. This document incorporates our Climate Emergency Action Plan (CEAP) which has specific actions associated with adaptation. See Annex 1 [to insert link to SEA and Climate Change Strategy on clacks website once approved by Council]

2. Obtain Council approval for our Pollinator strategy. This document contains our Pollinator Action Plan which includes specific actions associated with adaptation [to insert link to Pollinator Strategy once approved by Council]

3. Continue to work with communities and partner organisations on local flood risk management (partnership projects education, volunteers and networking). Continue to operate and develop the network group which was established by the council as a forum for all the flood groups in the area as well as the relevant responsible bodies, e.g. SEPA, Police, Scottish Fire and Rescue Service and Scottish Water. See Annex 2

4. Working in partnership with the Scottish International Environment Centre (SIEC), Falkirk Council, Stirling Council and other key stakeholders to deliver the Forth Climate Forest (the planting of 16.4 million new trees across 8,300 hectares within the next 10 years) and gather data about climate impacts as they affect Clackmannanshire.

5. To help community enterprises, social enterprises and co-operatives to setup, grow and diversify in line with our climate change adaptation priorities by providing financial support via the Co-operative & Social Enterprise Fund.

Further information

4h

Supporting information and best practice

Provide any other relevant supporting information and any examples of best practice by the body in relation to adaptation.

As with previous years, there are a number of policies and proposals in the Adaptation Programme where local authorities are actively engaged but are not listed as delivery agents in the Programme. In particular, Clackmannanshire Council considers that it contributes to:

N1-9 (supporting citizen science and voluntary environmental monitoring) by working with the Clackmannanshire Biodiversity Partnership and partners in the Inner Forth Landscape Initiative in support of environmental recording and volunteer engagement, and also the TCV/Hillfoots volunteer river monitor project on which work started in FY 2016-17. Transportation staff have worked with Sustainability and with the Conservation Volunteers to develop a network of Flood Risk Monitor volunteers to monitor key choke points in watercourses to enhance community flood resilience and we have developed this model further in order to encompass invasive species on the selected watercourses in addition to choke points. Further enhanced by the above and additional projects associated with widening the scope of the volunteer work and the council considers there are additional community buy in accrued as a result. We continue to engage with these and other partners to promote flood risk management and community awareness. We also have a continuing partnership with SFF/TCV to develop community resilience groups. The Council also has an ongoing partnership with the SFRS to promote better links with them re FRM and Community Resilience capacity building.

N2-4 (manage designated sites for land based biodiversity) by conducting an ongoing review of Local Nature Conservation Sites with a view to ensuring appropriate management; ongoing

N2-7 (reduce the pressure on ecosystems from invasive non-native species (INNS) by working with Inner Forth Landscape Initiative partners to develop better understanding of the spread of invasive non-native species at a landscape level. This work was being developed in 2017/18, however, due to reducing resources we have been unable to progress this area of work in 2018/19, however, it is envisaged that under the new Council structure that this area of work will be able to be revisited and resources made available to incorporate this work into part of our flood risk management tasks. N.B. Clackmannanshire Council are presently working with TCV and local Volunteers to help tackle INNS and work has recommenced with the IFL to take problem areas.

N2-9 (implement the Scottish Biodiversity Strategy) by supporting an active Biodiversity Partnership to deliver the Clackmannanshire Local Biodiversity Action Plan (CBAP) in support of the Scottish strategy, with stronger emphasis on climate change following review and extension of the 2012-17 CBAP to 2020; ongoing

S2-5 (Develop and promote resources which support capacity building in communities, to help build resilience to emergencies, including responding to severe weather events) Flood resilience Groups have been established to increase community resilience in Tillicoultry and Menstrie. These communities are now prepared to deal with significant weather events (flood being the most common risk to consider) Local Flood warning systems are linked to their community emergency response plans. Regular meetings with the Council, the local Flood resilience Groups, SEPA, Scottish Fire Rescue Service and Scottish Water take place which helps to solidifies the partnership. Transportation staff have also worked with Sustainability and with the Conservation Volunteers to develop a network of Flood Risk Monitor volunteers to monitor key choke points in watercourses to enhance community flood resilience and we have developed this model further in order to encompass invasive species on the selected watercourses in addition to choke points.

With regard to S3-1 (NHS Scotland boards to develop individual climate change adaptation plans), with the integration of health and social care initiated in 2014-15, this is an issue on which local authorities and NHS boards need to work together. We are working with the NHS Forth Valley, Stirling Council and Falkirk Council to identify potential areas for partnership working however, resource limitations has hindered progress

Clackmannanshire Council has taken significant steps either as specific climate adaptation measures or as part of broader good practice including using our experience of the impacts of flooding on vulnerable groups informs our work on flood risk management; and carrying out presentations to staff groups and community planning partners.

Provision of guidance and information in our Local Development Plan. Information included:

- Business and Employment
- EP6 Green Business
- Clackmannanshire Green Network

Public Sector Report on Compliance with Climate Change Duties 2024 Template

PART 5 Procurement

5a How have procurement policies contributed to compliance with climate change duties?

Provide information relating to how the procurement policies of the body have contributed to its compliance with climate changes duties.

As per the Council Contract Standing orders (<https://www.clacks.gov.uk/business/contractstandingorders/>) we have adopted the National Procurement Journey (<https://www.procurementjourney.scot/>) as the Council Procurement Policy and our Corporate Procurement process. (<https://www.clacks.gov.uk/business/corporateprocurementprocess/>) Public procurement law and policy already reflects environmental considerations principally through the sustainable procurement duty of the Procurement Reform (Scotland) Act 2014. (<https://www.gov.scot/publications/procurement-reform-scotland-act-2014-statutory-guidance/>)

It requires the Council to consider and act on opportunities to achieve socio-economic and environmental benefits in the course of our procurements.

The Council undertakes this on a number of levels

As part of that process the Sustainable Procurement Duty is built into the Council's tender authorisation forms which must be completed by the Contract Responsible Officer, before any tender process commences. (<https://www.clacks.gov.uk/site/documents/procurement/corporateprocurementprocess/>)

A commodity/service strategy is required for all Council regulated procurements. The commodity/service strategy however should be proportionate to risk, value and strategic importance of the commodity/service to the organisation. Consideration must also be given to Planning, Sustainable Procurement (including Fair Work practices and Climate Change considerations) and Risk Management.

The profiling the commodity/service stage assist the Council officers to:

Understand and scope requirements to help ensure that they achieve the optimum combination of whole life costs and quality to meet the end user(s) requirement.

Use a sustainability test to help maximise the positive impact the procurement process can provide in terms of social, economic and environmental impact associated with the requirement.

The Single Procurement Document (Scotland) ("SPD") (<https://www.publiccontractsscotland.gov.uk/helpandresources/download/e303d9ed-51d9-47d0-84e0-a47301b0359e>) is the standard questionnaire that potential bidders complete which allows the Council to identify suitably qualified and experienced bidders for all our regulated procurements. Specifically question 4C7 allows procurement officers to ask bidders to provide evidence of capability to address the climate emergency in the form of a Bidder Climate Change Plan Template at the selection stage of a procurement exercise.

The Council prepares an Annual Procurement Report which includes a demonstrable alignment between procurement activity and the organisation's Procurement Strategy, including compliance with the Sustainable Procurement Duty.

5b How has procurement activity contributed to compliance with climate change duties?

Provide information relating to how procurement activity by the body has contributed to its compliance with climate changes duties.

The Procurement Strategy Action Plan contains measures to:

- Establish systems to record the impact of procurement policies and practices on the council's climate change duties.
- Utilise the Scottish Government's sustainable prioritisation tool to identify and prioritise procurement activity.
- Utilise the Flexible Framework Self-Assessment Tool (FFSAT) to provide a Sustainable Action Plan to establish the performance level of sustainable procurement across the council.
- Create and manage a sustainable register to capture, monitor and report on the sustainable outcomes achieved via procurement activity, and link to related internal and external reporting requirements.
- Procurement will encourage, through the tender process and support to contractors, provision of apprenticeships and promote health and safety and utilise environmentally sustainable solutions

The Council have a number of initiatives and activities that contribute to our climates change duties some examples are below but not exhaustive.

The Council works in very close collaboration with the Centre of expertise for local authorities Scotland Excel in the development and use of national frameworks. All their frameworks are aligned with the Scottish Sustainable Action Plan which encourages buyers to take a holistic view of the social, economic, environmental implications of the product or services. <https://home.scotland-excel.org.uk/our-contracts/contract-register/>

This also applies to the National contacts put in place by the Scottish Government for Council use <https://www.gov.scot/publications/frameworks-and-contracts/> and UK national contracts via Crown Commercial Service <https://www.gov.uk/government/organisations/crown-commercial-service>

The utilisation of the Sustainable Procurement tools however can also establish where possible information around:

Carbon in production

This is concerned with the procurement of products that are known to be energy/carbon intensive in their production.

- We use compostable bags for some of our waste collection

Carbon and energy consumption

This is concerned with the procurement of energy-using equipment (e.g. ICT, laboratory equipment, white goods, audio-visual and others) or the use of energy in the delivery of a service that is being procured (e.g. FM, printing, professional services).

Further information

5c Supporting information and best practice

Provide any other relevant supporting information and any examples of best practice by the body in relation to procurement.

The Council Procurement Strategy covering April 2019–March 2025 is aimed at promoting effective procurement across the Council by setting out how the Council will:

- make procurement easier for suppliers and the Council alike
- increase the professionalism and commercial skill of those carrying out procurements for the Council
- give opportunity to local and SME suppliers to participate by increasing visibility of the Council's procurement plans and opportunities
- maximise innovation, sustainability and collaboration in procurement activities

On the 21st February 2019 It was recommended that Council agreed to adopt the Procurement Strategy and notes that the Procurement Strategy will be subject to an annual review.

This was after the Partnership and Performance Committee agreed on 31st January, 2019 to adopt the Strategy

The Council Strategy can be found using the following Link <https://www.clacks.gov.uk/business/procurementstrategy/>

The Corporate Procurement Process "The Procurement Journey" has been developed and is intended to support all levels of procurement activities and to help manage the expectations of stakeholders, customers and suppliers alike. It facilitates best practice and consistency across the Council.

Public Sector Report on Compliance with Climate Change Duties 2024 Template

PART 6 Validation and Declaration

6a Internal validation process

Briefly describe the body's internal validation process, if any, of the data or information contained within this report.

See below for the council's validation process of the PBCCD Report in order:

- 1) Data is captured by responsible services.
- 2) Data is collated into the report by the Energy and Sustainability team.
- 3) Input is checked in partnership with the Energy and Sustainability team, senior managers & responsible services.
- 4) Progress updates are presented at the Climate Emergency Working Group.
- 5) Final draft report is passed to internal auditors for validating.

6b Peer validation process

Briefly describe the body's peer validation process, if any, of the data or information contained within this report.

No peer validation was carried out for this report.

6c External validation process

Briefly describe the body's external validation process, if any, of the data or information contained within this report.

No external validation was carried out for this report.

6d No Validation Process

If any information provided in this report has not been validated, identify the information in question and explain why it has not been validated.

6e Declaration

I confirm that the information in this report is accurate and provides a fair representation of the body's performance in relation to climate change.

Name:	Lawrence Hunter
Role in the body:	Energy & Sustainability Team Leader
Date:	29/11/2024

Date in format (dd/mm/yyyy)

Recommended Reporting: Reporting on Wider Influence

Wider Impact and Influence on GHG Emissions

Q1) Historic Emissions (Local Authorities Only) ****The latest dataset is not available. If you wish to include area emissions in the report a separate tab will be posted on the SSN website after DESNZ publishes the dataset, late June/early July.****

Please indicate emission amounts and unit of measurement (e.g. tCO₂e) and years. Please provide information on the following components using data from the links provided below. Please use (1) as the default unless targets and actions relate to (2).

Please note: territorial emissions of carbon dioxide (CO₂), methane (CH₄) and nitrous oxide (N₂O) are provided, but not fluorinated gases, which are also included in the UK territorial greenhouse gas emissions statistics. Prior to the 2005 to 2020 publication the statistics covered emissions of carbon dioxide only.

(1) UK local and regional CO₂e emissions, select dataset (emissions within the scope of influence of local authorities)

(2) UK local and regional CO₂e emissions, full dataset

<https://data.gov.uk/dataset/773c2438-31fa-4e17-8b61-c8693a1d109f/emissions-of-carbon-dioxide-for-local-authority-areas>

Local Authority (Please State)																				
Source	Sector	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	Units	Comments					
DESNZ Sectors	Total Emissions	-	-	-	-	-	-	-	-	-	-	-	-	tCO ₂ e						
	Industry and Commercial	-	-	-	-	-	-	-	-	-	-	-	-	tCO ₂ e						
	Domestic	-	-	-	-	-	-	-	-	-	-	-	-	tCO ₂ e						
	Land Use Change, Forestry and Buildings	-	-	-	-	-	-	-	-	-	-	-	-	tCO ₂ e						
Other Sectors	Please select from drop down box													Please select from drop down box						
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Table 1: Targets
Please detail your wider influence targets

Sector	Description	Type of Target (units)	Baseline value	Start year	Target	Target/End year	Saving in latest year measured	Latest Year Measured	Comments
Energy	REM - KP 1: 1% reduction in total carbon emissions from energy use (interim target)	Percentage Emissions (%)	1309 tCO ₂ e	2023	75% reduction by 2035 (337 tCO ₂ e)	2030		N/A	Link to REM can be found here: https://www.clacks.gov.uk/document/heatmap/1310277738.pdf In order to meet this, decarbonisation and/or sequestration above and beyond all of the above will be required, as current predictions show a ~68% reduction if all interim KPIs are met.
Energy	REM - KP 1: 1% reduction in total carbon emissions from energy use	Percentage Emissions (%)	1309 tCO ₂ e	2023	75% reduction by 2035 (337 tCO ₂ e)	2030		N/A	Best case scenario predicts that "100% tCO ₂ e will need to be sequestered. Worst case scenario predicts that "100% tCO ₂ e will need to be sequestered. If following the setting of these targets in 2023, the energy model predicts that this interim target has already been met. Expected heat demand reductions from works to improve EPC (Energy Performance Certificate) ratings are anticipated to reduce this further.
Energy	REM - KP 2: 1% reduction in region residential heat demand (interim target)	Percentage Emissions (%)	1174 GWh	2023	10% reduction by 2035 (192 GWh)	2032		N/A	This 20% reduction target should be met early in 2032, from the expected fabric improvements and other energy efficiency measures expected to be implemented by then to reach the interim EPC target.
Energy	REM - KP 2: 1% reduction in region residential heat demand	Percentage Emissions (%)	1174 GWh	2023	25% reduction by 2032 (293 GWh)	2045		N/A	To reach this ~40% of the region's homes will require some form of retrofit. This is likely to exclude hard to treat homes (~27% of homes). Scottish Government enforcement will contribute to enabling this. The trigger point for retrofit homes to meet the target is expected to be a change in demand, whereas for owner occupied homes the trigger point may be the point of sale. Raising homeowner awareness of these targets and funding will be essential for local authorities.
Energy	REM - KP 4: 1% homes at set EPC levels: where technically feasible and cost effective to do so (interim target)	Other (please specify in comments)	45% at EPC A-C in 2019	2023	100% EPC C or better by 2033 (49,406 homes, excluding hard to treat)	2030		N/A	To reach this ~68% of the region's homes, including hard to treat homes, will likely require retrofit. However, EPC metrics are due to be reformed to improve their value as a tool in the road to net zero. Our data will be updated to reflect this reform along with any available accurate home energy data. So where the retrofits of 68% of homes may not be feasible, reaching net zero will be possible through heat decarbonisation.
Energy	REM - KP 4: 1% homes at set EPC levels: where technically feasible and cost effective to do so	Other (please specify in comments)	45% at EPC A-C in 2019	2023	95% EPC A-B by 2045 (54,837 homes)	2045		N/A	The electricity grid in Scotland is largely decarbonised, with ~97% of the gross electrical demand met by renewables. The main scope for improving this KPI will therefore arise from the decarbonisation of transport and heat – primarily through electrification. Hydrogen may play a role, but this is unlikely to be the case before 2035.
Energy	REM - KP 5: 1% of total energy (including transportation) to be generated from renewables (interim target)	Percentage Emissions (%)	Currently ~30% in region	2023	50% by 2030 (1,409 GWh)	2030		N/A	To reach this, the use of fossil fuels must be almost completely eliminated. These targets will be dependent upon further decarbonisation of the electricity grid, electricity or hydrogen becoming a cost effective alternative to fossil fuels in the domestic sector, and transport being successfully decarbonised.
Energy	REM - KP 5: 1% of total energy (including transportation) to be generated from renewables	Percentage Emissions (%)	Currently ~30% in region	2023	95% (2,677 GWh)	2045		N/A	To meet the interim target, all off-gas-grid homes currently heated with fossil fuels will need to transition to a low carbon heating source (these home types are to be prioritised by the Scottish Government for heat decarbonisation by 2032). However, even if all of these homes decarbonise their heat then only 19% of the total heating stock will be using a low carbon heat source, so an additional 2,000 of homes currently on the gas grid will also need to change to a low carbon heat source (38% of main gas connected homes), and section 4.3. A lower proportion of non-domestic buildings will need to transition as comparatively more of them currently have a zero-carbon heat supply (~54%).
Energy	REM - KP 6: 1% of buildings with low carbon heat source (interim target)	Other (please specify in comments)	15% non-domestic (2021) (1,532 buildings) 10% domestic (7,067 buildings)	2023	75% non-domestic by 2032 (4,128 buildings) 58% domestic (7,067 buildings)	2032		N/A	To achieve this, nearly all current on-gas-grid homes will need to change to a zero-carbon heat supply – this may be possible in the future through green hydrogen or biomethane replacing natural gas in the gas network, however if neither of these fuels are ready at the scale required by then, then alternative heat sources will need to be used such as electrification, or in some cases biogas. District heating networks will be a vital option for zero-carbon heating in appropriate areas. Meeting these targets will be dependent on UK Government policy with electricity prices being reduced, or hydrogen replacing natural gas in the mains gas network.
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2b) Does the organisation have an overall mission statement, strategies, plans or policies outlining ambition to influence emissions beyond your corporate boundaries? If so, please detail this in the box below.

Collection of baseline data for people cycling and walking for everyday journeys ceased during 2022 (data being collected prior to this). Our partners, Living Street Council as a partner in the Clackmannanshire Alliance has been working with partners to develop a new Wellbeing Economy Local Outcomes Improvement Plan (<https://www.clacks.gov.uk/document/heatmap/1310277738.pdf>), encompassing net zero and climate change ambitions. This strategy plan will cover all of the partner organisations in the Clackmannanshire Alliance.

Clackmannanshire Council is also leading on the Community Wealth Building agenda and through the existing Action Plan (<https://www.clacks.gov.uk/document/5408.pdf>) has a number of actions supporting steps to reduce emissions. More information can be read in the first Progress Report (<https://www.clacks.gov.uk/document/5946.pdf>).

Economic Development will also be developing a Clackmannanshire Strategy for Economic Transformation, with wellbeing economy, Community Wealth Building and Net Zero ambitions embedded.

Our Local Development Plan (<http://gls.clacksweb.org.uk/Static/17747b5b9-4771-44e7-9d7a-9d70b0bdc6/resource/04dc08-6153-43a4-9490-5bdc5c70a153/download/monitoring-report-2017.pdf>) LDF Vision and Strategic Objectives incorporate the following.

Q3) Policies and Actions to Reduce Emissions
Please detail any of the specific policies and actions which are underway to achieve your emission reduction targets

Sector	Start year for policy/action implementation	Year that the policy/action will be fully implemented	Annual CO ₂ e saving once fully implemented (tCO ₂ e)	Latest Year measured	Saving in latest year measured (tCO ₂ e)	Status	Metric/Indicators for monitoring progress	Delivery Role	During project (uplifting design and implementation, has LHM or an equivalent behaviour change tool been used?)	Please give further details of this behaviour change activity.	Value of Investment (£)	Ongoing Costs (£/year)	Primary Funding Source for Implementation of Policy/Action	Comments
Business Industry and Public Sector	2023	2024		N/A		Complete		Enabling	No		£	62,000	Grant funding (UK)	Capital grant funded by UKSPF and administered by Clacks Council economic development team. 7 projects funded total grants awarded £2,000. Some of the main project outcomes were around carbon reduction / energy efficiency. For example, we funded Tullibody Community Development Trust to install new left insulation throughout the Community Centre, and Clackmannan Bowling Club to install triple glazing to part of the building. Southside Community Group were funded to improve their community garden with new planters and barrels. A similar grant programme will be launched in June 2024.
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Q4) Partnership Working, Communications and Capacity Building									
Please detail your Climate Change Partnership, Communication or Capacity Building Initiatives below.									
Key Action Type	Description	Organisation's project role	Lead Organisation (if not reporting organisation)	Private Partners	Public Partners	3rd Sector Partners	Outputs	Comments	
Partnership Working	Employer Engagement Event	Lead		Ceteris (Scotland) Ltd, Flexibility Works	Zero Waste Scotland, Business Energy Scotland, Scottish Enterprise, University of Stirling			Event organised by Council Economic Development team in partnership with our local Business Gateway provider, Ceteris (Scotland) Ltd. The event was held on 1st February 2024 at Alloa Business Centre, with over 40 attendees. (https://www.alloaadvertiser.com/news/24084318-cto-cto-event-help-businesses-achieve-net-zero-target). The focus was on providing information to businesses and third sector organisations in Clackmannanshire on support which is available for net zero activity, action planning and potential funding opportunities. Speakers included representatives from Clackmannanshire Council (setting the scene at a local level), Zero Waste Scotland, Business Energy Scotland, Scottish Enterprise (including the Scottish Manufacturing Advisory Service), Flexibility Works (how hybrid and flexible working practices can support net zero ambitions), and the University of Stirling. Discussion was wide ranging, and contact details for all support organisations were provided to the business and third sector organisations in attendance.	
Partnership Working	Net Zero Workshops	Lead			Zero Waste Scotland, University of Stirling			A programme of net zero workshops commissioned by Council Economic Development and funded by UK Shared Prosperity Funding. Workshops organised by the University of Stirling and delivered at different venues in Clackmannanshire by Zero Waste Scotland and the University of Stirling. Using the Scottish Business Climate Collaboration (SBCC) tool 'Climate Action Hub' to measure carbon footprint and develop a carbon reduction plan. Benefits to businesses and third sector organisations: - Giving the organisation a competitive edge to secure and retain contracts given the mounting pressure to work with suppliers with a net zero strategy - Attracting new customers, with a third of consumers actively seeking out brands with sustainable and ethical credentials. - Enabling businesses to access future funding One workshop was held on 1st March with 11 organisations in attendance. Further workshops planned in 2024/25.	
Partnership Working	Net Zero Expert Help programme	Lead			Business Gateway			Funded by UK Shared Prosperity, a framework of net zero consultants has been set up by Clackmannanshire Council Economic Development team. Working in partnership with Business Gateway who make referrals to the support, we can fund up to 3 days 'expert help' consultants to support organisations with net zero action planning, carbon measurement and carbon reduction plans, energy audits, etc. Two projects currently underway with third sector projects in the county.	
Partnership Working	Climate Forth Project	Supporting	Inner Forth Futures					Climate Forth Project (https://www.innerforthlandscape.co.uk/climate-forth) Project part funded by Clackmannanshire Council through V&AOTF. 2 events held during 2023/24 at Hawkhill Community Centre, attracting 21 attendees. Event topics 'Our Heritage and Future' and 'Climate Change and What is at Risk'.	
Partnership Working	Muckhart NFM Project	Lead				Church of Scotland, Forth Rivers Trust, Muckhart Flood Group, Woodland Trust	Scheme of various Natural flood risk management measure to reduce the risk of flooding to nearby housing.	The project will not only reduce the risk of property flooding but also introduces significant habitat and biodiversity improvement within the catchment. Whilst ultimate responsibility for the installed measures lies with the council, the local flood group are happy to accept responsibility for day to day maintenance actions. The local flood group effort in this regard are to be supported by TV.	
Partnership Working	The Hillbots network forum for local flood groups	Lead			SEPA, Scottish Fire and Rescue Service, Scottish Water, Angus Scotland	TCV, Forth Rivers Trust, Scottish Flood Forum, local flood group members	A regular meeting of all forum members to enable learning, engagement and best practice in flood risk management.	This model of engagement with our flood groups continues to be a very useful means of dialog with all forum members. The regularity of the meeting strengthens the ties between the members and public partners.	
Partnership Working	ACE recycling donation station (CTSI)	Supporting	Alloa Community Enterprises (ACE)				Services and programmes aimed at supporting the people and communities of Clackmannanshire and protect the environment by recycling second hand items.		
Partnership Working	Dollar Repair Cafe	Supporting	Dollar Community Development Trust				Volunteers who can help fix: Small electricals Electronics (Desktop/tablets etc) Small pieces of furniture Musical Instruments Clothing/bags/other fabrics Bikes		
Partnership Working	Mess Shed	Supporting	UK Men's Sheds Association				Men's Sheds encourage people to come together to make, repair and improve, supporting projects in their local communities.		
Partnership Working	Recycle-a-bike	Supporting	Recycle-a-bike				Refurbishes old bikes to stop a bike going to landfill and provides local employment and training.		
Partnership Working	WOW/Living Streets	Supporting	Living Streets				WOW/Living Streets carry out assessments of active travel hotspots in partnership with the council.	Collection of baseline data for people cycling and walking for everyday journeys ceased during 2020 (data being collected prior to this). Our partners, Living Streets, monitor daily travel to school through their WOW campaign (https://www.livingstreets.org.uk/walk-to-school/primary-schools/leave-the-walk-to-school-challenge/leave-travel-tracker/) and this provides evidence for how primary school children travel to school. We monitor this data with Living Streets (one school has seen a 44% decrease in car travel in July 2024) and work closely with schools to raise awareness of sustainable travel. As part of our ongoing commitment, we are looking to invest in new traffic monitoring cameras in 2024/2025 to re-start data collection with regard to number of people using our multi use, segregated paths. The Active Travel Strategy, currently being written, will further outline targets and ambitions for people cycling and walking.	
Partnership Working	Scotland's International Environment Centre (SIEC) pollinator sensors	Supporting	Scotland's International Environment Centre (SIEC)				Ability to monitor pollinator populations and determine how much of an impact Climate Change and human activity is having on pollinators.	Scotland's International Environment Centre (SIEC) obtained funding from Clackmannanshire Council's Nature Restoration Fund to deploy 40 automated pollinator sensors throughout the Council area. The sensors are solar powered and transmit their data via mobile connectivity. The sensors have been developed by AgriLand. They listen to the sounds around them and identify bees from the frequency of their wing beats. This data is then collated and the time when pollinators are active can be calculated. The sensors have been deployed at a range of sites throughout Clackmannanshire, in both urban and rural settings, such as Gartmore Dam, Devon Meadow, Clackmannan and Winny Park. Sensors are recording within school grounds and community gardens as well as country parks.	
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Other Notable Reportable Activity				
Q5) Please detail key actions relating to Food and Drink, Biodiversity, Water, Procurement and Resource Use in the table below				
Key Action Type	Key Action Description	Organisation's Project Role	Impacts	Comments
Biodiversity		Lead		This is Clackmannanshire Council's first pollinator strategy and action plan. The document acknowledges the importance of pollinators within our community and provides an action plan that identifies the role that the Council will take in helping to tackle the decline in pollinator populations. The strategy aligns with the Pollinator Strategy for Scotland 2017-2027 and the Council's Climate Change strategy. Pollinators ensure the continuation of plant populations that lock up carbon in their woody stems, roots, bulbs and tubers. The best way to restore natural habitats to help fight global warming is through natural regeneration from seeds, and for that we need pollinators. Pollination is not just fascinating natural history. It is an essential ecological survival function. Without pollination, the human race and all of earth's terrestrial ecosystems would not survive.
Resource Use	Finalise Pollinator Strategy draft and carry out consultation process	Lead	Approval and implementation of this document will help reduce the impact on pollinators caused by climate change and human activity.	
	Continued development and administration of Energy Efficiency Scotland: Area Based Scheme programme.		Reduction of energy usage in private households through energy efficiency measures.	The council will continue to deliver energy efficiency measures with EES ABS funding.
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Q6) Please use the text box below to detail further climate change related activity that is not noted elsewhere within this reporting template				

UK Government GHG Conversion Factors for Company Reporting

Factors by Category

Category				
Scope	Level 1	Level 3	UOM	GHG Conversion Factor 2023 (kgCO ₂ e/unit)
Scope 1	Bioenergy	Biogas	kWh	0.00022
Scope 1	Bioenergy	Biogas	tonnes	1.23595
Scope 1	Bioenergy	Landfill gas	kWh	0.00020
Scope 1	Bioenergy	Wood chips	kWh	0.01074
Scope 1	Bioenergy	Wood chips	tonnes	40.58114
Scope 1	Bioenergy	Wood pellets	kWh	0.01074
Scope 1	Bioenergy	Wood pellets	tonnes	51.56192
Scope 2	Electricity	Electricity: UK	kWh	0.20707
Scope 3	Electricity	Transmission and distribution - Electricity: UK	kWh	0.01792
Scope 1	Fuels	Aviation spirit	kWh	0.24382
Scope 1	Fuels	Aviation spirit	litres	2.33116
Scope 1	Fuels	Aviation turbine fuel	kWh	0.24758
Scope 1	Fuels	Aviation turbine fuel	litres	2.54269
Scope 1	Fuels	Burning oil (Kerosene)	kWh	0.24677
Scope 1	Fuels	Burning oil (Kerosene)	litres	2.54016
Scope 1	Fuels	Burning oil (Kerosene)	tonnes	3165.04181
Scope 1	Fuels	Coal (industrial)	tonnes	2396.47994
Scope 1	Fuels	Diesel (100% mineral diesel)	litres	2.65937
Scope 1	Fuels	Diesel (average biofuel blend)	litres	2.51206
Scope 1	Fuels	Fuel oil	kWh	0.26813
Scope 1	Fuels	Fuel oil	litres	3.17492
Scope 1	Fuels	Fuel oil	tonnes	3228.89019
Scope 1	Fuels	Gas oil	kWh	0.25650
Scope 1	Fuels	Gas oil	litres	2.75541
Scope 1	Fuels	Gas oil	tonnes	3226.57859
Scope 1	Fuels	LPG	kWh	0.21450
Scope 1	Fuels	LPG	litres	1.55713
Scope 1	Fuels	Marine fuel oil	litres	3.10202
Scope 1	Fuels	Marine gas oil	litres	2.77139
Scope 1	Fuels	Natural gas	kWh	0.18293
Scope 1	Fuels	Petrol (100% mineral petrol)	litres	2.34503
Scope 1	Fuels	Petrol (average biofuel blend)	litres	2.09747
Scope 1	Fuels	Propane	kWh	0.21410
Scope 1	Fuels	Propane	litres	1.54358
Scope 1	Fuels	Waste oils	kWh	0.25641
Scope 1	Fuels	Waste oils	litres	2.74924
Scope 1	Fuels	Waste oils	tonnes	3219.37916
Scope 2	Heat and steam	District heat and steam	kWh	0.17965
Scope 2	Heat and steam	Onsite heat and steam	kWh	0.17965
Scope 3	Heat and steam	Transmission and distribution - district heat & steam, 5% loss	kWh	0.00945
Scope 3	Homeworking	Homeworking (office equipment + heating)	FTE Working Hours	0.33378
Scope 3	Hotel stay	Hotel stay - UK	Room per night	10.40000
Scope 3	Hotel stay	Hotel stay - UK (London)	Room per night	11.50000
Scope 3	Material use	Aggregates - Primary material production	tonnes	7.75138
Scope 3	Material use	Aggregates - Recycled source	tonnes	3.19491
Scope 3	Material use	Aggregates - Re-used	tonnes	2.21000
Scope 3	Material use	Asbestos - Primary material production	tonnes	27.00000
Scope 3	Material use	Asphalt - Primary material production	tonnes	39.21249
Scope 3	Material use	Asphalt - Recycled source	tonnes	28.65491
Scope 3	Material use	Asphalt - Re-used	tonnes	1.73826
Scope 3	Material use	Average construction - Primary material production	tonnes	80.21282
Scope 3	Material use	Batteries - Alkaline - Primary material production	tonnes	4633.47826
Scope 3	Material use	Batteries - Li ion - Primary material production	tonnes	6308.00000
Scope 3	Material use	Batteries - NiMH - Primary material production	tonnes	28380.00000
Scope 3	Material use	Bricks - Primary material production	tonnes	241.75138
Scope 3	Material use	Clothing - Primary material production	tonnes	22310.00000
Scope 3	Material use	Clothing - Re-used	tonnes	152.25000
Scope 3	Material use	Compost derived from food and garden waste - Primary material production	tonnes	114.83405
Scope 3	Material use	Compost derived from garden waste - Primary material production	tonnes	112.01742
Scope 3	Material use	Concrete - Primary material production	tonnes	131.75138
Scope 3	Material use	Concrete - Recycled source	tonnes	3.19491
Scope 3	Material use	Electrical items - fridges and freezers - Primary material production	tonnes	4363.33333
Scope 3	Material use	Electrical items - IT - Primary material production	tonnes	24865.47556
Scope 3	Material use	Electrical items - large - Primary material production	tonnes	3267.00000
Scope 3	Material use	Electrical items - small - Primary material production	tonnes	5647.94563
Scope 3	Material use	Food and drink - Primary material production	tonnes	3701.40359
Scope 3	Material use	Glass - Primary material production	tonnes	1402.76667
Scope 3	Material use	Glass - Recycled source	tonnes	823.18954
Scope 3	Material use	Insulation - Primary material production	tonnes	1861.75138
Scope 3	Material use	Insulation - Recycled source	tonnes	1852.08125
Scope 3	Material use	Metal: aluminium cans and foil (excl. forming) - Primary material production	tonnes	9108.72731
Scope 3	Material use	Metal: aluminium cans and foil (excl. forming) - Recycled source	tonnes	990.47810
Scope 3	Material use	Metal: mixed cans - Primary material production	tonnes	5254.64731
Scope 3	Material use	Metal: mixed cans - Recycled source	tonnes	1461.67759
Scope 3	Material use	Metal: scrap metal - Primary material production	tonnes	3669.43615
Scope 3	Material use	Metal: scrap metal - Recycled source	tonnes	1620.27606
Scope 3	Material use	Metal: steel cans - Primary material production	tonnes	3086.72731
Scope 3	Material use	Metal: steel cans - Recycled source	tonnes	1726.72731
Scope 3	Material use	Metals - Primary material production	tonnes	4005.13777
Scope 3	Material use	Metals - Recycled source	tonnes	1558.94894
Scope 3	Material use	Mineral oil - Primary material production	tonnes	1401.00000
Scope 3	Material use	Mineral oil - Recycled source	tonnes	676.00000
Scope 3	Material use	Paper and board: board - Primary material production	tonnes	801.52177
Scope 3	Material use	Paper and board: board - Recycled source	tonnes	699.88184
Scope 3	Material use	Paper and board: mixed - Primary material production	tonnes	868.06994
Scope 3	Material use	Paper and board: mixed - Recycled source	tonnes	718.56937
Scope 3	Material use	Paper and board: paper - Primary material production	tonnes	910.47810
Scope 3	Material use	Paper and board: paper - Recycled source	tonnes	730.47810
Scope 3	Material use	Plasterboard - Primary material production	tonnes	120.05000
Scope 3	Material use	Plasterboard - Recycled source	tonnes	32.17000
Scope 3	Material use	Plastics: average plastic film - Primary material production	tonnes	2560.25566
Scope 3	Material use	Plastics: average plastic film - Recycled source	tonnes	1890.70135

Scope 3	Material use	Plastics: average plastic rigid - Primary material production	tonnes	3263.92202
Scope 3	Material use	Plastics: average plastic rigid - Recycled source	tonnes	2744.09248
Scope 3	Material use	Plastics: average plastics - Primary material production	tonnes	3102.44851
Scope 3	Material use	Plastics: average plastics - Recycled source	tonnes	2322.22425
Scope 3	Material use	Plastics: HDPE (incl. forming) - Primary material production	tonnes	3255.92980
Scope 3	Material use	Plastics: HDPE (incl. forming) - Recycled source	tonnes	2346.68907
Scope 3	Material use	Plastics: LDPE and LLDPE (incl. forming) - Primary material production	tonnes	2586.72731
Scope 3	Material use	Plastics: LDPE and LLDPE (incl. forming) - Recycled source	tonnes	1793.29541
Scope 3	Material use	Plastics: PET (incl. forming) - Primary material production	tonnes	4018.48341
Scope 3	Material use	Plastics: PET (incl. forming) - Recycled source	tonnes	3121.34429
Scope 3	Material use	Plastics: PP (incl. forming) - Primary material production	tonnes	3090.81790
Scope 3	Material use	Plastics: PP (incl. forming) - Recycled source	tonnes	2537.38600
Scope 3	Material use	Plastics: PS (incl. forming) - Primary material production	tonnes	3764.03981
Scope 3	Material use	Plastics: PS (incl. forming) - Recycled source	tonnes	3187.08199
Scope 3	Material use	Plastics: PVC (incl. forming) - Primary material production	tonnes	3399.17507
Scope 3	Material use	Plastics: PVC (incl. forming) - Recycled source	tonnes	2485.74317
Scope 3	Material use	Soils - Recycled source	tonnes	0.98491
Scope 3	Material use	Tyres - Primary material production	tonnes	3335.57190
Scope 3	Material use	Tyres - Re-used	tonnes	731.21789
Scope 3	Material use	Wood - Primary material production	tonnes	312.61178
Scope 3	Material use	Wood - Recycled source	tonnes	112.96968
Scope 3	Material use	Wood - Re-used	tonnes	38.54288
Scope 1	Process	Desflurane	kg	2540.00000
Scope 1	Process	Sevoflurane	kg	130.00000
Scope 1	Process	Isoflurane	kg	510.00000
Scope 1	Process	Anaesthetic Nitrous Oxide	kg	298.00000
Scope 1	Refrigerants	HFC-134a	kg	1300.00000
Scope 1	Refrigerants	HFC-32	kg	677.00000
Scope 1	Refrigerants	R404A	kg	3943.00000
Scope 1	Refrigerants	R407C	kg	1624.00000
Scope 1	Refrigerants	R410A	kg	1924.00000
Scope 1	Refrigerants	R422D	kg	2473.00000
Scope 1	Refrigerants	R422E	kg	2350.00000
Scope 1	Refrigerants	R423A	kg	2274.00000
Scope 1	Refrigerants	R424A	kg	2212.00000
Scope 1	Refrigerants	R425A	kg	1431.00000
Scope 1	Refrigerants	R426A	kg	1371.00000
Scope 1	Refrigerants	R427A	kg	2024.00000
Scope 1	Refrigerants	R428A	kg	3417.00000
Scope 1	Refrigerants	R429A	kg	13.80000
Scope 1	Refrigerants	R430A	kg	106.00000
Scope 1	Refrigerants	R431A	kg	40.00000
Scope 1	Refrigerants	R432A	kg	1.80000
Scope 1	Refrigerants	R433A	kg	0.64000
Scope 1	Refrigerants	R433B	kg	0.16000
Scope 1	Refrigerants	R433C	kg	0.55000
Scope 1	Refrigerants	R434A	kg	3075.00000
Scope 1	Refrigerants	R435A	kg	28.40000
Scope 1	Refrigerants	R436A	kg	1.35000
Scope 1	Refrigerants	R436B	kg	1.47000
Scope 1	Refrigerants	R437A	kg	1639.00000
Scope 1	Refrigerants	R438A	kg	2059.00000
Scope 1	Refrigerants	R439A	kg	1828.00000
Scope 1	Refrigerants	R440A	kg	156.00000
Scope 1	Refrigerants	R441A	kg	0.23000
Scope 1	Refrigerants	R442A	kg	1754.00000
Scope 1	Refrigerants	R443A	kg	1.00000
Scope 1	Refrigerants	R444A	kg	89.00000
Scope 1	Refrigerants	R445A	kg	118.00000
Scope 1	Refrigerants	R500	kg	7564.00000
Scope 1	Refrigerants	R501	kg	3870.00000
Scope 1	Refrigerants	R502	kg	4786.00000
Scope 1	Refrigerants	R503	kg	13299.00000
Scope 1	Refrigerants	R504	kg	4299.00000
Scope 1	Refrigerants	R505	kg	7956.00000
Scope 1	Refrigerants	R506	kg	3857.00000
Scope 1	Refrigerants	R507A	kg	3985.00000
Scope 1	Refrigerants	R508A	kg	11607.00000
Scope 1	Refrigerants	R508B	kg	11698.00000
Scope 1	Refrigerants	R509A	kg	5758.00000
Scope 1	Refrigerants	R510A	kg	1.24000
Scope 1	Refrigerants	R511A	kg	7.00000
Scope 1	Refrigerants	R512A	kg	196.00000
Scope 1	Refrigerants	R600 = butane	kg	0.00600
Scope 1	Refrigerants	R600A = isobutane	kg	3.00000
Scope 1	Refrigerants	R601 = pentane	kg	5.00000
Scope 1	Refrigerants	R601A = isopentane	kg	5.00000
Scope 2	Renewables	Renewable Elec Purchase Direct Supply	kWh	0.00000
Scope 2	Renewables	Renewable Heat Purchase Direct Supply	kWh	0.00000
Scope 2&3	Transport - car	Average business travel car - Battery Electric Vehicle	km	0.05480
Scope 2&3	Transport - car	Average business travel car - Battery Electric Vehicle	miles	0.08819
Scope 2&3	Transport - car	Average business travel car - Plug-in Hybrid Electric Vehicle	km	0.09392
Scope 2&3	Transport - car	Average business travel car - Plug-in Hybrid Electric Vehicle	miles	0.15113
Scope 3	Transport - car	Average car - Diesel	km	0.16983
Scope 3	Transport - car	Average car - Diesel	miles	0.27332
Scope 3	Transport - car	Average car - Hybrid	km	0.11898
Scope 3	Transport - car	Average car - Hybrid	miles	0.19147
Scope 3	Transport - car	Average car - Petrol	km	0.16391
Scope 3	Transport - car	Average car - Petrol	miles	0.26379
Scope 3	Transport - car	Average car - Unknown	km	0.16664
Scope 3	Transport - car	Average car - Unknown	miles	0.26817
Scope 1	Transport - car	Average fleet car - Battery Electric Vehicle	km	0.00000
Scope 1	Transport - car	Average fleet car - Battery Electric Vehicle	miles	0.00000
Scope 1	Transport - car	Average fleet car - Plug-in Hybrid Electric Vehicle	km	0.06588
Scope 1	Transport - car	Average fleet car - Plug-in Hybrid Electric Vehicle	miles	0.10601
Scope 2&3	Transport - car	Large business travel car - Battery Electric Vehicle	km	0.05797
Scope 2&3	Transport - car	Large business travel car - Battery Electric Vehicle	miles	0.09330
Scope 2&3	Transport - car	Large business travel car - Plug-in Hybrid Electric Vehicle	km	0.10158
Scope 2&3	Transport - car	Large business travel car - Plug-in Hybrid Electric Vehicle	miles	0.16349
Scope 3	Transport - car	Large car - Diesel	km	0.20859

Scope 3	Transport - car	Large car - Diesel	miles	0.33570
Scope 3	Transport - car	Large car - Hybrid	km	0.15244
Scope 3	Transport - car	Large car - Hybrid	miles	0.24530
Scope 3	Transport - car	Large car - Petrol	km	0.27224
Scope 3	Transport - car	Large car - Petrol	miles	0.43812
Scope 3	Transport - car	Large car - Unknown	km	0.22612
Scope 3	Transport - car	Large car - Unknown	miles	0.36389
Scope 1	Transport - car	Large fleet car - Battery Electric Vehicle	km	0.00000
Scope 1	Transport - car	Large fleet car - Battery Electric Vehicle	miles	0.00000
Scope 1	Transport - car	Large fleet car - Plug-in Hybrid Electric Vehicle	km	0.07082
Scope 1	Transport - car	Large fleet car - Plug-in Hybrid Electric Vehicle	miles	0.11397
Scope 2&3	Transport - car	Medium business travel car - Battery Electric Vehicle	km	0.05257
Scope 2&3	Transport - car	Medium business travel car - Battery Electric Vehicle	miles	0.08458
Scope 2&3	Transport - car	Medium business travel car - Plug-in Hybrid Electric Vehicle	km	0.08501
Scope 2&3	Transport - car	Medium business travel car - Plug-in Hybrid Electric Vehicle	miles	0.13680
Scope 3	Transport - car	Medium car - Diesel	km	0.16716
Scope 3	Transport - car	Medium car - Diesel	miles	0.26902
Scope 3	Transport - car	Medium car - Hybrid	km	0.10904
Scope 3	Transport - car	Medium car - Hybrid	miles	0.17549
Scope 3	Transport - car	Medium car - Petrol	km	0.17819
Scope 3	Transport - car	Medium car - Petrol	miles	0.28676
Scope 3	Transport - car	Medium car - Unknown	km	0.17246
Scope 3	Transport - car	Medium car - Unknown	miles	0.27754
Scope 1	Transport - car	Medium fleet car - Battery Electric Vehicle	km	0.00000
Scope 1	Transport - car	Medium fleet car - Battery Electric Vehicle	miles	0.00000
Scope 1	Transport - car	Medium fleet car - Plug-in Hybrid Electric Vehicle	km	0.06144
Scope 1	Transport - car	Medium fleet car - Plug-in Hybrid Electric Vehicle	miles	0.09887
Scope 3	Transport - car	Motorbike - Average	km	0.11367
Scope 3	Transport - car	Motorbike - Average	miles	0.18294
Scope 2&3	Transport - car	Small business travel car - Battery Electric Vehicle	km	0.04823
Scope 2&3	Transport - car	Small business travel car - Battery Electric Vehicle	miles	0.07763
Scope 2&3	Transport - car	Small business travel car - Plug-in Hybrid Electric Vehicle	km	0.05402
Scope 2&3	Transport - car	Small business travel car - Plug-in Hybrid Electric Vehicle	miles	0.08694
Scope 3	Transport - car	Small car - Diesel	km	0.13931
Scope 3	Transport - car	Small car - Diesel	miles	0.22420
Scope 3	Transport - car	Small car - Hybrid	km	0.10150
Scope 3	Transport - car	Small car - Hybrid	miles	0.16336
Scope 3	Transport - car	Small car - Petrol	km	0.14080
Scope 3	Transport - car	Small car - Petrol	miles	0.22660
Scope 3	Transport - car	Small car - Unknown	km	0.14037
Scope 3	Transport - car	Small car - Unknown	miles	0.22591
Scope 1	Transport - car	Small fleet car - Battery Electric Vehicle	km	0.00000
Scope 1	Transport - car	Small fleet car - Battery Electric Vehicle	miles	0.00000
Scope 1	Transport - car	Small fleet car - Plug-in Hybrid Electric Vehicle	km	0.02163
Scope 1	Transport - car	Small fleet car - Plug-in Hybrid Electric Vehicle	miles	0.03481
Scope 3	Transport - public	Average local bus	passenger.km	0.10215
Scope 3	Transport - public	Black cab	km	0.30604
Scope 3	Transport - public	Black cab	passenger.km	0.20402
Scope 3	Transport - public	Coach	passenger.km	0.02718
Scope 3	Transport - public	Ferry - Average (all passenger)	passenger.km	0.11270
Scope 3	Transport - public	Ferry - Car passenger	passenger.km	0.12933
Scope 3	Transport - public	Ferry - Foot passenger	passenger.km	0.01871
Scope 3	Transport - public	Flights - Domestic, to/from UK - Average passenger	passenger.km	0.27258
Scope 3	Transport - public	Flights - International, to/from non-UK - Average passenger	passenger.km	0.17580
Scope 3	Transport - public	Flights - International, to/from non-UK - Business class	passenger.km	0.39044
Scope 3	Transport - public	Flights - International, to/from non-UK - Economy class	passenger.km	0.13464
Scope 3	Transport - public	Flights - International, to/from non-UK - First class	passenger.km	0.53854
Scope 3	Transport - public	Flights - International, to/from non-UK - Premium economy class	passenger.km	0.21542
Scope 3	Transport - public	Flights - Long-haul, to/from UK - Average passenger	passenger.km	0.26128
Scope 3	Transport - public	Flights - Long-haul, to/from UK - Business class	passenger.km	0.58029
Scope 3	Transport - public	Flights - Long-haul, to/from UK - Economy class	passenger.km	0.20011
Scope 3	Transport - public	Flights - Long-haul, to/from UK - First class	passenger.km	0.80040
Scope 3	Transport - public	Flights - Long-haul, to/from UK - Premium economy class	passenger.km	0.32016
Scope 3	Transport - public	Flights - Short-haul, to/from UK - Average passenger	passenger.km	0.18592
Scope 3	Transport - public	Flights - Short-haul, to/from UK - Business class	passenger.km	0.27430
Scope 3	Transport - public	Flights - Short-haul, to/from UK - Economy class	passenger.km	0.18287
Scope 3	Transport - public	International rail	passenger.km	0.00446
Scope 3	Transport - public	Light rail and tram	passenger.km	0.02860
Scope 3	Transport - public	Local bus (not London)	passenger.km	0.11836
Scope 3	Transport - public	Local London bus	passenger.km	0.07832
Scope 3	Transport - public	London Underground	passenger.km	0.02780
Scope 3	Transport - public	National rail	passenger.km	0.03546
Scope 3	Transport - public	Regular taxi	km	0.20806
Scope 3	Transport - public	Regular taxi	passenger.km	0.14861
Scope 2&3	Transport - van/HGV	Business Travel Van - Average (up to 3.5 tonnes) - Battery Electric Vehicle	km	0.07346
Scope 2&3	Transport - van/HGV	Business Travel Van - Average (up to 3.5 tonnes) - Battery Electric Vehicle	miles	0.11824
Scope 2&3	Transport - van/HGV	Business Travel Van - Class I (up to 1.305 tonnes) - Battery Electric Vehicle	km	0.03850
Scope 2&3	Transport - van/HGV	Business Travel Van - Class I (up to 1.305 tonnes) - Battery Electric Vehicle	miles	0.06197
Scope 2&3	Transport - van/HGV	Business Travel Van - Class II (1.305 to 1.74 tonnes) - Battery Electric Vehicle	km	0.05932
Scope 2&3	Transport - van/HGV	Business Travel Van - Class II (1.305 to 1.74 tonnes) - Battery Electric Vehicle	miles	0.09547
Scope 2&3	Transport - van/HGV	Business Travel Van - Class III (1.74 to 3.5 tonnes) - Battery Electric Vehicle	km	0.08967
Scope 2&3	Transport - van/HGV	Business Travel Van - Class III (1.74 to 3.5 tonnes) - Battery Electric Vehicle	miles	0.14430
Scope 1	Transport - van/HGV	Fleet Van - Average (up to 3.5 tonnes) - Battery Electric Vehicle	km	0.00000
Scope 1	Transport - van/HGV	Fleet Van - Average (up to 3.5 tonnes) - Battery Electric Vehicle	miles	0.00000
Scope 1	Transport - van/HGV	Fleet Van - Class I (up to 1.305 tonnes) - Battery Electric Vehicle	km	0.00000
Scope 1	Transport - van/HGV	Fleet Van - Class I (up to 1.305 tonnes) - Battery Electric Vehicle	miles	0.00000
Scope 1	Transport - van/HGV	Fleet Van - Class II (1.305 to 1.74 tonnes) - Battery Electric Vehicle	km	0.00000
Scope 1	Transport - van/HGV	Fleet Van - Class II (1.305 to 1.74 tonnes) - Battery Electric Vehicle	miles	0.00000
Scope 1	Transport - van/HGV	Fleet Van - Class III (1.74 to 3.5 tonnes) - Battery Electric Vehicle	km	0.00000
Scope 1	Transport - van/HGV	Fleet Van - Class III (1.74 to 3.5 tonnes) - Battery Electric Vehicle	miles	0.00000
Scope 1	Transport - van/HGV	HGV (all diesel) - All artics - Average laden	km	0.90644
Scope 1	Transport - van/HGV	HGV (all diesel) - All artics - Average laden	miles	1.45877
Scope 1	Transport - van/HGV	HGV (all diesel) - All HGVs - Average laden	km	0.87205
Scope 1	Transport - van/HGV	HGV (all diesel) - All HGVs - Average laden	miles	1.40341
Scope 1	Transport - van/HGV	HGV (all diesel) - All rigids - Average laden	km	0.82313
Scope 1	Transport - van/HGV	HGV (all diesel) - All rigids - Average laden	miles	1.32470
Scope 1	Transport - van/HGV	HGVs refrigerated (all diesel) - All artics - Average laden	km	1.04867
Scope 1	Transport - van/HGV	HGVs refrigerated (all diesel) - All artics - Average laden	miles	1.68766
Scope 1	Transport - van/HGV	HGVs refrigerated (all diesel) - All HGVs - Average laden	km	1.02098

Scope 1	Transport - van/HGV	HGVs refrigerated (all diesel) - All HGVs - Average laden	miles	1.64310
Scope 1	Transport - van/HGV	HGVs refrigerated (all diesel) - All rigid - Average laden	km	0.98025
Scope 1	Transport - van/HGV	HGVs refrigerated (all diesel) - All rigid - Average laden	miles	1.57754
Scope 1	Transport - van/HGV	Vans - Average (up to 3.5 tonnes) - Diesel	km	0.23128
Scope 1	Transport - van/HGV	Vans - Average (up to 3.5 tonnes) - Diesel	miles	0.37224
Scope 1	Transport - van/HGV	Vans - Average (up to 3.5 tonnes) - Petrol	km	0.20132
Scope 1	Transport - van/HGV	Vans - Average (up to 3.5 tonnes) - Petrol	miles	0.32400
Scope 1	Transport - van/HGV	Vans - Average (up to 3.5 tonnes) - Unknown	km	0.23037
Scope 1	Transport - van/HGV	Vans - Average (up to 3.5 tonnes) - Unknown	miles	0.37075
Scope 1	Transport - van/HGV	Vans - Class I (up to 1.305 tonnes) - Diesel	km	0.14212
Scope 1	Transport - van/HGV	Vans - Class I (up to 1.305 tonnes) - Diesel	miles	0.22875
Scope 1	Transport - van/HGV	Vans - Class I (up to 1.305 tonnes) - Petrol	km	0.18217
Scope 1	Transport - van/HGV	Vans - Class I (up to 1.305 tonnes) - Petrol	miles	0.29318
Scope 1	Transport - van/HGV	Vans - Class II (1.305 to 1.74 tonnes) - Diesel	km	0.17405
Scope 1	Transport - van/HGV	Vans - Class II (1.305 to 1.74 tonnes) - Diesel	miles	0.28013
Scope 1	Transport - van/HGV	Vans - Class II (1.305 to 1.74 tonnes) - Petrol	km	0.19594
Scope 1	Transport - van/HGV	Vans - Class II (1.305 to 1.74 tonnes) - Petrol	miles	0.31534
Scope 1	Transport - van/HGV	Vans - Class III (1.74 to 3.5 tonnes) - Diesel	km	0.25346
Scope 1	Transport - van/HGV	Vans - Class III (1.74 to 3.5 tonnes) - Diesel	miles	0.40792
Scope 1	Transport - van/HGV	Vans - Class III (1.74 to 3.5 tonnes) - Petrol	km	0.31444
Scope 1	Transport - van/HGV	Vans - Class III (1.74 to 3.5 tonnes) - Petrol	miles	0.50605
Scope 3	Waste	Aggregates - Landfill	tonnes	1.23401
Scope 3	Waste	Aggregates - Recycled	tonnes	0.98491
Scope 3	Waste	Asbestos - Landfill	tonnes	5.91332
Scope 3	Waste	Asphalt - Landfill	tonnes	1.23401
Scope 3	Waste	Asphalt - Recycled	tonnes	0.98491
Scope 3	Waste	Average construction - Combustion	tonnes	21.28081
Scope 3	Waste	Average construction - Recycled	tonnes	0.98491
Scope 3	Waste	Batteries - Landfill	tonnes	8.88413
Scope 3	Waste	Batteries - Recycled	tonnes	21.28081
Scope 3	Waste	Books - Combustion	tonnes	21.07310
Scope 3	Waste	Books - Landfill	tonnes	1164.09963
Scope 3	Waste	Books - Recycled	tonnes	21.07310
Scope 3	Waste	Bricks - Landfill	tonnes	1.23401
Scope 3	Waste	Clinical Waste - Orange Stream	tonnes	273.00000
Scope 3	Waste	Clinical Waste - Other	tonnes	1000.00000
Scope 3	Waste	Clinical Waste - Red Stream	tonnes	1000.00000
Scope 3	Waste	Clinical Waste - Yellow Stream	tonnes	297.00000
Scope 3	Waste	Clothing - Combustion	tonnes	21.28081
Scope 3	Waste	Clothing - Landfill	tonnes	496.68331
Scope 3	Waste	Clothing - Recycled	tonnes	21.28081
Scope 3	Waste	Commercial and industrial waste - Combustion	tonnes	21.28081
Scope 3	Waste	Commercial and industrial waste - Landfill	tonnes	520.33474

Scope 3	Waste	Concrete - Landfill	tonnes	1.23401
Scope 3	Waste	Concrete - Recycled	tonnes	0.98491
Scope 3	Waste	Glass - Combustion	tonnes	21.28081
Scope 3	Waste	Glass - Landfill	tonnes	8.88413
Scope 3	Waste	Glass - Recycled	tonnes	21.28081
Scope 3	Waste	Household/Municipal/Domestic waste - Combustion	tonnes	21.28081
Scope 3	Waste	Household/Municipal/Domestic waste - Landfill	tonnes	497.04471
Scope 3	Waste	Mixed dry recyclates - Recycled	tonnes	21.28081
Scope 3	Waste	Insulation - Landfill	tonnes	1.23401
Scope 3	Waste	Insulation - Recycled	tonnes	0.98491
Scope 3	Waste	Metal: aluminium cans and foil (excl. forming) - Combustion	tonnes	21.28081
Scope 3	Waste	Metal: aluminium cans and foil (excl. forming) - Landfill	tonnes	8.88413
Scope 3	Waste	Metal: aluminium cans and foil (excl. forming) - Recycled	tonnes	21.28081
Scope 3	Waste	Metal: mixed cans - Combustion	tonnes	21.28081
Scope 3	Waste	Metal: mixed cans - Landfill	tonnes	8.88413
Scope 3	Waste	Metal: mixed cans - Recycled	tonnes	21.28081
Scope 3	Waste	Metal: scrap metal - Combustion	tonnes	21.28081
Scope 3	Waste	Metal: scrap metal - Landfill	tonnes	8.88413
Scope 3	Waste	Metal: scrap metal - Recycled	tonnes	21.28081
Scope 3	Waste	Metal: steel cans - Combustion	tonnes	21.28081
Scope 3	Waste	Metal: steel cans - Landfill	tonnes	8.88413
Scope 3	Waste	Metal: steel cans - Recycled	tonnes	21.28081
Scope 3	Waste	Metals - Landfill	tonnes	1.26435
Scope 3	Waste	Metals - Recycled	tonnes	0.98491
Scope 3	Waste	Mineral oil - Combustion	tonnes	21.28081
Scope 3	Waste	Mineral oil - Recycled	tonnes	21.28081
Scope 3	Waste	Organic: food and drink waste - Anaerobic digestion	tonnes	8.91242
Scope 3	Waste	Organic: food and drink waste - Combustion	tonnes	21.28081
Scope 3	Waste	Organic: food and drink waste - Composting	tonnes	8.91242
Scope 3	Waste	Organic: food and drink waste - Landfill	tonnes	700.20988
Scope 3	Waste	Organic: garden waste - Anaerobic digestion	tonnes	8.91242
Scope 3	Waste	Organic: garden waste - Combustion	tonnes	21.28081
Scope 3	Waste	Organic: garden waste - Composting	tonnes	8.91242
Scope 3	Waste	Organic: garden waste - Landfill	tonnes	646.60659
Scope 3	Waste	Organic: mixed food and garden waste - Anaerobic digestion	tonnes	8.91242
Scope 3	Waste	Organic: mixed food and garden waste - Combustion	tonnes	21.28081
Scope 3	Waste	Organic: mixed food and garden waste - Composting	tonnes	8.91242
Scope 3	Waste	Organic: mixed food and garden waste - Landfill	tonnes	655.98717
Scope 3	Waste	Paper and board: board - Combustion	tonnes	21.28081
Scope 3	Waste	Paper and board: board - Composting	tonnes	8.91242
Scope 3	Waste	Paper and board: board - Landfill	tonnes	1164.39042
Scope 3	Waste	Paper and board: board - Recycled	tonnes	21.28081
Scope 3	Waste	Paper and board: mixed - Combustion	tonnes	21.28081
Scope 3	Waste	Paper and board: mixed - Composting	tonnes	8.91242
Scope 3	Waste	Paper and board: mixed - Landfill	tonnes	1164.39042
Scope 3	Waste	Paper and board: mixed - Recycled	tonnes	21.28081
Scope 3	Waste	Paper and board: paper - Combustion	tonnes	21.28081
Scope 3	Waste	Paper and board: paper - Composting	tonnes	8.91242
Scope 3	Waste	Paper and board: paper - Landfill	tonnes	1164.39042
Scope 3	Waste	Paper and board: paper - Recycled	tonnes	21.28081
Scope 3	Waste	Plasterboard - Landfill	tonnes	71.95000
Scope 3	Waste	Plasterboard - Recycled	tonnes	21.28081
Scope 3	Waste	Plastics: average plastic film - Combustion	tonnes	21.28081
Scope 3	Waste	Plastics: average plastic film - Landfill	tonnes	8.88413
Scope 3	Waste	Plastics: average plastic film - Recycled	tonnes	21.28081
Scope 3	Waste	Plastics: average plastic rigid - Combustion	tonnes	21.28081
Scope 3	Waste	Plastics: average plastic rigid - Landfill	tonnes	8.88413
Scope 3	Waste	Plastics: average plastic rigid - Recycled	tonnes	21.28081
Scope 3	Waste	Plastics: average plastics - Combustion	tonnes	21.28081
Scope 3	Waste	Plastics: average plastics - Landfill	tonnes	8.88413
Scope 3	Waste	Plastics: average plastics - Recycled	tonnes	21.28081
Scope 3	Waste	Plastics: HDPE (incl. forming) - Combustion	tonnes	21.28081
Scope 3	Waste	Plastics: HDPE (incl. forming) - Landfill	tonnes	8.88413
Scope 3	Waste	Plastics: HDPE (incl. forming) - Recycled	tonnes	21.28081
Scope 3	Waste	Plastics: LDPE and LLDPE (incl. forming) - Combustion	tonnes	21.28081
Scope 3	Waste	Plastics: LDPE and LLDPE (incl. forming) - Landfill	tonnes	8.88413
Scope 3	Waste	Plastics: LDPE and LLDPE (incl. forming) - Recycled	tonnes	21.28081
Scope 3	Waste	Plastics: PET (incl. forming) - Combustion	tonnes	21.28081
Scope 3	Waste	Plastics: PET (incl. forming) - Landfill	tonnes	8.88413
Scope 3	Waste	Plastics: PET (incl. forming) - Recycled	tonnes	21.28081
Scope 3	Waste	Plastics: PP (incl. forming) - Combustion	tonnes	21.28081
Scope 3	Waste	Plastics: PP (incl. forming) - Landfill	tonnes	8.88413
Scope 3	Waste	Plastics: PP (incl. forming) - Recycled	tonnes	21.28081
Scope 3	Waste	Plastics: PS (incl. forming) - Combustion	tonnes	21.28081
Scope 3	Waste	Plastics: PS (incl. forming) - Landfill	tonnes	8.88413
Scope 3	Waste	Plastics: PS (incl. forming) - Recycled	tonnes	21.28081
Scope 3	Waste	Plastics: PVC (incl. forming) - Combustion	tonnes	21.28081
Scope 3	Waste	Plastics: PVC (incl. forming) - Landfill	tonnes	8.88413
Scope 3	Waste	Plastics: PVC (incl. forming) - Recycled	tonnes	21.28081
Scope 3	Waste	Soils - Landfill	tonnes	19.51734
Scope 3	Waste	Soils - Recycled	tonnes	0.98491
Scope 3	Waste	Tyres - Recycled	tonnes	21.28081
Scope 3	Waste	WEEE - fridges and freezers - Landfill	tonnes	8.88413
Scope 3	Waste	WEEE - large - Combustion	tonnes	21.28081
Scope 3	Waste	WEEE - large - Landfill	tonnes	8.88413
Scope 3	Waste	WEEE - mixed - Combustion	tonnes	21.28081
Scope 3	Waste	WEEE - mixed - Landfill	tonnes	8.88413
Scope 3	Waste	WEEE - small - Combustion	tonnes	21.28081
Scope 3	Waste	WEEE - small - Landfill	tonnes	8.88413
Scope 3	Waste	Wood - Combustion	tonnes	21.28081
Scope 3	Waste	Wood - Composting	tonnes	8.91242
Scope 3	Waste	Wood - Landfill	tonnes	925.24450
Scope 3	Waste	Wood - Recycled	tonnes	21.28081
Scope 3	Water	Water supply	cubic metres	0.10000
Scope 3	Water	Water supply	million litres	110.00000

END

Key responsibilities				
Lead	Climate Emergency Work Group - Service Reps	Clackmannanshire Council		
Compiler of report	Energy and Sustainability Team			
Audit	Internal Audit			
How many months will the project last?		11		
Considerations/Constraints	Format changes by SSN following UK Gov releasing conversion factors Dates when emissions data is released			

Task	Comments	Timescales	January	February	March	April	May	June	July	Aug	Sept	Oct	30th Nov
Feedback from Internal Audit on 2023/24 report presented at Climate Emergency Working Group (CEWG) meeting (21st of January)	- Feedback/Questions from services. - E+S confirm folder for the depositing of information. - Services identify lead persons for each service. - Timeframe agreed.	1 Day											
Presentation on 23/24 Report to Climate Emergency Board (CEB) meeting (11th of February)	- Feedback from CEB members passed on to CEWG members	1 Day											
Service Review of feedback from Internal Audit	- Identify strengths and weaknesses. - Commence collation of 24/25 data.	10 Weeks											
Service Feedback to CEWG meeting (18th April) on progress	- Services to report on progress and to identify any challenges with data collected to date. - E+S to inform the Internal Audit on identified challenges	1 Day											
Update to CEB meeting (6th of May) on progress	- E+S report to CEB on progress/identified challenges	1 Day											
Services ongoing work on collection of data + data input by E+S team to template	- Ensure supporting documentation is available	9 Months											
PBCCD 2024/25 Guidance from SSN/UK Government	- UK gov. Publish Conversion figures. Jun/July - E+S relay any new requirements to services and update CEWG meeting (8th of July)	2 Months											
Services make amendments/adjustments based on UK gov and SSN guidance	- Internal Audit informed of any changes and of any potential challenges in the provision of new requirements.	2 Months											
Update to CEB meeting (12th of August) on progress	- E+S report to CEB on progress/identified challenges	1 Day											
Service Feedback to CEWG meeting (8th of October) on progress	- Services to report on progress and to identify any challenges with data collected.	1 Day											
Data collected to date sent to Internal Audit / Internal Audit Review	- Document completed as far as possible taking into account the constraints of available data at this point. - Waste data unavailable until 30th Oct. Details to be issued to Internal Audit within 5 days of receiving data - E+S to submit the draft to Internal Audit within the first week of October - Internal Audit to complete their draft report by the beginning of the 3rd week in November (17th,18th Nov) Feedback on actions to meet Internal Audit recommendations to be supplied to Internal Audit by 25th Nov.	1 Month											
Update CEB meeting (11 November) on Progress	- E+S report to CEB on progress and submission to Internal Audit	1 Day											
Submission of PBCCD report to SSN	- Internal Audit to certify the final PBCCD Report before close of play on the 27th November 2025 - E+ S to aim to submit the final PBCCD Report to SSN by close of play on Fri 28th Nov with the latest submission date being Sunday the 30th of November 2025	1 Day											

The above time table is subject to any changes that may be instructed by the Scottish Sustainability Network
The E+S team and Internal Audit will work together to amend the time table should there be substantial changes that will impact upon the completion date of the 30th November. Any changes will be presented to the CEWG and CEB.

Appendix 4: Greenhouse Gas Emissions

The emissions data is based on greenhouse gas emissions which the Council can directly influence.

The Council's Energy Officer sources the data from records of usage.

Scope 1 (gas, LPG, fuel oil, diesel, and biomass),

Scope 2 (grid electricity) and

Scope 3 (water, water treatment, and grid electricity) emissions was consistent with that in the 2018/19, 2019/20, 2020/21, 2021/22, and 2022/23 reports.

It was noted that the Scope 1 and 3 for 2022/23 in the current return was different from the final return received in the prior year, however, evidence has been received to demonstrate a late amendment to the submission in the prior year.

The information at Table 1 confirms that the Council's greenhouse gas emissions have reduced over the previous four years. There was a major increase in 2021/22, however, due to the incorporation of emissions from waste (7,074 tCO₂e) into the carbon footprint in Scope 3. This information was not available in previous years, however, was again not included for 2022/23 due to information being unavailable from the originating department. Waste emissions have been included in the 2023/24 figures (5,901 tCO₂e) into the carbon footprint in Scope 3. There was also a slight decrease in Scope 1 and 2 emissions due to a reduction in fuel usage, and the increase in Scope 3 is due to increased mileage claims.

Table 1

Year	Scope 1	Scope 2	Scope 3	Total	Units
2017/18	3,940	3,096	503	7,538	tCO ₂ e
2018/19	3,445	2,418	421	6,285	tCO ₂ e
2019/20	3,468	2,139	379	5,986	tCO ₂ e
2020/21	3,137	1,663	245	5,045	tCO ₂ e
2021/22	3,098	1,890	7,327	12,315	tCO ₂ e
2022/23	3,163	1,800	173	5,136	tCO ₂ e
2023/24	3,071	1,777	6,162	11,010	tCO ₂ e

Report to Audit & Scrutiny Committee

Date of Meeting: 6 February 2025

**Subject: Environmental Health
Official Food Control Progress Report**

Report by: Strategic Director (Place)

1.0 Purpose

- 1.1. To present an overview of the progress the Council's Official Food Control Service Plan, April 2024 to March 2025 (appendix 1), submitted to Food Standards Scotland for review in August 2024.

2.0 Recommendations

- 2.1. That the Committee note, comment on and challenge the performance of the Council's food law regulation service.

3.0 Considerations

3.1. Background

- 3.1.1. The Council, as the food law enforcing authority in Clackmannanshire, has a statutory duty to provide a food law regulation service that meets the requirements of Assimilated Regulation (EU) 2017/625, the Food Law Code of Practice (Scotland) 2019 and the Food Law Interventions Code of Practice (Scotland) 2019.

<https://www.foodstandards.gov.scot/publications-and-research/publications/interventions-food-law-code-of-practice-scotland-2019>

- 3.1.2. Food must be manufactured, prepared, distributed and handled by food businesses in accordance with relevant food safety laws. This ensures that food businesses do not pose a risk to public health. Where food businesses contravene food law in Clackmannanshire, the Council's Environmental Health Service must take appropriate regulatory action to remedy the situation in accordance with the Council's Food Law Enforcement Policy.
- 3.1.3. Clackmannanshire Council implemented a recovery program for the restart of Food Law inspections as the delivery of routine interventions ceased during Covid. This work followed direction provided by Food Standards Scotland (FSS) on local authority recovery. It is based on a phased approach to ensure

that resources are focused on businesses which present the greatest risk. The team is continuing to progress through this ongoing programme of work.

3.2. **Review Process**

3.2.1. The review process focuses on examining evidence to verify whether the Council complies with the planned arrangements for food law enforcement and whether planned arrangements are being applied effectively. Checks are carried out to verify and validate that the Codes of Practice are being implemented correctly by the Council.

3.2.2. Analysis of electronic evidence held by the Council and verification of documentation is carried out, to ensure that policies, procedures and codes of practice have been correctly followed during the inspection process.

3.3. **Review Findings**

3.3.1. Progress with the plan is set out in the table below. Appendix 2 contains extracts from “Interventions Food Law Code of Practice (2019)” which provides the rationale behind risk rating and grouping of food businesses, which in turn determines frequency of inspections required.

Group / Band	Number Due in 2024/25	Achieved (%) by end Dec 24
1A	3	100%
1B	2	100%
1C	3	100%
1D	1	100%
1E	0	N/A
Group1 Unrated	1	100%
2A	0	N/A
2B	120	26%
2C	75	86%
2D	32	100%
2E	2	100%
Group2 Unrated	27	100%
3A	0	N/A
3B	48	47%
3C	15	60%
3D	1	100%
3E	0	N/A
Group3 Unrated	9	100%
Approved Establishments	1	100%
Primary Production	1	100%

3.3.2 The Environmental Health Team is on target to complete the inspection program in all categories except for two. These are highlighted as bold in the table above. It should be noted there has been a marked improvement in overall performance in comparison to the previous year reflected in focusing on this work.

3.3.3 Work has been prioritised following FSS recovery guidance. The team is on target to deliver official controls at all higher risk premises. This includes the

Approved Establishment; all Group 1s; intensive interventions within all Groups; and Band Cs in Groups 2 and 3. In addition, the team have been inspecting new businesses. This includes those registered prior to the inspection plan and also those registered during this reporting year.

- 3.3.4 There has been slippage in the inspection programme for compliant businesses in Band 2B and 3B. Both bands contain the largest number of businesses within the inspection program. Although rated as compliant, it has been some time since they were inspected and there is a risk that standards could slip. Given the level of resources available, the team will need to continue to prioritise higher risk premises. However, these Band 2B and 3B businesses will always be visited if any complaints regarding food safety/hygiene issues are received.
- 3.3.5 The team continues to manage the ongoing turnover of businesses. During the 9 month period, 53 businesses have closed or changed ownership, and 31 new businesses have started to trade. This turnover requires significant resources as the majority of new businesses require considerable input from the Environmental Health Team to help them understand and achieve compliance.

4.0 Sustainability Implications

- 4.1. NIL

5.0 Resource Implications

- 5.1. *Staffing*
- 5.2. Staff have been working on a hybrid basis between the office and their home. All Officers have full remote access to the IT systems.
- 5.3. There have been vacancies within the team this financial year. There was a vacancy created within the team due to an internal promotion in June 2023 following retirement of the Team Leader. This post has been advertised but the Council was unsuccessful in recruiting a suitable individual and it remains vacant. Due to the shortage of available Environmental Health Officers within Scotland, it was agreed that this post would be downgraded to a Technical Officer in Public Health. This has led to a saving but will also free up Environmental Health Officers to concentrate more on Food Law related issues. Food safety work also has to be balanced with the Public Health work which is mainly reactive and unplanned. In addition, there has been the loss of a Part-Time Senior Environmental Health Officer in November. This reduction in available resources has and will continue to impact on the team's ability to deliver the full inspection programme.
- 5.4. Food Standards Scotland audited Clackmannanshire's Environmental Health Service in 2022 and even though at that time the Team was fully staffed it was identified through the resource calculation process for food law enforcement that there is a 1.2 FTE resource deficit of Environmental Health Officers identified through the resource calculation process for food law enforcement. As has previously been reported to this Committee, it is contended that a recent change in the rating of food businesses, introduced by Food Standards

Scotland, has increased our inspection liability. It is therefore considered that central government should provide funding for this deficit or revise the new rating system so as to be resource neutral. This was fed back to Food Standards Scotland and is under consideration. Other local authorities are anecdotally of the same view as this service. Food Standards Scotland is still reviewing the rating scheme to ensure that it is “resource neutral” as originally intended.

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	<input checked="" type="checkbox"/>
Our families; children and young people will have the best possible start in life	<input checked="" type="checkbox"/>
Women and girls will be confident and aspirational, and achieve their full potential	<input checked="" type="checkbox"/>
Our communities will be resilient and empowered so that they can thrive and flourish	<input checked="" type="checkbox"/>

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

Development Services Food Law Enforcement Policy 2022 (Appendix 3)

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: Official Food Control Service Plan 24/25
 Appendix 2: Extract from Interventions Food Law Code of Practice (Scotland) 2019
 Appendix 3: Development Services Food Law Enforcement Policy 2022

11.0 Background Papers

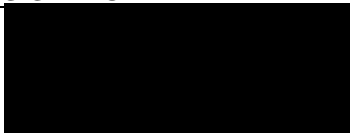
11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

Yes ☐ (please list the documents below) No ☒

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Dawn Brisbane	Team Leader Environmental Health	2579

Approved by

NAME	DESIGNATION	SIGNATURE
Kevin Wells	Strategic Director (Place)	



**Clackmannanshire
Council**

www.clacks.gov.uk

Comhairle Siorrachd
Chlach Mhanann

Place

Development Services

Official Food Control Service Plan

1 April 2024 to 31 March 2025

Approved by Strategic Director of Place

Signed

(Pete Leonard)

Date

02 August 2024

Section 1 - Service Aims and Objectives

1. Aims & Objectives

- 1.1. Safe food and drink is something that is taken for granted by the majority of the population. The safety of this fundamental human need relies on a competent, trustworthy and managed supply chain. Regulation of this process is undertaken by Environmental Health professionals working in local authorities. The consequence of failure can be costly in terms of human health, and also public confidence in the food industry and government.
- 1.2. Clackmannanshire Council recognises the importance of ensuring that all food produced and sold within the county is safe. Providing a service capable of carrying out the statutory duties placed upon the Council is fully recognised. This Official Food Control Service Plan underlines the Council's commitment to fulfilling those duties and it covers the key areas of food law regulation for the period 1 April 2024 to 31 March 2025. The Council remains committed to:
 - provide the resources needed to meet the statutory obligations and duties placed upon it to maintain a safe food supply in Clackmannanshire
 - ensure officers are trained and meet the requirements of Continual Professional Development to carry out food control duties
 - ensure officers have sufficient equipment, adequately maintained, to carry out their statutory duties in relation to food control
- 1.3. Clackmannanshire Council's food law service is provided by the Environmental Health team. The team's objectives are to ensure that:
 - Food is safe and authentic
 - Responsible food businesses are enabled to thrive
 - Consumers are empowered to make positive choices about food

These objectives support those contained within Food Standards Scotland's Corporate Plan 2021-24¹.

- 1.4. This Service Plan supports the priorities of Clackmannanshire Council's Place Directorate Business Plan². That Business Plan sets out the main priorities to be pursued and outcomes to be achieved taking account of the Corporate Plan. The Official Food Control Service Plan contributes to the following Corporate Outcomes:
 - Sustainable, inclusive growth
 - Empowering individuals, families and communities
 - Health and wellbeing

Section 2 – Background

¹ Food Standards Scotland - Healthy, Safe, Sustainable: Driving Scotland's Food Future Corporate Plan 2021-24

² Clackmannanshire Council Place Directorate Business Plan 2021-23

2. Profile of Clackmannanshire Council

- 2.1. Clackmannanshire Council is the smallest mainland Scottish Council. The county covers an area of 61 square miles and has a population of 51,540³. It's bounded by the Ochil Hills in the North and the River Forth in the South. Neighbouring authorities are Fife, Perth & Kinross, Stirling and, south of the River Forth, Falkirk. Clackmannanshire is a mix of rural and urban areas with Alloa as the main town. The district is primarily residential in nature with no large industrial sites.
- 2.2. The 2011 census contains details of Clackmannanshire's population statistics and can be found at - <http://www.scotlandscensus.gov.uk/ods-web/area.html>

Organisational Structure

- 2.3. Clackmannanshire Council has three directorates, each managed by a Strategic Director. They are:
- People
 - Place
 - Performance and Partnerships

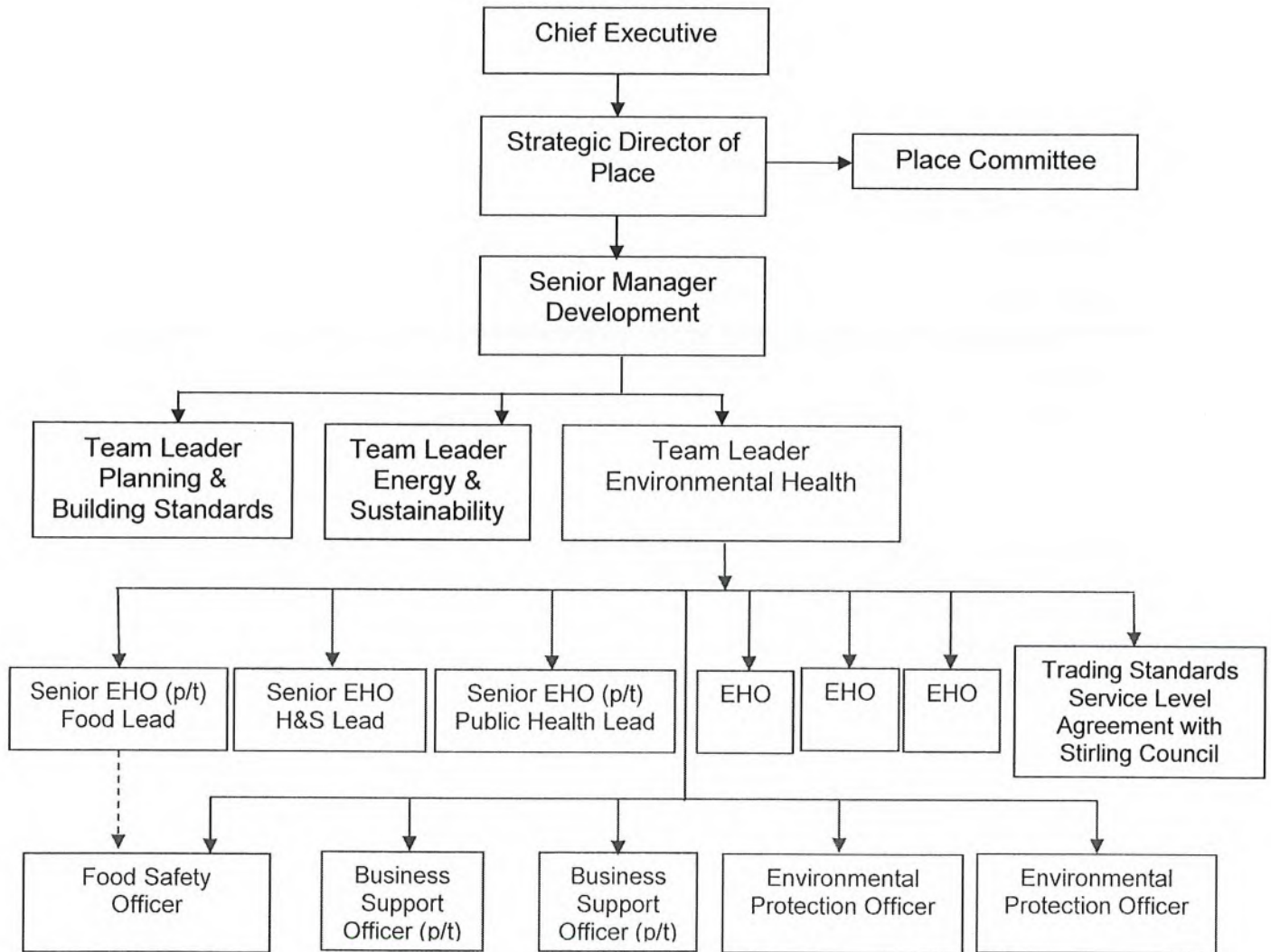
The Place Directorate covers Housing, Property, Development and Environment. Environmental Health is situated within Development Services. This service includes predominantly statutory, front-line services that support community health & safety, well being and economic prosperity. This includes:

- Planning
- Building Standards
- Trading Standards
- Environmental Health
- City Deal / Regional Economic Partnership
- Regeneration
- Climate Change

- 2.4. The Council's Environmental Health Officers and Environmental Health Technical Officer are responsible for the entire range of Environmental Health work, in addition to the delivery of the food control service. They are supported in non-food Environmental Health work by two Environmental Protection Officers. Environmental Health is managed by the Environmental Health Team Leader. The Team Leader is the Council's Lead Officer responsible for delivery of Official Food Controls for food law. A Senior Environmental Health Officer, with specialist food knowledge, has responsibility for routine food control service activities. The Team Leader also manages the service level agreement for the provision of the Trading Standards service within Clackmannanshire which is provided by Stirling Council.
- 2.5. The Structure of Environmental Health within Development Services is detailed in the diagram below. Red writing and red lines denote the Environmental Health staff:

³ National Records of Scotland 2021

Official Food Control Plan 2024-25



Dashed lines denote supervisory duties, solid line denotes management duties.

Scope of the Food Service

- 2.6. The scope of the food law work undertaken by Environmental Health includes:
- Programmed food law inspections of food businesses.
 - Assisting businesses to meet their legal obligations in terms of food law by providing appropriate advice and information
 - Enforcement of the legal requirements in respect of food law through formal regulation, e.g. Hygiene Improvement Notices, Hygiene Emergency Prohibition Notices, Remedial Action Notices, Reports to the Procurator Fiscal, etc.
 - Issue of Food Hygiene Information Scheme ratings
 - Investigation of cases of food poisoning
 - Investigation of food complaints and complaints about food premises
 - Approval of premises in terms of EU Hygiene Regulations
 - Sampling of foods for analysis by Glasgow Council Scientific Services
 - Consultation to the Licensing Board and other Council Services
 - Consultation advice on Civic Government (Scotland) Act 1982
 - Advice on all food law matters to the general public and others
 - Responding to Food Alerts and notification of incidents issued by Food Standards Scotland (FSS)
 - Issue Export Health Certificates for exports to third countries.
- 2.7. As the EHOs are generic officers, they also undertake all other statutory functions required by the service which includes public health, health and safety and statutory nuisance. Officers are also involved with supporting businesses and Forth Valley Health Board with compliance and reacting to complaints and incidents.
- 2.8. The Environmental Health service is located at Kilncraigs, Greenside Street, Alloa, FK10 1EB. Reception is open Monday to Friday 10am to 3pm for public enquiries. Officers work on a hybrid basis between the office and their home. They are required to be based in the office at least 40% of the working week. Staff have full remote access to IT systems for home working. Officers work flexible hours between 8:00am and 6:00pm. Out of hours services are provided when necessary by prior arrangement. There is no formal system of out of hours cover.

Demands on Food Service

- 2.9. Clackmannanshire has 559 Registered Food Premises. The current profile of these businesses are as follows:

Business Type	Number of Businesses
Approved Establishment	1
Primary Producers	2
Manufacturers and Packers	22
Importers / Exporters	0
Distributors / Transporters	10
Supermarket / Hypermarket	16
Small Retailer	88
Retailers Other	14
Restaurant / Café / Canteen	77
Hotel / Guest House	9
Pub / Club	49
Take-away	56
Caring Premises	86
School / College	27
Mobile Food Unit	12
Restaurants & Other Caterers	90

FLRS Group/Band	A	B	C	D	E	Unrated
1	6	2	3	1	0	0
2	0	178	74	17	0	11
3	85	150	25	0	0	4

Annex 5 Risk Rating	No. Establishments	Risk Rating (FH)
Approved establishments	1	B
Primary Production	2	E

- 2.10. Performance for the service, in terms of food control delivery, is measured by:
- Completion of the annual food law inspection programme within timescales specified in the Code of Practice. Clackmannanshire's target for performance on this standard is detailed in the table below:

Official Food Control Plan 2024-25

	1	2	3
FLRS Band A	100%	80%	0%
FLRS Band B			50%
FLRS Band C		100%	100%
FLRS Band D			
FLRS Band E			
Approved Est	100%		
Primary Production	50%		

- Officers achieving the required 10 hours Continuing Professional Development
- Response times to service requests
- Internal monitoring of officers delivering the food control service by the Senior EHO for food, including accompanied inspections.
- The completion of an annual food sampling programme that is focussed on the safety and quality of food locally produced and sold.

Enforcement Policy

- 2.11. The Council has produced a Food Law Enforcement Policy which is agreed by the Place Committee. This document sets out what businesses can expect from the enforcement officers whilst undertaking food law work. Enforcement will be applied in a graduated, risk-based manner and resources shall be targeted at those businesses which pose the greatest risk to health.

3. Section 3 - Service Delivery

Inspections at Food Establishments

- 3.1. In September 2021, Clackmannanshire Council implemented a recovery program for the restart of food law inspections as the delivery of routine interventions ceased during the Covid pandemic. This work was prepared following direction provided by FSS on local authority recovery⁴. It is based on a phased approach and ensures that resources are focussed on businesses which present the greatest risk. The team is the final year of this program of work which is due to be completed by March 2025. Details of the full recovery strategy are in Annex 1.

- 3.2. The table below details the planned program of food interventions for 2024-25:

⁴ Food Standards Scotland – Local Authority Recovery Project Recovery Process Guidance (Dec 2020)

Official Food Control Plan 2024-25

FLRS Group/Band	A	B	C	D	E	Unrated
1	4	2	3	1	0	0
2	0	120	74	17	0	11
3	16	50	15	0	0	4

Annex 5 Risk Rating	No. Establishments	Risk Rating (FH)
Approved Establishments	1	B

- 3.3. All programmed interventions are by way of inspection, including new unrated businesses. Officers undertake inspections in accordance with Clackmannanshire Council's Enforcement Policy and Inspection Procedure which incorporates the provisions of the Food Law Code of Practice Scotland, Practice Guidance and other centrally issued guidance. The above figures do not include the potential increase in the number of inspection due to businesses being placed on intense intervention (one or three month inspection frequency) due to poor compliance. Nor does it include new businesses that will open during this reporting year which and will require inspection.
- 3.4. It is estimated that officers will be required to undertake at least 142 revisits to follow up on significant contraventions raised during routine inspections. This number is an estimate based on previous history as the need to revisit can only be determined once the initial inspection has been undertaken.
- 3.5. New businesses that register with Environmental Health are entered onto the team's database. The target for all new businesses to be inspected is within 3 months of opening and they shall be allocated on a risk basis.

Food Complaints

- 3.6. The investigation of food complaints is in accordance with the Council's written procedure and all complaints are reviewed and investigated. Action taken shall be proportionate to risk. Based on data from previous years, an estimate of 46 complaints relating to problems with food items or poor practices at a business is predicted. However, this type of work is reactive and can not be planned.

Home Authority Principle

- 3.7. The Council supports the Home Authority Principle and Primary Authority Scheme. It does not act as Home or Primary Authority for any business. Where an officer is considering taking enforcement action which they believe may be contrary to any

advice issued by the relevant Home/Originating or Primary Authority, they will discuss the facts with the relevant Authority before action is instigated.

Advice to Business

- 3.8. Clackmannanshire Council provides advice for businesses either on request or in the course of normal service operation. The Council is committed to providing quality and comprehensive advice to local food businesses and this is reflected in the Enforcement Policy and written procedures.

Food Sampling

- 3.9. A sampling programme is prepared each year which incorporates local producers, exported food, SFELC/FSS national sampling priorities and local issues. Sampling is carried out by the Environmental Health Officers and the Environmental Health Technical Officer in accordance with written procedures. The Council has appointed Glasgow City Council Scientific Services as Food Examiner and Public Analyst and all food samples for examination and analysis are submitted to them.

Control and Investigation of Outbreaks and Food Borne Infectious Disease

- 3.10. The Council, in partnership with, and led by, Forth Valley Health Board, investigates all reported cases of outbreaks and food related infections. This is in accordance with procedures agreed with Forth Valley Health Board. The Team Leader Environmental Health attends meetings with the Consultant in Public Health Medicine as called.

Food Law Incidents

- 3.11. All food law incidents reported to the Council by local food businesses will be dealt with in accordance with the Council's procedures. These procedures follow the requirements of the Food Law Code of Practice Scotland. The Council's procedures extend to reports of food safety incidents through the alert system operated by Food Standards Scotland. All alerts "for action" are acted upon if relevant to businesses in Clackmannanshire. A record of all alerts is kept electronically.

Liaison with other Organisations

- 3.12. The Environmental Health team maintains positive liaison with many organisations. The food law code of practice requires local authorities to work together with national bodies to contribute to consistency of enforcement. The team works with other local authorities through attendance of the East of Scotland Liaison Group (ESFLG) and the Scottish Food Enforcement Liaison Committee (SFELC). The Senior Environmental Health Officer for Food Safety is the Chair of the ESFLG and is a representative on SFELC. The service is audited by Food Standards Scotland and there is a strong commitment to attend any events organised by this agency. The Council also provides full commitment to supporting working groups.

Food Crime and Fraudulent Activities

- 3.13. The Environmental Health team work with the Food Crime and Incidents Unit at Food Standards Scotland in support of work undertaken on food fraud and food crime. During routine inspections and sampling, Officers are looking for evidence of any attempts to mislead consumers or provide food which is dangerous. The team shall share intelligence with this agency and assist with any investigation as required.

Section 4 – Finance and Staffing

Financial Allocation

- 4.1. The following financial resources are available to the service for **all** Environmental Health Work, including food control delivery and it is not possible to break this figure down any further:

Staff	£498,872
Transport	£2,200
Equipment Maintenance	£4,100
Equipment Purchase	£1,000
Staff Clothing	£570
Materials	£1,500
Training (Centrally Held)	£2,000

- 4.2. The staffing budget has increased slightly from the previous financial year due to pay increase awarded the previous year. Staff numbers remain stable. The training budget has remained the same and is held centrally. These funds are predominantly used for food CPD for authorised officers. Equipment maintenance has decreased slightly due to budget restraints.
- 4.3. Clackmannanshire Council must ensure that services are prioritised on meeting targets and fulfilling statutory obligations to protect people's health, safety and welfare. Previous years have seen slight reductions in budget but for the period of this service plan the position remains fairly stable. The Council must ensure that it maintains a food control service that meets statutory obligations.
- 4.4. The Council continues to face challenging times and further budget cuts but, at this current time, it is not planned for further reductions in Environmental Health's staffing levels or budget allocation. The Council is fully committed to meeting statutory duties and any future changes will not impact on its ability to deliver services at that level.

Staffing Allocation

- 4.5. The Environmental Health team at Clackmannanshire Council are generalist officers that adapt and react to the multiple functions that the profession covers. This includes public health, statutory nuisance, health and safety and food control. The team's current staffing levels and the proportion of officer time dedicated to food control work is listed in the table below:

Position	All EH Work (FTE)	Vacant Post (FTE)	Food Control Work (FTE)
Team Leader Environmental Health	1	0	0.3
Senior / Environmental Health Officer	5	1	2.6
Environmental Health Technical Officer	1	0	0.8
Environmental Protection Officer	2	0	0
Total	9	1	3.7

- 4.6. The resources required for delivery of the 2024-25 food control program has been calculated to require 3.7 full time equivalents (FTE). Full details of the resource calculation are available in Schedule 2. Due to the vacant EHO post, the available resource available to deliver the food control program is 3.4 FTE.
- 4.7. The levels of competency and authorisation of staff is as outlined in the Inspection Procedure and Enforcement Policy. The Business Support and Environmental Protection Officers are not authorised in any capacity for food control work.

Staff Development Plan

- 4.8. Clackmannanshire Council is committed to staff development. Training and development needs are assessed during individual Constructive Conversations with staff in accordance with the council's performance management process.
- 4.9. Training will be provided using a range of formats including formal qualifications; external courses delivered in person or online; internal training sessions; shadowing and mentoring. All Officers authorised to undertake food law work shall complete at least 10 hours training annually as part of their continuing professional development (CPD) to maintain competency as required by the Food Law Code of Practice.

Section 5 - Monitoring

Quality Assessment and Internal Monitoring

- 5.1. The Council is committed to providing quality services and has in place a system of internal monitoring. This covers:
- review of files to check that inspection procedures etc. have been carried out;
 - review of all reports submitted to the Procurator Fiscal prior to submission
 - checks on all formal enforcement notices issued;
 - checks on informal reports issued;
 - accompanied inspections and visits to check quality and practices;
- 5.2. The performance of this Authority against the Service Plan will be monitored by:
- comparison of annual inspections against the inspection programme
 - annual review of food sampling;
 - annual review of procedural guidance
 - annual training assessment.

Section 6 – Review

Review against the service plan

- 6.1. The Service Delivery Plan will be reviewed on an annual basis by the Senior EHO for Food Environmental Health to assess its relevance to current operations and targets and will be amended where there are significant changes. The Official Food Control Service Plan will be submitted annually to the Head of Service for approval.
- 6.2. An end of year report will be submitted to the Strategic Director identifying where the service has varied from the Service Plan, the reasons for this and the actions taken as a consequence.
- 6.3. Any areas of improvement of service delivery identified will be set out within the review with proposals for their implementation.

Areas for Improvement / Challenges

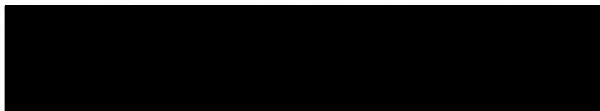
- 6.4. The recovery of the food law inspection program following disruption due to the Covid pandemic is a significant undertaking for the team. The recovery period is due to end in March 2025. It is important that Officers are supported throughout this transition so that they deliver a competent service. Over the past few years, the operational and economic pressures have been extremely challenging for the food industry and have resulted in a changing landscape within the food industry which has impacted on the inspection program. Many businesses have started trading online for the first time, some have introduced higher risk processes and cut backs often impact the general standard of compliance.

Official Food Control Plan 2024-25

- 6.5. The recovery is made more complex by the transition to the new food law rating scheme. This new scheme has changed the inspection profile of the businesses due to the different priorities built into the scheme, resulting in many businesses requiring inspection on a more frequent basis. Large or complex businesses are to be inspected more frequently due to their inherent risk. The introduction of intense interventions is effective at securing improvement at poorly performing businesses. However, this involves significant officer time. A significant number of lower risk premises are being risk rated at higher inspection frequencies due to the increased priority placed on food standards. All these factors contribute towards a heavier inspection program moving forward.
- 6.6. The Interventions Food Law Code of Practice (Scotland) does not apply to Approved Establishments. This type of businesses will be addressed in a future Code of Practice which will include the introduction of the Official Control and Verification manual. Implementation of this new inspection regime requires to be fully introduced at Approved Establishments. Officers will require support with this change in working practice.
- 6.7. There has been a vacant EHO post within the team since June 2024 and recruitment has been unsuccessful. This shall impact the performance of the team in the year going forward. All Scottish local authorities are struggling to recruit at this time due to a lack of professional staff being available, and more staff leaving the profession than are currently being educated and trained. Recruitment for this vacant post is a priority for the coming year. As part of the inspection recovery plan, there is a growing number of Group 2B and Group 3B businesses that are outstanding and require to be inspected. Due to the challenges detailed above, and the demand of reactive public health work, priority has been given to ensure resources for planned Food Law inspections is directed to the higher risk businesses, those with a poor history of compliance and also new businesses where the risk is unknown. Although the Band B businesses have been identified as compliant and lower risk, the challenge going forward is to manage and reduce this backlog.

Official Food Control Service Plan prepared by the Senior Environmental Health Officer for Food

Signed:



(Helen Henderson)

Date:

1-8-24.

Official Food Control Plan 2024-25

Official Food Control Service Plan confirmed by the Team Leader Environmental Health

Signed: _____

(Dawn Brisbane)

Date: _____

01/08/2024

Annex 1 – Food Law Recovery Inspection Plan (September 2021 to March 2025)

Inspection Type		Insp Freq CoP (Months)	Permitted Time Scale for recovery (months)	Total No. business	Year 21/22	Year 22/23	Year 23/24	Year 24/25
Group 1	A	18	18	0	0	As per CoP		
	B	12	12	7	7	As per CoP		
	C	6	6	2	2	As per CoP		
	D	3	3	1	1	As per CoP		
	E	1	1	0	0	As per CoP		
	Unr'd		-	1	1	As per CoP		
Group 2	A	24	48	0	0	0	As per CoP	
	B	18	24	164	41	123	As per CoP	
	C	12	18	101	60	41	As per CoP	
	D	3	6	21	21	As per CoP		
	E	1	1	0	0	As per CoP		
	Unr'd		-	42	42	As per CoP		
Group 3	A	60 / No proactive visit	60	81	0	0	0	Asses s if Req'd
	B	36	48	116	0	0	58	58
	C	24	36	43	0	22	21	As per CoP
	D	3	6	3	3	As per CoP		
	E	1	1	0	0	As per CoP		
	Unr'd		-	27	27	As per CoP		
Approved Establishments		12	12	1	1	As per CoP		
Primary Production		24	-	2	0	2	As per CoP	

Official Food Control Plan 2024-25

Annex 2: Resource Calculation Information

Table 1: Interventions

Inspection Type		Estimate time per intervention (Hrs)	Factor for Witness / Officer Support	No Inspections Planned in 2024/25	Total time to implement plan
Group 1	A	13.5	2	4	108
	B	13.5	2	2	54
	C	19.25	2	3	116
	D	21.75	2	1	44
	E	26.75	2	0	0
	Unrated	21.75	2	0	0
Group 2	A	4.75	1	0	0
	B	4.75	1	120	570
	C	8.5	1.2	74	755
	D	11.75	1.5	17	300
	E	13.9	2	0	0
	Unrated	11.75	1	11	130
Group 3	A	3.5	1	16	56
	B	3.5	1	50	175
	C	6.25	1	15	94
	D	8	1.2	0	0
	E	9.75	2	0	0
	Unrated	8	1	4	32
Approved Establishment		30	2	1	60
Primary Production		5	1	0	0
Total				318	2,494
FTE Officers for Insps					2.3

Official Food Control Plan 2024-25

Table 2: Other Food Law Work out with Inspection Program

Other Intervention Activities	No	Time per activity (hrs)	Total Time (Hrs)
Food Complaints	20	4	80
Complaints re premises	17	4	68
Food Alerts for Action	1	7.5	7.5
Food Alerts for Information	114	1.2	136.8
Food Poisonings	12	3	36
Food Incidents	1	10	10
Sampling: Micro & Chem Formal Satisfactory	2	5.8	11.6
Sampling: Micro & Chen Formal Unsatisfactory	0	15.25	0
Sampling: Micro & Chem Informal Satisfactory	101	3	303
Sampling: Micro & Chen Informal Unsatisfactory	7	5	35
Implementation of new allergen regs October		20	20
Planning Applications re food premises	21	2.5 (+2hr 50%)	105
Licensing S50	4	5	20
Licensing Variation	4	2.5 (+2hr 50%)	20
Public Entertainment	32	5	160
Late Hours Catering Licence	5	0.25	1.25
Market Operators Licence	1	5	5
Advice to business/public/agencies	45	1 (+2hr 50%)	90
CPD/Training Activity		120	120
Total			1229.15
Officer FTE			1.1

Official Food Control Plan 2024-25

Table 3: Food Law Management Activities

Management Activities	No.	Time per activity (Hr)	Total Time (Hrs)
Management of MIS & SND Data		60	60
Internal monitoring		60	60
Complaints against service	1	5	5
Create & manage sampling plan		7.5	7.5
Service Plan, Service Review, Policies,		50	50
Provision of data to FSS Audit Team		12.5	12.5
Attendance at Liaison Groups & Working Groups		30	30
Management of FHS	1.5Hr/month	18	18
Management of Export Certificates	2 Hrs/month	24	24
Production Export Health Certificates	647	0.25	161.75
FOIs & Cllr/MSP/MP enquiries	11	2.5	27.5
Total			456.25
Officer FTE			0.4

5. Food Law Rating System

5.1 The Ladder

Group 1 Business	Performance Levels	Band	Intervention Frequency
<ul style="list-style-type: none"> Manufacturer of High Risk Foods. Manufacturer, Caterer, Processor or Retailer that undertakes a specific method of processing that has the potential to increase the risk to public health beyond that of normal preparation, storage or cooking. Manufacturers of Foods for Specific Groups. All Exporters. Manufacturers, Processors, Importers, Wholesaler, Distributor, Food Broker, Packers of Food at enhanced risk of food fraud, substitution, adulteration or contamination. 	Sustained Compliance	1A	18 Months
	Compliant and confident in compliance going forward	1B	12 Months
	Minor Non-compliance and/or gaps in confidence in compliance going forward	1C	6 Months
	Significant Non-Compliance and/or no confidence in compliance going forward	1D	3 Months
	Sustained non-compliance and/or Issues of Public Health Significance or Fraudulent Activity	1E	Intensive Intervention. 1 Month.
Group 2 Business	Performance Levels	Band	Intervention Frequency
<ul style="list-style-type: none"> All other Manufacturers, Processors, and Caterers. Importers, packers, wholesalers and distributors of high-risk foods not in Group 1. Head Office Business that undertakes a regional/national decision making function. Retailers handling open high-risk foods. 	Sustained Compliance	2A	24 Months
	Compliant and confident in compliance going forward	2B	18 Months
	Minor Non-compliance and/or gaps in confidence in compliance going forward	2C	12 Months
	Significant Non-Compliance and/or no confidence in compliance going forward	2D	3 Months
	Sustained non-compliance and/or Issues of Public Health Significance or Fraudulent Activity	2E	Intensive Intervention. 1 Month.
Group 3 Business	Performance Levels	Band	Intervention Frequency
<ul style="list-style-type: none"> All other retailers, Food Brokers, Importers, packers, wholesalers and distributors. Public Houses and similar Licenced Business not providing catering. Business providing limited refreshments (e.g. tea, coffee, soft drinks) as an adjunct to main activity. Child minders. Supported Living Business. Business producing low risk food based from a domestic dwelling. Bed & Breakfasts. 	Sustained Compliance or Businesses where information available at point of registration, indicates there is minimal inherent risk	3A	No proactive Intervention or 60 months.
	Compliant and confident in compliance going forward	3B	36 Months
	Minor Non-Compliance and/or gaps in confidence in compliance going forward	3C	24 Months
	Significant Non-Compliance and/or no confidence in compliance going forward	3D	3 Months.
	Sustained Non-Compliance and/or Issues of Public Health Significance or Fraudulent Activity	3E	Intensive Intervention. 1 month.

5.7 The Compliance Matrix and Definitions

COMPLIANCE CATEGORY		COMPLIANCE LEVEL				
FOOD SAFETY AND PRACTICE PERFORMANCE	CROSS CONTAMINATION PERFORMANCE	Serious (wilful and/or sustained serious) non-compliance. Any non-compliances that are an immediate risk to consumer health, allow consumers to make unsafe food choices or could give rise to fraudulent gain	Significant non – compliance Any non-compliances which may adversely affect consumer health or which might do so if not remedied quickly. Failure to comply with product or process specific requirements. Food Standards non-compliances where the consumer is misinformed or prejudiced.	Minor non – compliance Technical non-compliances which do not adversely affect consumer health or consumer choice but which require to be remedied.	Generally compliant No non-compliances or only very minor non-compliances which the LA has decided should not be pursued until the next intervention.	Full and continuing compliance and/or evidence of going beyond legislative requirements Evidence of a proactive approach. Evidence of compliance with third party programmes which are recognised as additional or beyond legislative requirements.
	STRUCTURAL PERFORMANCE					
	FOOD INFORMATION PERFORMANCE					
	COMPOSITION PERFORMANCE					
	FOOD SAFETY MANAGEMENT SYSTEM	Serious lack of control of food safety and/or standards. No appropriate FSMS or failure to follow FSMS.	No appropriate FSMS or general/significant failure to follow FSMS. Significant lack of control of food safety and/or standards.	An appropriate FSMS (HACCP based) is in place and is followed but with minor gaps in scope/use.	Fully Documented appropriate (HACCP based) FSMS in place and followed.	Fully Documented appropriate (HACCP based) FSMS in place and followed with additional 3 rd party accreditation.
CONFIDENCE IN MANAGEMENT		No confidence. Unwilling to engage with obligations. Serious formal action required at this visit	Little confidence. Willing, but largely unable, to engage with obligations.	Some confidence. Engage with obligations but gaps in technical awareness. Reliant on LA. New Business or FBO.	Confident. Obligations are routinely met. Able to identify and control emerging issues. Good technical awareness.	Full and continuing compliance. Confident. Proactive approach to food safety management. Own or access to technical expertise. Implementation of externally audited FSMS at least equivalent to HACCP.
	AVERAGE SCORE	5	4	3	2	1



Development Services

FOOD LAW ENFORCEMENT POLICY

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1. Introduction

- 1.1. This policy covers Clackmannanshire Council's enforcement activity in relation to Food Law. Feed enforcement within Clackmannanshire is carried out by Food Standards Scotland. Primary production enforcement is carried out by the Clackmannanshire and Stirling joint Trading Standards service. Clackmannanshire Council discharges its responsibilities as a Food Authority through Place Directorate, Development Services, Environmental Health, Kilncraigs, Alloa, FK10 1EB.
- 1.2. Only officers duly authorised by the Council may enforce food law in Clackmannanshire. Those officers will be subject to enforcement limitations, dependant upon qualification and experience, imposed by the Authorisation of Officers Procedure.
- 1.3. Copies of this Enforcement Policy are available on request from Environmental Health, Development Services, Clackmannanshire Council. Copies are free of charge. Copies are also available from www.clacks.gov.uk
- 1.4. This Food Law Enforcement Policy plays an important part in the Food Law Service Plan, delivering Clackmannanshire's Food Law Enforcement Service. All enforcement action will be targeted utilising the National Food and Feed Compliance Spectrum and will take regard of the Scottish Regulators Strategic Code of Practice.
- 1.5. The Food Law Enforcement Policy ensures the comprehensive and consistent enforcement of food safety within Clackmannanshire in line with the Food Law Code of Practice (Scotland). It is a requirement that all officers delivering food law regulation read, understand and follow the Code of Practice.
- 1.6. In preparing and updating this policy due regard has been taken of the advice issued by Central Government, Scottish Food Enforcement Liaison Committee (SFELC), and Food Standards Scotland (FSS).
- 1.7. All decisions on enforcement action shall only be made after consideration of this Enforcement Policy. Any deviation from the policy will be exceptional, be capable of justification and have been fully considered by the Environmental Health Team Leader, unless to delay a decision may result in significant risk to the public. The circumstances relating to any departure will be comprehensively documented.
- 1.8. Clackmannanshire Council will strive to ensure all food and drink relating to any food business activity within Clackmannanshire is without risk to health and does not mislead the consumer either about its composition or by its presentation.

- 1.9. It is recognised that working in partnership, sharing information and intelligence with other agencies as necessary, is an important part of better regulation.
- 1.10. Clackmannanshire Council acknowledges education is a means of securing improvement in Food Safety Standards and will work with Businesses to help them comply with the law by:
 - offering on the spot advice during visits and inspections;
 - answering queries within five working days;
 - distributing electronic information leaflets free of charge.

2. Official Controls

- 2.1. An 'official control' is any form of control that the Council carries out to verify a business's compliance with food law.
- 2.2. The aim of an official control is to prevent, eliminate or reduce to acceptable levels any risks to health presented by food businesses whilst aiming to:
 - guarantee fair practices in food trade
 - protect consumer interests, including food labelling and other forms of consumer information.

3. Conflict of Interests

- 3.1. It is essential that all staff carrying out official controls in food law are free from conflicts of interest.
- 3.2. There are many situations in which the interests of an officer or the authority may conflict with the carrying out of official controls. Examples are where an authorised officer provides their own training service for food hygiene; where they give advice to food businesses which is independent and distinct from the advice that is given in the course of carrying out official controls (whether in conflict with that advice or not); or acting as a consultant to food businesses. Conflict may be reduced or negated through the causation being made remote from the Council.
- 3.3. In accordance with the Food Law Code of Practice (Scotland) (January 2019), no officer connected with Food Law delivery in Clackmannanshire may provide consultancy, training or other food related services in Clackmannanshire.
- 3.4. The Council does not provide food hygiene training courses. If they are provided in the future it will be ensured that the service is not promoted by the council in competition with other providers or in any other way which may conflict with the interests of food law delivery.

- 3.5. The council provides a pest control service limited to Council property only and under no circumstances is the service to be offered to local businesses. In any exceptional circumstances that this may be considered necessary the express approval of the Environmental Health Team Leader must be obtained first. Approval can only be given if it is demonstrated there is no conflict with the interests of food law delivery.
- 3.6. The Council will provide no other service to food businesses which could involve a conflict of interests with food law delivery. Any such service provided outwith the Environmental Health Service will be reported to the Senior Service Manager, (Development) for any action required. The Council will not exclusively promote any food related service it provides in competition with other providers in the area.
- 3.7. The Council has procedures in place which will be followed at all times in relation to the regulation of food premises in which the Council is also the Food Business Operator or proprietor. These are detailed below at Section 7.

4. Inspections

- 4.1. The format of inspections is covered by the Food Law Inspection Procedure. This procedure will be adhered to at all times.
- 4.2. Letters will be sent to the proprietor within 15 working days except in cases where it has to be translated by the Translation Service and the translation has not been returned in time. Standard paragraphs for Food Law Inspections are to be used where applicable.
- 4.3. Inspection frequency is determined by the inspection rating of the premises as per Food Law Code of Practice (Scotland) and Interventions Code of Practice as applicable.
- 4.4. Revisits following a food safety inspection may be carried out to check that compliance with statutory requirements have been achieved. Revisits are restricted to those matters which the officer determines are too serious to be left until the next inspection date. This is subject to Paragraph 4.5 below. It is vital to reduce time spent on revisiting to the absolute minimum required for public safety and good regulation. Repeated revisits will require to be justified in the inspection reports. They will be challenged concerning seriousness of contravention, any possible deviation from this policy and detriment to public safety in relation to unresolved matters.
- 4.5. In some circumstances the track record of the Food Business Operator may indicate that significant contravention(s) will be remedied without a further visit being required. In these circumstances the officer must be confident that the matter will be remedied and that food safety will not be compromised by

leaving the premises until the next scheduled inspection. Under these circumstances, and only with prior agreement from the Team Leader, a re-visit may be allowed to pass.

- 4.6. The timing of a revisit will be determined by the nature of risk to public health and the action required to secure compliance. The appropriate enforcement action **MUST** be taken when food businesses have failed to remedy the serious contravention(s), which initiated the revisit.
- 4.7. Inspections other than programmed or revisit inspections may be carried out:
 - on request from a proprietor looking for advice;
 - on request from a proprietor for a FHIS Pass Certificate;
 - to reply to a property enquiry for the premises;
 - to investigate a complaint about the premises;
 - to investigate a complaint about food sold from the premises;
 - to inform the proprietor and investigate any unsatisfactory samples submitted to Glasgow Scientific Services for analysis or examination;
 - new premises or change of proprietor will instigate an inspection;
 - where available information indicates an inspection is necessary in the interests of public health and safety
- 4.8. Officers are provided with mobile phones, white overcoats, hair nets, a hat and a pair of safety shoes. Protective clothing shall be worn during inspection, wherever appropriate, or to conform with the Business own policy. Where a Business supplies additional protective clothing this shall be worn.
- 4.9. Officers are provided with probe thermometers and probe wipes.
- 4.10. Officers are responsible for ensuring they are appropriately equipped and are to inform the Team Leader of any deficiencies that need replacement.
- 4.11. Before inspecting premises, Officers shall introduce themselves by showing their photo identification card and explain the purpose of the visit.

5. Enforcement

- 5.1. Clackmannanshire Council will adopt a graduated approach to enforcement using education and advice to secure compliance wherever appropriate. This approach will not be suitable where businesses persistently or deliberately avoid their regulatory responsibilities to gain unfair competitive advantage. Full regard will also be had to the effect of non compliance on public health.

- 5.2. Robust action will be taken against any food business operators who deliberately or recklessly flout the law or where there is a serious risk to the safety of consumers. This will include reporting to the Procurator Fiscal where appropriate.
- 5.3. Officers are required to use the full range of documents outlined in this Policy to ensure their enforcement decisions follow the five principles of better regulation. The principles require regulation to be transparent, accountable, consistent, proportionate and targeted.
- 5.4. The Council commits not to use enforcement actions of any kind as an indicator of performance. This ensures officers are able to use the full range of enforcement options without being influenced by performance monitoring.
- 5.5. Environmental Health Officers, Environmental Health Technical Officer and The Environmental Health Team Leader are authorised to carry out enforcement under The Food Safety Act 1990, The Food Hygiene (Scotland) Regulations 2006 and all other Regulations made thereunder (as amended) subject to being suitably qualified, experienced and competent.
- 5.6. Suitable qualification, experience and competency is as detailed in the Food Hygiene (Scotland) Regulations 2006, The Food Safety (Sampling & Qualification Regulations 2013, the Food Law Code of Practice (Scotland) and Official Feed And Food Control Regulations 2009 (all as amended). A record of officers suitably qualified is at Annexe 1 of the Authorisation of Officers Procedure.
- 5.7. Each Officer receives in-house training and attendance at formal courses or vocational visits. Officers will receive a minimum of 10 hours per year Continuing Professional Development (CPD) for food related subjects. The Environmental Health Team Leader will review progress in relation to adequate CPD for food law enforcement purposes.
- 5.8. All officers have access to suitable, sufficient, and up to date information to enable them to carry out competent inspections including all legislation, codes of practice, industry guides, SFELC guidance, Food Standards Scotland guidance and the internet.
- 5.9. Training needs are assessed during annual Performance, Review & Development interviews with the Environmental Health Team Leader.
- 5.10. Officers shall ensure that all communication, including advice, on enforcement issues is clear, structured and capable of being understood by the recipient.
- 5.11. Where it appears to an Officer that communication in English may be a barrier to compliance he/she will utilise the Language Line call centre via their issued mobile phone. Arrangements for

a translator to attend any site visit may be made with prior consultation and agreement from the Environmental Health Team Leader .

- 5.12. Officers will provide, where available, information leaflets in the proprietors own language.
- 5.13. Where advice is confirmed in writing a clear distinction must be made between statutory requirements and recommendations. However, the approach taken to enforcement will always be consistent with current guidance and the protection of public health remains the paramount consideration.
- 5.14. The Council is guided by the Home Authority Principle. Where the principle cannot be adhered to, concerns would be discussed with SFELC and Food Standards Scotland.
- 5.15. The Council will provide advice for businesses within Clackmannanshire on legal compliance. Officers will liaise with the Home Authority of a Company on issues of advice or enforcement directly related to centrally agreed policies or procedures of that food business.
- 5.16. The Council shall have regard to any information provided from home and/or originating authorities and will notify them of the outcome of any investigation.
- 5.17. There are the following hierarchal enforcement options open to officers:
 - No action at all
 - Verbal advice/warning
 - Written advice/warning
 - Enforcement Notice (where appropriate)
 - Seizure or detention (where appropriate)
 - Report to Procurator Fiscal
- 5.18. In deciding what enforcement action to take, officers will have full regard to Regulation EC 2017/625 which requires the nature of the non-compliance to be considered along with the operator's past record in relation to non-compliance. Regard will also be given to Food Standards Scotland's Regulatory Strategy, The Scottish Regulators' Strategic Code of Practice, The National Compliance Spectrum, The Crown Office publication "Reports to the Procurator Fiscal – A Guide for Specialist Reporting Agencies" and this Enforcement Policy. All of these documents are available to officers for reference.
- 5.19. In relation to new businesses which have no past compliance record, officers will be required to make a professional judgement based on the operator's willingness to comply, deliberateness of any actions to mislead or defraud and the risk to public health.

- 5.20. In all circumstances, having regard to Paragraph 5.16 above, the most expedient and effective enforcement action will be taken to protect health.
- 5.21. In deciding whether or not a business presents a risk to food safety regard shall also be had to:
- the nature of the food
 - the manner in which it is handled
 - the manner in which it is packed
 - any process to which it is subjected
 - the conditions under which it is stored or displayed
- 5.22. Significant risk – in deciding whether or not any risks associated with a business are significant, consideration will be given to the adequacy of controls at critical points in the food process and the possible consequences for food safety if the controls are inadequate. Significant risk in this context means that an incident is more likely to occur than not.
- 5.23. Contraventions may be dealt with informally subject to the following provisos:
- where the consequences of non-compliance will not present a significant risk to health
 - where (from the business's previous record) it can reasonably be expected that compliance will be forthcoming
 - where, due to the nature of the business (e.g. – voluntary organisations) informal action may be more effective
- 5.24. Where the health risk condition (as defined in food safety law) is fulfilled, the primary action of all officers will be to eliminate that risk. This may be by use of one, all or any combination of the following:
- Issue of Emergency Prohibition Notice (or voluntary closure procedures if this is found to be more effective)
 - Seizure or Detention of food (or voluntary surrender procedures if this is found to be more effective)
 - Report to the Procurator Fiscal
- The written procedures dealing with each action are to be followed. Full guidance on the "health risk condition" and examples of use of voluntary procedures and Emergency Prohibition Notices are provided by the Food Law Code of Practice (Scotland).
- 5.25. In the majority of cases contraventions will not warrant immediate formal action such as enforcement notices or report to the Procurator Fiscal. In these circumstances normally the following actions will take place:
- No action at all

- Verbal or Written notification of the contravention including remedial works required.
 - Follow-up action to ensure the necessary work is completed (either by re-visit or at the next programmed inspection depending on the seriousness and trigger values for re-visit being met).
- 5.26. When actions other than enforcement notices or reporting to the Procurator Fiscal are undertaken the guiding principle will be one of helping businesses to understand and comply with their legal obligations.

6. Enforcement Notices

6.1. *Hygiene Improvement Notices*

- 6.2. Hygiene Improvement Notices shall be served in accordance with the Food Law Code of Practice (Scotland). When serving a Hygiene Improvement Notice regard shall be had for the Scottish Regulators Strategic Code of Practice. Hygiene Improvement Notices will be served under the following circumstances:

- where it is proportionate to the public health risk having consideration to this Enforcement Policy,
- where there is a record of non-compliance with food safety regulations,
- Where the officer believes an informal approach will not be successful.

- 6.3. While Improvement Notices may be served on the evidence of the authorised officer alone, upon expiry of the notice (where prosecution is likely) the authorised officer will be accompanied by a suitably qualified witness. Except where circumstances have changed such as to cast doubt on the quality of the evidence, all persons failing to comply with Improvement Notices will be subject of a report to the Procurator Fiscal. Improvement Notices will not be signed by authorised officers on behalf of another officer unless the other officer has witnessed the contravention.

6.4. *Remedial Action Notices*

- 6.5. Remedial Action Notice shall be served in accordance with the Food Law Code of Practice (Scotland). When serving a Remedial Action Notice regard shall be had to the Scottish Regulators Strategic Code of Practice.
- 6.6. It is important that public health is protected and that the most appropriate action is taken to do this whilst following the principles of better regulation.

- 6.7. Remedial Action Notices will only be served under the following circumstances:
- where it is proportionate to the public health risk having consideration to this Enforcement Policy,
 - where the serving of a Remedial Action Notice is required to ensure urgent action is taken to ensure food safety,
 - where other approaches will not be successful
- 6.8. Remedial Action Notices, once served, must be monitored for compliance. Any failure to comply with a Remedial Action Notice will result in a report to the Procurator Fiscal. In exceptional circumstances and after consultation with the Team Leader Environmental Health, non compliance with the notice will be dealt with by alternative means than a report to the Procurator Fiscal. In these cases the reasons for the decision will be fully documented.
- 6.9. *Hygiene Emergency Prohibition Notice*
- 6.1. All Hygiene Emergency Prohibition Notices shall be served in accordance with the Food Hygiene (Scotland) Regulations 2006. When serving Hygiene Emergency Prohibition Notices, regard shall be had for the Food Law Code of Practice (Scotland) and the Scottish Regulators Strategic Code of Practice.
- 6.2. If an authorised officer, in the course of his/her duties, encounters a situation where there is evidence that the health risk condition is fulfilled (as defined in the Food Hygiene (Scotland) Regulations 2006) that officer will immediately serve a Hygiene Emergency Prohibition Notice. The Food Law Code of Practice (Scotland) gives examples of situations where this might be appropriate action to take but it is up to the authorised officer to decide, based on evidence, if the condition is fulfilled. The Environmental Health Team Leader must be advised immediately, or, in his absence, the Senior Service Manager (Development) of any such notice served or intention to serve such notice.
- 6.3. Hygiene Emergency Prohibition Notices will not be signed by authorised officers on behalf of another officer unless the authorised officer has also witnessed the contravention and is satisfied that the health risk condition is fulfilled along with imminent risk to health.
- 6.4. Voluntary procedures may be used only when there is sufficient evidence to proceed with emergency prohibition procedures. The Procedures for Issue Of Improvement And Hygiene Emergency Prohibition Notices must be followed.

7. Council Premises

- 7.1. When enforcing within Clackmannanshire Council run establishments, a letter, signed by the Environmental Health Team Leader, outlining any contraventions will be sent to the appropriate Senior Service Manager for the service responsible for the food business operation. Any continued failure by that service to satisfactorily remedy the contravention will be escalated in accordance with this Policy to include the appropriate enforcement action.
- 7.2. Any serious breach of food law will be notified by letter addressed to the Chief Executive, drafted by the officer responsible for the enforcement action and signed by the Senior Service Manager (Development) or above Strategic Director, Place. Such letters will require prior approval by the Environmental Health Team Leader who will discuss the matter with the Senior Service Manager (Development).
- 7.3. Serious breaches will include, for example:
 - the service of any enforcement notice (including Hygiene Improvement Notice, Remedial Action Notice, etc.);
 - a report to the Procurator Fiscal;
 - service of any fixed penalty notice;
 - any food standards contravention deemed likely to place any potential consumer at risk of harm or distress (e.g. contamination, substitution, food fraud, etc.);
 - any other matter related to food law enforcement which in the opinion of the Team Leader, as Lead Officer for Food, requires to be notified to the Chief Executive.
- 7.4. Any decision by a manager, including the Environmental Health Team Leader, not to send a letter to the Chief Executive, contrary to the recommendations of the officer responsible for the enforcement action, will be fully documented in the file system. This will include full details of the contravention, officer recommendation and reason for not notifying the Chief Executive. A copy of the file record will be sent to the Environmental Health Team Leader who will ensure it is passed to the manager deciding not to notify the Chief Executive and copied to the Strategic Director, Place.
- 7.5. All Council run establishments will be dealt with exactly as any other food business would be dealt with and in full accord with this Policy. All actions and decisions made concerning enforcement at Council run establishments will be transparent. Full records will be kept of all interventions and other regulatory interactions with food businesses run by the Council. These records will be made available to Food Standards Scotland, on

request, in line with that organisation's statutory responsibilities in relation to food.

8. Prosecution

- 8.1. The ultimate decision as to whether or not to prosecute rests with the Procurator Fiscal.
- 8.2. In deciding whether or not there are sufficient grounds to recommend that prosecution be sought by the Procurator Fiscal, due consideration will be given to all relevant centrally issued criteria and guidelines.
- 8.3. A recommendation to prosecute will, in general, be considered for those persons who blatantly disregard the law, fail to achieve a basic compliance with the minimum legal requirements, or who put the public or other groups at a serious risk to health.
- 8.4. Circumstances which are likely to warrant a recommendation to prosecute include:
 - cases where the alleged offence involves a blatant breach of the law such that health is or has been put at risk
 - cases where there has been a blatant breach of the law in respect of product description, packaging or associated issue
 - cases where the offence involves a refusal to comply in full or part with the requirements of an authorised officer
 - cases where the offence involves a failure to comply with the requirements of a statutory notice
 - cases where there is a history of similar offences related to a risk to health or safety or a breach of food standards requirements
 - cases where an officer has been obstructed in undertaking his/her duties
 - cases of repeated failure or refusal to comply with regulation, regardless of seriousness, if this is considered an intentional and deliberate flouting of the law.

9. Quality Management

- 9.1. The Team will maintain a computer database (IDOX Uniform) of all known businesses in the area for which there is responsibility for food safety enforcement.
- 9.2. Officers will keep this database up to date for their work with regard to new premises or the accuracy of details for existing premises using the Idox Uniform Procedure Manual.

- 9.3. The Environmental Health Team Leader (or nominated representative) will carry out internal monitoring of officers work in food law enforcement in accordance with a prepared procedure. The procedure will detail the monitoring records required to be kept to demonstrate officers are applying this Policy and all procedures relevant to food law enforcement.
- 9.4. Any failures to follow this Policy or a procedure will result in action being taken to remedy the failure. This may include re-training or disciplinary proceedings dependant upon the severity of the failure.

10. References

- The Food Hygiene (Scotland) Regulations 2006
- The Food Safety Act 1990
- Regulation EC/178/2002
- Regulation EC/852/2004
- Regulation EC/853/2004
- Regulation EC/854/2004
- Regulation EC/2017/625
- Food Safety (Qualifications & Sampling) (Scotland) Regulations 2013
- Food Law Code of Practice (Scotland)
- The European Commission Guidance Document on Regulation EC/852/2004 (Hygiene of Foodstuffs)
- Scottish Regulators Strategic Code of Practice
- National Food & Feed Compliance Spectrum
- Reports to the Procurator Fiscal – A Guide for Specialist Reporting Agencies