

Annual Governance Statement 2020-21 Update for January 2022 Audit & Governance Committee

	Governance matters identified	Target Date	Lead Officer
1	<p>Ofsted Inspection of Children’s Services</p> <p>Actions in response</p> <ul style="list-style-type: none"> • Accelerated Improvement Plan – this provides the framework for all improvement activity. • Quality Assurance and Performance Management – enables managers to understand impact and quality. • Essentials 2.0/3.0 Training Programmes – equips SW practitioners with core skills. • Team Improvement Programme – targets underperforming teams identified through QA/Performance. • Initial Phase of Systemic Practice Training - first cohort now underway. • Continued development of our recruitment and retention offer. • Sufficiency Strategy – currently being revised to further enhance placement options. <p>Position as at December 2021</p> <ul style="list-style-type: none"> ➤ The quality of social work practice remains a key issue in terms of achieving an Ofsted judgement of ‘requires improvement’ or better, either of which would represent reasonable progress and cease to be a significant regulatory and reputational risk for GCC. Our Focused Visit in October 2020 reported good progress, noting a significant increase in the pace of improvement over the prior 18 months. More recently, the enduring impact of Covid on practitioners and the families they are working with has impaired the pace and consistency of improvement. CS SLT, supported by corporate colleagues, have taken assertive action to address matters focused, in the main, on stabilising our workforce to ensure a continuity of provision for children and families. An extensive case file screening exercise has also been completed as part of our Ofsted preparations, acknowledging the impact that staff churn can have on case recording. As such, the service remains very much in response rather than recovery mode. ➤ After a prolonged decline, our agency workforce has increased recently and now stands at circa 20%, whereas three years ago it was 50%. We have also experienced particular difficulties in recruiting into safeguarding teams over recent months, which has required a 		<p>Director of Children’s Services (DCS) - Chris Spencer</p>

Annual Governance Statement 2020-21 Update for January 2022 Audit & Governance Committee

	<p>differentiated approach to recruitment and retention in those teams. This appears to be stabilising the situation. Our “grow your own” strategy towards workforce development is now well embedded. The Social Work Academy is also playing a key role in ensuring we are able to support ongoing cohorts of students, ASYE and newly qualified practitioners as well as shifting the focus of attention towards retention of those new to profession and the more experienced staff. Covid has also impacted here in limiting the scope of delivery, which has necessarily had to shift to virtual platforms, thereby limiting group sizes. The Academy will continue to broaden its remit to include other “hard to recruit” specialist staff such as Educational Psychologists and highly specialised teachers of the deaf, visually impaired and deaf/blind.</p> <ul style="list-style-type: none">➤ After a period in which the proportion of “inadequate practice” identified through case file auditing had been in single figures and on target, we have recently seen an increase in the proportion of inadequate audits. The longer-term trend remains positive, but the focus has returned to understanding and reducing “inadequate” casework, along with shifting a significant proportion of “requires improvement” casework into “good”, which now stands at consistently over 30%. The Social Work Academy training, such as our practice fundamentals, plus targeted leadership interventions are key to continuous improvement as is our Accelerated Improvement Plan.➤ Childrens Social Care has continued to experience significant costs pressures during 2020/21, with an overspend at year end of £10.77 M, of which £7.3M is Covid related, leaving a net overspend of £3.47M at year end March 2021. This is due in greater part to external placement costs. The High Cost Placements Panel continues to provide a mechanism to ensure senior management oversight of individual cases, as has the introduction of the Care Ladder, particularly in terms of control of spend for the latter. Our Sufficiency Strategy sets out our longer-term vision to ensure good quality care provision is available for all our children and young people.➤ The opening of Trevone House during 2020/21 has allowed us to effectively enter the market in partnership with a charitable partner - the Shaw Trust. Proposed developments for the coming year include local mother and baby provision and the provision of life long facilities for some of our most vulnerable and complex young people. Both will be key		
--	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	--

Annual Governance Statement 2020-21 Update for January 2022 Audit & Governance Committee

	<p>elements in realising our longer-term ambition of creating good quality, local placements that meet the needs of children and young people.</p>		
2	<p>Gloucestershire Fire and Rescue Service (GFRS)</p> <p>Actions in response</p> <ul style="list-style-type: none"> • The introduction of a quarterly Community Safety Directorate Finance, Performance & Risk meeting. • The work of the Improvement Board, overseeing completion of 118 audit recommendations. • The revision and improvement of risk management reporting. • The establishment of clear delegations including the introduction of officer delegations for accountability and business continuity. • The establishment of a portfolio management office and improved programme and project management to work and improvements across the directorate • Positive direction of travel identified by internal audit and regulatory bodies e.g. HMICFRS and the Human Tissue Act (HTA). • Strengthened procurement compliance through dedicated professional resource. • The development of a 3 year improvement strategy and detailed plans including themes, priorities, risk assessments. <p>Position as at December 2021</p> <p>This is an ongoing development journey. The actions in the 6 months since the AGS 20/21 are:</p> <ul style="list-style-type: none"> ➤ HMICFRS have completed their 2021 inspection and their findings will be reported in Spring 2022. ➤ The quarterly Community Safety Directorate Finance, Performance and Risk meeting is well established and continues. ➤ Internal audit have reported a positive direction of travel following the completion of the 118 recommendations. 		<p>Chief Fire Officer - Mark Preece</p>

Annual Governance Statement 2020-21 Update for January 2022 Audit & Governance Committee

	<ul style="list-style-type: none"> ➤ Risk management reporting improvements have been achieved through the development of a Corporate Risk Register (CRR) that updates the GFRS Senior Management Board quarterly. The officer who manages the CRR is also a member of the wider GCC Risk Management Group (RMG). ➤ Officer delegations for accountability and business continuity have been completed. ➤ The Portfolio Management Office has been established to manage all improvement projects and programmes and is overseen by a high level scrutiny board that has been modelled on the audit Improvement Board. ➤ Procurement compliance has been strengthened by a dedicated professional resource but this post is about to become vacant requiring new recruitment. ➤ A 3 year improvement strategy has been developed and consulted upon. The consultation outcomes will be reported imminently, and this will shape the final draft of the plan to be published in April 2022 subject to the necessary Cabinet approval. 		
3	<p>The recruitment and retention of employees in hard to fill, critical positions</p> <p>Actions in response</p> <ul style="list-style-type: none"> • Ongoing monitoring of key hard to fill positions with comparisons of market rates with business cases for additional payments where appropriate • Targeted campaigns to attract in specific roles such as qualified social workers, planning and legal supplemented by grow our programmes to develop internally • HR business partners developing county wide campaign to promote GCC as employer and county as place to live <p>Position as at December 2021</p> <ul style="list-style-type: none"> ➤ After an extended period with reduced turnover during the pandemic, recent months have been increasingly challenging regard to both recruitment and retention. Even lower graded roles, where generally we have compared well with the market, are not attracting good candidates given competition with the struggling hospitality and retail industries. A new R&R strategy paper to be presented to CLT in January. 		<p>Director of Digital and People Services - Mandy Quayle</p>

Annual Governance Statement 2020-21 Update for January 2022 Audit & Governance Committee

4	<p>COVID-19 Impact on Governance</p> <p>Actions in response</p> <ul style="list-style-type: none"> • GOLD and SILVER meetings are continuing, but with slightly reduced frequency and length • All formal decision-making meetings (by Cabinet, Council and Committees) continue to take place ‘in person’, but with provision for members of the public and others to ‘dial in’ via video conference if they are not taking part in the formal decision making. • A new and improved process is being rolled out for Business Impact Analysis and Business Continuity Planning, building on some of the lessons learnt from the pandemic. • Advice continues to be developed and cascaded to managers on working from home safely and modifications to office spaces are being made to assist with a permanent move towards hybrid and agile working. <p>Position as at December 2021</p> <ul style="list-style-type: none"> ➤ The Council continues to manage the risks and issues arising from the ongoing COVID pandemic alongside and on top of ‘business as usual’ activity. At this stage in the pandemic, front-line services and governance have been restored, most to pre-pandemic levels. GOLD and SILVER arrangements have been kept in place to monitor the impact of COVID on communities and services and to manage the changing situation and new challenges as and when they arise. For example, we continue to see particular pressures on some parts of the Council’s business, and in particular, challenges in securing an adequate supply of domiciliary care. The long-term impact of the pandemic on staff welfare and motivation continues to be closely monitored and managed, particularly as workloads remain high within teams who are still responding to the pandemic as part of their roles. ➤ On officer decision-making, since the beginning of the pandemic we have seen a slight increase in the number of decisions being taken under urgency procedures as a result of grants becoming available and needing to be allocated at short notice. This also results in greater reliance on making direct awards to providers. Despite this, we continue to publish those decisions in the interests of transparency and public accountability, and to ensure that Direct Awards are only made where there is sufficient justification and where the conditions allowed in the Public Procurement Regulations can be met. 		<p>Chief Executive – Pete Bungard</p>
---	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	-------------------------------------------

Annual Governance Statement 2020-21 Update for January 2022 Audit & Governance Committee

<p>5</p>	<p>ICT Governance – Transformation Roadmap</p> <p>Actions in response</p> <ul style="list-style-type: none"> • New ICT model and outsourced provider in place since April 2021 • Ambitious roadmap to transform our networks, infrastructure, security and user devices • Some slippages against ambitious plan, nonetheless good progress resulting largely more stable ICT experience for users <p>Position as at December 2021</p> <ul style="list-style-type: none"> ➤ Progress has been made in all areas of the roadmap including upgrading our user devices to modern cloud based M365 software, improved cyber security regime and replacing our aging county wide and internal networks. Current plans due to complete in Q4 2021/22 and Q1 2022/23 with focus on developing and agreeing the next stage of the roadmap by April 2022. 		<p>Director of Digital and People Services - Mandy Quayle</p>
<p>6</p>	<p>Procurement Transformation</p> <p>Actions in response</p> <ul style="list-style-type: none"> • The Procurement Transformation Board was formed in May 2021. <p>Position as at December 2021</p> <p>The Board currently has the following workstreams:</p> <ul style="list-style-type: none"> ➤ Contract procedure rules – the revised contract procedure rules were agreed by Council on the 8th December ➤ Procurement Toolkit – a web based product with the first Tranche of which will be up and running by the end Q1 2022 ➤ Updated policies – e.g. Social Value / Sustainability has been agreed by CLT and will be coming forward to Cabinet in 2022. Other policies are being updated ➤ Standard Contracts – the council is working on producing a standard set of contracts that can be used to cover many of the standard situations ➤ Information and Processes – this work includes the way we use contact management information, sourcing pools, on and off contract spend anal 		<p>Executive Director for Corporate Resources - Steve Mawson</p>

Annual Governance Statement 2020-21 Update for January 2022 Audit & Governance Committee

7	<p>Gloucestershire Industrial Services (GIS Healthcare)</p> <p>Actions in response</p> <ul style="list-style-type: none"> • A new GIS Operational Manager was appointed in July 2021. The manager is working with support from specialist services within GCC to implement the service and process improvements recommended by the Counter Fraud Team audit report shared earlier this year. • 9 out of the 10 audit recommendations have now been fully actioned and the risks identified to GCC mitigated. The outstanding recommendation is partially completed. The management team are working with colleagues from property services to mitigate the risk in regard to the availability of suitable on site overnight vehicle storage. • Early in 2022 a new equipment database will be implemented. The new system will provide greater oversights in terms of stock control, real time delivery and collection activity and route planning. <p>Position as at December 2021</p> <p>Overall, we are satisfied that the risks are now mitigated. There has been a considerable amount of work activity over the last 9 months which has resulted in significant progress being made. There are strategic plans in place to ensure ongoing improvements to the service over the coming year.</p>		<p>Executive Director of Adult Social Care and Public Health - Sarah Scott</p>
---	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	------------------------------------------------------------------------------------------------