Corporate Overview & Scrutiny Committee

Quarter 1 2022/23

Purpose of the report

To provide a strategic overview of the Council's performance for Quarter 1 2022/23.

The following scorecards are enclosed:

Prepared by the Performance and Improvement Team

Key to Symbols

Reporting Basis	
Year to Date	Performance accumulated over the year
Rolling Year	Average performance over a 12 month period
Annual	Performance measured once a year
Latest Quarter	Performance this quarter
Snapshot	Performance at a particular point in time
Forecast	Predicted position at the end of the year

Measure Symbols		
★		Performance Better than Target
▲		Performance Worse than Target
●		Performance significantly worse than Target
?		No information
!		Missing Target
?!		No Value
Bigger is Better		A bigger value for this measure is good
Smaller is Better		A smaller value for this measure is good
Plan is best		Where it is better for performance to be on target rather than above or below

Risk	Impact/Consequence				
Likelihood	1 Insignificant	2 Minor	3 Moderate	4 Major	5 Critical
Almost certain (5)	5	10	15	20	25
Likely (4)	4	8	12	16	20
Probable (3)	3	6	9	12	15
Possible (2)	2	4	6	8	10
Rare (1)	1	2	3	4	5

Risk Rating
(calculated by multiplying the Impact with the Likelihood of each risk)

Risk Symbols		
	✗	Risk Value Increasing
	✔	Risk Value Decreasing
	➡	No Change

Level of Risk	Score
Low	1 - 6
Moderate	7 – 12
High	13 – 25

Performance Overview

Performance

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of Council Strategy indicators that are on or ahead of target.	Bigger is Better	Latest Quarter	61.8%	59.7%	58.6%	59.4%	57.5%	65.0%	▲		n/a

Delivering Our Ambitions
Cllr Lynden Stowe

Workforce

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
Days lost to Sickness per FTE (excluding Schools and GFRS)	Smaller is Better	Latest Quarter	1.60	2.19	2.55	2.36	1.93	1.80	▲		n/a
% of appraisals completed	Bigger is Better	Latest Quarter	13.8%	39.4%	46.7%	48.4%	11.9%	65.0%	▲		n/a

	Good Performance High/Low	Reporting Basis	Dec-17	Dec-18	Dec-19	Dec-20	Actual Dec-21	Target Dec-21		Comments	Comparator Group
Employee Engagement Index	Bigger is Better	Annual		93.4%	94.4%	96.3%	94.2%	95.0%	🟠		n/a

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Comments	Comparator Group
GCC Turnover (staff leaving as a % of all staff)	Smaller is Better	Rolling Year	10.3%	11.6%	12.1%	13.3%	13.9%		n/a
Turnover of all adults social workers and senior practitioners	Smaller is Better	Rolling Year	14.5%	16.2%	15.3%	15.5%	15.4%		n/a
Turnover of all children's social workers and senior practitioners	Smaller is Better	Rolling Year	21.6%	22.1%	22.9%	24.8%	26.2%		n/a
Days lost to sickness/absence per FTE - Rolling Year	Smaller is Better	Rolling Year	5.92	6.97	7.91	8.93	9.35		7.38

Corporate Governance

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of FOI/EIR requests responded to on time	Bigger is Better	Latest Quarter	83.0%	82.0%	81.0%	83.0%	82.0%	90.0%	▲		n/a
% of SAR requests responded to on time	Bigger is Better	Latest Quarter	60.0%	51.0%	50.0%	44.0%	44.0%	90.0%	▲		n/a
Number of reportable security incidents	Smaller is Better	Latest Quarter	1	0	1	0	2	14	⭐	There have been 2 reportable security incidents this quarter. The first was reported to the ICO on 24.04.22 following the loss of a work bag containing notes and referral forms relating to several families open to Children's Services. The ICO confirmed they would not be taking any action on 28.06.22. The second was reported on 13.05.22 after multiple errors resulted in the wrong family being contacted following serious allegations about a young person. The ICO have yet to provide a response in relation to this breach.	n/a

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
Number of Cases Upheld by Local Government Ombudsman	Smaller is Better	Latest Quarter	2	4	4	5	2	2	⭐		n/a
Number of RIDDOR reportable incidents	Smaller is Better	Latest Quarter	2	2	0	3	1	5	⭐		n/a
Audit recommendations outstanding beyond target date	Smaller is Better	Latest Quarter	26	26	1	8	5	0	▲		n/a

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Comments	Comparator Group
Number of FOIs & EIRs	Plan is Best	Latest Quarter	346	285	286	335	350		n/a
Number of Information Security breaches	Smaller is Better	Latest Quarter	249	230	211	244	235		n/a
Number of SARs	Plan is Best	Latest Quarter	112	104	100	102	103		n/a

ICT

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
Total number of ICT Priority 1 incidents raised per quarter	Smaller is Better	Latest Quarter	7	2	10	17	5	3	▲	There has been a significant reduction in the number of Priority 1 incidents this quarter, reflecting improvement to overall stability of services. All P1s raised this quarter related to third-party services. Apr-22 15/04 - File transfer functionality in SAP was unavailable to a third-party (CapGemini) configuration issue. Although SAP is not a DICT-supported service, a P1 was raised to allow engagement with Cantium to support third-party resolution. May-22 10/05 - Intermittent certificate error on Jabber and Finesse between 10/05 and 13/05, following a third-party (VCG) system upgrade. 11/05 - No wired network available at Stroud registrars for 4.5 hours following third-party (BT) network project implementation activity. 24/05 - Full loss of network at Cheltenham County Office for 8h 15m due to a failure in the fibre circuit coming into the building, owned by Virgin Media. Jun-22 20/06 - The integration between Coldharbour and Liquidlogic Adults System was unavailable for 12 hours due to server issues which were ultimately resolved by third-party (Liquidlogic) system restart.	n/a

Tackling Climate Change
Cllr Dom Morris

Climate Change

	Good Performance High/Low	Reporting Basis	Mar-21	Jun-21	Sep-21	Dec-21	Actual Mar-22	Target Mar-22		Comments	Comparator Group
Council Carbon Emissions, buildings & transport (exc schools) Tonnes of CO_2e	Smaller is Better	Year to Date	6,486.29	1,281.77	2,279.60	4,212.07	6,186.30	6,453.00	★	End of year performance, reported a quarter in arrears, shows a continued reduction in emissions, 4.6% reduction on 2020/21, likely a mix of ongoing hybrid working, increased use of pool cars, and energy efficiency improvements.	

	Good Performance High/Low	Reporting Basis	Mar-21	Jun-21	Sep-21	Dec-21	Actual Mar-22	Comments	Comparator Group
Renewable energy generation (kWh) from the Councils Estate (exc schools)	Bigger is Better	Year to Date	62,753,382	17,027,389	31,665,414	48,759,032	65,607,181		n/a

Waste

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
Residual household waste per household (Kgs)	Smaller is Better	Forecast	461	457	440	440	436	479	★		
% of household waste sent for reuse, recycling and composting	Bigger is Better	Forecast	50.7%	51.0%	51.5%	51.2%	52.0%	51.0%	★	The inclusion of additional wood recycling in the new HRC contract has led to an increased recycling forecast this year.	
Net power production (MWhr) by the Gloucestershire Energy From Waste facility	Bigger is Better	Forecast	33,491	29,130	34,138	33,547	35,227	29,100	★		n/a
% of waste diverted from landfill	Bigger is Better	Forecast	97.4%	97.4%	97.4%	97.5%	97.6%	92.8%	★		n/a

Improving Our Roads
Cllr David Gray

Highways

	▲ Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of 2 hour emergency repairs made on time	Bigger is Better	Latest Quarter	100.0%	99.0%	99.0%	99.0%	99.0%	96.0%	★		n/a
% of 24 hour defects repaired on time	Bigger is Better	Latest Quarter	99.0%	99.0%	100.0%	100.0%	100.0%	96.0%	★		n/a
% of 28 day defects repaired or made safe in time	Bigger is Better	Latest Quarter	96.0%	97.0%	99.0%	99.0%	99.8%	95.0%	★		n/a
% of structural maintenance programme delivered	Bigger is Better	Latest Quarter	32.0%	61.0%	75.0%	86.0%	48.0%	25.0%	★		n/a

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22		Comments	Comparator Group
Number of Winter maintenance runs completed	Smaller is Better	Quarterly	9	0	66	117	0			n/a
Average number of additional days to complete overdue 28 day defect repairs	Smaller is Better	Quarterly		11.45	5.17	2.40	1.90			n/a

	Good Performance High/Low	Reporting Basis	Dec-17	Dec-18	Dec-19	Dec-20	Actual Dec-21	Target Dec-21		Comments	Comparator Group
Overall resident satisfaction with Highways network	Bigger is Better	Annual	52.0%	51.0%	52.0%	52.0%	50.0%	52.0%	🟠		n/a

	Good Performance High/Low	Reporting Basis	Mar-18	Mar-19	Mar-20	Mar-21	Actual Mar-22	Target Mar-22		Comments	Comparator Group
% of principal roads where maintenance should be considered	Smaller is Better	Annual	2.0%	2.0%	2.0%	2.0%	2.0%	2.0%	★		
% of the Non-principal classified roads where maintenance should be considered	Smaller is Better	Annual	5.0%	6.0%	5.0%	4.0%	5.0%	5.0%	★		

	Good Performance High/Low	Reporting Basis	Mar-18	Mar-19	Mar-20	Mar-21	Actual Mar-22		Comments	Comparator Group
% of unclassified roads where maintenance should be considered	Smaller is Better	Annual	13%	13%	12%	12%	13%			

Flooding

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% delivery of the annual gully emptying programme (as published on the website)	Bigger is Better	Latest Quarter	32.0%	64.0%	83.0%	100.0%	34.0%	25.0%	★		n/a

Road Safety

	Good Performance High/Low	Reporting Basis	Actual Jan - Mar 21	Actual Apr - Jun 21	Actual Jul - Sep 21	Actual Oct - Dec 21	Actual Jan - Mar 22	Forecast Jan - Mar 22		Comments Jan - Mar 22	Comparator Group
Number of killed and seriously injured people	Smaller is Better	Calendar Year to Date	39	130	238	327	93	71	🔺	Provisional totals for Jan to March 2022. Forecast calculated from 2018/19/20 average because 2021 was during lockdown.	n/a

Sustainable Growth
Cllr Philip Robinson

Connectivity

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of premises with next generation broadband access (NGA) Superfast	Bigger is Better	Latest Quarter	96.4%	96.4%	96.5%	96.6%	96.8%	99.0%	🟠	The existing Fastershire strategy includes a target of achieving 99% superfast coverage by December 2022. This target is no longer achievable due to advances in technology, changing Government priorities and delivery issues with local suppliers. Our existing superfast coverage is 96.8% - nationally is it 97.6%. Superfast deliver has reached a plateau in terms of deployment. Future build increments are going to be marginal. No new Fibre Cabinets are being deployed - all efforts are Full Fibre based in line with industry and Government targets.	n/a

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Comments	Comparator Group
% Gigabit (DOCSIS 3.1 or FTTP) Broadband coverage	Bigger is Better	Latest Quarter					60.3%		n/a

Growth Hubs

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
Number of light-touch business interactions supported by the Growth Hubs	Bigger is Better	Latest Quarter	27	74	65	65	59	50	⭐		n/a

Prevention, Wellbeing and Communities
Cllr Nick Housden

Addressing Public Health Inequalities

	Good Performance High/Low	Reporting Basis	Mar-21	Jun-21	Sep-21	Dec-21	Actual Mar-22	Target Mar-22		Comments	Comparator Group
Proportion of adult alcohol misusers who successfully completed treatment and did not represent within 6 months of completion	Bigger is Better	Quarter in Arrears	28.1%	25.9%	23.3%	26.7%	29.5%	35.0%	▲	The Q4 performance is 29.5%, this is an increase from the last quarter. Projecting forward 6 months we are anticipating that the performance will continue to increase, recovering to around 37%. There are multiple reasons for this low performance including the halt on discharges and enhanced risk-management brought about by the pandemic which still affects this metric. 94 further completions would be required to bring this to LA family comparator top quartile.	36.9%
Proportion of all Opiate Users in treatment, who successfully completed treatment and did not represent within 6 months of completion	Bigger is Better	Quarter in Arrears	5.1%	4.4%	3.8%	4.1%	4.3%	6.3%	▲	The Q4 performance is 4.3%, which is slight increase from the previous quarter. Projecting forward by 6 months we are anticipating that this performance to continue to slowly increase recovering to around 5%. There are multiple reasons for this low performance including the halt on discharges and enhanced risk-management brought about by the pandemic which still affects this metric. It would require 24 further completions to bring this into the LA family comparator top quartile.	5.7%
Proportion of all Non-Opiate Users in treatment, not representing 6 months after completion	Bigger is Better	Quarter in Arrears	25.3%	21.3%	18.3%	20.3%	23.7%	33.2%	▲	The Q4 performance is 23.7%, this is an increase from last quarter. Projecting forward 6 months from this point we are anticipating that the performance will continue to slowly improve recovering to around 28%. There are multiple reasons for this low performance including the halt on discharges and enhanced risk-management brought about by the pandemic which still affects this metric. 103 further completions would be required to bring this to LA family comparator top quartile.	33.2%
% of pregnant smokers achieving a 4 week quit	Bigger is Better	Quarter in Arrears	87.0%	82.0%	80.0%	67.0%	80.0%	70.0%	★	The service continues to achieve excellent outcomes with 80% of pregnant women achieving a 4-week quit in Q4, this is higher than the Q3 figure (67%) and significantly higher than the latest national data (20/21) figure of 48%. The Q3 data was lower due to the service employing and training a new staff member who has now completed her training and is holding her own caseload. This has resulted in the Q4 figure being in line with Q1 & Q2 performance.	n/a
Number of customers who achieve a significant risk factor improvement	Bigger is Better	Quarter in Arrears	619	614	847	794	704	763	▲	The numbers achieving an improvement has decreased to 704 compared to 794 in Q3. However, the percentage achieving improvement remains stable at 66% compared to 65% in Q3. After discussions with the performance team it has been agreed that for 22/23 this data will be reported as a percentage of those accessing the service that achieve a risk factor improvement rather than a number. This proportion data will provide a better indication of service performance and will allow for a more robust comparison between quarters.	n/a

	Good Performance High/Low	Reporting Basis	Sep-17	Sep-18	Sep-19	Sep-20	Actual Sep-21	Comments	Comparator Group
% Reception Children with obesity (including severe obesity)	Smaller is Better	Academic Year	9.0%	9.8%	9.1%	10.0%	13.6%	In 2020/21, Gloucestershire saw an increase in reception-age children with obesity or severe obesity compared with pre-pandemic levels. Data for Reception has not been published at local authority level, we have therefore been unable to benchmark our performance against peer comparators. However, the increase in prevalence of obesity or severe obesity in Gloucestershire has been reflected at both a regional and national level.	n/a
% Year 6 Children with obesity (including severe obesity)	Smaller is Better	Academic Year	16.2%	16.3%	18.3%	18.4%	21.6%	In 2020/21, Gloucestershire saw an increase in Year 6 children who have obesity or severe obesity compared with pre-pandemic levels. **However it should be noted that this was based upon a 10% sample, so performance should be seen as an estimation.** Data for Year 6 has not been published at local authority level, we have therefore been unable to benchmark our performance against peer comparators. However, the increase in prevalence of obesity or severe obesity in Gloucestershire has been reflected at both a regional and national level.	n/a
Reception: Inequality in the prevalence of obesity (including severe obesity	Smaller is Better	Academic Year	7.3%	7.4%	6.8%	5.3%	8.5%	The Slope Index of Inequality (SII) is a measure of the social gradient in child obesity, i.e. how much child obesity varies with deprivation. Gloucestershire saw an increase in the SII for Reception-age children compared to pre-pandemic figures. SII data has not yet been released at a regional or national level for 2020/21.	n/a
Year 6: Inequality in the prevalence of obesity (including severe obesity)	Smaller is Better	Academic Year	13.1%	12.2%	16.7%	18.0%	16.3%	The Slope Index of Inequality (SII) is a measure of the social gradient in child obesity, i.e. how much child obesity varies with deprivation. The estimated figures for Year 6-age children in Gloucestershire appears to have remained constant compared to pre-pandemic figures. SII data has not yet been released at a regional or national level for 2020/21.	n/a

	Good Performance High/Low	Reporting Basis	Dec-16	Dec-17	Dec-18	Dec-19	Actual Dec-20	Target Dec-20		Comments	Comparator Group
Suicide rate per 100,000 Population	Smaller is Better	3-Year Average	10.8	9.8	10.4	10.2	11.0	11.4	★	The figure reported covers the three year period (2018-2020) where there were an additional 15 suicides compared to 2017-2019 (from 170 to 185). The National, Regional, Comparator Group and Gloucestershire rates have all increased since 2017-2019. Gloucestershire's rate remains broadly in line with both the National rate of 10.4 and our Comparator Group (11.4). The South West regional rate is 11.6.	11.4

Transforming Children's Services
Children's Social Care - Cllr Stephen Davies

Quality Assurance

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of audits judged as good or better	Bigger is Better	Latest Quarter	44.0%	38.0%	31.0%	37.0%	40.0%	50.0%	▲		n/a
% of Children open to Social Care with 2 or fewer Social Workers in 6 months	Bigger is Better	Snapshot	83.8%	84.4%	84.4%	84.2%	85.9%	90.0%	●		n/a

Contact Activity

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of referrals to Social Care that are re-referrals within 12 months	Smaller is Better	Latest Quarter	23.9%	24.4%	23.5%	25.5%	24.5%	21.5%	▲		21.3%
% of Initial Decisions made within 24 hours for all contacts	Bigger is Better	Latest Quarter	88.2%	81.2%	71.9%	70.6%	67.1%	90.0%	▲		n/a
% Initial visits in time	Bigger is Better	Latest Quarter	79.2%	78.2%	69.9%	62.4%	68.9%	85.0%	▲	In-month, performance improved in April and May to 75% timeliness which is the highest performance since September 2021. However, improvement was not sustained with performance declining in June to 63%, resulting in quarterly performance of 69% overall.	n/a

Children in Need of Help & Protection

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of Children in Need who have been on a plan for 12 months or more	Smaller is Better	Snapshot	4.8%	4.0%	3.8%	4.2%	4.2%	5.0%	★		n/a
% of Single Assessments completed within 45 working days	Bigger is Better	Latest Quarter	80.9%	83.2%	79.6%	77.4%	80.4%	90.0%	▲		86.9%
% of Children becoming the subject of a Child Protection Plan for a second or subsequent time	Smaller is Better	Latest Quarter	28.4%	27.4%	27.3%	29.5%	23.2%	23.5%	★		23.8%
% of Children subject to Child Protection Plans lasting 2 years or more	Smaller is Better	Snapshot	3.2%	3.1%	2.4%	3.3%	3.4%	2.0%	▲		1.7%

Children in Care

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of Children who are fostered who are placed with the in-house fostering service	Bigger is Better	Snapshot	68.0%	64.0%	64.0%	68.0%	66.0%	70.0%	▲		n/a
% of Children in Care for more than 2.5 years in the same placement for at least 2 years	Bigger is Better	Snapshot	67.0%	66.0%	65.6%	65.9%	64.0%	68.0%	▲		70.0%
% Children in Care (CIC) reviewed in timescales	Bigger is Better	Latest Quarter	99.7%	98.9%	97.4%	97.4%	94.7%	100.0%	▲		n/a
% Children in Care with at least 3 placements in the last 12 months	Smaller is Better	Snapshot	15.9%	16.2%	13.2%	12.5%	12.3%	12.0%	●		9.5%
% Children in Care persistently absent	Smaller is Better	Snapshot	22.0%	18.4%	22.5%	23.9%	24.5%	5.0%	▲		
% of children who have been admitted to care within 12 months of previously being in care	Smaller is Better	Latest Quarter	6.6%	3.4%	7.8%	10.3%	13.6%	7.0%	▲		

Care Experienced Young People

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of Young People aged 19-21 who were looked after aged 16 who were in suitable accommodation	Bigger is Better	Snapshot	92.4%	94.4%	90.4%	93.8%	94.0%	95.0%	●		87.9%
% of Young People aged 19-21 who were looked after aged 16 who were not in employment, education or training	Smaller is Better	Snapshot	51.9%	45.1%	44.9%	45.1%	43.3%	25.0%	▲		48.8%

Transforming Children's Services
Education - Cllr Philip Robinson

Education

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
Number of Suspensions (All Pupils)	Smaller is Better	Quarterly	1,159	611	1,457	1,593	1,291	1,346	★		n/a
Number of pupils permanently excluded (all pupils)	Smaller is Better	Latest Quarter	16	11	35	40	26	21	▲		n/a
% of pupils attending good or outstanding Secondary Schools	Bigger is Better	Snapshot	81.0%	81.0%	85.0%	91.0%	93.0%	85.0%	★		n/a
% of pupils attending good or outstanding Primary Schools	Bigger is Better	Snapshot	86.0%	86.0%	87.0%	86.0%	87.0%	88.0%	●		n/a
% of good or outstanding Early Years Settings	Bigger is Better	Snapshot	91.7%	91.7%	90.9%	91.1%	90.4%	92.0%	●		n/a

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Comments	Comparator Group
Rate per 1,000 of children with an Education Health and Care Plan	Plan is Best	Latest Quarter	26.0	26.6	27.6	28.0	29.2		28.3

	Good Performance High/Low	Reporting Basis	Academic Year Ending 2017	Academic Year Ending 2018	Academic Year Ending 2019	Academic Year Ending 2020	Academic Year Ending 2021	Comments	Comparator Group
% of pupils achieving grades 9-5 in English and Maths	Bigger is Better	Academic Year		47.3%	47.8%	54.9%	57.3%		52.7%

Transforming Adult Social Care
Delivery - Cllr Kathy Williams

Contact Activity

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of all ASC Contacts with a decision within 1 working day	Bigger is Better	Latest Quarter	93.5%	93.7%	96.7%			95.0%		Unable to report on this metric whilst PowerBI remains unavailable	n/a
% of ASC contacts signposted or closed	Bigger is Better	Latest Quarter	35.2%	35.6%	35.4%	34.7%	38.6%	33.0%	★		n/a

Assessments

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of Service Users who have had a review/ re-assessment of their needs within the last 12 months	Bigger is Better	Snapshot	43.6%	52.1%	42.0%	50.7%	42.4%	55.0%	▲	At the end of June 2022 there were 2,921 individuals overdue a Care Act Review which is an increase of 302 compared to the position at the end of March 2022. This equates to 42.4% of the total long-term Social Care clients who have an up-to-date review.	n/a

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Comments	Comparator Group
Average number of weeks people have been awaiting Brokerage	Smaller is Better	Snapshot					4.8	At 30 June 2022 there were 473 people awaiting the brokerage of their package of care. Of these: 59.2% (280 people) had been waiting for less than 1 month 24.9% (118 people) had been waiting for 1-2 months 12.5% (59 people) had been waiting for 2-3 months 3.4% (16 people) had been waiting for more than 3 months.	n/a
% of FAB Assessments Open after 60 working days (as a proportion of all Open Assessments)	Smaller is Better	Latest Quarter					70.4%	At the end of June 2022 there were 601 Open Assessments of which 423 (70.4%) had been open for 60 working days or longer.	n/a
% of FAB Assessments taking more than 19 working days to close (as a proportion of all closed Assessments)	Smaller is Better	Latest Quarter					87.4%	There were 365 Assessments closed in the quarter of which 319 (87.4%) took more than 19 working days to complete.	n/a

Hospital Discharge and Reablement

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of clients who need no long term care after their period of reablement	Bigger is Better	Latest Quarter	92.5%	89.5%	91.3%	89.4%	90.0%	85.0%	★	There were 271 clients ending Reablement in Quarter 1 of which 27 did not achieve the required outcome. Note that this only includes data up to 15 June 2022.	n/a

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22	Comments	Comparator Group
Delayed transfers of care from hospital due to Adult Social Care per 100,000 population	Smaller is Better	Rolling Year						3.50	DTOC measures were suspended on 1st March 2020 There is no data available at present.	

Adult Safeguarding

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of Section 42 enquiries this quarter where the risk was reduced or removed	Bigger is Better	Latest Quarter	83.3%	85.3%	87.3%	81.8%	81.7%	85.0%	●	There were 164 S42 closures during Quarter 1. Of these only 9 (5.5%) were closed with the Risk Remaining. There were 21 closures (12.8%) where the outcome was 'Inconclusive'.	84.5%
% of S42 Enquiries open for more than 26 weeks	Smaller is Better	Latest Quarter	48.3%	39.1%	26.2%	24.2%	17.7%	25.0%	★	At the end of June 2022 there were 175 open Section 42 Enquiries (down by 19 from the end of Q4 2021/22). Of these 31 (17.7%) had been open for more than 26 weeks.	n/a

Transforming Adult Social Care
Commissioning - Cllr Carole Allaway-Martin

Quality Assurance

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of GCC Commissioned Providers judged to be Good or Outstanding by CQC	Bigger is Better	Latest Quarter	94.1%	92.3%	92.6%	91.2%	91.3%	90.0%	★	Latest data from CQC (in relationship to Social Care providers) indicates: ● 18 providers are rated as Outstanding - unchanged from Q4 2021/22 ● 203 providers are rated as Good - up from 200 at Q4 2021/22 ● 20 providers are rated as Requires Improvement - down from 21 at Q4 2021/22 ● One provider is rated as Inadequate - unchanged from Q4 2021/22	n/a

Assessments

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
Average waiting time for a Care Act Compliant Assessment (in working days)	Smaller is Better	Snapshot	15.0	17.0	17.0	17.0	6.0	30.0	★	A review of this target will take place during Quarter 2	n/a

Long Term Care

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
Permanent admissions 18-64 to residential & nursing care homes per 100,000 population	Smaller is Better	Rolling Year	9.7	17.8	16.1	17.0	14.8	11.7	▲	There were 55 permanent admissions in the 12 months to 30 June 2022. Admission rates for the previous 4 quarters have been refreshed to capture delayed data entry.	11.7
Permanent admissions aged 65+ to residential & nursing care homes per 100,000 population	Smaller is Better	Rolling Year	281.9	286.2	276.9	251.0	218.0	421.2	★	There were 304 permanent admissions in the 12 months to 30 June 2022. Admission rates for the previous 4 quarters have been refreshed to capture delayed data entry.	421.2

Mental Health

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of referrals for an AMHP assessment that led to support or protection being put in place	Bigger is Better	Latest Quarter	58.5%	60.9%	60.5%	57.4%	56.0%	60.0%	▲	Of the 316 AMHP Assessments completed in the quarter, 177 (56%) resulted in detention or other support being put in place.	n/a
% of Adults receiving secondary Mental Health services in settled accommodation	Bigger is Better	Snapshot	89.0%	88.0%	89.0%	89.0%	89.0%	85.0%	★		55.0%

Learning Disability

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of Adults with Learning Disabilities in settled accommodation	Bigger is Better	Snapshot	79.1%	79.1%	78.6%	78.6%	78.6%	78.0%	★		73.8%
Total number of people in Employment with a Disability (or work limiting health condition) supported by GCC Forward Services	Bigger is Better	Latest Quarter					547	545	★		n/a

	Good Performance High/Low	Reporting Basis	Mar-18	Mar-19	Mar-20	Mar-21	Actual Mar-22		Comments	Comparator Group
% of Adults with Learning Disabilities in Employment	Bigger is Better	Annual	6.4%	3.1%	0.8%	2.7%			Update for 2021/22 due in Autumn 2022	n/a

Transforming Gloucestershire Fire and Rescue Service

Response

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
Average Response times to dwelling fires	Smaller is Better	Latest Quarter	8.39	9.29	7.03	9.14	9.17	9.00	🟠		

Prevention

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of Safe and Well visits undertaken to those in high risk groups	Bigger is Better	Latest Quarter	83.4%	83.0%	78.4%	79.0%	80.0%	75.0%	⭐		68.0%
Rate of Safe and Well visits undertaken per 1,000 population	Bigger is Better	Latest Quarter	0.78	0.83	0.89	0.89	0.94	2.35	🔺		2.04
Number of Accidental Dwelling Fires	Smaller is Better	Latest Quarter	75	63	74	60	68	55	🔺		103

Protection

	Good Performance High/Low	Reporting Basis	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	Target Jun-22		Comments	Comparator Group
% of 7.2d premises within required frequency	Bigger is Better	Latest Quarter	67.9%	87.5%	68.8%	88.9%	93.0%	100.0%	🔺		n/a
% of higher risk premises inspected within required time frame	Bigger is Better	Latest Quarter	94.7%	72.0%	63.4%	50.0%	50.0%	100.0%	🔺		n/a

Strategic Risk

Strategic Risk Register

Strategic Risk 1: Corporate Governance

		Risk Owner	Inherent Risk	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	DoT Jun-22	Mitigating Actions
⊞ SR1.1	Failure in corporate governance which leads to service, financial, legal or reputational damage or failure.	Ayliffe, Rob	High 20	Moderate 8	Moderate 8	Moderate 8	Moderate 8	Moderate 8	➡ ●	Sign-off of the Annual Governance Statement has been delayed as a result of delays to the external audit of the Council's accounts. The outcome of ombudsman complaints continues to be closely monitored but is not giving rise to any significant new issues.

Strategic Risk 1: Governance (New Q1 22/23)

		Risk Owner	Inherent Risk					Actual Jun-22	DoT Jun-22	Mitigating Actions
⊞ SR1.2	Resources are insufficient to deliver the volume of procurement and re-procurement activity, leading to failure to secure the intended outcomes and/or best value through contracts	Ayliffe, Rob	n/a					Moderate 9	●	The procurement pipeline has been launched and published to meet legislative requirements. This will continue to be developed to ensure it gives Directorates greater oversight, enabling them to plan ahead more effectively.
⊞ SR1.3	Failure to ensure the effective management of Health and Safety	Ayliffe, Rob	n/a					Low 6	★	The new Employee Engagement Group has now met twice and is supporting better engagement with staff across the Council on health and safety issues. We are now taking H&S reports to each Directorate on a quarterly basis in order to analyse trends and address any concerns arising.
⊞ SR1.4	Inadequate contract management or quality assurance arrangements result in GCC being unable to identify, control or manage risks (including health and safety risks) associated with a provider's actions or failure to act.	Ayliffe, Rob	n/a					Moderate 8	●	No new issues arising this quarter. Over the next 6 months, a review will be undertaken of the Council's Operating Model for Procurement and Contract Management
⊞ SR1.5	Failure to be able to demonstrate due regard to the Equalities Act 2010, within council decision making.	Ayliffe, Rob	n/a					Moderate 8	●	We continue to provide EIA training to all Cabinet report authors. During Q2/3 we will be undertaking a self-assessment against the Equalities Framework for Local Government to identify areas for improvement.

Strategic Risk 2: Financial

		Risk Owner	Inherent Risk	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	DoT Jun-22	Mitigating Actions
⊞ SR2.4a	Reductions and changes to funding in current financial year and any additional unplanned overspends from previous financial year, with the potential to impact Statutory Services.	Rush, Alistair	High 25	Low 5	Low 5	Low 5	Low 5	Low 5	➡ ★	The final finance settlement announced was in line with expectations allowing the Council to set a balanced budget for 2022/23, and the outturn position for 2021/22 was an underspend, so the level of General fund balances has increased by £1.053m to £23.052 million at 31/3/22.
⊞ SR2.4b	Reductions and changes to funding for future financial years, potentially impacting, in particular, Statutory Services	Rush, Alistair	High 25	High 15	Moderate 10	High 15	High 15	High 20	↑✗ ▲	A one year settlement for 22/23. Two year settlement to be announced for 23/24 and 24/25

Strategic Risk 3: Infrastructure

		Risk Owner	Inherent Risk	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	DoT Jun-22		Mitigating Actions
⊞ SR3.1	Failure to ensure technology managed by ICT (including communications abilities) remains fit for purpose.	Quayle, Mandy	High 25	High 15	High 15	High 15	High 15	High 15	➡	▲	Reviews are being undertaken for each element of the service and an audit plan is in place we expect these measures to reduce the risk level during 2022 Items below are a summary of the 'Controls in Place' field held on the Strategic Risk Register: • Director level ownership of the ICT Managed Service contract with Cantium (Service Review Underway) • ICT client team staffing structure re-developed - e.g. greater engagement with all Directorates via ICT Business Relationship team, underpinned by an internal Strategy & Architecture function. • Governance in place to ensure any ICT operational risks and issues are appropriately managed • ICT Strategy, Service Plan and strategic roadmap in place to address ageing and legacy technological products and solutions • Comprehensive MTFS/capital expenditure activity to address a legacy of under-investment in technology and digital solutions • Significant project activities have been undertaken to modernise/stabilise critical infrastructure, focused on a journey to cloud technologies via improved WAN / LAN / telephony / Wi-Fi services. • The new Digital and ICT operating model is governed through a robust set of meetings including a structured Digital and ICT Senior Management Team meeting that reviews all aspects of the service delivery.
⊞ SR3.2	Risk of a singular or multiple, cyber-attack(s) on the Council's ICT systems, leading to potential loss/misuse of key information and data.	Quayle, Mandy	High 25	High 15	High 15	High 15	High 15	High 15	➡	▲	There is an increase prevalence of cyber attacks within both council and major suppliers. As an organisation we continue to be extra vigilant. Although this quarter we are not changing the risk rating we are mindful this situation can change quickly and are therefore keeping this under review. Items below are a summary of the 'Controls in Place' field held on the Strategic Risk Register: • ICT Managed Service contract with Cantium in place to provide technological controls and measures against cyber attack (and service review underway) • ICT client team staffing structure has been re-developed to give closer working with the Information Management Service. • Governance in place via the Information Board to ensure any technical and non-technical operational risks and issues are appropriately managed • Cyber & Information Management (Procurement) Policy in place • Comprehensive MTFS/capital expenditure activity to address a legacy of under-investment in technology and digital solutions • The annual Independent IT health check has been completed and remediating any issues found in partnership with suppliers. • Significant change activities have been undertaken to modernise/stabilise critical infrastructure, e.g. telephony, Wi-Fi, video-conferencing, etc. • Regular communications are circulated and training provided to ensure that staff are fully aware of their responsibilities to help in the fight against cyber-crime. • The Digital Governance Board is now established to control and manage data and information across the council • Internal audit has a programme of cyber audits for 2021 / 22 - the first 2 completed

Strategic Risk 5: Organisational Change Programmes

		Risk Owner	Inherent Risk	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	DoT Jun-22		Mitigating Actions
⊞ SR5.3	Provider failures in the Adult Social Care market result in the council being unable to achieve its strategic objectives.	Scott, Sarah	High 25	High 20	High 20	High 20	High 20	High 20	➡	▲	Continued pressure from the pandemic have increased this risk. The provider markets in both residential and home care are seeing a rise in the number of cases and the demands of system flow have remained high. We are encouraging providers to implement their BCPs and to inform Commissioners when doing so in order that we can seek additional support from system leaders. We are undertaking the necessary planning to review the GCP estate strategy in order to inform the strategic direction of the care market and improve sustainability of health and care markets in the short, medium and long terms.

	Strategic Risk 6: Collaborative Working										
		Risk Owner	Inherent Risk	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	DoT Jun-22		Mitigating Actions
⊞ SR6.1	Failure to maintain effective relationships with key partners and organisations and shared funding arrangements, impacting on our ability to meet statutory and local requirements.	Bungard, Pete	High 20	Moderate 8	Moderate 8	Moderate 8	Moderate 8	Moderate 8	➜	🟠	We are still seeing highly effective and very positive working relationships with partners and organisations to meet statutory and local requirements now we have moved into "living with Covid". The LRF, other emergency management functions and business continuity arrangements remain as good foundations across the partner scene.

Leadership Gloucestershire meetings, Leader's Stocktake meetings and regular MP briefings with Health, continue at appropriate frequency.

Statutory meetings are face-to-face for both Members and Officers and hybrid meeting arrangements are working well for those meetings which have no statutory decision-making responsibility. We hope to continue with hybrid working arrangements in the future in keeping with the needs of the business.

We are working closely with partners and organisations to deliver the Homes for Ukraine scheme.

The next few months will see extensive external consultancy work looking at our NHS relationship, focussed on emergency and urgent care. |

	Strategic Risk 7: Safeguarding Children, Young People & Adults										
		Risk Owner	Inherent Risk	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	DoT Jun-22		Mitigating Actions
⊞ SR7.1	Failure to protect vulnerable adults in Gloucestershire from abuse neglect in situations that potentially could have been predicted and prevented.	Scott, Sarah	High 20	Moderate 10	Moderate 10	Moderate 10	Moderate 10	Moderate 10	➜	🟠	The safeguarding adults team has carried out a focused piece of work to reduce the number of cases on the referral centre. This has removed the backlog and should ensure that safeguarding concerns are dealt with in a timely manner again.
Plans are in place to introduce a dedicated Adult Safeguarding Screening function (launch date early 2023) which will be located within the safeguarding team and will mean that professionals will no longer raise concerns via the Adult Help Desk. Over the longer term this should help to improve the quality of safeguarding concerns raised by multi agency partners and enable the team to focus their work on genuine cases of abuse and neglect, which will support the safeguarding of adults with care and support needs.
⊞ SR7.2	Ineffective social care practice, management oversight and review processes resulting in drift and delay for children and young people in situations of harm.	Spencer, Chris	High 25	Moderate 8	Moderate 8	Moderate 8	Low 6	Low 6	➜	⭐	Post inspection we are now progressing from our AIP to a CIP - Continuous Improvement Plan which provide the foundations to secure the improvement to date and enable us to deliver sustainably good services going forward. A refreshed Improvement Board has been established and will meet for the first time in July. The CIP will be submitted to Ofsted in July. The contextual challenges of high demand and workforce stability continue to impact on our improvement journey - with improvement activity informed by our QA and Performance Arrangements. As a consequence our risk profile is unchanged over this quarter.
⊞ SR7.4	The ability to meet statutory timelines for EHCP assessments, plan issue and annual amendments and the associated budgetary commitments, affecting the educational outcomes of vulnerable children, is at risk: financially, legally and reputationally through ever-increasing EHCP requests, workforce capacity to process these requests and the implications for the outcomes of future local area SEND inspections.	Harrison, Kirsten	High 20	Moderate 12	Moderate 12	High 16	Moderate 9	Moderate 9	➜	🟠	A wide range of service development projects and system-wide actions are in train to mitigate the risks.

At system level, the GCC SEND and Education Inclusion strategies have been ratified by cabinet. These outline the strategic actions being undertaken to influence the local education system around developing inclusive schools and early non-statutory intervention to reduce the numbers of requests to assess for an EHCP. Other mitigating projects include:
● Participation in the DfE 'Delivering Better Value in SEND' project
● Establishment of a partnership SEND Improvement Board
● Introduction of a non-statutory funding model
● Development and implementation of the operational plans for the SEND strategy roll out
● Roll out of the Banded Funding project
● The Graduated Pathway project

At service level, there is significant work in train around service re-modelling led by the newly appointed Principal Education Psychologist and Senior Lead Advisory Teacher. These activities include:
● Full recruitment to a re-shaped EHCP Casework team - with officers with higher skill levels
● Roll out of the EHCP Digitisation project
● Increases to SENDIASS capacity - focused on improving the customer journey and reducing redress to mediation or Tribunal
● EPS service re-shape, including ceasing trading for Term 6, focusing all EP work or clearing the statutory advice backlog
● Piloting of a Digital EHCP QA tool to provide assurance regarding quality, consistency and engagement of partners in the EHCP process |

		Risk Owner	Inherent Risk	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	DoT Jun-22		Mitigating Actions
	Strategic Risk 7: Safeguarding Children, Young People & Adults										
⊞ SR7.5	Insufficient workforce capacity and/or instability adversely impacting on pace and sustainability of improvement and contributing to discontinuity in social engagement with children and families	Spencer, Chris	High 16	Moderate 8	Moderate 12	Moderate 12	Moderate 12	Moderate 12	➡	🟠	Workforce stability and capacity remain as key challenges impacting on our improvement journey. The key metrics of Agency %, turnover and vacancies all declined over Q1. This reflects a challenging position nationally and regionally. We continue to refine our offer and make maximum use of the various supply lines we have established to address the situation.
⊞ SR7.6	Unable to support all those who can, to live independently at home, because demand for home care services outstrips available capacity. Resulting in the reliance on temporary respite/alternative bed based care in lieu of home care	Scott, Sarah	High 20	High 16	High 20	High 20	High 20	High 16	✔	🔺	Home care capacity is currently being strained due to staff shortages arising from isolation, sickness or increased childcare demands, all of which we feel are likely to increase over the next quarter. We have also added an additional strain through using guaranteed hours to support the Home First service, whilst also trying to deliver a standard home care offer which supports locality teams and the progression of people leaving the reablement pathway. We are actively working with the market to try to minimise the number of providers working in any one area with the aim of maximising the sustainability of individual providers while minimising wasted resource through lost care hours.
⊞ SR7.7	Failure to develop sufficient placement capacity to meet the needs of children looked after	Spencer, Chris	High 16	Moderate 12	Moderate 12	Moderate 12	Moderate 12	Moderate 12	➡	🟠	The provider market continues to be very challenging, with a lack of capacity particularly for the most vulnerable and complex of children. We have also experienced a sustained increase in our Children in Care population. Increased utilisation of in-house foster care has off set the pressure somewhat but is now more or less at capacity. We have recently revised the Sufficiency Strategy, setting out a longer vision for care provision alongside the work to transform our Edge of Care offer. These will take some time to impact and therefore our risk profile for Q1 is unchanged.
⊞ SR7.8	Risk of legal action being taken against the Local Authority due to failure to complete a Deprivation of Liberty assessment within the stated time lines. Since a significant and sudden change in the law due to a Supreme Court Judgement in March 2014 there is an excessively high demand for best interest assessments to be carried out for Deprivation of Liberty (DoLS) authorisations.	Scott, Sarah	High 20	Moderate 9	Moderate 9	Moderate 9	Moderate 9	Moderate 9	➡	🟠	The DoLS team continues to operate the ADASS triage process to try to ensure that individuals who are objecting to their placements receive a prompt assessment. There is a consistently high and increasing number of referrals for authorisation and the list of outstanding applications has increased to approx. 1600, however a new Practitioner has recently joined the team, which will assist with the carrying out of assessments. Consultation has been undertaken locally on the draft Code of Practice for the Mental Capacity Act and Liberty Protection Safeguards (replacement for DoLS). The final Code is not expected until the New Year 2023.

		Risk Owner	Inherent Risk					Actual Jun-22	DoT Jun-22		Mitigating Actions
	Strategic Risk 7: Safeguarding Children, Young People & Adults (New Q1 2022/23)										
⊞ SR7.9	Insufficient planning and oversight of international resettlement and asylum immigration including current Ukraine, Afghan, Syrian and Hong Kong programmes, alongside other asylum seeker routes including hotel accommodation, could lead to unpredictable and unsupportable demand on county council services.	Farmer, Siobhan	High 16					Moderate 8		🟠	Staff in place, district and county working relationships and partnership are good, success so far in schemes has been good, work is underway to better plan for overall international migration issues and partnership working across the system with proposal for new model of managing this across county due in Autumn for consideration by leaders, sufficient awareness by government departments of the issues we have slowing each of the programmes down, considerable work to obtain reserve accommodation for current Ukraine scheme underway, significant department funding for Ukraine scheme and reserves for other schemes available, plan to supplement community support through additional local resource. Forward planning underway re move on accommodation, although likely the biggest residual risk.
⊞ SR7.10	Implementation of the 'Care Cap' cost of care exercise (section 18.3 of the Care Act) leads to significant resource pressures and overspend.	Scott, Sarah	High 20					High 20		🔺	Conducting a Cost of Care exercise heavily informed by the independent adult social care sector. Market Sustainability Plan will be produced detailing the gap in funding and how it might be closed. Both of which have to be signed off by the CE and Section 151 Officer.

Strategic Risk 8: Workforce Planning & Employee Relations

		Risk Owner	Inherent Risk	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	DoT Jun-22		Mitigating Actions
⊞ SR8.1	Difficulties in recruiting and retaining experienced workers in a wide range of roles across service areas, including some hard-to-fill professional roles.	Quayle, Mandy	High 16	Moderate 12	High 16	High 20	High 20	High 20	➡	▲	National and regional labour markets remain tight across a range of employment groups. The County Council, continues to make available a range of market supplement payments, recruitment and retention payments and similar measures. Work is ongoing in connection with recruitment branding and associated matters. This will remain a challenging area for us for the foreseeable future.

Strategic Risk 8: Workforce Planning & Employee Relations (New Q1 22/23)

		Risk Owner	Inherent Risk					Actual Jun-22	DoT Jun-22		Mitigating Actions
⊞ SR8.2	Failure to ensure identification and understanding of staff fatigue and 'burnout' issues, resulting in impact on staff morale and well-being, and service delivery.	Quayle, Mandy	High 16					Moderate 12		🟠	A number of key services are reporting high levels of fatigue following the pressures of the extended pandemic. This potentially has impact on staff motivation, attendance and retention. Therefore, we have extended our occupational health and wellbeing offer including an enhanced counselling offer plus three levels of training to support all employees, managers and particularly critical individuals in developing their own coping strategies and to build resilient teams. We are doing further targeted work to understand the impact for particular services and developing specific interventions.

Strategic Risk 10: Emergency Response & Business Continuity Threats

		Risk Owner	Inherent Risk	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	DoT Jun-22		Mitigating Actions
⊞ SR10.4	Due to insufficient business continuity management arrangements failure of the Council or a key partner to effectively deliver their statutory services, resulting in community disruption and failure of corporate objectives.	Preece, Mark	High 16	Moderate 12	Moderate 12	Moderate 12	Moderate 12	Moderate 12	➡	🟠	The overall assessment for this quarter is unchanged from the previous quarter and reflects the following:- Work continues to take place to ensure that all service areas have an up-to-date business continuity plan in place which addresses an agreed range of significant disruption scenarios. In line with best practice, business impact analyses (BIAs) need to be conducted before business continuity plans (BCPs) are developed / updated. BIA sessions therefore continue to be rolled out to plan owners with a revised target date of BIA completion by end June 2022 (and BCPs by end of December 2022). The end of June deadline has not been met by plan owners. Although reasonable progress has been made (see below) this has still not been at the pace required. Non-compliance with business continuity policy and options for escalation will be a matter for further discussion at the next meeting of the corporate BCM Assurance Board. Work to update the Corporate Recovery Plan, the final strand of planned activity, has commenced but will require BIAs to be materially completed. **% up-to-date BIAs BCPs** End Q4 2021-2022 52% 26% End Q1 2022-2023 65% 46%
⊞ SR10.6	Insufficient workforce capacity and capability adversely impacting the pace and sustainability of improvement that will potentially contribute to an increased risk to firefighter safety, failure to meet our statutory obligations and/ or capability to deliver emergency services to the community.	Preece, Mark	High 20	Moderate 8	Moderate 12	Moderate 12	Moderate 12	Moderate 12	➡	🟠	Recruitment and selection processes have been carried out to backfill substantive posts, although there is success in recruiting to grey book posts there continues to be a struggle to fill and retain green book posts. Additional funding will help to provide the finance needed for additional resource and training, however effects of this will only been seen once posts are filled. It is still recognised that there are many work pressures on staff and this Risk has been identified by the recent HMICFRS Inspection Report, therefore work to address the risk of having insufficient capacity and capability within the workforce continues.

Strategic Risk 11: Information Governance

		Risk Owner	Inherent Risk	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	DoT Jun-22		Mitigating Actions
⊞ SR11.1	Failure to comply with data protection and to protect the confidentiality, integrity and availability of information.	Ayliffe, Rob	High 20	Moderate 12	Moderate 12	Moderate 12	Moderate 12	Moderate 12	➡	🟠	We continue to report and learn from all data breaches, where necessary reporting them to the ICO. No significant new issues have arisen during the quarter. A new system has been launched for the delivery of Information Governance and Compliance training to all staff, enabling this to be moved from the blue to the purple layer. A cyber risk exercise was carried our during Q1, and an action plan is in place to address the lessons learned.

Strategic Risk 12: Climate Change

		Risk Owner	Inherent Risk	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	DoT Jun-22		Mitigating Actions
⊞ SR12.1	Failure to deliver the county council's climate change strategy, impacting our ability to deliver our organisation, partnership, and community activities, and to secure Government funding, and therefore limiting our ability to mitigate the impacts of a changing climate on Gloucestershire's natural environment, communities, business and visitors.	Chick, Colin	High 25	High 15	Moderate 10	Moderate 10	Moderate 10	Moderate 10	➡	🟠	• 78% reduction in GCC emissions 2021/22 against the 2006/07 baseline. • Rising energy costs saw an overall 20% increase in spend (30% for electricity) despite a 1% reduction in use. • Implementation of the Climate Change Strategy Action Plan remains on target. • GCC buildings heat decarbonisation programme in development, which if approved would take us beyond the 2030 Net Zero target of at least 80% reduction in carbon emissions. • 40,000 trees secured to date for the upcoming planting season • "Journey to Net Zero" transport decarbonation forum being developed for 20 July, Kingsholm Rugby Stadium

Strategic Risk 14: Community Infrastructure Levy

		Risk Owner	Inherent Risk	Jun-21	Sep-21	Dec-21	Mar-22	Actual Jun-22	DoT Jun-22		Mitigating Actions
⊞ SR14.1	The implementation of Community Infrastructure Levy (CIL) in Gloucestershire has resulted in a decrease in the County Council's developer contributions receipts. This has placed significant additional pressures on the relevant County Council's budgets, such as education, transport and highways.	Chick, Colin	High 16	High 16	High 16	High 16	High 16	High 16	➡	🔺	This risk continues to be high - although every possible effort is being made by GCC officers to mitigate the risk.